CEPI is pleased to announce a new funding opportunity of up to US $140 million, contingent upon availability of funds, for clinical trials with the aim to rapidly expand access to and confidence in COVID-19 vaccines by i) generating clinical evidence in special / sub-populations / age groups or ii) addressing clinical development gaps. Clinical trials which expand access and capacity in low- and middle-income countries (LMICs) are particularly encouraged. This document describes the scope, requirements and processes for submission, review, and selection for funding. Further details can be found at [https://cepi.net/get_involved/cfps/](https://cepi.net/get_involved/cfps/)

The Call for Proposals asks for an Expression of Interest (EOI) with a brief description of the current status of the project and a high-level Clinical Development Plan supporting initial emergency use approval / (conditional) licensure or similar. An outline of the proposed clinical trial and targeted label claims (supported by a study protocol synopsis), as well as regulatory and operational considerations for conduct of the clinical trial will be required. For clinical development gaps related to COVID-19 vaccines, please also see the report of the WHO consultation held on 15th January 2021.

Applicants should state in what positive ways the proposal can contribute to CEPI’s mission of increasing access to affordable vaccines to low- and middle-income countries, and if there is any willingness to support the provision of vaccine doses, as appropriate, via the COVAX facility.

This Call is open for EOIs from January 28th, 2021 to May 28th, 2021. EOIs will be reviewed on a rolling basis as they are received. The call may be extended or amended depending on programmatic need and may be closed earlier in case the budget limit has been reached.

CEPI reviews and evaluates proposals on their merits in the context of stated eligibility criteria, CEPI’s overall project portfolio and the equitable access benefits of the proposal. Regardless of eligibility at any stage of a funding Call, CEPI, in its sole discretion, reserves the right to consider and to decline any proposal.
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1. Introduction

The ongoing COVID-19 pandemic is a public health crisis causing unprecedented disruption to human activity and a terrible loss of lives. As national and regional governments continue to implement containment measures, it is thought that only widely available safe and effective vaccines used in conjunction with other public health measures, will allow a return to normal life and help stop further loss of life and economic disruption.

Several vaccines against COVID-19 have now proved efficacious, received emergency use authorisation / conditional licensure, and are being rolled out in adult populations across the globe with further vaccines in clinical trials. Despite the significant progress already made, clinical development gaps still exist which need to be addressed urgently. It is important to expand vaccine access to certain vulnerable subgroups including immunocompromised populations, pregnant women, and to paediatric populations. It is unknown whether current vaccines, either licensed or in development, protect against recently emerged variants. The length of time between administered doses has been extended in some countries in order to immunise more people against COVID-19; additional robust scientific evidence can inform such delayed timing approaches. A reduction in the number of doses and mixing and matching vaccines for primary immunisation have also been discussed as options to facilitate mass vaccination.

CEPI is pleased to announce this Call for Proposals with the aim to expand access to and confidence in COVID-19 vaccines more widely, whether through label expansion, increased flexibility in dosing regimens, proof of efficacy against new variants or otherwise where there is a need and no alternative timely funding. CEPI will make available up to US $140 million in funding to vaccine developers and other research institutions through this Call for Proposals.

2. Objectives

The primary objective of this Call for Proposals is to expand access to COVID-19 vaccines already in human trials more widely to special / sub-populations or age groups and to rapidly generate data addressing clinical development gaps of COVID-19 vaccines and platform–technologies.

Each proposed clinical trial will be evaluated against knowledge gaps (pre- or post-licensure) related to the specific COVID-19 vaccine / platform technology as well as in the context of the COVID-19 pandemic.

The funding is intended for complementary clinical trials which i) represent amendments or extensions to ongoing trials or ii) new clinical trials which will be able to start expeditiously after contracting. (Interim) Results should be available during 2021 to provide data relevant for the ongoing COVID-19 pandemic. The proposed clinical trials should contribute to the respective vaccine target product profile or label in a way that, if successful, would expand access to and confidence in the relevant vaccine.

3. Scope of the Call

This Call for Proposals is to support one or several new clinical trial(s) that will generate relevant additional clinical evidence on COVID-19 vaccine(s) that may or may not have received initial emergency use approval / (conditional) licensure or similar (‘pre-’ or ‘post-licensure’ clinical trials). Amendment(s) or extensions to already planned / initiated clinical trials are also acceptable. Observational studies are not in the scope of this Call for Proposals.

Evidence generated with the complementary clinical trial(s) / amendment(s) must lead to new evidence / investigate objectives which rapidly expand access to and confidence in COVID–19 vaccines by i) expanding access to vaccine to special populations / age groups and / or ii) addressing clinical evidence gaps not included in the core Clinical Development Plan. Clinical trials which expand access and capacity in low- and middle-income countries (LMICs) are particularly encouraged. Applicants are encouraged
to review clinical development gaps identified in the WHO Consultation COVID-19 Vaccines – Knowledge Gaps and Research Priorities held on 15th January 2021.

It is not the intent of this Call for Proposals to support clinical trials already included in the vaccine developer’s core Clinical Development Plan supporting initial emergency use approval / (conditional) licensure or similar (for example initial Phase 1 dose / formulation finding trials or pivotal Phase 2/3 vaccine efficacy trials).

To be eligible, the COVID-19 vaccine must have entered the clinical development phase. Developer Applicants must be able to provide a Clinical Development Plan justifying the complementary evidence / label claims to be generated with funding through this Call for Proposals. Other organizations / institutions (non-developer Applicants) are also eligible to apply but must provide detailed information on sourcing of the trial vaccine(s) / clinical trial material(s) to be tested.

Applicants (vaccine developers or individual organizations or consortia) must provide information in their application that they meet the following eligibility criteria:

- For non-licensed vaccines, Applicants must be able to provide relevant evidence commonly generated in pre-clinical research, including required non-clinical toxicology studies, at least be in Phase 1 with their vaccine candidate and be able to provide (preliminary) data on safety and immunogenicity for their COVID-19 vaccine candidate.
- For non-licensed vaccines, Applicants must have a Clinical Development Plan in place indicating their pathway to emergency use approval / (conditional) licensure including a strategy to demonstrate vaccine efficacy.
- For non-licensed and licensed vaccines, Applicants must justify the complementary evidence (developer Applicants: label claims) and / or explain how the evidence generated will support vaccine characteristics formulated in the target product profile (TPP).
- The clinical trial(s) / trial amendment(s) must be the core part of the application. Applicants should provide evidence indicating the ability to start clinical trial(s) (recruitment initiated) as quickly as possible after date of funding. It is expected that (interim) clinical data will be available before end of 2021.
- A study protocol synopsis must be provided with the application. Applicants need to explain the positioning of the clinical trial(s) within the overall Clinical Development Plan and indicate potential label claims to be supported with the clinical trial(s).
- Applicants must be able to provide evidence on availability and stability of the Clinical Trial Material.
- The scope and objective of the clinical trials should address relevant clinical or regulatory gaps including but not limited to the below aspects:
  - Safety / tolerability & immunogenicity in pregnant and lactating women [if the application includes trials in pregnant / lactating women, Applicants must provide appropriate reproductive toxicity data or evidence that respective DART studies will be completed prior to trial start. DART studies may be part of this application as long as timelines are justifiable.]
  - Dose confirmation, safety / tolerability & immunogenicity in paediatric populations
  - Safety / tolerability & immunogenicity / efficacy in other special populations (e.g. immunocompromised including HIV and autoimmune diseases; older adults; populations with underlying diseases / frailty)
  - Long-term safety, immunogenicity, and booster strategy (including SARS-CoV-2 seropositive subjects)
  - Increasing / broadening the immune response, for example
    - Prolonged dosing interval for primary immunisation
    - Heterologous prime–boost regimen
  - Dose sparing strategies including single-dose vaccination regimens
  - Vaccine efficacy against viral shedding, asymptomatic infection and transmission
Complementary clinical trials: Expanding access to COVID-19 vaccines

- Long-term vaccine efficacy against COVID-19 including against severe disease manifestations or long-term sequelae (long COVID)
- Vaccine efficacy against new SARS-CoV-2 variants: Sequencing breakthrough cases in clinical trials
- Correlate-of-Protection studies
  - Applicants are strongly encouraged to use secondary antibody standards calibrated to the WHO international reference standard in serologic assays assessing the immune response – wherever possible. ([www.nibsc.org/science_and_research/virology/centre_for_aids_reagents/covid-19_reagents.aspx](https://www.nibsc.org/science_and_research/virology/centre_for_aids_reagents/covid-19_reagents.aspx)).
  - Applicants are further encouraged to consider plans to integrate immunological testing of a comprehensive subset of samples which would utilize CEPI’s available Centralised Laboratory network, and apply for sample testing, by completing and submitting the Sample Analysis Request Form.
  - Applicants should have a Data Safety Monitoring Board (DSMB) in place and be willing to participate in the meta—Data Safety and Monitoring Board (mDSMB) scheme offered as part of the Safety Platform for Emergency vACCines (SPEAC) project ([https://brightoncollaboration.us/speac/](https://brightoncollaboration.us/speac/)).

4. Applicant guidelines and the review process

The proposal must include essential evidence as required in Section 3, meet the presented timeline requirements, and contain sufficient information for review of the proposed vaccine development and access plans. Any claims made within the proposal must be supported by evidence.

The proposal should:
- be no longer than 8–10 pages (excluding references); a study synopsis should be provided as a separate attachment
- include high–level budget information (in USD) with costs in compliance with CEPI’s Cost Guidance; and
- be written in English.

**This Call for Proposals is open until May 28th, 15:00 CET, 2021.** EOIs will be reviewed on a rolling basis as they are received, and Applicants are encouraged to submit EOIs as early as possible. The call may be closed before May 28th in case the budget limit has been reached. Each application will go through eligibility screening for CEPI to assess if the application and the Applicant meets the eligibility criteria. Eligible applications will be sent for peer–review performed by CEPI’s internal and external expert reviewers. All internal and external experts that participate in the review process will be evaluated for any potential conflicts of interest and are required to sign non-disclosure agreements. Responses to Applicants will be issued as soon as they are available. CEPI will make every effort to accelerate review timelines as it recognises that every day counts. In line with its commitment to acceleration, CEPI intends to issue awards quickly but also expects Applicants to show willingness and flexibility.

The application template is accessible via the CEPI website. To respond to this Call for Proposals, Applicants must submit their application to CEPI via a secure portal. Please send an email to cfp@cepi.net to be provided with a secure link to upload your application to the secure portal (in the Subject field indicate: Application for COVID-19 vaccine platform). The application should be uploaded via the secure portal in a pdf format. Apart from the application and a separate trial synopsis, **do not send any additional documents** to cfp@cepi.net. The application will be treated as confidential and personal data included in any proposal that is submitted will be handled according to CEPI’s Privacy Notice.

This is a direct Call for Proposals, which means that no additional information should be submitted.
Please note that CEPI will not cover any costs incurred by the applicants for the development and submission of proposals.

Applicant organisations: This request for proposals is open worldwide to relevant entities that bring the relevant expertise and experience to address challenges within the scope of this call. Funding beneficiaries must be legal entities. CEPI may conduct due diligence reviews for feasibility verification, legal, business and financial compliance before awards are made.

5. Review criteria

Proposals that have met the eligibility criteria described under Section 3 will be assessed against the following criteria where applicable, depending on the full or partial scope of the development plan proposed:

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Assessment levels</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Clear scope</td>
<td>1.1. Clear objective</td>
<td>• Objective contributing relevant evidence which will expand access to and confidence in COVID-19 vaccines by i) expanding access to vaccine to special populations / age groups and / or ii) addressing clinical evidence gaps not included in the core Clinical Development Plan. Please see clinical development gaps identified at the WHO consultation held on 15th January 2021.</td>
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<td></td>
<td>• Trial objective well justified in the context of the overall Clinical Development Plan (e.g. trial in paediatric populations as part of an overall paediatric investigation plan, PIP)</td>
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<td></td>
<td></td>
<td>• Beneficial: relevance for / contribute general evidence to platform technologies supporting the adaptation of COVID-19 vaccines to new SARS-CoV-2 variants and / or for Disease X (beyond COVID-19).</td>
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<tr>
<td>2. Scientific and operation merit</td>
<td>2.1. Appropriate endpoints</td>
<td>• Endpoints clearly supporting the objective(s) of the clinical trial</td>
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<td></td>
<td>2.2. Statistical justification</td>
<td>• Endpoints based on sound statistical considerations / sample size calculations OR descriptive endpoints well justified</td>
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<td></td>
<td>2.3. Target population</td>
<td>• Clear in-/exclusion criteria defining an appropriate trial population</td>
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<td></td>
<td>2.4. Overall trial design</td>
<td>• Overall trial design realistic and supportive of the trial objective (e.g. number and scheduling of visits, sampling timepoints, follow-up procedures and duration)</td>
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<td></td>
<td>2.5. Justified sample size</td>
<td>• Recruitment feasible in terms of projected recruitment time / overall trial execution timelines, number of trial sites, country selection etc. (trials conducted in LMICs are of particular interest)</td>
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<td></td>
<td>2.6. Realistic recruitment study</td>
<td>• Outline / summary of the analysis plan including expected availability of the primary endpoint analyses, interim analyses, final analyses</td>
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<td></td>
<td>2.7. Data management and analysis plan</td>
<td></td>
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<tr>
<td>3. Vaccine safety</td>
<td>3.1 Reactogenicity</td>
<td>• Existing safety data package with candidate vaccine</td>
</tr>
<tr>
<td></td>
<td>3.2 Safety</td>
<td>• Appropriate assessment of solicited and unsolicited local reactions and systemic adverse events</td>
</tr>
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<td></td>
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<td>• Appropriate assessment of Serious Adverse Events (SAEs), Adverse Events of Special Interest</td>
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### Criterion: Assessment levels

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Assessment levels</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest (AESIs)</td>
<td></td>
<td>Interest (AESIs) and other potential safety signals including vaccine-mediated enhanced disease.</td>
</tr>
<tr>
<td>For trials in</td>
<td></td>
<td>For trials in pregnant / lactating women: DART studies to be completed before study start. DART studies can be part of the application but need to</td>
</tr>
<tr>
<td>pregnant / lactating women</td>
<td></td>
<td>be justified in the overall timelines.</td>
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<tr>
<td>4. Serology</td>
<td>4.1 Appropriate serology / diagnostic analysis plan</td>
<td>Existing (preliminary) immunogenicity data. Use of appropriate serologic and / or diagnostic assays that are fit-for-purpose, qualified or validated – depending on the objective.</td>
</tr>
<tr>
<td>5. Clinical Supply</td>
<td>5.1 Clinical Trial Material availability and stability</td>
<td>Clinical Trial Material suitable for phase of clinical development. Evidence of documented stability.</td>
</tr>
<tr>
<td>6. Regulatory</td>
<td>6.1 Clinical trial approval</td>
<td>Realistic Clinical Trial Application (CTA) plans / timelines (also consider import license etc. in case of international / multinational clinical trials).</td>
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<td></td>
<td>6.2 Overall regulatory strategy and label claims</td>
<td>Does the clinical trial and respective evidence support the regulatory strategy / potential label claims.</td>
</tr>
<tr>
<td>7. Budget</td>
<td>7.1. Per subject cost</td>
<td>Adequate cost estimates and justification. Additional in-kind contributions and / or other funding sources?</td>
</tr>
<tr>
<td>8. Partnership</td>
<td>8.1. Competency, capacity, experience, and track-record</td>
<td>Extent to which the partnership, its plans and procedures are viable and of the necessary quality to deliver on the proposed activities of the project. The potential involvement of partners in LMICs.</td>
</tr>
<tr>
<td></td>
<td>8.2. Extent to which additional rights are needed to enable freedom to operate</td>
<td>Involved of a CRO? See also Equitable Access below.</td>
</tr>
<tr>
<td>9. Time</td>
<td>9.1. Time to trial start</td>
<td>Time to trial start (first subject recruited) after contracting should be outlined to allow (interim) clinical data to be available before the end of 2021.</td>
</tr>
<tr>
<td>10. Equitable Access</td>
<td>10.1. Extent to which the equitable access plan would expand access to COVID19 vaccines</td>
<td>Whether applicant has responded to UNICEF RFP for the COVAX Facility for this vaccine/vaccine candidate.</td>
</tr>
<tr>
<td></td>
<td>10.2. Extent to which it would expand capacity in LMICs.</td>
<td>Whether Applicant has contracts in place for the provision of this vaccine to countries with timing of provision regardless of income level and for those within the COVAX AMC, the pricing is established at not for profit/minimal margin level.</td>
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<td></td>
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<td>How equitable access will be better enabled through the proposed work.</td>
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<td></td>
<td></td>
<td>If not the Marketing Authorisation Holder or anticipated MAH, extent to which access plan can be secured rapidly.</td>
</tr>
</tbody>
</table>
6. Note on vaccine access

CEPI is committed to the principle of universal, equitable and affordable access to vaccines, especially for the most vulnerable countries, as expressed in its Equitable Access Policy. CEPI’s access policy with respect to COVID-19 requires that vaccines are allocated fairly based on public health need rather than ability to pay.

CEPI is a co-lead on the vaccine pillar (COVAX) of the Access to COVID-19 Tools (ACT) Accelerator which has established a global mechanism to procure and fairly allocate COVID-19 vaccines (the COVAX Facility). Awardees receiving funds through CEPI have to date been required to supply and sell vaccines to this mechanism (or make available their technologies in order to do so) in quantities reflective of the funding received and at fair prices that are sustainable to the manufacturer. CEPI is also working with international partners towards establishing an appropriate liability and indemnification mechanism, recognising the importance to developers that such issues be addressed comprehensively prior to supplying vaccine.

Any successful Applicant will become an Awardee, and as such must have the right to develop, use, manufacture, and/or sell the vaccine proposed here for funding. CEPI will not take ownership of patents arising from its funded projects. CEPI will not seek a share of any commercial return from the vaccine manufacture during the pandemic period, focusing instead on expanded access by ensuring global allocation needs are met. CEPI has a common interest with Awardees to ensure that project results are quickly and broadly made available to further scientific research on COVID-19 and that publications are ‘open access’.

7. Award conditions

Before submitting an application, Applicants should take note of two Award conditions. The first is that each Awardee recognises CEPI’s governance, which can be found on CEPI’s website. The second is that any funding is dependent on the signing of an Award Agreement, which provides the terms and conditions under which the Award will be made, in line with CEPI’s Third Party Code, which can be found on CEPI’s website.

Contractual terms and conditions will need to be rapidly concluded in days or weeks and Awardees must be able to meet these pressing timelines given the urgency of the pandemic and the desire to start funding projects as quickly as possible.

Applicants unable or unwilling to meet these requirements should not submit an application.

8. Technical and administrative questions

Technical and administrative questions about this Call should be directed to the CEPI Secretariat (cfp@cepi.net).