



**COVID-19 Vaccine**  
DELIVERY PARTNERSHIP

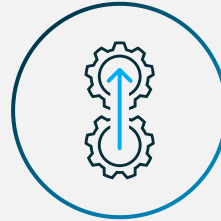


# C-19 Integration: Country Introduction Materials

**Compendium**

March 2023

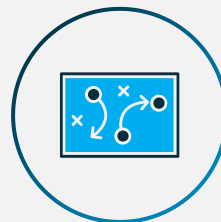
# Purpose of this document



Give **explanation of C-19 integration**, its relevance and examples of in-country implementation



Serve as **repository for HQ, RO, and CO stakeholders** on C-19 integration materials and support available



Provide **overview of when and how to use different integration support materials** and their linkages

- > WHAT is C-19 integration?
- > WHY is C-19 integration important?
- > HOW can C-19 integration look like?
- > WHICH SUPPORT is available to countries for C-19 integration?
- > HOW can countries deploy this document to kick off C-19 integration?
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# COVID-19 integration involves partial or full adoption of C19 vaccination into other health services across WHO health system building blocks



*The **partial or full adoption of COVID-19 vaccination into national immunization programme services, PHC and any other relevant health services** with the overall aim of improving programme efficiency and sustainability, enhancing demand and improving user satisfaction, achieving and maintaining satisfactory coverage, and addressing inequities*

**WHO / UNICEF Considerations for Integrating COVID-19 Vaccination**

## WHO Health System Building Blocks

-  Leadership and governance
-  Health systems financing
-  Demand and community engagement
-  Service delivery
-  Health workforce
-  Health information systems
-  Access to essential medicines (incl. quality vaccines)

## Today, countries are at different stages of C-19 integration



### Limited integration efforts

Limited integration activities launched to date, esp. at service delivery level, with Covid-19 Vx acceleration still as the main focus



### Planned integration

Transition plan to integrate C-19 Vx into RI, PHC and other relevant health services, but no execution to date



### Opportunistic integration

Short-term/ad-hoc activities driven out of necessity/resource constraints without clear strategy/plan in place



### Structured integration

Strategic activities to enable systematic integration, reaching key target groups (incl. cross-sector coord. with other PHC partners)

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## Rationale for COVID-19 integration laid out in WHO-UNICEF guidance

- 1 **Epidemiology:** C-19 is expected to evolve, and severity of resulting disease might reduce over time as immunity increases. Also, periodic spikes may occur as immunity wanes, which may require periodic boosting or specific vaccines targeting new variants
- 2 **Sustainability:** Mass vaccination campaigns have been used so far; however, this has strained health systems – health workers and resources have been diverted from providing essential health services
- 3 **Leveraging COVID-19 resources:** There is room to capitalize on C19 vaccination investments triggered by the pandemic towards strengthening immunization programmes, PHC and pandemic preparedness
- 4 **Life-course approach:** Integrating C-19 vaccination with other services increases opportunity for a more people-centred approach by delivering packages of health services, in alignment with the goals of IA2030

## Recent developments underline need to think about integration now

- 1 **Support of integrating countries:** Some countries have begun integration efforts at different speeds, scales and levels of success, and have requested additional support from WHO / UNICEF via the Regional Offices
- 2 **Availability of dedicated funding:** Additional pandemic preparedness funds earmarked for integration (e.g., CDS3 funding) or for health systems strengthening (e.g., Global Fund) are currently available
- 3 **Window to act is now:** Integration is currently a priority for many actors, but window of opportunity may close if another health challenge arises
- 4 **Future Gavi C-19 program:** Gavi is currently designing its future C-19 program for 2024 and 2025 with a strong focus on integration

# COVID-19 integration is highly relevant for PHC and other non-immunization programs...



## Strengthen health system collaboration

Integration of COVID-19 into PHC and non-immunization programs provides an **opportunity to strengthen collaboration across critical PHC stakeholders**



## Adopt learnings from COVID-19 vaccination

COVID-19 vaccination created an avenue for novel innovations and tools for pandemic response which PHC and non-immunization programs could **leverage to improve performance in critical areas** e.g., service delivery, logistics, political commitment, etc.



































































## Opportunity to benefit from priority funding for COVID-19

PHC and other non-immunization programs can **benefit from large funding envelopes** available over coming months **dedicated to COVID-19 integration** and broader interest from donors



# ...but will also create platform for other upcoming life course vaccines

**Fig. 1. COVID-19 vaccine as part of a life course immunization approach to other health interventions**

|  | <br>Pregnant women | <br>Newborn (<24 hours) | <br>Infant (<1 year) | <br>Second year of life (12–23 months) | <br>Child (2–9 years) | <br>Adolescent (9–19 years) | <br>Adult (20–64 years) | <br>Older person (>65 years) |                                |
|--|---|--|---|---|--|--|--|---|--------------------------------|
| <b>Vaccines recommended by WHO for all immunization programmes</b>   | TTCV<br>Seasonal influenza<br>COVID-19  | BCG<br>Hep B-BD  | DTPCV<br>Measles<br>Rubella<br>HepB   | PCV<br>Rotavirus<br>Hib<br>PolioRota-virus  | DTPCV booster<br>Measles<br>PCV3 (if 2+1 schedule)<br>COVID-19   | Diphtheria booster<br>Tetanus booster<br>COVID-19  | Diphtheria booster<br>Tetanus booster<br>HPV<br>COVID-19   | Seasonal influenza<br>COVID-19  | Seasonal influenza<br>COVID-19 |
| <b>Vaccines recommended by WHO for certain regions/high risk populations /immunization programmes with certain characteristics</b> |   |  | Japanese encephalitis<br>Meningococcus<br>Rabies<br>Seasonal influenza<br>TCV<br>Yellow fever           | Cholera<br>Hepatitis A<br>Meningococcus<br>Mumps<br>Seasonal influenza<br>Rabies<br>TCV<br>Varicella                      | Cholera<br>Rabies<br>TCV   | Cholera<br>Dengue<br>Rabies<br>TCV   | Cholera<br>Dengue<br>Rabies  | Cholera<br>Pneumococcus<br>Rabies   |                                |
| <b>Pipeline of new life course vaccines*</b>   | Group B streptococcus<br>RSV<br>Zika  | TB (next gen)  | ETEC<br>GAS<br>Malaria (next gen)<br>Norovirus<br>RSV Shigella<br>SPA                                   | Malaria (next gen)<br>GAS<br>SPA<br>RSV   | Meningococcus  | Chikungunya<br>Gonococcus<br>TB (next gen)<br>CMV<br>Meningococcus   | Clostridium difficile<br>Chikungunya<br>TB (next gen)<br>CMV<br>HIV<br>Pneumococcal                        | Clostridium difficile<br>Chikungunya<br>Norovirus<br>RSV<br>TB (next gen)                                       |                                |
| <b>Nutrition</b><br>Growth monitoring/nutrition counseling/vitamin A   |                    |                         |                      |                                        |                       |  |  |   |                                |
| <b>Malaria</b><br>Distribution LLINs/IPT/SMC   |                    |                         |                      |                                        |                       |                             |                         |                              |                                |
| <b>Neglected tropical diseases</b><br>Deworming  |                   |  |                     |                                       |                      |                            |                        |                             |                                |
| <b>Reproductive and maternal health services</b><br>Family planning services   |                  |                       |                    |                                      |                     |                           |                       |   |                                |
| <b>HIV services</b>  |                  |                       |                    |                                      |                     |                           |                       |                            |                                |
| <b>WASH</b><br>Hygiene kit distribution  |                  |                       |                    |                                      |                     |                           |                       |                            |                                |
| <b>Health promotion</b><br>Health counselling  |                  |                       |                    |                                      |                     |                           |                       |                            |                                |
| <b>Noncommunicable disease screening</b>   |                  |  |   |   |                     |                           |                       |                            |                                |

\* Based on data available as of March 2023; \*\* for caregiver

Source: WHO-UNICEF Considerations for integrating COVID-19 vaccination into immunization programmes and primary health care for 2023 and beyond

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# C-19 integration will look different across countries based on various factors



Some initial country examples on following pages

## Factors determining country specification of C-19 integration *(non-exhaustive list)*



Integration **progress**



Country **context** and existing **programmes**



COVID-19 vaccination **target population**



Available **funding**



Maturity of health **digital systems**



**Interconnectedness** of service delivery across immunization areas



Health **governance** landscape

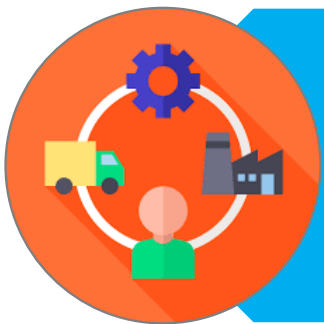
# Good practices and innovation to mainstream/integrate COVID-19 vaccination

GOVERNANCE, PLANNING & FINANCING



## POOLING RESOURCES

**Rwanda** leveraged and pooled partner and domestic resources to procure COVID-19 and other vaccines and cold chain equipment for their national immunization programme.



## JOINT PLANNING

**Colombia** conducted joint planning for procurement and delivery of COVID-19 and other essential vaccines in their national immunization programme



## INTEGRATION OF GOVERNANCE PROCESSES

**India:** Task forces in state/district/urban areas developed for monitoring polio data were integrated for EPI and are now starting to discuss COVID-19 vaccination.

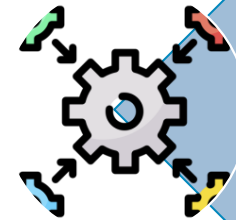
# Good practices and innovation to mainstream/integrate COVID-19 vaccination

SERVICE DELIVERY (1/3)



## CO-ADMINISTRATION WITH INFLUENZA VACCINATION

**Panama** integrated the delivery of COVID-19 & influenza vaccination at health facilities and house-to-house during the Vaccination Week in the Americas



## DELIVERING COVID-19 AND ESSENTIAL VACCINATIONS AT THE SAME FACILITY

**India & Bangladesh** deliver COVID-19 and essential vaccines at the same outreach and health facility vaccination sites on different days.



## INTEGRATED DELIVERY WITH MEASLES OUTBREAK RESPONSE VACCINATION

**Angola** integrated the delivery of COVID-19 vaccination with measles outbreak response vaccination in children.



## DELIVERING COVID-19 AND ESSENTIAL VACCINATIONS AT THE SAME FACILITY

**Maldives** delivers COVID-19 and essential vaccination at the same outreach and health facility vaccination sites but at different times of the day.



## MULTI-INTERVENTION CAMPAIGNS

**Nigeria** plans multi-intervention campaigns to concurrently deliver measles vaccines, other essential vaccines and vitamin A to children and COVID-19 vaccination to adults.



## INTEGRATION OF VACCINATION WITH IDENTIFICATION OF RISK GROUPS

**Sri Lanka** screens caretakers of children coming for essential vaccination to check their COVID-19 vaccination status and offer vaccination to those who require it..

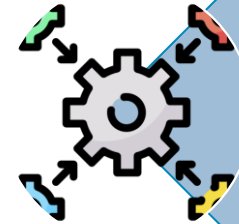
# Good practices and innovation to mainstream/integrate COVID-19 vaccination

## SERVICE DELIVERY (2/3)



### INTEGRATED DELIVERY OF SERVICES DURING OUTREACH SESSIONS

**Philippines** provides COVID-19 vaccine, essential vaccines, vitamin A supplementation and nutrition screening at different sites in a village during the same day.



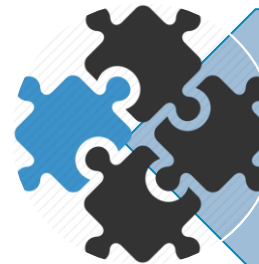
### NCD SCREENING AT MASS VACCINATION SITES

**Cambodia** provided screening for non-communicable diseases at COVID-19 mass vaccination sites.



### COVID-19 VACCINATION FOR CAREGIVERS DURING ESSENTIAL IMMUNIZATION VISITS

**Ethiopia** screens care givers of children coming for essential immunization and provides COVID-19 vaccination.



### WHOLE FAMILY APPROACH TO COVID-19 VACCINATION

**Nigeria:** some states adopted a whole family approach combining COVID-19 vaccination with, nutritional and NCD screening and essential vaccines



### INTEGRATING SOCIAL MOBILIZATION FOR COVID-19 WITH IDENTIFICATION OF MISSED CHILDREN

**Iraq:** community mobilizers for COVID-19 vaccination also check vaccination records to identify children who missed essential vaccination doses.



### INTEGRATING COVID-19 VACCINATION WITH NCD SCREENING

**Panama** provided NCD and cervical cancer screening along with COVID-19 vaccination during the Vaccine Week in the Americas.

# Good practices and innovation to mainstream/integrate COVID-19 vaccination

SERVICE DELIVERY (3/3)



## PARTNERING WITH OTHER PROGRAMMES

**The United Republic of Tanzania** partnered with the HIV programme and with physicians treating NCDs to provide COVID-19 vaccination in the respective clinics along with clinical care.



## INTEGRATION OF COVID-19 VACCINATION & TESTING

**Liberia** integrated COVID-19 vaccination and testing in the same facilities to improve vaccination uptake.



## INTEGRATED SERVICE DELIVERY

**Somalia**: integrated outreach programmes provided COVID-19 vaccines along with other essential vaccines, vitamin A, zinc, ORS packets, and medical consultation to eligible persons in the community



## INTEGRATED DELIVERY WITH ESSENTIAL VACCINES

**Honduras and Yemen**: All health facilities offer COVID-19 vaccines and other essential vaccines for adults.



## INTEGRATED DELIVERY WITH ANC

**Fiji** integrated COVID-19 vaccination with antenatal care services to allay fears among pregnant women about the safety of vaccines and improve uptake

# Good practices and innovation to mainstream/integrate COVID-19 vaccination

## SUPPLY CHAIN & WASTE MANAGEMENT



### STRENGTHENING REGULATORY CAPACITY

**Philippines and Indonesia:** Fast-tracked the process for emergency regulatory authorization, which could be capitalized for future emergency-related products.



### THE iDRONE PROGRAMME FOR INTEGRATED DELIVERY OF SUPPLIES

**India** used drones to deliver medical supplies in difficult geographic terrains, including COVID-19 vaccines, other vaccines, antenatal care medicines, multi-vitamins, syringes and gloves in the north-east of the country.



### INTEGRATED APPROACH TO COLD CHAIN CAPACITY PLANNING

**Cambodia:** Cold chain assessment and distribution for COVID-19 vaccine deployment was integrated with essential immunizations when planning cold chain capacity



### STRENGTHENING OVERALL COLD CHAIN CAPACITY

**Nepal** leveraged the opportunity of COVID-19 vaccine deployment to strengthen cold chain capacity for the overall national immunization programme..



### LEVERAGING THE EXISTING E-LMIS FOR COVID-19 STOCK MANAGEMENT

**Senegal** used the existing eLMIS, a real-time stock-monitoring tool in each health facility, for rationally redirecting COVID-19 stock flows to points of care based on consumption rates.



### LEVERAGING THE EXISTING E-LMIS FOR COVID-19 STOCK MANAGEMENT

**India** adapted the existing eLMIS (eVIN) to accommodate COVID-19 vaccine roll-out needs while maintaining essential immunizations during the pandemic.



# Good practices and innovation to mainstream/integrate COVID-19 vaccination

## HUMAN RESOURCES MANAGEMENT & TRAINING



### TRAINING HEALTH WORKERS TO IDENTIFY AND ENLIST BENEFICIARIES

**India** trained health workers to conduct surveys to identify and enlist beneficiaries for essential immunization and COVID-19 vaccination.



### LEVERAGING THE POLIO WORKFORCE

**Somalia** used the polio workforce to conduct training of trainers for COVID-19 vaccination, recruiting vaccinators and for developing micro plans

# Good practices and innovation to mainstream/integrate COVID-19 vaccination

## DEMAND & COMMUNITY ENGAGEMENT



### USE OF TRUSTED COMMUNITY INFLUENCERS

**Yemen:** Community midwives (trusted influencers) trained to provide COVID-19 and essential immunizations



### COMMUNITY INVOLVEMENT AND INTEGRATION OF VACCINATION WITH ROUTINE ANC SERVICES

**Fiji** used community feedback and established a dedicated Social Listening Subgroup under a multi-partner RCCE initiative to improve demand for routine immunization and COVID-19 vaccination.



### PROMOTING COVID-19 SAFETY MEASURES JOINTLY WITH CHILDHOOD IMMUNIZATION

**Nepal** promoted COVID-19 safety measures together with essential immunizations, particularly targeting children.



### COMMUNITY ENGAGEMENT FOR COMMUNICATING EFFECTIVE HEALTH INTERVENTIONS

**Afghanistan:** Cross-sectoral community engagement activities to share information on safe water, hygiene and vaccination.



### INTEGRATED HEALTH COMMUNICATION

**Cameroon:** Coupled vaccination with existing health communication activities.

# Good practices and innovation to mainstream/integrate COVID-19 vaccination

## DATA SYSTEMS & MONITORING



### LEVERAGING DIGITAL DATA SYSTEMS

**Lao People's Democratic Republic** will leverage The COVID-19 Vaccination Registry (CVR), based on the DHIS2 software module, to establish an electronic registry for essential immunization.



### LEVERAGING DIGITAL DATA SYSTEMS

**India** plans to expand the use of an electronic registration system (CoWIN) for COVID-19 vaccination to register priority groups, schedule appointments, generate vaccination certificates and monitor AEFIs to include all essential immunization



### LEVERAGING DIGITAL DATA SYSTEMS

**Indonesia:** the digital home-based immunization record, the PeduliLindungi app, is currently used as individual COVID-19 vaccination registry but will be expanded to include all essential vaccination.



### INTEGRATING COVID-19 AND VPD SURVEILLANCE

**Timor-Leste** is planning to integrate COVID-19 and VPD surveillance programmes within a comprehensive surveillance programme.



### ENHANCING SAFETY SURVEILLANCE CAPACITY

**Philippines** enhanced AEFI surveillance, and the structure and function of expertise of regional AEFI committee and national AEFI committee to conduct causality assessments using the opportunity of COVID-19 vaccination.



### COMPLIANCE WITH VACCINE SAFETY STANDARDS

**Bolivia** established mass COVID-19 vaccination campaign sites complying with AEFI technical standards for prevention and care that can be reproduced for other mass vaccination campaigns.

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## Four types of support available to integrating countries



### SUPPORT MATERIALS

Guidelines, tools, checklists and other documents for C-19 integration



### TECHNICAL ASSISTANCE

Capacity building resources available to support implementation



### POLITICAL ADVOCACY

Overview of relevant stakeholders for C-19 integration buy-in



### FUNDING

Training materials on deployment of Gavi CDS3 funding




## Four types of support available to integrating countries



**SUPPORT  
MATERIALS**



TECHNICAL  
ASSISTANCE

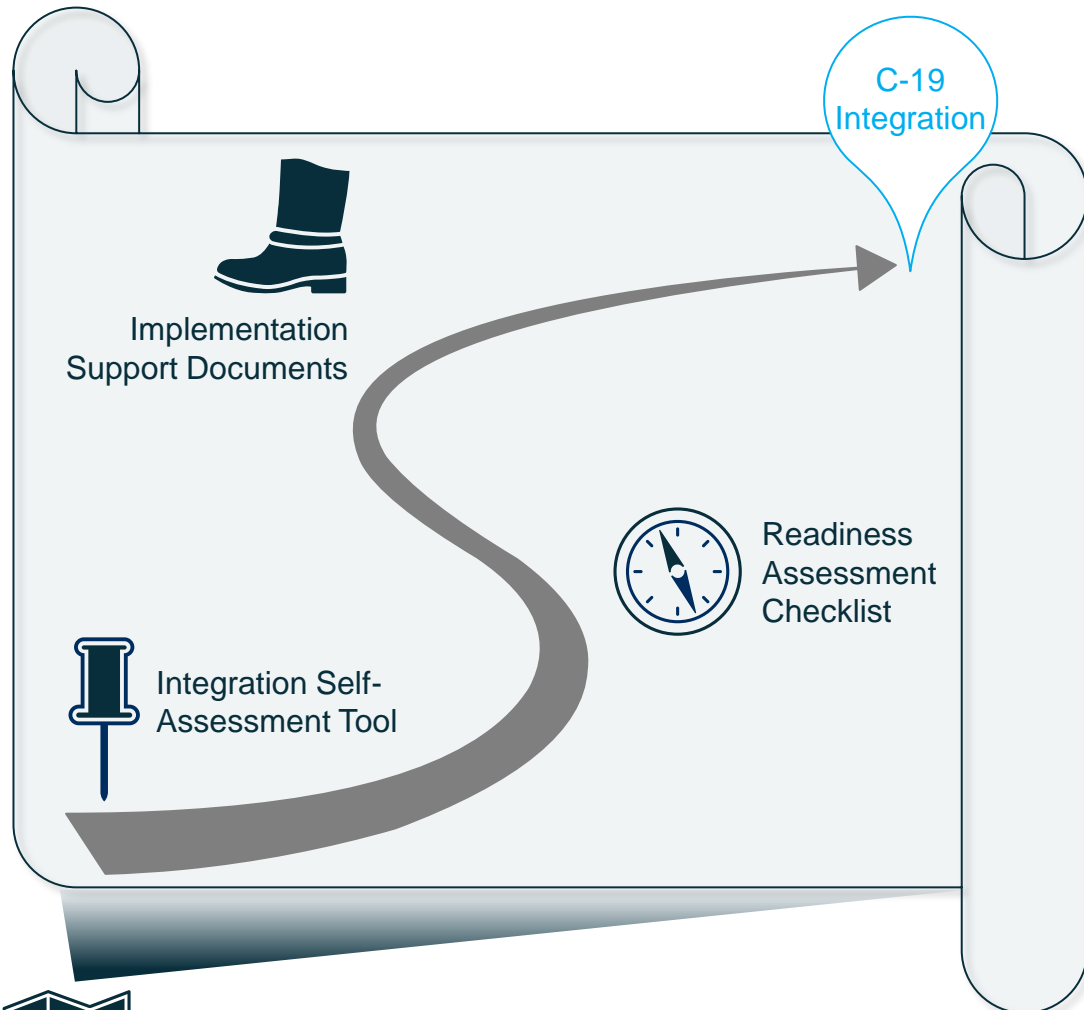


POLITICAL  
ADVOCACY



FUNDING

# Support package helps countries navigate towards C-19 integration



Considerations for  
C-19 Integration



## THE MAP

### Considerations for Integrating COVID-19 Vaccination

Establishes global principles and overall framework, supporting countries to define national objectives for integrating C-19 vaccination along all health system building blocks



## THE LOCATION PIN

### Integration Self-Assessment Tool

Enables countries to conduct a situational analysis of the current state of C-19 integration along all health system building blocks in order to identify current strengths and focus areas



## THE COMPASS

### Readiness Assessment Checklist (Annex 3 of Considerations)

Supports countries to identify specific technical actions for incorporation in integration strategy and implementation in order to address gaps and challenges identified in self-assessment



## THE BOOTS

### Implementation Support Documents

Provides practical and action-oriented support (e.g., best practices, lessons learned) for implementation of global guidelines along health system building blocks and/or target population

## Support package is directed at country-level integration efforts...

Package should be used by those supporting C-19 integration at country level

Non-exhaustive

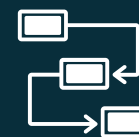
- Government stakeholders
  - National Ministry of Health
  - Health-related departments & agencies
  - ...
- WHO / UNICEF Country Office
- Implementation partners

## ... taking into account different country contexts

Support package is meant to facilitate C-19 integration efforts for different country contexts



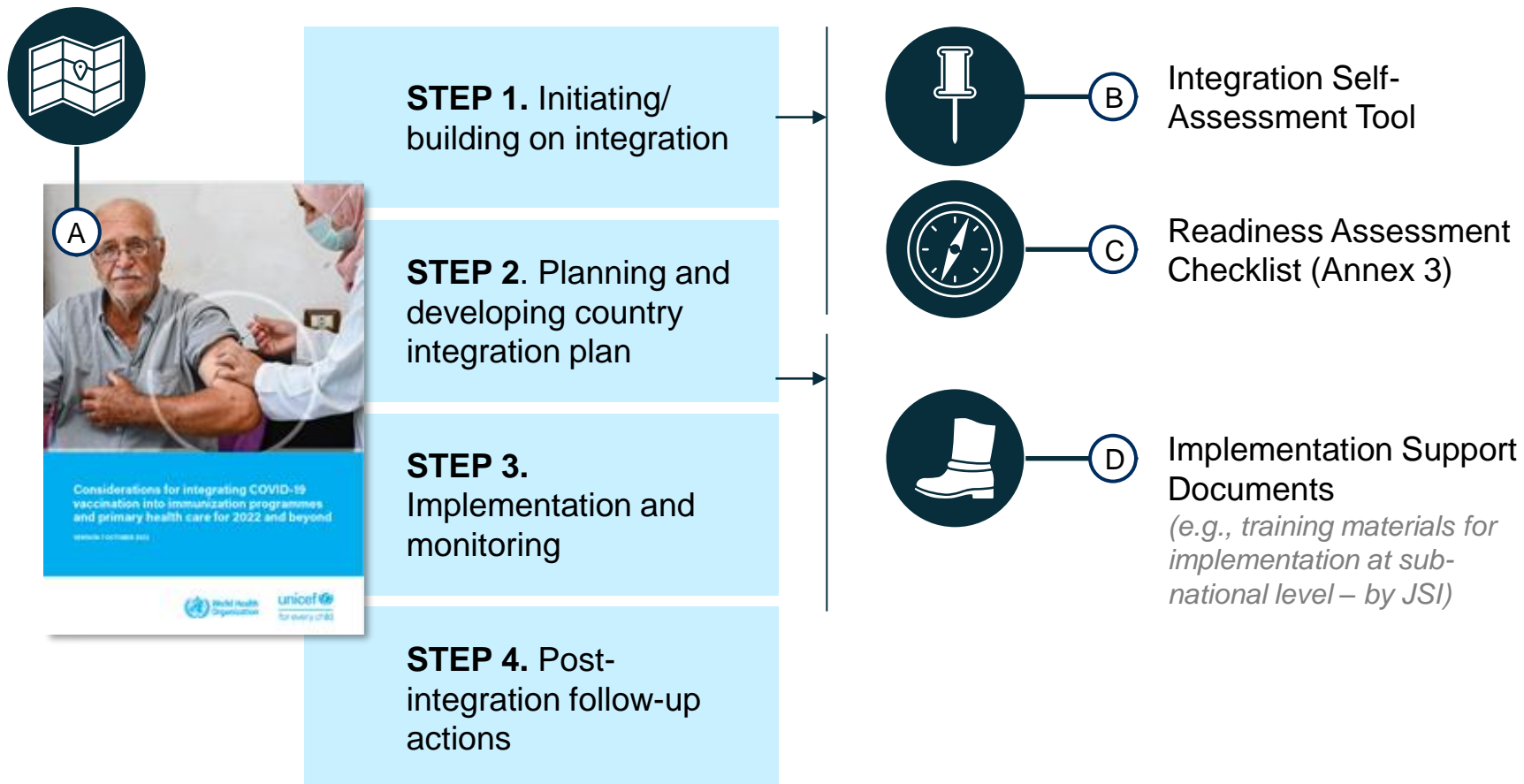
Countries at the **start** of their integration journey  
(no / limited integration to date)



Countries already **in the process of integration**  
(opportunistic / strategic integration)



# To reach their goal of C-19 integration, we suggest countries deploy support materials in order as depicted in guidance document...



...but can adapt approach based on context

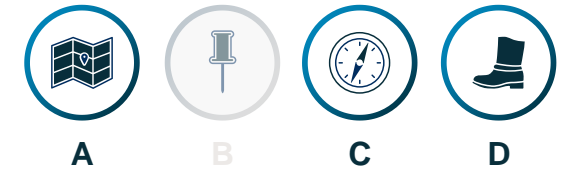
Details on next slide

# Backup | Countries can adapt approach to support package based on respective context

1

## No Integration Self-Assessment Tool

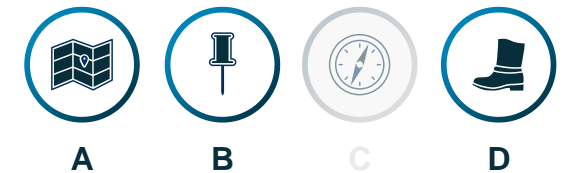
Countries may choose to not fill out the Self-Assessment Tool if they already have a **good understanding of their current state of integration** (e.g., from Readiness Assessment Checklist). In this case, countries can still use the rest of the support package for direction and may also complete the Self-Assessment Tool as a status check-in later in the integration journey.



2

## No Readiness Assessment Checklist

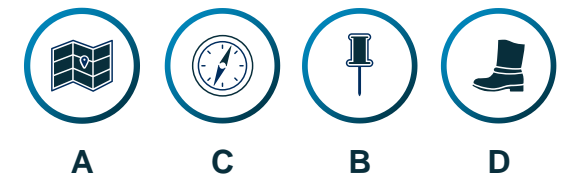
Countries may choose to not complete the Readiness Assessment Checklist if they already have a **strategy and set of technical actions for C-19 integration in place**. In this case, countries can still use the Self-Assessment Tool to identify their current strengths and focus areas for action.



3

## Bring forward Readiness Assessment Checklist

Countries may choose to fill the Readiness Assessment Checklist ahead of the Self-Assessment Tool if they have already **started working with the Considerations and its Annex**. In this case, countries may use the results of the Checklist to help fill the Self-Assessment Tool if needed.





# Considerations for Integrating COVID-19 Vaccination



[Click here to access](#)



## Objective

Establish **global principles and overall framework** for COVID-19 integration, supporting countries **define national objectives** for integrating COVID-19 vaccination along all health system building blocks.

## High-level overview

### STEP 1. Initiating/building on integration

- Repurpose existing EPI-related or C-19 vaccination technical working groups
- Conduct multisectoral consultations on potential C-19 vaccine integration
- Conduct a situation analysis to assess national/sub-national level readiness for integration

### STEP 2. Planning and developing country integration plan

- Define national policy for C-19 booster doses, understand and map population in-scope and how integration will reach them, define other interventions & service delivery strategies to provide C-19 vaccination, and identify key actions or investments needed

### STEP 3. Implementation and monitoring

- The existing repurposed taskforce or new temporary group should oversee progress on implementation and monitoring of COVID-19 vaccination integration and define indicators for monitoring progress

### STEP 4. Post-integration follow-up actions

- Define key implementation research questions on integrating C-19 vaccination, i.e. factors affecting integration, outcomes of different integrated approaches, effect on efficiency and cost effectiveness of C-19 vaccination

## Addressed at

**All levels of health-related MDAs** incl. leadership across immunization and non-immunization topics



# Integration Self-Assessment Tool

Step(s) of Considerations: 1,2

| Category  | Score |
|---|-------|
| Leadership and governance                                   | 3     |
| Operational coordination                                    | 2     |
| National health strategy                                    | 2     |
| Health system financing                                     | 2     |
| Integration budget  | 2     |
| Organization and equipment systems                          | 2     |
| Personnel and community engagement                          | 3     |
| Information communication strategy                          | 2     |
| Community mobilization                                      | 2     |
| Social marketing and behaviour change promotion and use     | 2     |
| Service delivery  | 2     |
| Integrated delivery strategy                                | 2     |
| Site points and digital capabilities                        | 2     |
| Quality of care mechanisms                                  | 2     |
| Health workforce  | 3     |
| Health information systems                                  | 3     |
| Health monitoring information systems                       | 2     |
| Reporting procedures and tracing mechanisms                 | 2     |
| Access to essential medicines (and quality mechanism)       | 2     |
| Procurement and supply management                           | 2     |
| Contraception and storage (not for non-reproductive health) | 2     |
| Stock and logistics management                              | 2     |
| Monitoring and evaluation                                   | 4     |
| Integration coordination framework                          | 2     |
| National self-assessment strategy                           | 2     |

## Objective

Enable countries to conduct a **situational analysis and self-assess the current state** of COVID-19 vaccination integration along all health system building blocks in order to **identify current strengths and potential focus areas** that may require further action / investment to advance integration

## High-level overview

The Integration Self-Assessment Tool can be used to **assess the current state of COVID-19 vaccine integration** along all health system building blocks in a country.

The tool has 3 main sections, excluding an instructions page:

### 1. Preparation for assessment

- Countries fill in target population groups and target health services for COVID-19 integration
- This ensures alignment on each country's objectives for COVID-19 and provides the context required to interpret results

### 2. Country inputs

- Self-assessment of current COVID-19 vaccine integration step along all dimensions and key actions based on 5pt scale

### 3. Output summary

- Dashboard summary to visually illustrate the country's inputs, including a heatmap and simple data visualizations in addition to more contextual information on the country's target population groups and target health services

## Addressed at

**Technical experts at health-related MDAs** (immunization and non-immunization topics) in conjunction with WHO/UNICEF country offices and implementation partners



# Readiness Assessment Checklist (Annex 3)

Step(s) of Considerations: 1,2



[Click here to access](#)

**Annex 3. Checklist for the COVID-19 vaccine integration readiness assessment**

The following checklist is provided as a suggested list of questions to guide countries as they assess their readiness for planning and implementing COVID-19 integration. Countries may find items in the checklist more or less relevant depending on their context and the steps they have already taken towards integration. Table 1 can help to identify approaches for integrated service delivery and Table 2 to identify actions/investments.

| Health system building block     | Question  | Yes/No                   | If No, specify action/investment required |
|----------------------------------|---|--------------------------|---|
| <b>Leadership and governance</b> | Does the proposed integration of COVID-19 vaccination have high-level support among relevant government leadership (e.g., CC, COVID-19 Task force, national managers of NP and PNC programmes)? | <input type="checkbox"/> |   |
|                                  | Is integration planning shared with relevant country policy and strategy documents (e.g., national health strategy plans, NRP/NC), national health promotion strategy?                          | <input type="checkbox"/> |   |
|                                  | Has a working group or equivalent to oversee the integration planning and implementation, including participation from relevant programmes, been defined? If yes, specify                       | <input type="checkbox"/> |   |
|                                  | Have you agreed a timeline for integration?   | <input type="checkbox"/> |   |
| <b>Health systems financing</b>  | Have costs of procuring COVID-19 vaccine products, supplies, cold chain equipment, and supplies and services been estimated and secured?  | <input type="checkbox"/> |   |
|                                  | Have costs of IM, training, outreach and communication needs been estimated and secured, including mapping of health context and human capital?   | <input type="checkbox"/> |   |
|                                  | Do you have an estimate of the funding needed to streamline processes to integrate COVID-19 vaccination into NP and PNC?  | <input type="checkbox"/> |   |
|                                  | Have opportunities for cost sharing across interventions and resource mobilization been identified?   | <input type="checkbox"/> |   |
|                                  | Have health budgets and expenditure changes been analysed to consider where sufficient resources may be occurring due to lack of COVID-19 vaccine integration?                                  | <input type="checkbox"/> |   |

## Objective

Support countries identify **specific technical actions which should be incorporated** into the integration strategy and implemented in order to **address potential gaps and challenges** that have been identified in the diagnostic assessment

## High-level overview

The Readiness Assessment Checklist provides a **list of questions categorized by the WHO Health Systems Building Blocks** (including Demand & Community Engagement and Monitoring & Evaluation), to guide countries' integration efforts as they **plan for implementing actions** to shore up areas for improvement or further strengthen the health systems

Questions in the checklist would have **varying levels of importance across countries** depending on **various factors including but not limited to:**

- Integration progress
- Country context and existing programmes
- COVID-19 vaccination target populations
- Available funding
- Maturity of health digital systems
- Interconnectedness of service delivery across immunization areas
- Health governance landscape

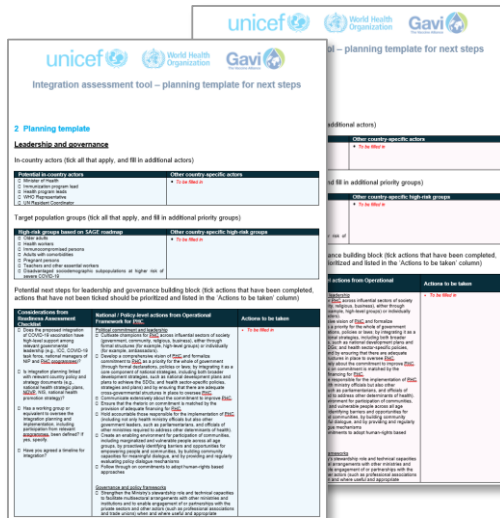
## Addressed at

**Technical experts at health-related MDAs** (immunization and non-immunization topics) in conjunction with WHO/UNICEF country offices and implementation partners



# Implementation Support Documents

Step(s) of Considerations: 2,3

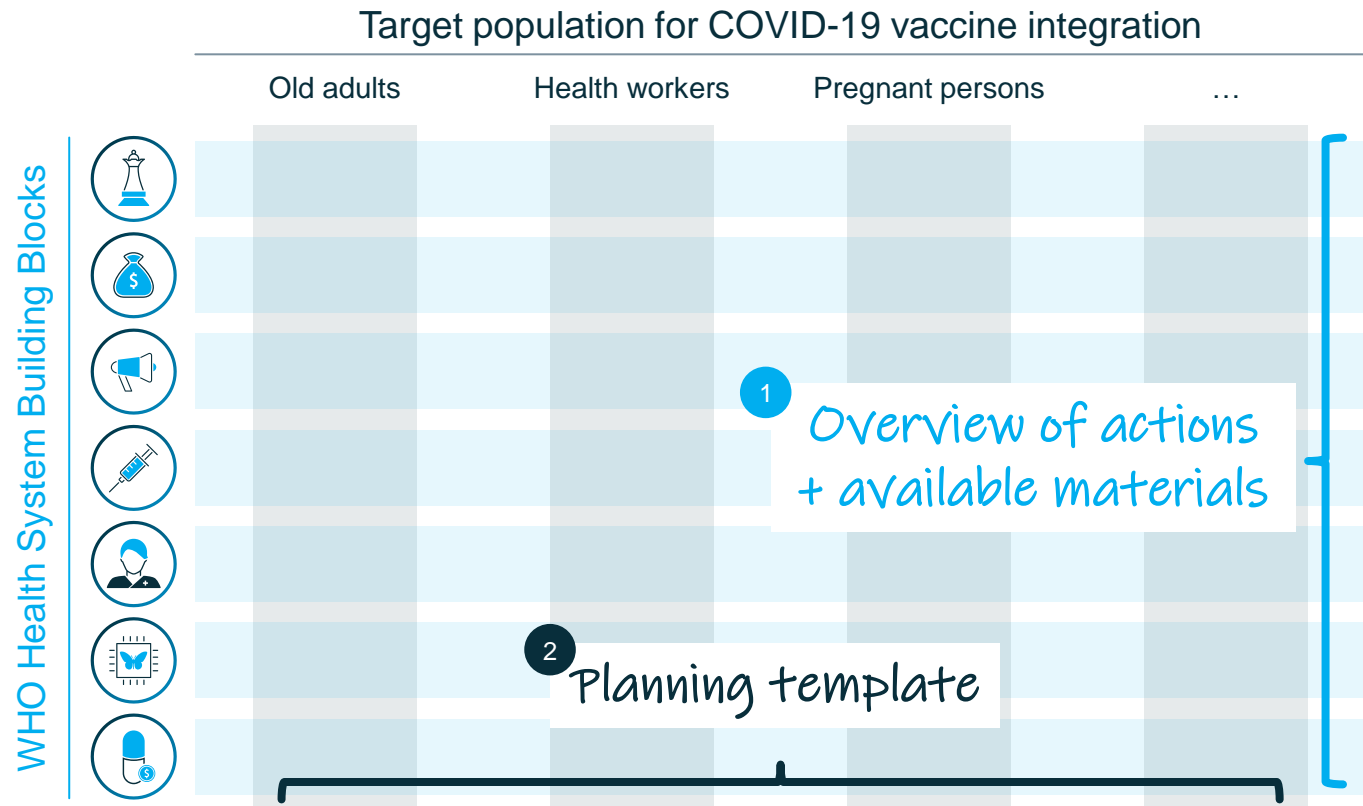


## Objective

Provides countries with **practical and action-oriented support** (e.g., best practices, lessons learned) for implementation of global guidelines along **health system building blocks and/or target population**

## High-level overview

Different formats for support materials available along two interconnected lenses: (1) **WHO Health System Building Block** and (2) **Target Populations**



Potential next steps for leadership and governance building block (tick actions that have been completed, actions that have not been ticked should be prioritized and listed in the 'Actions to be taken' column)

| Considerations from Readiness Assessment Checklist   | National / Policy-level actions from Operational Framework for PHC   | Actions to be taken  |
|--|--|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Does the proposed integration of COVID-19 vaccination have high-level support among relevant governmental leadership (e.g., ICC, COVID-19 task force, national managers of NIP and PHC programmes)?</li> <li><input type="checkbox"/> Is integration planning linked with relevant country policy and strategy documents (e.g., national health strategic plans, NDVP, NIS, national health promotion strategy)?</li> <li><input type="checkbox"/> Has a working group or equivalent to oversee the integration planning and implementation, including participation from relevant programmes, been defined? If yes, specify.</li> <li><input type="checkbox"/> Have you agreed a timeline for integration?</li> </ul> | <p><u>Political commitment and leadership</u></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Cultivate champions for PHC across influential sectors of society (government, community, religious, business), either through formal structures (for example, high-level groups) or individually (for example, ambassadors).</li> <li><input type="checkbox"/> Develop a comprehensive vision of PHC and formalize commitment to PHC as a priority for the whole of government (through formal declarations, policies or laws; by integrating it as a core component of national strategies, including both broader development strategies, such as national development plans and plans to achieve the SDGs; and health sector-specific policies, strategies and plans) and by ensuring that there are adequate cross-governmental structures in place to oversee PHC.</li> <li><input type="checkbox"/> Communicate extensively about the commitment to improve PHC.</li> <li><input type="checkbox"/> Ensure that the rhetoric on commitment is matched by the provision of adequate financing for PHC.</li> <li><input type="checkbox"/> Hold accountable those responsible for the implementation of PHC (including not only health ministry officials but also other government leaders, such as parliamentarians, and officials of other ministries required to address other determinants of health).</li> <li><input type="checkbox"/> Create an enabling environment for participation of communities, including marginalized and vulnerable people across all age groups, by proactively identifying barriers and opportunities for empowering people and communities, by building community capacities for meaningful dialogue, and by providing and regularly evaluating policy dialogue mechanisms</li> <li><input type="checkbox"/> Follow through on commitments to adopt human-rights based approaches</li> </ul> <p><u>Governance and policy frameworks</u></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Strengthen the Ministry's stewardship role and technical capacities to facilitate multisectoral arrangements with other ministries and institutions and to enable engagement of or partnerships with the private sectors and other actors (such as professional associations and trade unions) when and where useful and appropriate</li> </ul> | <ul style="list-style-type: none"> <li>• <i>To be filled in</i></li> </ul> |

1

## WHO Health System Building Block: Leadership and Governance | Guidance to identify potential actions and support materials

## 2 Target population for COVID-19 vaccine integration | Guidance to identify potential actions

Illustrative

| Target population   | Connected health programs / services | Relevant stakeholder groups | Activities / tasks to be launched | Implementation start time (estimate) | Kick-off funding requirement (estimate) | Responsibility / focal point |
|---|--------------------------------------|-----------------------------|-----------------------------------|--------------------------------------|---|------------------------------|
| Older adults  | • ...                                | • ...                       | ...                               | • ...                                | • ...                                   |                              |
| Health workers  | • ...                                | • ...                       | ...                               | • ...                                | • ...                                   |                              |
| Immuno-compromised persons (e.g., people living with HIV) | • ...                                | • ...                       | ...                               | • ...                                | • ...                                   |                              |

Please indicate current CDS2 funding and linkage to these activities



# Additional materials | Available and upcoming resources on vaccination

|                                    | On integration  | Vax health workers   | Vax older adults   | Vax pregnant women   | Vax adolescents  |
|------------------------------------|---|--|--|--|--|
| C-19 vax specific                  | <p><a href="#">Considerations for integrating COVID-19 vaccination into immunization programmes and primary health care for 2022 and beyond</a></p> <p><b>DRAFT</b><br/>FAQ how to integrate C-19 vax</p>                                 |  | <p><b>COMING SOON!</b><br/>Vaccinating older adults against COVID-19</p> | <p><a href="#">Questions and Answers: COVID-19 vaccines and pregnancy</a></p>  |  |
| Non-C-19 vax specific but relevant | <p><a href="#">Working Together: an integration resource guide for immunization services throughout the life course</a></p> <p><b>Under development</b><br/>Considerations for planning integrated campaigns: immunization and beyond</p> | <p><a href="#">Implementation guide for vaccination of health workers</a></p> <p><a href="#">How to implement seasonal influenza vaccination of health workers</a></p> |  | <p><a href="#">How to implement seasonal influenza vaccination of pregnant women</a></p> <p><a href="#">Protecting all against tetanus</a></p> | <p><a href="#">Options for linking health interventions for adolescents with HPV vaccination</a></p> <p><a href="#">Resource page for school-based immunization and vaccination checks</a></p> |



## Four types of support available to integrating countries



SUPPORT  
MATERIALS



TECHNICAL  
ASSISTANCE



POLITICAL  
ADVOCACY



FUNDING

# Several partners exist for Technical Assistance on country-level C-19 integration – immunization experts, non-immunization experts, and funders



## Immunization Experts

non-exhaustive



## Non-Immunization Experts

non-exhaustive



## Funders

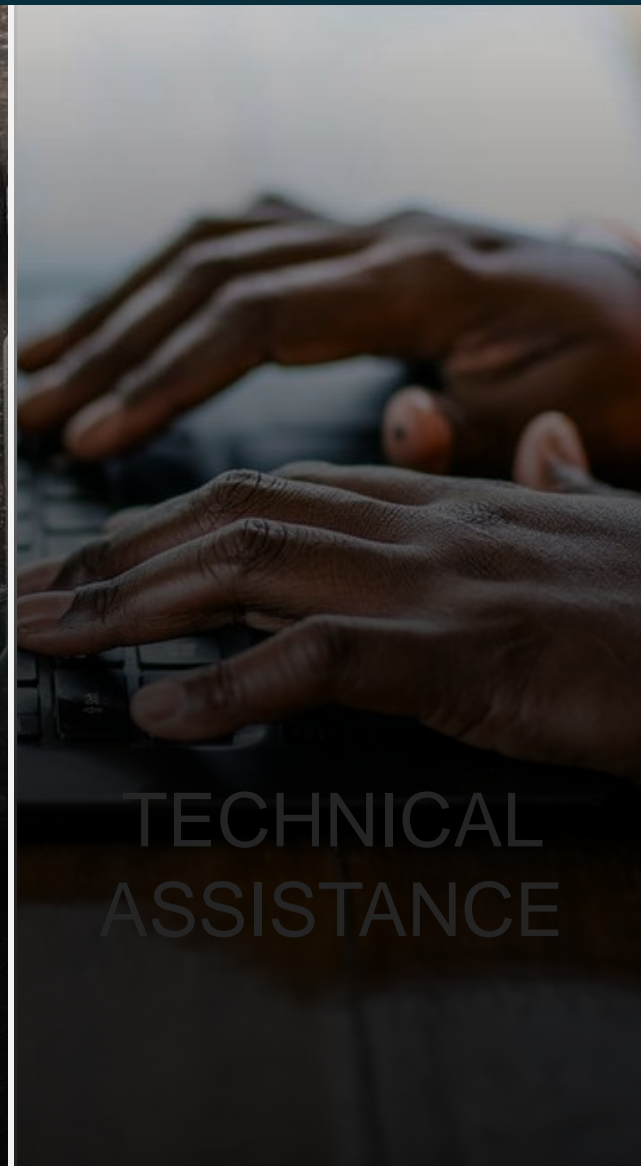
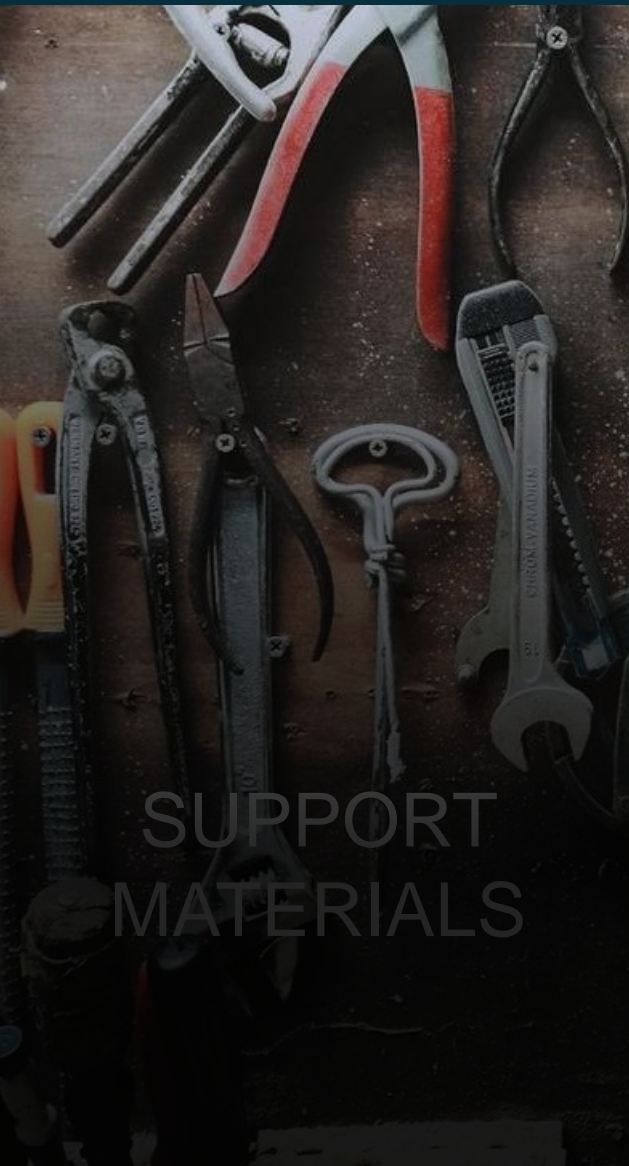
non-exhaustive



Note: Partners clustered based on their strongest presence in immunization/non-immunization activities, some actors involved in both across (e.g., UNICEF, WHO, JSI)

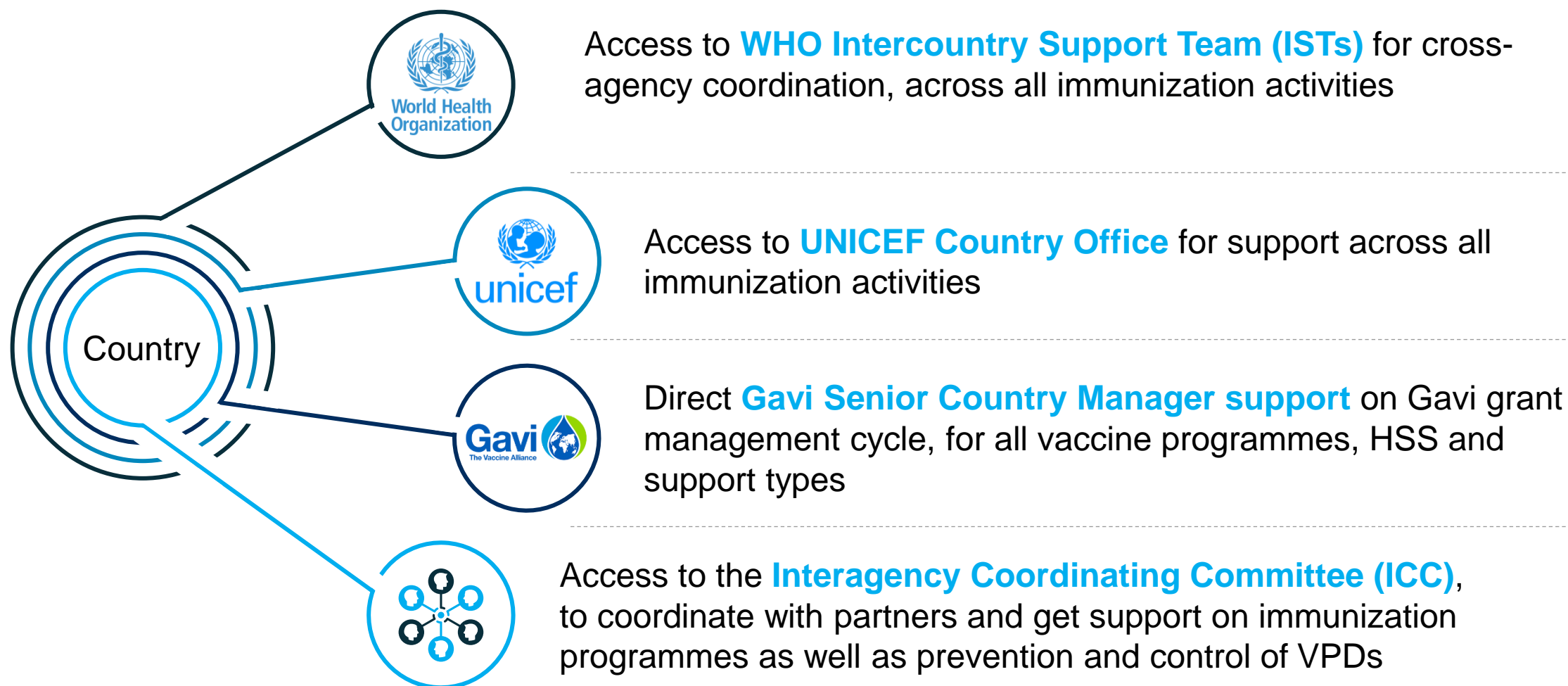


## Four types of support available to integrating countries



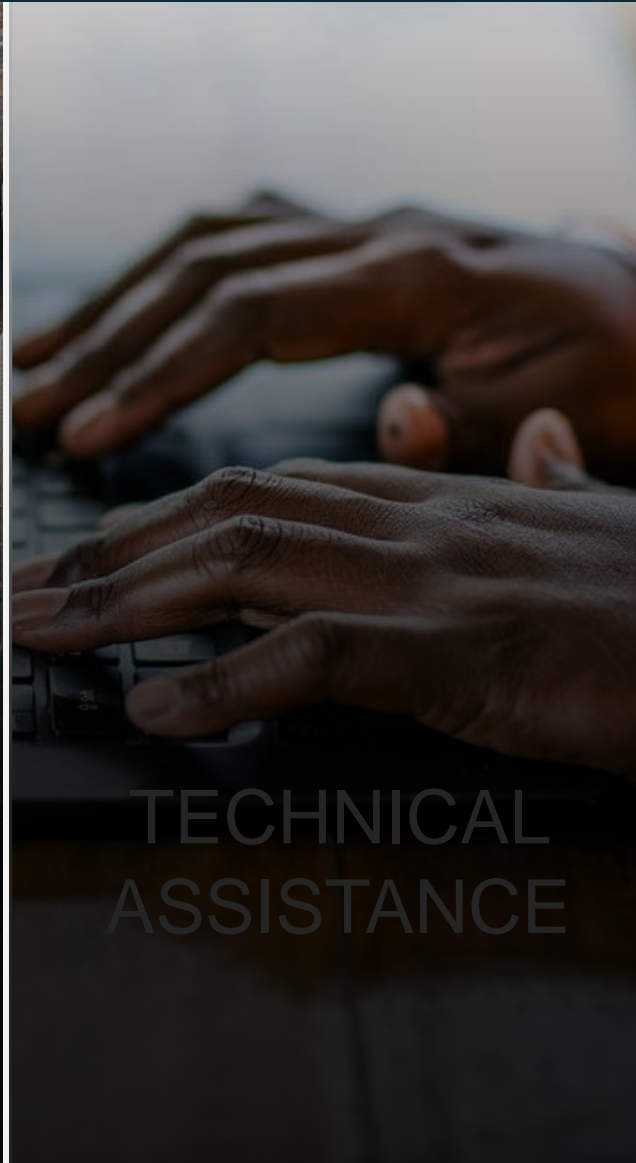
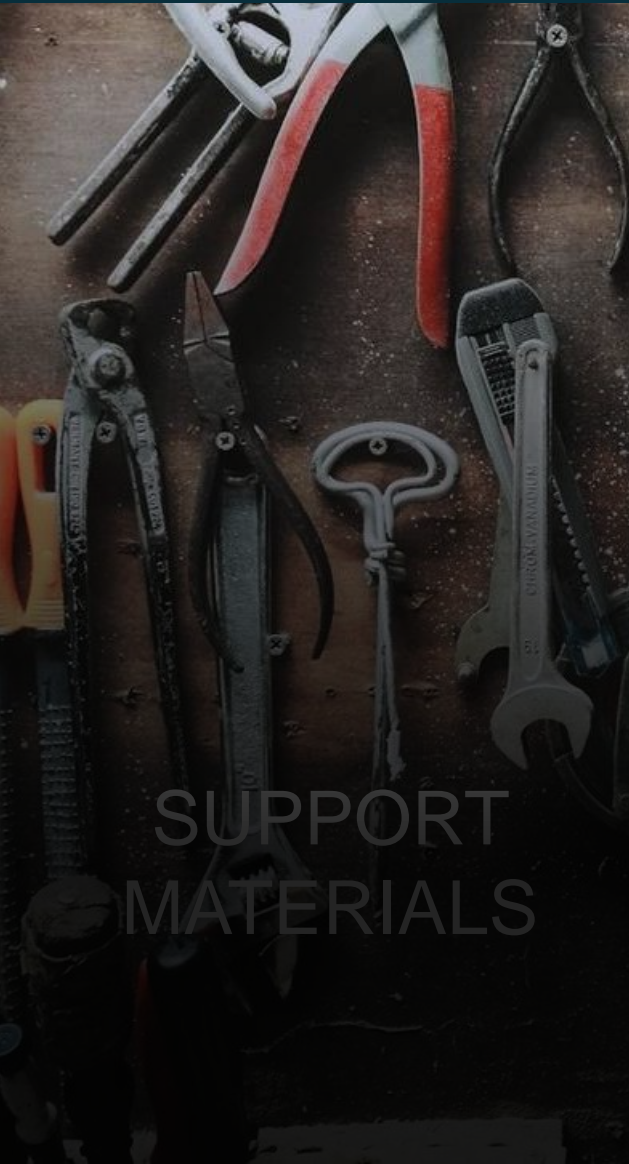
## Dedicated network of contacts and platforms to be leveraged for support on political advocacy

non-exhaustive





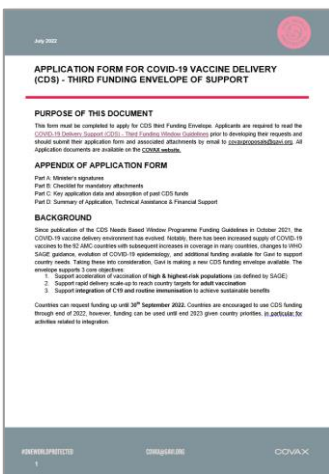
## Four types of support available to integrating countries



# APPLICATION FORM FOR COVID-19 VACCINE DELIVERY (CDS) 3<sup>rd</sup> FUNDING ENVELOPE OF SUPPORT



[Click here  
to access](#)



## Purpose of this document

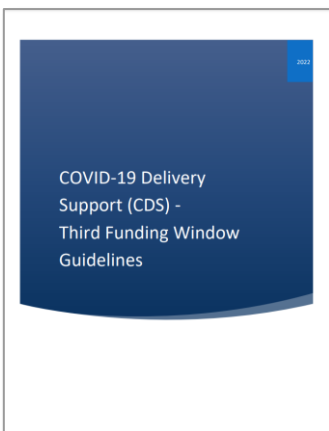
Collect countries' **CDS funding request** for the 3<sup>rd</sup> funding window, in particular for **activities related to integration** – until end of 2023

## High-level content

- Part A: Minister's signatures
- Part B: Checklist for mandatory attachments
- Part C: Key application data and absorption of past CDS funds
- Part D: Summary of Application, Technical Assistance & Financial Support



[Click here  
to access](#)



## Purpose of this document

Provide **guidelines to request a CDS funding** with detailed explanation on CDS funding process, objectives and enablers

## High-level content

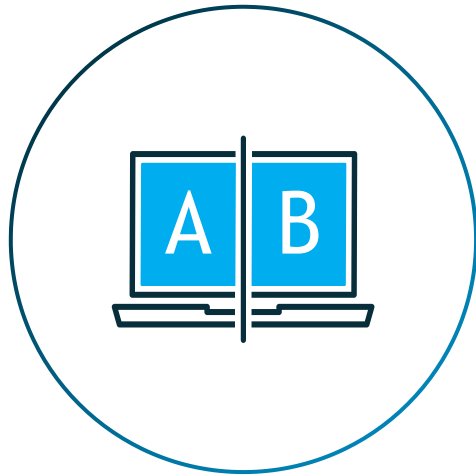
- Summary of key updates to third CDS funding window
- Guiding principles and objectives of the CDS 3<sup>rd</sup> funding window
- Enablers to achieve the objectives
- How to request support (financial request, budget template, reporting)

- > WHAT is C-19 integration?
- > WHY is C-19 integration important?
- > HOW can C-19 integration look like?
- > WHICH SUPPORT is available to countries for C-19 integration?
- > HOW can countries deploy this document to kick off C-19 integration?
- > FAQs



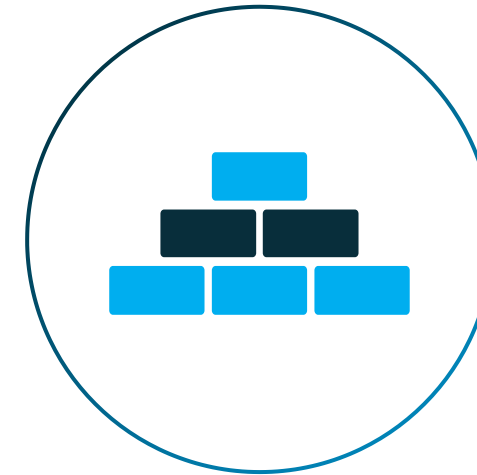


# Countries can kick off COVID-19 integration with the support package via virtual working session or field mission



## Virtual working session

Session held remotely with WHO, UNICEF and Gavi Country Office and in-country stakeholders (e.g., ACDC, CHAI, etc.) to introduce integration support package and collect information on country's integration status via Self-Assessment Tool



## In-country field mission

In-country session with WHO, UNICEF and Gavi Country Office, govt stakeholders, and in-country partners (e.g., ACDC, CHAI, etc.) to introduce integration support package, collect information on country's integration status, and support initial implementation planning

# Virtual working session enables remote collaboration across key stakeholders to conduct integration self-assessment

## Key objective

---

- Introduce **integration support package** based on WHO-UNICEF Considerations for Integrating COVID-19 Vaccination
- Collect information on **country's integration status** via Self-Assessment Tool

## Duration of session

---

- Approximately **2 hours**

## Participants

---

- **WHO & UNICEF CO** colleagues (immunization & non-immunization)
- **WHO & UNICEF HQ/RO** colleagues (immunization & non-immunization)
- Gavi Senior Country Manager (**SCM**)
- Optional: **In-country partners** e.g., ACDC, CHAI, etc.
- Country **gov't stakeholders** (e.g., Ministry of Health) – *after testing phase*

## Agenda

---

- Explanation of **context and importance** of integration
- Overview of **integration support package**
- Introduction of integration **Self-Assessment Tool**
- **Joint completion** of Self-Assessment Tool
- Synthesis of **findings**

# 2-hour session with focus on joint completion of Self-Assessment tool




Virtual session (~2 hours)

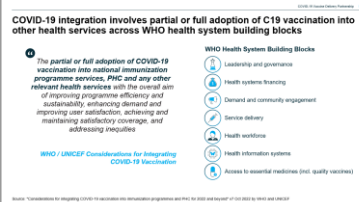
| Agenda item                          | Description  | Type                       | Duration    |
|--------------------------------------|--|----------------------------|-------------|
| Introduction                         | Explanation of <b>context and importance</b> of integration  | Icebreaker, Presentation   | 10min       |
| Country support package              | Overview of <b>integration support package</b> and how to use these elements to achieve integration objective              | Presentation               | 10min       |
| Integration self-assessment tool     | <b>Introduction of integration Self-Assessment Tool</b> as part of the integration support package                         | Presentation               | 10min       |
| Self-assessment tool completion      | <b>Joint completion of Self-Assessment Tool</b> , incl. guided discussions to identify strengths and areas for development | Workshop                   | 1hour 15min |
| Reflections on the tool and findings | <b>Synthesis of findings</b> and overall reflections ( <i>during testing phase</i> ) on the Self-Assessment Tool           | Facilitator-led discussion | 15min       |

# Materials required to introduce integration package and jointly complete Self-Assessment tool

Non-exhaustive



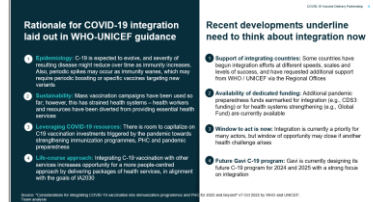
## Explanation of context and importance of integration



**COVID-19 integration involves partial or full adoption of C19 vaccination into other health services across WHO health system building blocks**

**WHO Health System Building Blocks**

- Leadership and governance
- Health systems financing
- Workforce
- Service delivery
- Health information systems
- Access to essential medicines (incl. quality vaccines)




**Rationale for COVID-19 integration laid out in WHO-UNICEF guidance**

- Feasibility:** C-19 is expected to receive an overall of higher disease burden over time as immunity increases. And people will likely need an increased vaccine supply to meet needs for routine or specific vaccine targeting new waves.
- Efficiency:** Many vaccination campaigns have been used to the hilt, to be shared to target, reach children and resources have been directed from providing essential health services.
- Urgency:** COVID-19 response: There is room to mobilize C-19 vaccination investments triggered by the pandemic to strengthen immunization programs, P-IC and pandemic preparedness.
- Equity:** Integrating C-19 vaccination with other essential services is important for a more coordinated approach to essential packages of health services, in alignment with the goal of UHC.

**Recent developments underline need to think about integration now**

- Support of integrating countries:** Some countries have begun integration efforts at different speeds, scales and levels of success. WHO/UNICEF via the Regional Offices.
- Availability of dedicated funding:** Additional pandemic response funds generated for integration (e.g., Global Fund) are currently available.
- Window to act is now:** Integration is currently a priority for many states, but window of opportunity may close if another health challenge arises.
- Future C-19 program:** Goal is currently designing the C-19 program for 2024 and 2025 with a strong focus on integration.



## Overview of integration support package



**Support package helps countries navigate towards C-19 integration**

**THE MAP**

Guidance for integrating COVID-19 vaccination: Establishes global principles and initial framework, supporting countries to follow national strategies for integrating C-19 vaccination along an health system learning track.

**THE LOCATION PIN**

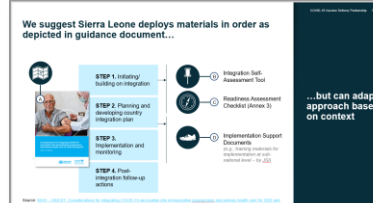
Enables countries to conduct a situational analysis of the current state of C-19 response area of health system learning track in order to identify current strengths and weaknesses.

**THE CORRIDOR**

Guidance for developing a C-19 integration strategy: Supports countries to identify specific technical actions for integration in the integration strategy and implementation in order to address gaps and challenges identified in self-assessment.

**THE GOALS**


Technical support resources: Provide practical and action-oriented support (e.g., toolkits, job aids, etc.) to support the implementation of global principles along health system building blocks and/or target population.



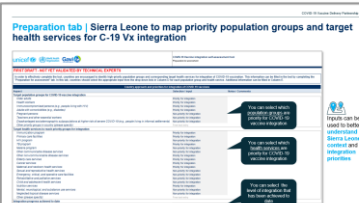
**We suggest Sierra Leone deploys materials in order as depicted in guidance document...**

1. Integration Self-Assessment Tool
2. Reaction Assessment Checklist (pages 17)
3. Implementation Support Documents
4. Final integration follow-up activity

...but can adapt approach based on context



## Introduction and joint completion of integration Self-Assessment Tool



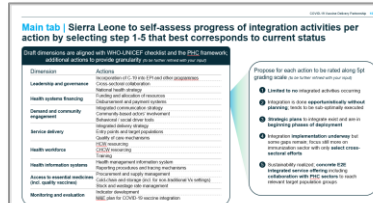
**Preparation tab | Sierra Leone to map priority population groups and target health services for C-19 Vx integration**

UNICEF | WHO | Gavi

Self-assessment tool for COVID-19 integration

Key features:

- Tools can be used to understand current status and target population.
- Tools can be used to understand current status and target population.
- Tools can be used to understand current status and target population.



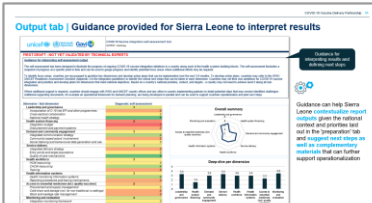
**Main tab | Sierra Leone to self-assess progress of integration activities per action by selecting step 1-5 that best corresponds to current status**

UNICEF | WHO | Gavi

Self-assessment tool for COVID-19 integration

Key features:

- Tools can be used to understand current status and target population.
- Tools can be used to understand current status and target population.
- Tools can be used to understand current status and target population.




**Output tab | Guidance provided for Sierra Leone to interpret results**

UNICEF | WHO | Gavi


Self-assessment tool for COVID-19 integration

Key features:

- Tools can be used to understand current status and target population.
- Tools can be used to understand current status and target population.
- Tools can be used to understand current status and target population.



## Synthesis of findings




**Synthesis of findings - Deep dive per dimension**

UNICEF | WHO | Gavi

Self-assessment tool for COVID-19 integration

Key features:

- Tools can be used to understand current status and target population.
- Tools can be used to understand current status and target population.
- Tools can be used to understand current status and target population.



**Synthesis of findings - Deep dive per dimension**

UNICEF | WHO | Gavi

Self-assessment tool for COVID-19 integration

Key features:

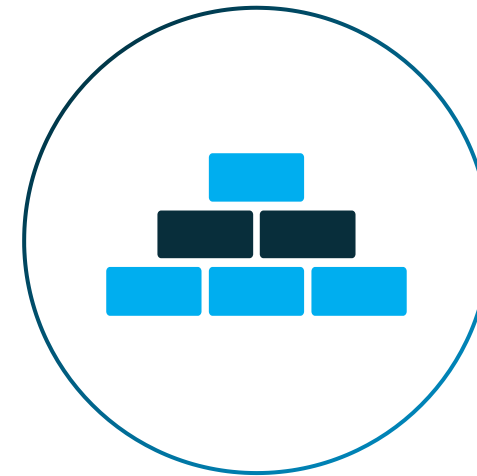
- Tools can be used to understand current status and target population.
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# Countries can kick off COVID-19 integration with the support package via virtual working session or field mission



## Virtual working session

Session held remotely with WHO, UNICEF and Gavi Country Office and in-country stakeholders (e.g., ACDC, CHAI, etc.) to introduce integration support package and collect information on country's integration status via Self-Assessment Tool



## In-country field mission

In-country session with WHO, UNICEF and Gavi Country Office, govt stakeholders, and in-country partners (e.g., ACDC, CHAI, etc.) to introduce integration support package, collect information on country's integration status, and support initial implementation planning



## In-country field mission connects in-country stakeholders to run self-assessment and develop initial implementation plan

### Key objective

---

- Introduce **integration support package** based on WHO-UNICEF Considerations for Integrating COVID-19 Vaccination
- Collect information on **country's integration status** via Self-Assessment Tool
- Support initial country **implementation planning**

### Duration of session

---

- Approximately **11 hours spread over 2 days**

### Participants

---

- **WHO & UNICEF CO** colleagues (immunization & non-immunization)
- **WHO & UNICEF HQ/RO** colleagues (immunization & non-immunization)
- Gavi Senior Country Manager (**SCM**)
- **In-country partners** e.g., ACDC, CHAI, etc.
- Country **gov't stakeholders** (e.g., Ministry of Health)

### Agenda

---

- Explanation of **context and importance** of integration incl. **lessons learned**
- Country **CDS application review**
- Overview of **integration support package** incl. **Self-Assessment Tool**
- **Joint completion** of Self-Assessment Tool
- Synthesis of **findings** and development of initial implementation plan
- Assessment of results and **implications for CDS3 funding**



## 2-day field test mission with primary focus to complete Self-Assessment tool and develop initial implementation plan (I/II)



### Day 1 (~ 6 hours)

| Agenda item                      | Description  | Type                       | Duration      |
|----------------------------------|--|----------------------------|---------------|
| Introduction                     | Explanation of <b>context and importance</b> of integration  | Icebreaker, Presentation   | 15mins        |
| Lessons learnt from integration  | Presentation of <b>lessons learned</b> so far from different <b>countries' integration experiences</b>                     | Presentation               | 30mins        |
| Country CDS application          | Review of country's plans as stated in <b>CDS application</b>  | Facilitator-led discussion | 45min         |
| Country support package          | Overview of <b>integration support package</b> and how to use these elements to achieve integration objective              | Presentation               | 30mins        |
| <i>Break</i>                     |  |                            | <i>30mins</i> |
| Integration self-assessment tool | Introduction / recap of integration <b>self-assessment tool</b> as a part of the integration support package               | Presentation               | 15mins        |
| Self-assessment tool completion  | <b>Joint completion of Self-Assessment Tool</b> , incl. guided discussions to identify strengths and areas for development | Workshop                   | 2hr 30mins    |
| Synthesis                        | <b>Synthesis of findings</b> and overall reflections ( <i>during testing phase</i> ) on the Self-Assessment Tool           | Facilitator-led discussion | 30mins        |



Smaller **core team** to stay behind after the session to start populating **country implementation roadmap**



## 2-day field test mission with primary focus to complete Self-Assessment tool and develop initial implementation plan (I/II)



Day 2 (~ 5 hours)

| Agenda item                 | Description  | Type         | Duration |
|-----------------------------|--|--------------|----------|
| Initial implementation plan | Smaller core team to continue <a href="#">development of initial draft implementation plan</a> , using Readiness Assessment Checklist in Annex 3 of Considerations and other support documents | Workshop     | 4hr      |
| Restitution                 | Recap from previous day's session, outline of <a href="#">initial implementation roadmap</a> and <a href="#">implications for CDS3 funding</a>   | Presentation | 1hr      |



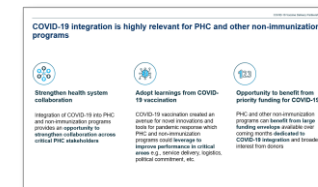
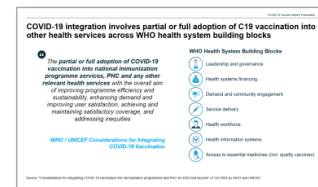
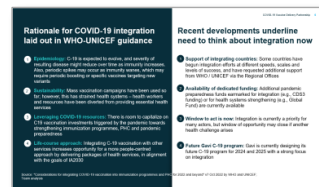


# Materials required to introduce integration package and jointly complete Self-Assessment tool

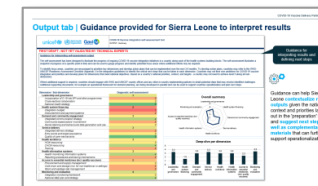
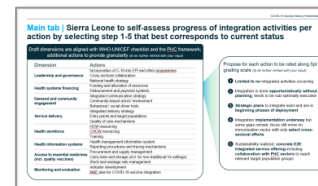
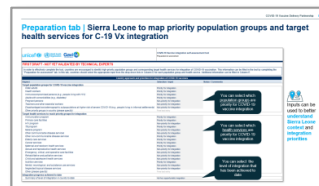
Non-exhaustive



Explanation of context and importance of integration incl. lessons learned so far



Country CDS application review



Overview of integration support package and joint completion of Self-Assessment Tool



Synthesis of findings



Initial implementation plan, roadmap, and implications for CDS3 funding

- > WHAT is C-19 integration?
- > WHY is C-19 integration important?
- > HOW can C-19 integration look like?
- > WHICH SUPPORT is available to countries for C-19 integration?
- > HOW can countries deploy this document to kick off C-19 integration?
- > FAQs



## List of frequently asked questions

- My country has not started considering C-19 integration. Can we get started with these support materials?
- My country has already started considering C-19 integration. Can we still use these support materials?
- ...

**COVID-19 Vaccine**  
DELIVERY PARTNERSHIP

