Engagement of private/nongovernmental health providers in immunization service delivery

Considerations for National Immunization Programmes



WHO Guidance Note



Engagement of private/nongovernmental health providers in immunization service delivery

Considerations for National Immunization Programmes



This document was developed and published by the Department of Immunization, Vaccines and Biologicals (IVB). An initial version of the document developed with input from a number of experts was presented and discussed at the April 2017 meeting of the Strategic Advisory Group of Experts on Immunization (SAGE). The document was then adjusted following SAGE's recommendations and with input from peer-review. With special thanks to Nikki Turner and Margie Watkins for their help with the development and the finalization of the document.

Ordering code: WHO/IVB/17.15

Published in September 2017

This publication is available on the Internet at: www.who.int/immunization/documents/en/

Copies of this document as well as additional materials on immunization, vaccines and biologicals may be requested from:

World Health Organization

Department of Immunization, Vaccines and Biologicals

CH-1211 Geneva 27, Switzerland

• Email: vaccines@who.int •

© World Health Organization 2017

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 license (CC BY SA-4.0; https://creativecommons.org/licenses/by-nc-sa/4.0/).

Under the terms of this license, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons license. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the license shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization.

Suggested citation. Engagement of private/nongovernmental health providers in immunization service delivery: Considerations for National Immunization Programmes. Geneva, Switzerland: World Health Organization; 2017. License: CC BY SA-4.

Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.

Sales, rights and licensing. To purchase WHO publications, see http://apps.who.int/bookorders. To submit requests for commercial use and queries on rights and licensing, see http://www.who.int/about/licensing.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages.

Table of Contents

Exec	cutive summary	i
1.	Introduction and aims	1
2.	Definitions and background	3
3. sect	Considerations concerning the engagement of the private or in national immunization programmes	6
3.1	L Contribution to vaccination service delivery and coverage	6
	2 Vaccination practices, service quality, missed opportunities, and ocurement	7
3.3	3 Vaccination schedules	9
3.5	Collaborative dialogue and formal agreements	12
3.6	5 Advocacy	13
	7 Programme monitoring, coverage reporting and disease and adverse ent surveillance	14
3.8	Private providers' role in policy and decision-making	15
4. sect	Recommendations concerning the engagement of the privat or in national immunization programmes	
5.	References	22

Executive summary

- → Nongovernmental private vaccination providers come from a diverse range of sectors that include both for-profit and not-for-profit civil society organizations (CSOs), nongovernmental organizations (NGOs) and faith-based organizations (FBOs), and have varying roles in the delivery of vaccination by national immunization programmes (NIPs), and in the provision of other immunization-related services, e.g. health education, advocacy, awareness raising, demand creation, resource mobilization, and vaccine-preventable disease surveillance.
- → Regardless of whether the government sector proactively engages with the nongovernmental sector, it is likely that nongovernmental organizations and providers are already playing a role in immunization services in most, if not all, countries.
- → Many NIPs have longstanding existing arrangements with nongovernmental (particularly not-for-profit) providers to provide vaccination services; such arrangements facilitate collaboration between government and nongovernmental sectors.
- → Information exchange between government and nongovernmental sectors, particularly for-profit providers, is weak in many countries.
- → In many countries, particularly those with fragile health systems, the nongovernmental (particularly for-profit) sector is not well integrated in the reporting of vaccine doses administered; consequently it is difficult to estimate the nongovernmental contribution to vaccination coverage.
- → In low and middle income countries (LMICs) and in some high income countries (HICs), mechanisms to enforce quality standards for vaccine storage and administration, and reporting of adverse events following immunization (AEFI) are limited in the nongovernmental sector, due to human and financial resource constraints and limited competencies.
- → A universal standard approach to engaging the nongovernmental sector is neither realistic nor appropriate, given the varying situations in individual countries.

Overall recommendation: National immunization programmes should optimize collaboration and communication with nongovernmental providers regardless of the relative contribution of nongovernmental providers to the delivery of vaccination.

Specific recommendations are provided with respect to activities to:

- 1. Assess nongovernmental providers' contribution in immunization service delivery
- 2. Determine the optimal model of public private engagement and optimization of service delivery
- 3. Facilitate dialogue and establish agreements and contracts for collaborative activities, including for decision-making
- 4. Ensure adequate data management and reporting
- 5. Provide adequate training and capacity building
- 6. Facilitate accountability and performance oversight

1. Introduction and aims

Vaccination is a core component of the human right to health, preventing communicable disease at the individual and population levels. In 2012, the World Health Assembly adopted the Global Vaccine Action Plan (GVAP) with the goal of providing equitable access to vaccines by 2020 (1). The GVAP sets ambitious targets that may only be attainable through shared responsibility and partnerships of the various groups involved in providing health care. The GVAP recommendations to achieve its strategic objectives include "Ensure coordination between the public and private sectors for new vaccine introduction, reporting of vaccine-preventable diseases and administration of vaccines, and ensure quality of vaccination in the public and private sectors". Furthermore, the global routine immunization strategies and practice (GRISP) (2), a companion document to the GVAP, recommends activities to Enable and harmonize routine immunization services provided by the private and nongovernmental sector. In April 2016, the WHO Strategic Advisory Group of Experts (SAGE) on immunization stressed that the implementation of immunization in the context of health system strengthening and Universal Health Coverage¹ requires increased coordination between the public and the nongovernmental (private) sectors (3).

Successful implementation and reaching the goals of the GVAP, including necessary improvements in vaccine coverage rates at all levels, require optimization of the interaction between public and private (for-profit and not-for-profit) health-care sectors. The challenge for NIPs is to achieve high vaccination coverage and reduce equity gaps, often in resource-constrained settings. Engagement with nongovernmental (private) providers to achieve optimal vaccination services has the potential to help improve programme performance and increase coverage, but only if their respective roles are clearly defined and the services are compatible with the existing national health system and standards (4,5). In countries with both public and private immunization delivery, there is often variation in coverage and accessibility to service providers. The variation can be geographic and/or related to socioeconomic and/or insurance status (4,5). Because each country functions differently,

¹ Universal health coverage includes financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.

and has a myriad of characteristics that make it unique, a single standard approach to engaging the private sector is not appropriate. The role of the private sector (contribution to coverage, service quality, disease and AEFI surveillance), and its engagement with NIPs varies within and between countries and remains poorly understood (4,5,6).

This guidance note for National Immunization Programmes aims to:

- Present considerations regarding the involvement of nongovernmental (private)
 providers in vaccine delivery (including contribution to enhancing coverage and
 equity while maintaining delivery standards and quality), monitoring of coverage and
 safety, and disease surveillance;
- 2. Provide recommendations to support optimal engagement of nongovernmental (private) providers in the effective delivery of national immunization programmes.

This document does not attempt to quantify the impact of the private sector or propose a preferred hierarchy of delivery systems (i.e. private, mixed, or public model). Nor does it prescribe the type of engagement or advocate for a greater or lesser role of the private sector in health care. The aim is to encourage closer collaboration between the public and private/nongovernmental sectors and hence a more effective engagement of the private sector in supporting NIP priorities.

预览已结束,完整报告链接和二维码如下:

https://www.yunbaogao.cn/report/index/report?reportId=5 26263

