

Latvia experience from outsourcing vaccine logistics to the private sector

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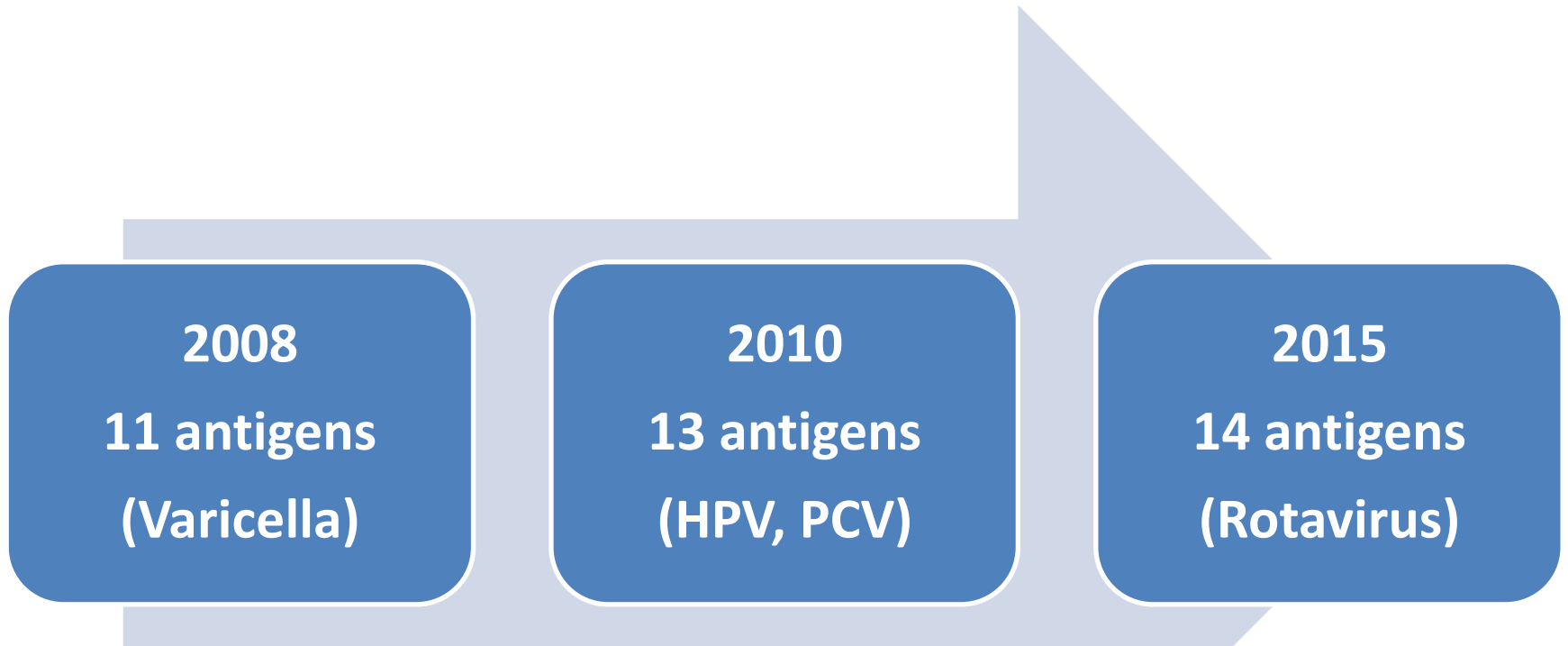
TechNet Conference, Bangkok, Thailand, 11-15 May 2015

Country overview



- 2014:
 - Population: **1 990 000**
 - Births: **21 532** (1,1%)
- Area: **64,589** km²
- GDP per capita (nominal) : **\$25,195** (estimates, 2015)
- Climate: temperate (January **-5°C**; July **17°C**)

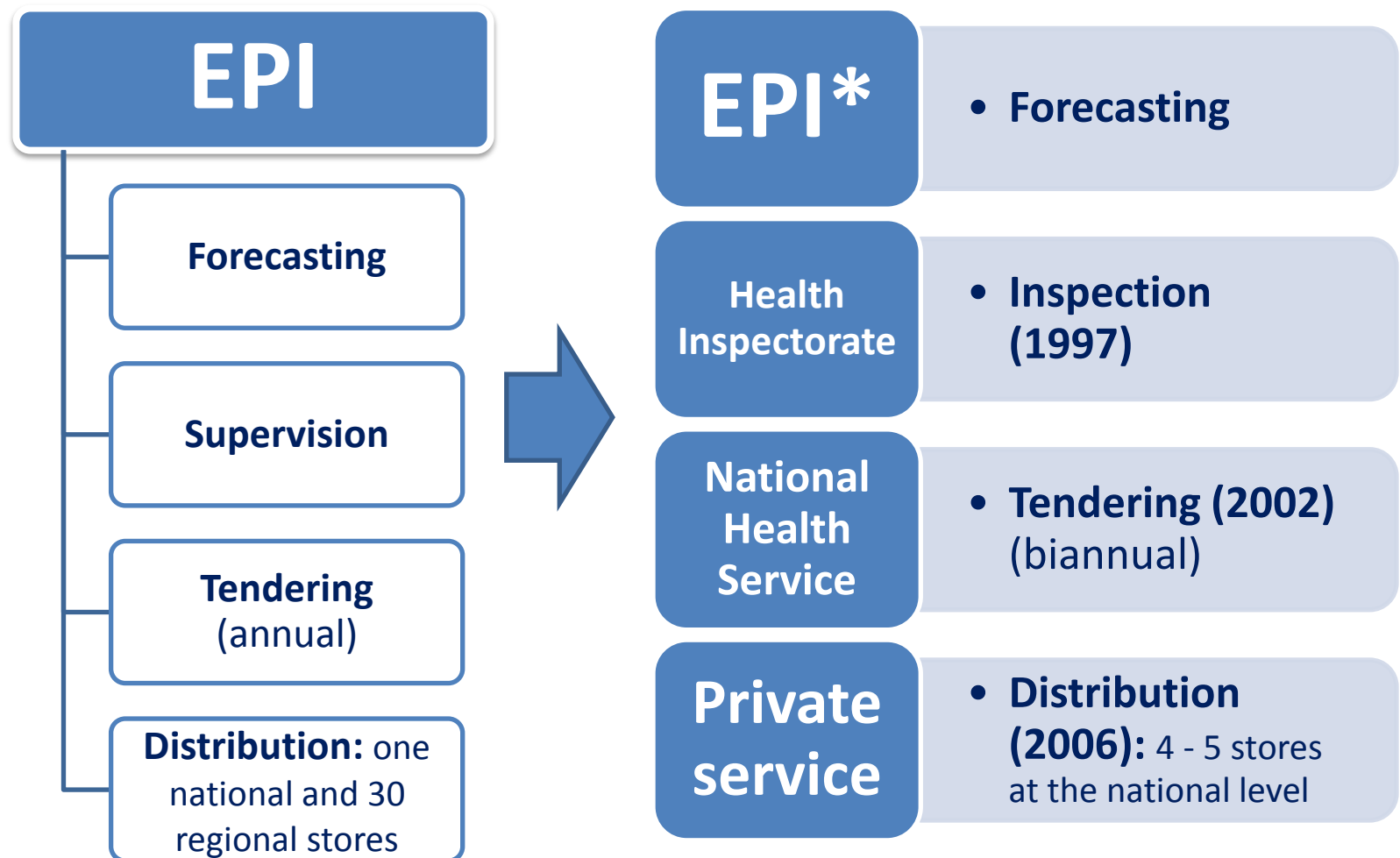
Immunization programme trends



Combined vaccines:

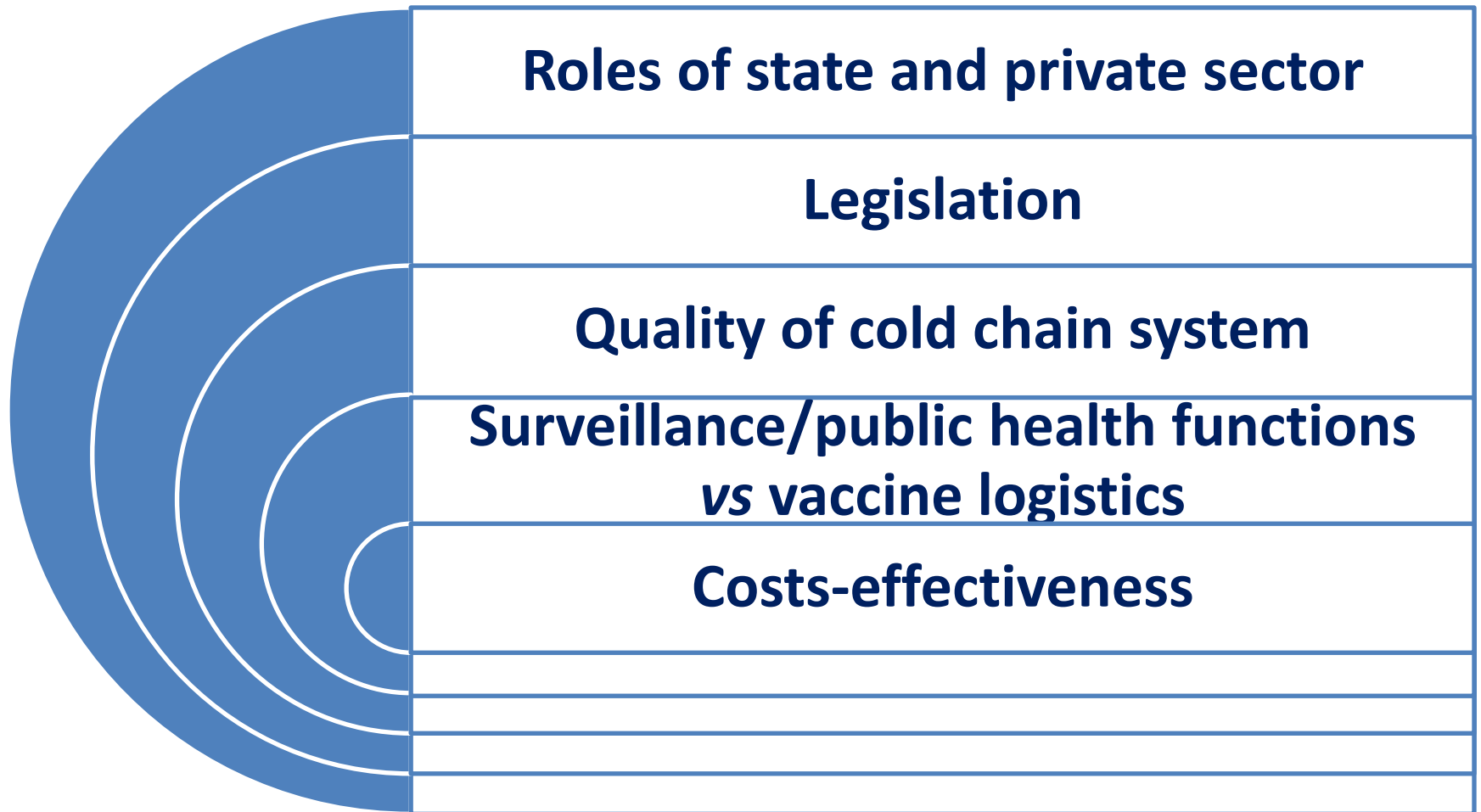
- *DTaP-IPV-Hib-HB (4 doses) from 2010*
- *Td-IPV (14 years) from 2010*

Immunization supply chain network

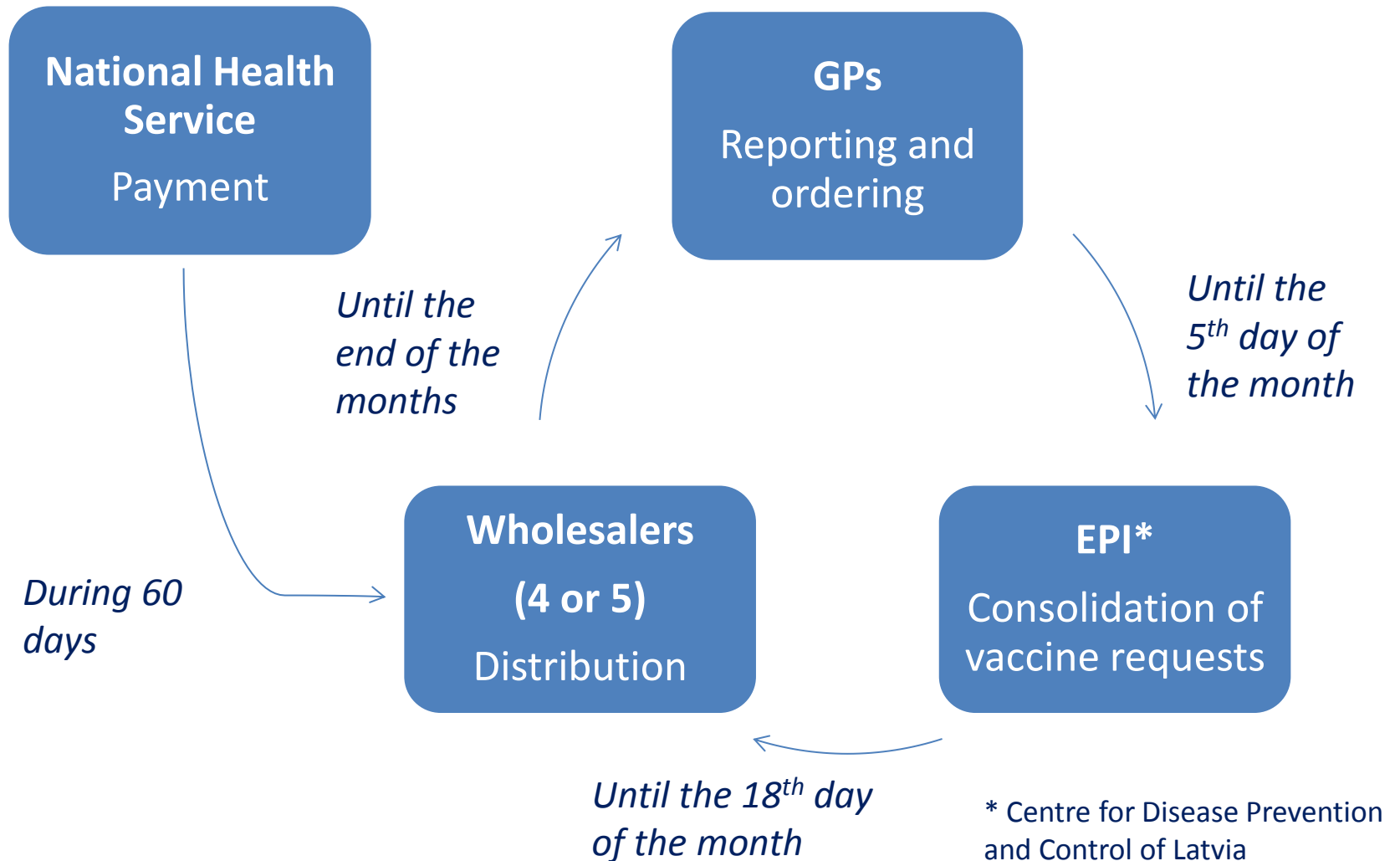


* Centre for Disease Prevention and Control of Latvia

Reasons for transfer of vaccine supply to the private sector



How the new vaccine distribution system functions (monthly cycle)



Impact (what was achieved)

Advantages

- No operational, equipment and investment costs
- Shared logistics with other pharmaceutical products and medical goods
- Development, modernization and improvement due to competition between wholesalers
- Skilled and well motivated staff
- High level of performance

Areas for improvement

- Several wholesalers store and distribute vaccines
- Duplication of supply chains
- Vaccine price includes in-country distribution
- No buffer stock
- Additional administrative work for EPI staff to supervise and coordinate the process
- Lack of EPI training and supportive supervision

Lessons learned (steps forward)

- Involvement of private sector in storage and distribution of vaccines is potentially cost-effective
- The following issues should be considered before decision to involve private sector in EPI vaccine management is taken:
 - Detailed assessment of the existing network
 - Cost-effectiveness analysis
 - Assessment of cold store capacity and safety offered by private sector
- Separation of tendering process for vaccine supply and storage/distribution
- Maintaining buffer stock

**Thank you for
your attention!**

