

Georgia

LNCT Private Sector Engagement Meeting







Virtual Workshop, October 2020

I. Private sector engagement in immunization						
Type of activity	Not-for- profit orgs	For-profit providers	Other for- profit orgs/corps	Professional associations	Other	
Government/policy advocacy						
Social mobilization/ demand generation		X (e.g. some providers promote commercial vaccines on Facebook)				
Immunization provision with NIP vaccines		х				
Immunization provision with non- NIP provided vaccines		Х				
Immunization provision with vaccines not on the NIP schedule		Х				
Cold chain equipment supply and/or maintenance		Х				
Vaccine and/or immunization supplies procurement		X (for non-NIP and not in the NIP schedule vaccines)				
Vaccine and/or immunization supplies distribution		X (for non-NIP and not in the NIP schedule vaccines)				
Other						

Georgia would like
to engage the
private sector to
support demand
generation and
improve
immunization
performance.

II. Coordination of service delivery					
	For Profit				
What percent of immunization services are provided by type of provider?	98% (95% of service providers are private for profit)				
Does this provider administer vaccines outside the NIP schedule? If yes, which ones?	Yes, but not all providers: Influenza, Chickenpox, Yellow fever, Meningitis, Hepatitis A, HPV				
Where are these providers located? (Indicate urban/rural, specific cities or districts)	countrywide in urban and semi-urban areas (districts)				
Does this type of provider charge fees for immunization? If so, what are the fees?	Yes for commercial NIP vaccines only. Charges are less prevalent now as Gov provided and commercial vaccines are almost identical, still some providers promote commercial vaccines for profit (reaching 3% of children). Charge is for vaccines, supplies, HR.				
What population sub-groups do this provider providers serve?	All				
Does the government conduct supervision of this provider?	Yes				
What is provided to this provider by the government for immunization?	 Vaccines and injection equipment Training Cold chain (for some service providers) 				
Does this provider report on Doses administered AEFI 	1. Yes 2. Yes				

IV. Good practices & lessons learned

- State regulations equally applies to public and private providers (including for commercial vaccinations) including service provision, vaccine storage, reporting, monitoring
- For profit, some private-for-profit service providers promote their commercial vaccines, leading to OOP for population. Such practice was widespread when some Gov supported vaccines were manufactured in non-Western countries, which led some groups to doubt their quality. Therefore, the Gov decided to procure vaccines (e.g. Hexavalent vaccine) from western manufacturers.

V. Challenges

- Low motivation of private providers to improve immunization performance (there is no monetary or other positive incentives schemes or penalties in place)
- Since 2007's healthcare reform, nearly all healthcare clinics became privatized. Consequently, private for-profit organizations are less interested in high performance for preventive public health services. In addition, there are no regulations that would encourage private PHC clinics to strengthen their performance in vaccination.

III. Demand	generation	& advocacy
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Organization name	Description of activities (location, approach, etc)	Source of funding (e.g. USAID, Gavi, etc)
Not defined yet	In 2020 the Gov program on immunization incorporates a budget line for communication activities, after purchasing the service (not procured yet) private company will provide the service. This will be nationwide communication activities.	Government funds