

Accelerator for Impact (a4i)

Creating the future together

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McGill Summer Institute's 7th Advanced TB Diagnostics Course



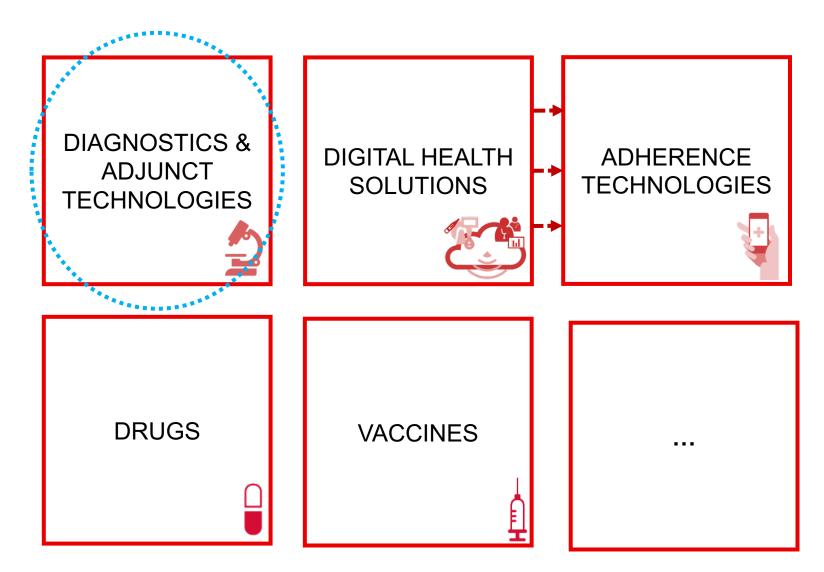


How can we create the future together?



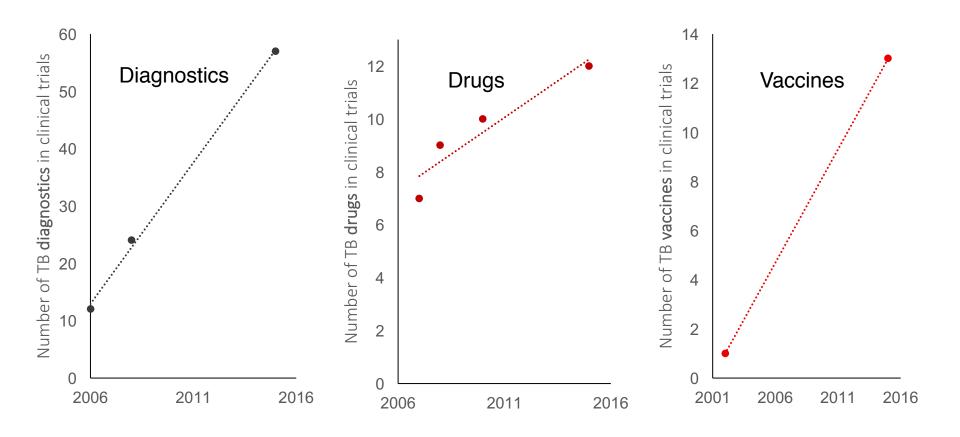


Accelerate the roll-out of promising, new TB tools





PDPs have been successful at catalyzing innovation



- Medecins Sans Frontieres. TUBERCULOSIS DIAGNOSIS AND DRUG SENSITIVITY TESTING: An overview of the current diagnostic pipeline. Paris: MSF; 2006.
- Treatment Action Group. 2008 Pipeline Report. New York; 2008.
- Stop TB Partnership. Global Plan to End TB 2016-2020: The Paradigm Shift. Geneva; 2015.
- Ginsberg A & Spigelman M. Challenges in tuberculosis drug research and development. Nature Medicine. 2007; 13(3):290-294.
- van den Boogaard J, Kibiki GS, Kisanga ER et al. New Drugs against Tuberculosis: Problems, Progress, and Evaluation of Agents in Clinical Development Antimicrob. Agents Chemother. 2009; 53(3):849-862.
- Ma Y, Lienhardt C, McIlleron H, et al. Global tuberculosis drug development pipeline: the need and the reality. Lancet. 2010; 375(9731): 2100–09.

Challenge

The rapid roll-out of promising, new TB tools has been sub-optimal, contributing to:

- 1.8 million deaths from TB;
- 10.4 million people falling ill with TB; and
- 480,000 developing multidrug resistant-TB (MDR-TB).*





Demand has not matched supply for recent TB tools brought to market



20% eligible patients were receiving bedaquiline or delaminid in March 2017*

Even when new TB tools are developed, access and scale-up is still a major issue

4%

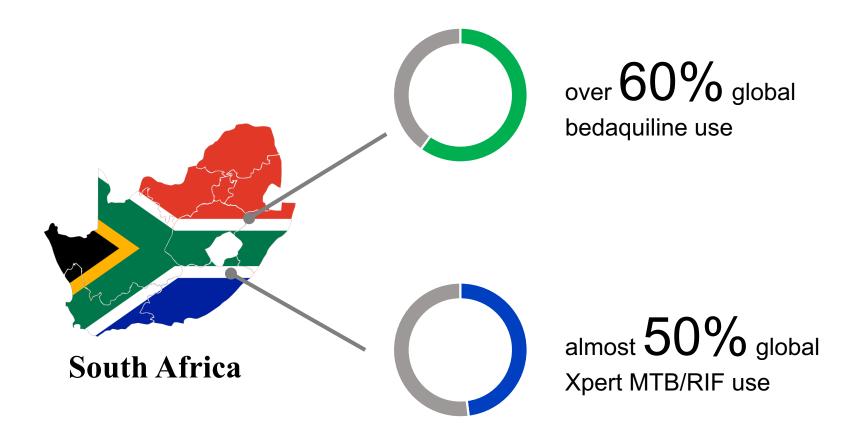
of diagnosis for TB/HIV patients was by Xpert in a multi-country study, **despite** good access**

^{*}Pai & Furin. Tuberculosis innovations mean little if they cannot save lives. eLIFE. 2017;6:e25956.

^{**}Clouse et al. Low implementation of Xpert MTB/RIF among HIV/TB co-infected adults in the International epidemiologic Databases to Evaluate AIDS (IeDEA) program. PLOS ONE. 2017;12(2):e0171384.



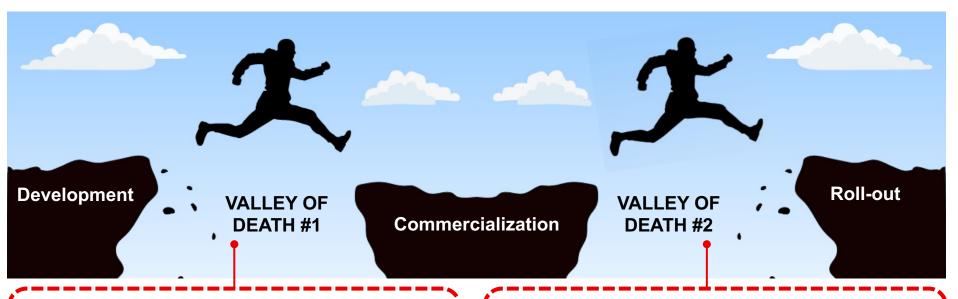
But the problem is not intractable: South Africa has promoted good access and scale-up



*DR-TB STAT March 2017 Task Force Update. [27 March, 2017];Stop TB Partnership. 2017 http://www.stoptb.org/wg/mdrtb/taskforces.asp?tf=4
**FIND. McGill International TB Centre. UNITAID TB Diagnostics Market in Select High-Burden Countries: Current Market and Future Opportunities For Novel Diagnostics. 2015 https://www.mcgill.ca/tb/files/tb/tb diagnostics market in select high-burden countries current market and future opportunities for novel diagnostics.pdf



Innovators face two "valleys of death" in the downstream product development lifecycle



DEVELOPMENT => COMMERCIALIZATION

- Insufficient evaluation in settings of intended use
- Weak end-user involvement in product research and development
- Mis-alignment in the product design and manufacturing process

COMMERCIALIZATION => ROLL-OUT

- Lack of focus on demand generation
- Weak engagement of country decision-makers and stakeholders, including civil society and community
- Lack of planning and resources for country adoption

*Engel et al. Addressing the challenges of diagnostics demand and supply: insights from an online global health discussion platform. BMJ Global Health. 2016; 1:e000132.

**Albert et al. Development, roll-out and impact of Xpert MTB/RIF for tuberculosis: what lessons have we learnt and how can we do better? Eur Respir J. 2016; 48:516-525.

Solution

A coordination platform that focuses on the downstream end of the product development lifecycle and executes an efficient pathway to rapidly roll-out promising, new TB tools.





Vision, mission, and impact

Vision: End TB as a public health threat by 2030

Mission: Accelerate the roll-out of promising, new TB tools

Impact: Optimal diagnosis, treatment, adherence, cure, and prevention

Core business

- Drive efficient product launches in 3-5 early adopter countries
- Catalyze sustainable partnership opportunities between innovators and 3-5 early adopter countries
- Achieve a return on investment

Operating principles

- Leverage key partners' expertise and existing platforms
- Strengthen collaboration and feedback loop between innovators, country decision-makers and stakeholders, including civil society and community, and key partners
- Promote early engagement with civil society and community
- Utilize the venture capital business model

Values

- Promote mutually beneficial outcomes for supply and demand stakeholders
- Promote country sustainability
- Promote financial sustainability

RIGHT PRODUCT

RIGHT PERFORMANCE RIGHT PRICE

RIGHT UPTAKE RIGHT IMPLEMENTATION

RIGHT IMPACT



Proposed co-convener and key partners (TBD/TBC)

Co-convener: FIND

Strategic Enabler 1: Civil society and community engagement

STBP's Communities, Rights, & Gender Team

Strategic Enabler 2: Political will

STBP's Advocacy Team

Stage 1

Stage 2

Stage 3

Stage 4

Stage 5

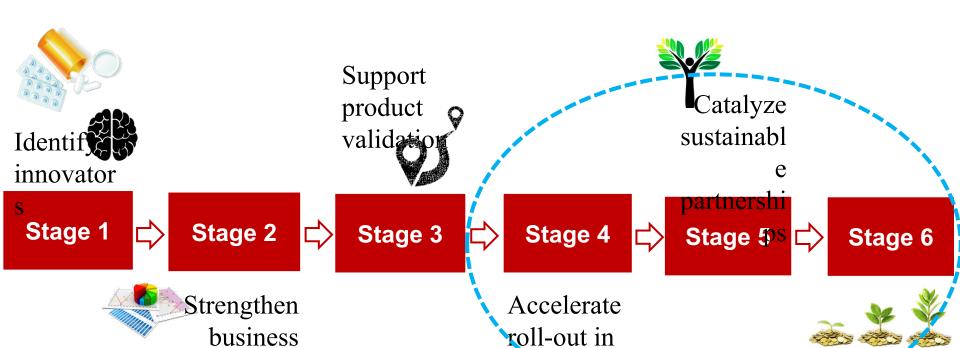
Stage 6

Some of the implementation partners for each stage will be determined through an open call for proposals

*Ex. for TBDx



6 sequential stages



to market strategies

plans and go-

Strategic



early adopter

countries

Ensure

financial

sustainability



Stage 4: Accelerate roll-out in 3-5 early adopter countries (some activities to run parallel with Stages 1-3; TBC)



- Convene annual Innovators & Adopters Workshops between innovators, country decision-makers and stakeholders, including civil society and communities, and key partners.
- Support development of country profiles and country tailored roadmaps for introduction in 3-5 early adopter countries, including convening country/regional consultations.
- Convene focus group discussions with end-users before product launches.
- Convene training workshops for civil society and communities.
- Conduct country-driven demonstration and cost-effectiveness studies, including identifying technical support needs, in 3-5 early adopter countries.
- Expand the scope and scale of the initial conduct country-driven demonstration and cost-effectiveness studies beyond the 3-5 early adopter countries.
- Support the inclusion of WHO recommended products in National Strategic Plans and Global Fund concept notes/grants in 3-5 early adopter countries.

*Ex. for TBDx



1st Innovators & Adopters Workshop (Oct. '17): First area of focus will be on TBDx and adjunct technologies



LANDSCAPE

Current and upcoming TB tools (0-5y)

Increase visibility to TB products pipeline for countries to plan and advocate for new tools



CRITICAL PATH

From product development to launch

Improve awareness of the sequence of stages, activities, and partners from research to roll-out



ROADMAPS

Country tailored pathway for Introduction

Map decision-making process for TBDx and adjunct technologies





Stage 5: Catalyze sustainable partnerships (TBC)



1

Work with early adopter countries to identify and develop a menu of potential projects addressing the underlying determinants of TB for innovators to support in their countries (e.g., reducing air pollution, promote vocational training, promote gender equity, etc.).

2

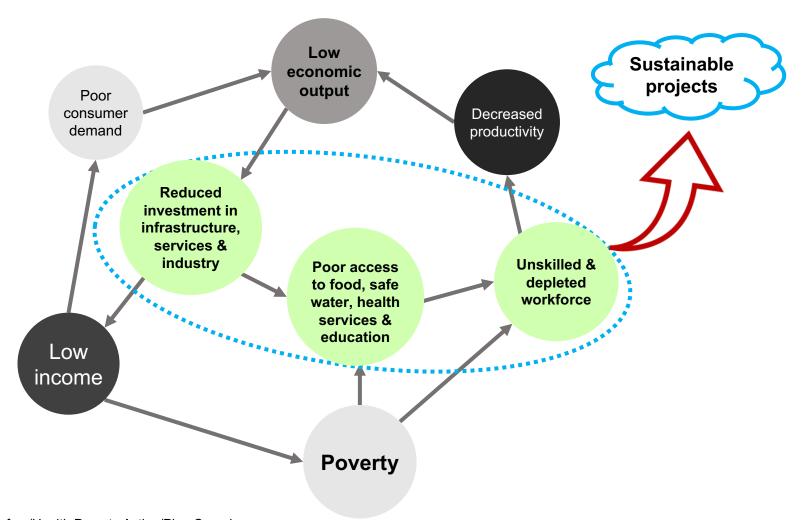
Draft concept note/proposal detailing activities, outcomes, and impact.

3

Work with early adopter countries and innovators to support and implement sustainability projects.



How can innovators and early adopter countries work together to solve fundamental problems?





Stage 6: Ensure financial sustainability (TBC)

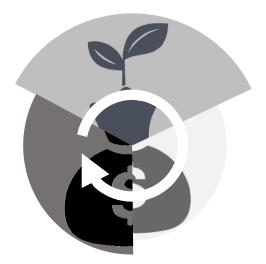


Venture Lab (vLAB) Trust Fund

Blends capital from the public/private sector and market investors

Return on Investment

Market investors receive a financial return



Replenishment

Innovators supported by a4i will financially contribute back into the vLAB trust fund

Global Health Bond*

Royalty streams will securitise the bond

^{**}Traditional debt instrument that can be publicly traded on market exchanges and sold to impact investors and institutional investors, such as endowment and/or pension funds.



Next steps and key milestones (TBC)



Activities

- MOU with FIND signed
- WHO independent expert review committee review process for commercially available transport solutions determined.

Activities

 Governance documents drafted, including: ethics principles and guidelines, individual and institutional conflict of interest policy drafted (e.g., firewall between a4i and GDF), funding agreements to key partners, committee(s) guidelines, policy documents (e.g., shared risks/benefits), transparency and confidentiality, etc.

2017

Activities

 WHO independent expert review committee reviews all commercially available transport solutions and issues a report

Q2

Pilot client's next steps determined.



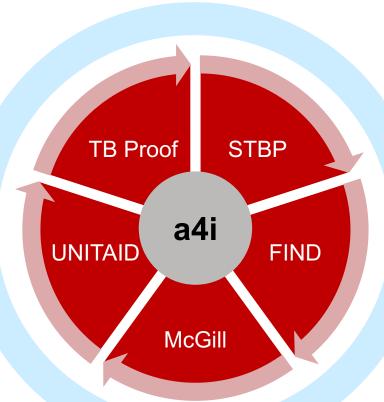
Q3

Activities

- 1st Innovators & Adopters Workshop for TBDx organized
- Critical path for TBDx launched
- Country tailored roadmaps planned (max. 2 countries)
- 1st Training Workshop for civil society/communities organized
- 1st Focus Group Discussion for TB adherence technologies organized



Acknowledgments and testimonial from initial key partners



a4i will establish a framework ... which will result in a dramatic impact to ending a disease that needlessly claims so many lives.

- Lucica Ditiu, Executive Director of Stop TB Partnership

We need [a4i] to drive innovation ... We can wait no longer to meet the critical diagnostic needs of the four million missing TB patients who go undiagnosed or unreported each year.

- Catharina Boehme, CEO of FIND

... promising innovations need to navigate a long, complex pathway to reach patients who really need them. An honest broker like a4i is necessary to pave the way, build momentum, and address demand and supply issues. 9 9

- Madhukar Pai, Associate Director of McGill International TB Centre

The launch of [a4i] will mobilize the best of private and public enterprise to deliver state-of-the-art diagnostics and treatments that are essential to getting the job done.

- Lelio Marmora, Executive Director of UNITAID

I nearly died from liver failure from the TB medication. Having new treatment with less side effects would be wonderful. It is treating the person, not only the disease. 9 9

- Ingrid Oxley, XDR-TB Survivor, TB Proof

"The best way to predict your future is to create it."
-Abraham Lincoln





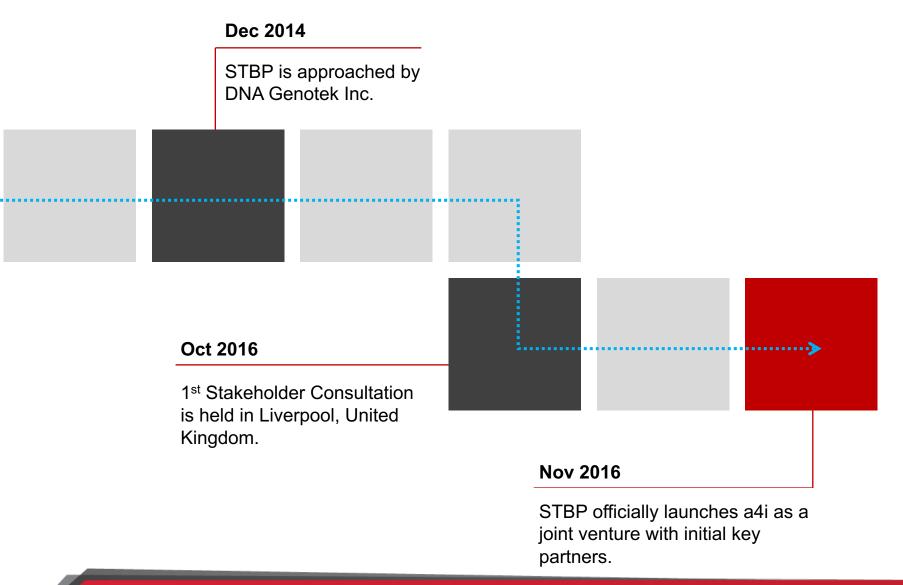
http://www.gbchealth.org/crossing-the-valleys-of-death-in-tb-from-development-to-roll-out/







History





Checkpoints (TBC)

S1:S2 Checkpoint

- Innovator is recommended, reviewed, and approved by the various committees/groups*
- Innovator signs project agreement with STBP

Stage 1

Identify innovators

Stage 2

Strengthen business plans

S2:S3 Checkpoint

3-5 early adopter countries are identified.

S3:S4 Checkpoint

Product receives guidance and recommendation from WHO

Stage 3

Support product validation

Stage 4

Accelerate roll-out

Stage 5

Sustainable partnerships

Stage 6

Financial sustainability

S4:S5/6 Checkpoint

Roll-out terms specified in the project agreement are met



Stage 1: Identify innovators with promising, new TB tools (to be piloted for 6 months)

FIND's Technology Review (with selection criteria from a4i's Delivery Working Group (DWG))

Web-based Submission

Initial Analysis (8w)

In-Depth Analysis (3m)

FIND's Scientific AdvisorySub-Committee Recommendation *

a4i's DWG Review

STBP's Executive Committee Approval

Supported by a4i

*Ex. for TBDx



Stage 1: Selection criteria (TBC)



Baseline requirement

a. Products not defined as a priority by existing target product profiles (TPPs) but fills a market need.

Product requirements

- a. Product has design-lock.
- b. Product has a high score for all relevant **ASSURED** criteria for diagnostics:
 - Affordable
 - Sensitive and Specific (analytical and diagnostic sensitivity and Specificity in case of diagnostics)
 - User-friendly (integration in local settings/algorithms, ease of use for targeted end user, training requirements)
 - Rapid and Robust (time to result, hands-on time, throughput, environmental stability)
 - Equipment-free or low complexity equipment (infrastructure requirements, environmental stability, system integration)
 - Deliverable (distribution plan, transportation stability).
- c. Product has delivered promising results with clinical samples.

Innovator requirement 3.

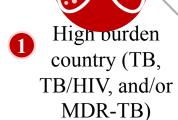
- a. High probability of success
 - Strength of team (qualified executive leadership)
 - Resources (product development/manufacturing expertise/capabilities, infrastructure. outsourcing, manufacturing, distribution)
 - · Quality and regulatory strength
 - Technology readiness and time to market
 - Financial health (financial reports/audits, short-term demands, red flags, acquisition plans)
 - · Company history and track record

*Ex. for TBDx



Stage 4: Selection criteria for early adopter countries (TBC)



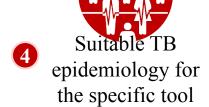




committed MoH, NTP, and in-country partners

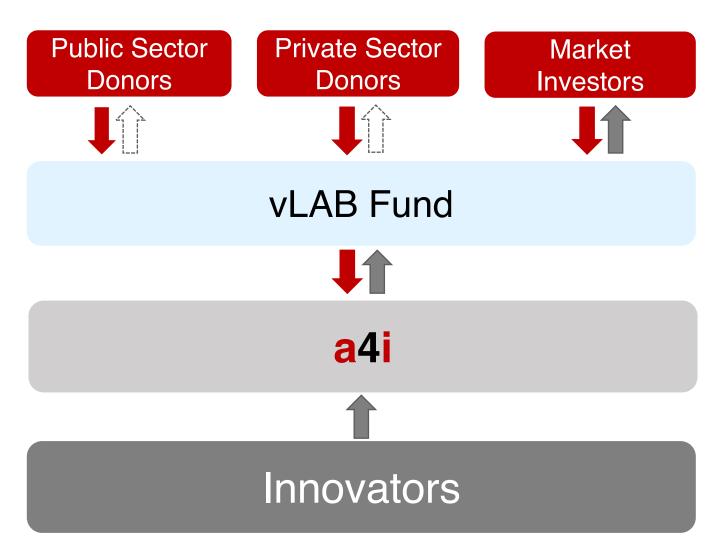


3 erve as a trailblazer for the region





Flow of donor funding and innovators' contribution* (TBC)



*Innovators' financial contribution will only be leveraged to ensure a4i's financial sustainability and securitise a global health bond.



Key metrics (TBC)

Objective 1:

Implement pathways to introduction and scale-up

Reduced roll-out timeline # of months per a4i stage (annual)

Country pathways mapped # of roadmaps developed (annual)

Objective 4: Generate sustainable partnerships

of projects developed and implemented in early adopter countries
(3y)

Objective 2:

Generate country demand

of national introductions in early adopter countries (annual)

Objective 3: Increase coverage or utilization rates*

% of target rates achieve in early adopter countries (annual)

Objective 5: Increase coordination

% of innovators, countries, and partners reporting "excellent" or "very good" in a survey (annual)

Objective 6: Utilize the venture capital model

% of total funding coming from market investors (3y)

^{*} Indicator to be determined based on product area and target to be determined with the early adopter countries.



SWOT analysis

STRENGTHS

- Buy-in and interest from innovators and country decision-makers/stakeholders, including civil society and communities, and key partners
- Increased collaboration by critical actors to solve market breakdowns
- Risk and benefit sharing between critical actors

OPPORTUNITIES

- Strong network of STBP key partners, working groups, and internal implementing teams
- Interest from public and private sector donors regarding sustainable financing for development
- Ability to change how the global development/health space engages with innovators

WEAKNESSES

- Lack of capital and human resources
- Lack of established reputation and mechanism
- No mechanism to hold key partners accountable without grant agreements/MOUs

THREATS

- Reputational risk from engaging with innovators
- Ethical risk from receiving royalties from innovators
- Potential perceived and/or real conflict of interest between a4i and GDF