



MINISTRY OF HEALTH

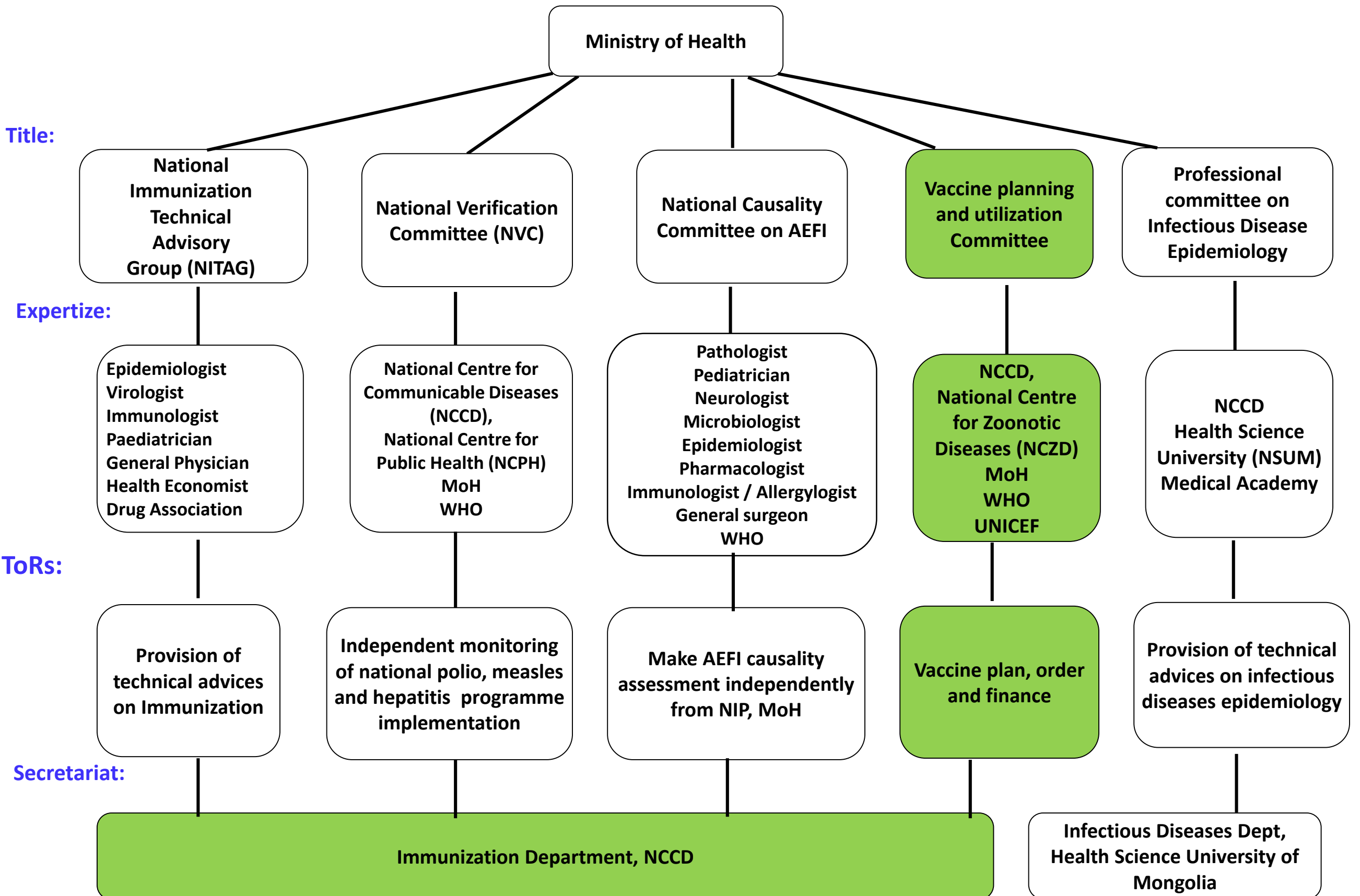
Procurement of vaccine and related supplies in Mongolia

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Content

- Relevant structures involved in procurement related decision making.
- Source of data, analysis, and roles
- Process of planning and supply
- Source of funding, budgetary framework

National Committees on Immunization in Mongolia



Source of information, and respective roles in procurement process, by the committees

	NITAG	NVC	NCC	VPUC	PCIDE
Source of information	NITAG network GNN, SAGE recommendation Research articles, literatures, surveillance Independent expert	Programme implementati on report, health statistics data,	AEFI incidence, hospital reports	Demographics and health statistics, price quotes from UNICEF, and local suppliers (average for the last 3 years)	Epidemiologi cal analysis of disease patterns, statistics
Role in procurement	Demand/needs identification New vaccine introduction, selection of vaccine presentation, dose	Strategic recommenda tions, forecast depending on disease dynamic	Choice, alteration of vaccine presentati on if/when AEFI	Cost estimates and Budget proposals Recommends budget allocation;	Technical advise

Process of planning and supply of vaccines and related supplies

- NCCD send official vaccines request reminder to all provinces and departments
- Each provinces and departments send vaccine and related supply requests to the National Center for Communicable Diseases (NCCD)
- NCCD compile supply requests, budgets and submit to VPUC for review
- VPUC review request and send back NCCD with some comments and suggestions.
- NCCD submit to MoH by amending VPUC comments and suggestion
- MoH submit budget proposals to the Ministry of Finance
- MOF submits to the Parliament for approval
- Upon receipt of actual approved amounts, VPUC recommend budget allocations between the vaccines and propose procurement plans
- MoH organize procurement committee for local procured vaccines and submit request to UNICEF for vaccines procured through UNICEF mechanism.

Vaccine supply for Mongolia

1. UNICEF

- Mandatory NIP routine vaccine (since 2003)
- At epidemiological indication (4-5 different vaccines)

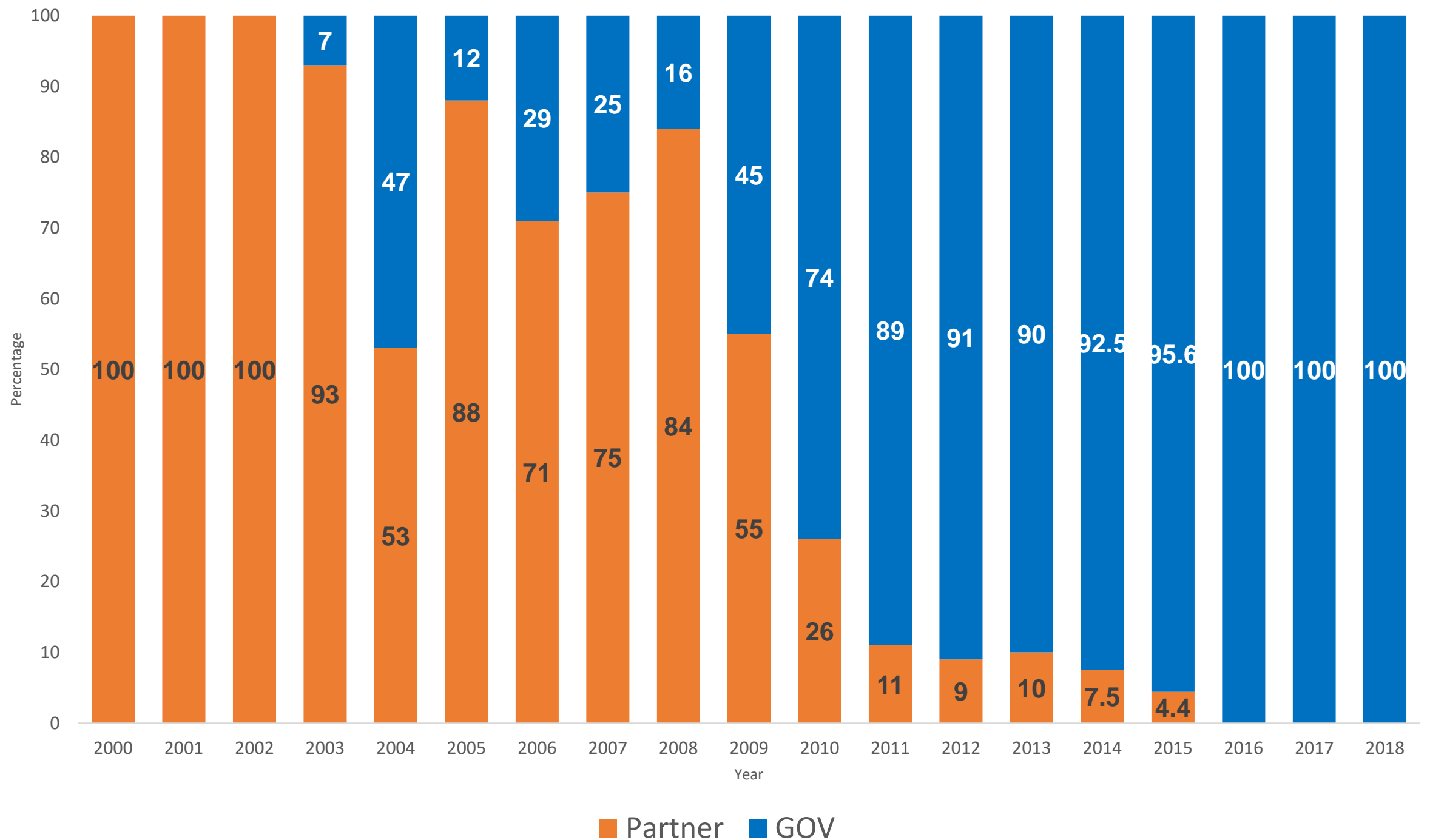
2. Through tendering by MoH (evaluation committee on case of procurement)

- Stock for responding communicable diseases, vaccine, bio-preparations for the cases

3. Donation by GAVI, and others

- IPV

Source of funding for immunization



source: Immunization secretariat

Highlights

1. Common secretariat to the technical and policy recommending committees
2. Direct control over budget, as it is approved with dedicated budget line under MoH
3. Enabling legal framework, consisting of laws on Immunization, Procurement, Budgets

Challenges

- Human resource capacity: Understaffing, high turnover, lack of budget specialist at secretariat
- NRA not fully functional
- Lack of information: available products and prices, beyond current suppliers
- New vaccine supply sustainability
- No routine, formal means of collecting data and analyze supplier and price intelligence
- Some misconception (of making profit etc.)

Thank you