**MANAGEMENT RESPONSE AND RECOMENDATIONS ACTION PLAN**

**Evaluation Report Title:** UK Vaccine Network Project: Interim Evaluation (August 2020)

**Response to Evaluation Report:**

This evaluation was commissioned by the Department of Health and Social Care (DHSC) to provide a better understanding of the UK Vaccine Network (UKVN) project’s benefits and key challenges to date, and how it is progressing towards its four key outputs. This evaluation was conducted by an external evaluator not affiliated with DHSC.

The UKVN project brings together leading experts from industry, academia, philanthropy and government to recommend targeted investments in key candidate vaccines, and in broader vaccine technologies. The associated funding programme aims to address the market failure in the development of vaccines against diseases of epidemic potential in low- and middle-income countries (LMICs). Investments largely focus on bridging vaccine development’s “valley of death”- where infectious disease vaccines are successfully developed in laboratory settings, but not taken through to clinical trials. This is a vital issue to tackle, as vaccines against these epidemic diseases have the potential to improve the health, wellbeing, and economic prosperity of many in low-income countries. COVID-19 has further highlighted the importance of vaccine preparedness. The existing development of a MERS vaccine candidate at the University of Oxford, funded by the UKVN project, enabled the rapid adaptation of this vaccine technology to address COVID-19, resulting in a licensed COVID-19 vaccine. This adaptation shows how research supported by the UKVN has already assisted in the response to a novel disease epidemic, resulting in a vaccine with the capacity to improve global health outcomes.

DHSC are pleased to accept this report, and its primary finding that the UKVN project provided financial support to address twelve pathogens that cause epidemics in low- and middle-income countries, enabling researchers to begin building vaccine development infrastructure and candidates. Alongside outlining the key benefits of the project, this assessment highlighted several key challenges faced by the UKVN project. The evaluation of these challenges and opportunities resulted in a variety of valuable insights for DHSC to reflect upon, including recommendations for the wider UKVN project and the work it undertakes with its delivery partners.

DHSC are satisfied with the methodological rigour of this evaluation and were pleased to engage with the evaluator throughout this process. Many of the reports findings and recommendations will prove beneficial to the remaining phase of the project and will influence potential future project iterations. However, given the breadth of viewpoints taken into consideration, some recommendations do not directly relate to the scope of this project. DHSC’s response to the evaluation recommendations is detailed below.

**UKVN Project Interim Evaluation Recommendations**

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|  | **Recommendations** | **Accepted or Rejected** | **If “Accepted”, Action plan for Implementation or if “Rejected”, Reason for Rejection** |
|  | **Recommendations regarding the UKVN project** | | |
| 1 | Consideration should be given to having a longer study period that is fully funded. A minimum five-year study period is required to yield better research results and impacts. | Partially Accepted | We recognise that shorter study periods can pose significant challenges to vaccine research. However, the UKVN project was established as a five-year programme (inclusive of the time required to run competitive research competitions) and its outputs were designed with this timeframe in mind. This also reflected the Spending Review funding commitment timeframe.  We recognise that it is crucial that projects know how to seek further funding support after their UKVN project-funding has ended. We seek to respond to this issue through our response to recommendation three, ‘a clear vaccine development pipeline tool’. |
| 2 | Communication strategies should be reviewed, revised and strengthened to promote engagement and discussions between researchers, the UKVN project, UK Research and Innovation (UKRI) and other external stakeholders. This should include the sharing of learning to reduce waste in the funding system. | Accepted | We agree with this recommendation. The UKVN project hosted a well-received event in February 2020 to encourage shared learning between UKVN project-funded researchers and wider stakeholders. Over the final year of the project we will seek to build on this success and increase our communication activities. This will also be considered as a priority for future iterations of the UKVN project. |
| 3 | A clear vaccine development pipeline tool with funding attached to specific elements needs to be put in place and promoted to continue and safeguard the investment that has been made in this area. The UKVN project should consider whether other organisations, such as the Coalition for Epidemic Preparedness Innovations (CEPI), could provide financial support for projects at a certain stage of development. | Accepted | We also see value from this recommendation, and we will engage in strategic conversations with other funders to explore employing this approach. |
| 4 | As part of the next phase of work, consideration should be given to initiate an independent vaccine development institute in the UK that is not influenced by the major vaccine companies. This could provide funding to facilitate further collaborations with synergistic technology and product offerings to create new products that would surpass the capabilities of the major vaccine companies which could then be licenced. | Partially Accepted | We agree that an independent vaccine development institute in the UK would be beneficial to vaccine development, however we believe the need for such a UK institution is being met by the establishment of the Vaccine Manufacturing Innovation Centre.  The UKVN project is ODA-funded and therefore would not provide direct support to the establishment of such an institute. |
| 5 | There is a need to balance the regional research disparities and work with the wider university research community outside of the ‘golden triangle’ (Oxford, Cambridge and London) in terms of promotion and dissemination of funding calls, staff capacity and development, and access to resources. | Partially Accepted | All UKVN project-funded projects were selected through open competition. However, through future iterations of the UKVN we will work with other funders to understand how best to reach and access diverse expertise from across both the UK and LMICs. |
| 6 | The UKVN project needs to consider how it will provide support for patents and intellectual property rights to safeguard UK vaccine research for future licencing. | Reject | As an ODA funded programme our work must be of primary benefit to LMICs. Therefore our primary focus is that the vaccine products supported by our funding are accessible to those that need them most.  Future iterations of the UKVN will seek to take an end-to-end view of the vaccine development pathway to maximise the likelihood of successful vaccines reaching the communities that need them most. This will include consideration of intellectual property rights, licensing and ensuring access. |
| 7 | An impact strategy with monitoring activities needs to implemented at the start of a future programme of work to ensure impacts are routinely captured, including all advocacy and policy work. Project successes and advocacy work should be disseminated widely, both within the UK Vaccine Network project and externally, to promote the work that is being undertaken. This will help to increase the overall impact of future programmes of work. | Accepted | We agree with this recommendation. We will review our existing monitoring framework to ensure that the achievement of our outputs, outcomes and impacts are routinely tracked. We will also ensure monitoring requirements are set out in the beginning of any future programmes of work.  We will also seek to disseminate project successes widely. |
| **Recommendations regarding Delivery Partners** | | | |
| 1 | Reporting of projects need to be standardised across all delivery partners and streamlined to ensure only necessary data is collected. | Accepted | We accept this recommendation and will compile lessons learnt from this programme’s reporting process to optimise reporting processes for the programme’s next potential iteration. |
| 2 | Delays in funding contracts being awarded have resulted in project delays and, in some cases, monies not being able to be carried over to compensate for these delays. Delivery partners should consider rapid circulation of contracts and consider a flexible approach to how funds are spent by programmes if they are not able to meet spending deadlines due to delays in signing off contracts. | Partially accepted | We recognise that the constraints associated with ODA funding can result in inflexible deadlines. We will take the experience from the establishment of the existing UKVN portfolio of projects into the planning of a potential new programme and consider how we can better build in suitable contracting timeframes. We will also work to improve partners’ understanding of ODA funding at the outset of funding competitions. |
| 3 | Consideration should be given to enhancing the Innovate UK funding model to better support UK small and medium-sized enterprises (SMEs) financially to contribute to vaccine research. At present, some SMEs and start-ups cannot absorb the financial costs of undertaking vaccine research without a portion of funding being paid in advance. Having a portion of grants available immediately would enable SMEs to pay for staff, specialist equipment and materials. This will be important if fast-paced innovation is to be continued in UK vaccine research and development. | Partially Acceptable | We agree that it would be beneficial to enhance the funding models to better support UK SMEs. However, it has traditionally been within the remit of some of our delivery partners to discern the financial model for payments to downstream partners. We will discuss implementing more suitable payment options for SMEs with Innovate UK and other delivery partners ahead of the next iteration of the UKVN project. We will also explore other government departments’ models of up-front cash flow to see if it will be possible for us to absorb this risk. |
| 4 | Consideration should be given to project start dates beginning from the date that a contract is signed, rather than when a grant is awarded. This would allow grant holders to have the full period outlined in their proposal to complete research. | Partially Accepted | We agree that this has been a problem in the UKVN portfolio to date. We recommend that this issue is addressed through changes laid out in recommendation two, ‘delays in funding contracts’. |