

# Memorandum

## COVID-19 Vaccine and Immunisation Programme: Gantt Chart & Governance Structure

<b>Date due to MO:</b>	15 October 2020	<b>Action required by:</b>	N/A
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<b>To:</b>	Hon Chris Hipkins, Minister of Health		
<b>Copy to:</b>	Hon Julie Anne Genter, Associate Minister of Health		

### Contact for telephone discussion

Name	Position	Telephone
Dr Ashley Bloomfield	Director-General of Health	[REDACTED]
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### Action for Private Secretaries

N/A

# COVID-19 Vaccine and Immunisation Programme: Gantt Chart & Governance Structure

## Purpose of report

1. This report responds to your request for a Gantt Chart that outlines the key milestones for the COVID-19 Vaccine & Immunisation Programme (Programme). It also provides you with a view of the governance structure for the Programme. This covers the following workstreams:
  - a. Vaccine Purchasing Workstream
  - b. COVID-19 Immunisation Implementation Programme
  - c. National Immunisation Solution (NIS).

## Background

2. We have developed an Immunisation Programme that can promptly roll out the vaccine once it arrives in New Zealand. Several workstreams are progressing at pace and in parallel to ensure tight timeframes are met. Senior internal governance for the Programme is in place, and a new external Governance Group is being established to support and provide assurance on delivery, with representation across key sectors.

## Gantt chart

3. At your request, a Gantt Chart is attached at Appendix A that provides details about the workstreams involved in purchasing and immunising for the Pfizer vaccine, which has been announced, and the key milestones. Draft plans for further vaccines are included and the plan will evolve further as additional vaccines are confirmed which will further impact on timelines.
4. An underlying assumption is that the Pfizer vaccine will arrive in New Zealand on 1 January 2021, noting that these timelines are likely to flex dependent on vaccine availability. Officials are planning ahead of this date to ensure we are ready to deliver in the event it lands earlier than anticipated. The latest delivery schedule received from Pfizer suggests the January deadline is highly unlikely. At present, Medsafe has not received information from Pfizer to start the regulatory approval process.
5. A critical factor for the delivering the vaccine is to ensure the National Immunisation Solution (NIS) is developed by 1 January, with an improved product ready later in Q1 2021. This IT system is essential to the rollout of a vaccine as it will be essential for capturing population information.
6. Work is occurring in parallel and there are a number of streams which are interdependent on each other. The critical path milestones are mapped out at Appendix A and include the following:

- a. Cold storage and consumable requirements and funding
  - b. Standing up ultra-low temperature storage and supply chain
  - c. Securing and training the required workforce
  - d. Medsafe approval
  - e. Ministerial decision to use and commence delivery.
7. To ensure there is a contingency option available by 1 January 2021 an interim solution is being developed for the NIS. This will be built in parallel with the final product should the vaccine arrive prior to the anticipated delivery date. As more certainty emerges on the delivery date, this interim arrangement may be stood down. The 1 January 2021 timeframe would present considerable risk in the delivery of a successful programme. However, programme planning has commenced to allow for this possibility, while still building a robust and credible programme that is aligned to more likely delivery dates.

### **Governance structure**

8. In a fluid environment with highly changeable subject matter such as COVID-19, it is important to respond in an agile way to competing demands. This is a high profile and significant work programme, meaning careful management and governance is required in order to achieve tight timeframes.
9. To support the delivery of the Programme in line with the timelines set out in the Gantt Chart, a governance structure has been strengthened and is outlined at Appendix B. This structure shows the formal lines of accountability between each layer.
10. A Governance Group is being established that will act as a strategic decision-maker for the overall delivery of the Programme. It will meet on a fortnightly basis and will report directly to you. Membership of the Governance Group will include:
  - a. Chair: Dame Dr Karen Poutasi, Commissioner, Waikato District Health Board
  - b. Dr Ashley Bloomfield, Director-General of Health
  - c. Steve Maharey, Chair of PHARMAC
  - d. Bruce Plested, Chairman of Mainfreight
  - e. Carolyn Tremain, Chief Executive, MBIE
  - f. Ngāhiwi Tomoana, Chair of the Māori Economic Development Panel and Chair of Ngāti Kahungunu
  - g. Murray Jack, IT expert and former CEO and Chair of Deloitte
  - h. Dr Fa'afetai Sopoaga, Associate Professor, University of Otago
  - i. John Whaanga, Deputy Director-General Māori Health, Ministry of Health.
11. The Governance Group will maintain a connection with the Vaccine Taskforce, which is led by MBIE and chaired by Dr Peter Crabtree, and this important connection is recognised by the inclusion of Carolyn Tremain.

## Next steps

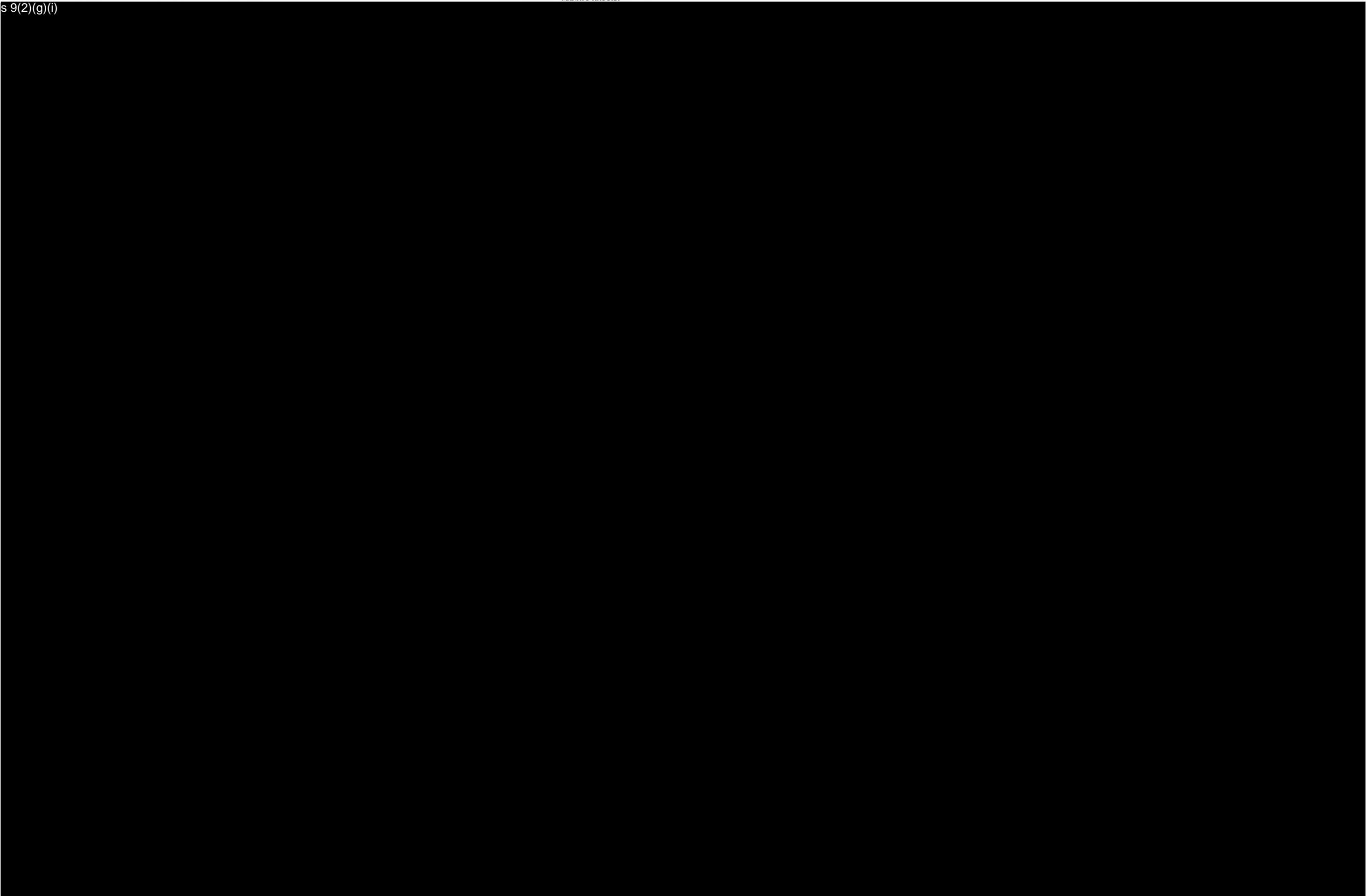
12. Work on the Programme will continue at pace, including establishing the Governance Group and other advisory functions who will provide advice.
13. Officials will continue to update you weekly about the progress of the Programme.
14. We will continue to work closely with our communications counterparts at MBIE to ensure there is consistent messaging between agencies and that we are telling an aligned story about both vaccine procurement and the overall immunisation plan.



Jane Kelley  
Acting Deputy Chief Executive  
**COVID-19 Health System Response**

PROACTIVELY RELEASED

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Appendix B – Governance Structure

