

Supplementary Table 2: Framework to inform access and implementation feasibility

Themes Considered	Indicators	Very Low	Low	Moderate	High	Very High
Access and Implementation Feasibility	Possibility of implementation within existing delivery systems	<ul style="list-style-type: none"> No possibility to leverage existing delivery systems due to a complex vaccine immunisation schedule 	<ul style="list-style-type: none"> Some evidence that existing delivery systems could be leveraged to deliver a vaccine 	<ul style="list-style-type: none"> Limited use of existing delivery systems to deliver a vaccine 	<ul style="list-style-type: none"> Vaccine can be delivered within existing delivery systems with amendments 	<ul style="list-style-type: none"> Vaccine can be delivered within existing delivery systems as is
Access and Implementation Feasibility	Commercial attractiveness	<ul style="list-style-type: none"> Poorly defined target population Disease burden mainly in LMICs but vaccine unlikely to be supported by Gavi 	<ul style="list-style-type: none"> Small target population predominantly in LMIC public markets Difficulty defining target population in LMICs 	<ul style="list-style-type: none"> Large target population distributed predominantly in LMICs with potential Gavi support 	<ul style="list-style-type: none"> Well-defined target population in LMIC public markets Large target populations distributed across HIC and LMIC markets 	<ul style="list-style-type: none"> Large target population in HIC and LMIC, both private and public markets
Access and Implementation Feasibility	Clarity of licensure and policy decision pathway	<ul style="list-style-type: none"> A need for novel licensure and/or policy pathway, which is currently unclear 	<ul style="list-style-type: none"> A need for novel licensure and/or policy pathway 	<ul style="list-style-type: none"> A possibility to leverage an existing licensure and policy pathway with major amendments 	<ul style="list-style-type: none"> A clear licensure and policy pathway with minor amendments 	<ul style="list-style-type: none"> A clear, highly precedented, fit for purpose licensure and policy pathway currently exists

<p>Access and Implementation Feasibility</p>	<p>Expected financing mechanism</p>	<p>No interest from global funders or national procurement agencies, potential for private market</p>	<p>Unlikely to be of interest to global funders, requiring commitment from national procurement</p>	<p>Potential interest from global funders, depending on public health impact data, interest from national procurement agencies</p>	<p>High level of interest expressed from public financing agencies such as Gavi, PAHO RF, and from national procurement agencies</p>	<p>Advanced purchasing commitment from, for example Gavi, PAHO RF, or other pull mechanism(s) in place</p>
<p>Access and Implementation Feasibility</p>	<p>Ease of uptake</p>	<ul style="list-style-type: none"> • Extensive challenges with a new vaccination touchpoint required • High level of clinician judgement and clinical engagement • Additional extensive barriers to uptake including lack of national commitment 	<ul style="list-style-type: none"> • Evidence of low uptake for marketed vaccines • Cultural barriers, negative patient perceptions 	<ul style="list-style-type: none"> • New vaccination touchpoint required 	<ul style="list-style-type: none"> • Well-defined target population with likelihood of high acceptability, but possible difficulties in infrastructure for vaccination 	<ul style="list-style-type: none"> • Well-defined target population with likelihood of high acceptability • Evidence of high uptake for marketed vaccine • Lack of other significant barriers to introduce a vaccine • Strong national commitment to introduce a vaccine