Alcimed

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USER GUIDE eMAP

MSD

Introduction

eMAP is a new web-based solution which replaces two older solutions, eVAL and MAP, used by the Market Access and Policy Country and Regional MER and CER colleagues, as well as by the Global Teams.

As its preceding solutions, eMAP stores public information about most of the National Immunization Programs from Europe, with the purpose of providing a quick, one-stop shop access to user-defined filtered information, used for guiding strategic business analysis and decisions for Vaccines franchise.

The information is being provided by designated country Points of Contact from Market Access or Policy teams.

eMAP is accessible to all MSD employees through web navigators* for viewing the information. A username and a password, allocated by the eMAP administrator, are required to edit the information, with different levels of access privileges: Admin (Edit all), Super-users (Country Points of Contact can edit only own country data)

Features

A) Landing page

The landing page consist of an interactive **map view** with filtering options.

Landing page content and features:

1. **Hovering over a country** provides access to generic information about it, such as population and healthcare expenditures. Clicking on a country opens a new page called "**Country Card"**. This mode is accessible also by clicking on **"Country Cards"** button on the right-side panel (see Chapter A, point 4)

2. Clicking on **"Filters"** button on the upper left corner of the screen, provides access to a **Filtering Panel**, containing five main categories of filters (Program information, cohort details, recommendation details, public funding and delivery framework). Each category can be expanded to display filtering options. Applied filters are cumulative and will highlight the corresponding countries on the **Map View** and provide vaccination programs details in the **Table View**.

   a) Program information: Country Name, **Disease**, Country Population
   b) Cohort details: Age Range (sliding bar), Gender (drop-down list), Cohort Type (drop-down list), Risk Factors (search by key words)
   c) Recommendation details: **Vaccines names** (drop-down list), Number of doses (drop-down list), Ongoing recommendation (drop-down list), HTA decision (drop-down list), Recommendation body (drop-down list), Type of recommendation (drop-down list)
   d) Public Funding: **Public funded** (drop-down list), Public Funding source (drop-down list), Funding Level (sliding bar)

e) Delivery framework: Point of Vaccination (multiple-choice drop-down list), Procurement Type (drop-down list)

Filters can be cleared by clicking on "Clear Filters" button on the top of the Filtering Panel.

3. **A toggle** button, on the upper right corner, allows **switching from the Map View to a Table View,** containing all vaccination programs** data (see details in chapter B), and back.

4. Clicking on **"Country Cards"** button opens a new page called "**Country Card"**. This mode is accessible also by clicking on any green country in the map.

Country cards content:

a) An overview of the country's healthcare systems and vaccination policies

b) Vaccine calendars, allowing for comparison of different diseases and countries, with a high level indication of funding (for details related to funding, access the Filtering panel on the landing page):
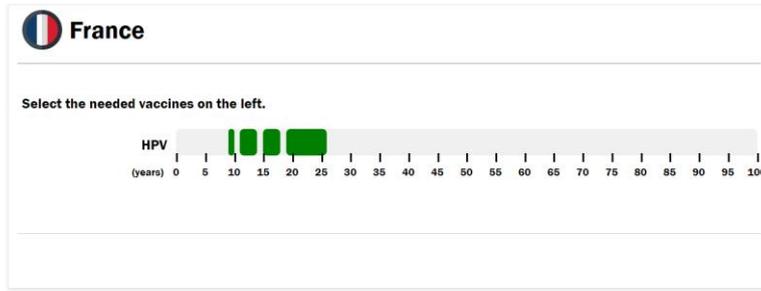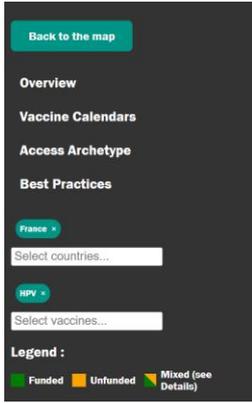
c) Access archetype, describing countries' access pathways for vaccines:
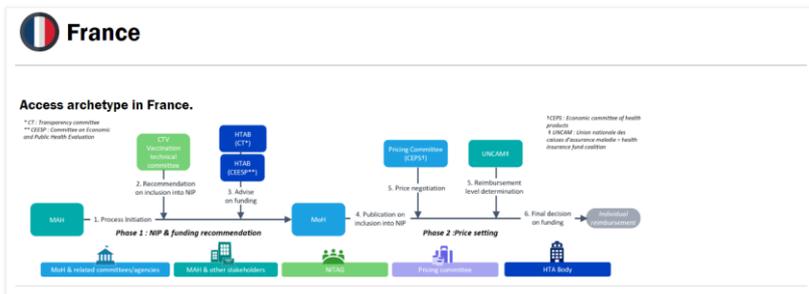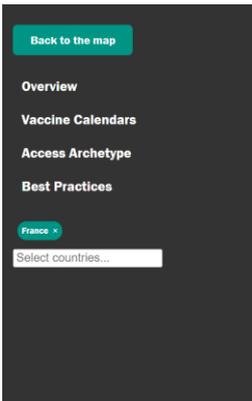
d) Best practices, describing initiatives, access or policy measures which are considered examples of interventions driving public health outcomes through immunization. Users can submit use cases using "Submit Best Practice" button, which will be reviewed and approved by the system administrator.

5. By clicking on "Contact us" button, a **contact form** is available to send inquiries to the tool admin

6. "User guide" button will provide access to the current User Guide document

B) Table view

In table view, users will find the raw data on which the tool is based. This is also where updates can be made to specific data or entire programs.

1. **A toggle** allows user to switch between a **Minimal view** of the main information and a **complete view,** with full database details.

2. For all users, **right-clicking on any data** will allow them to flag a mistake and send an inquiry to the tool Admin with an enclosed comment.

3. **Hovering** over the **table header** will display definitions of the respective field:

4. **"Edit Table"** button enable access to Super-User mode

5. **"Exported to Excel"** button: an Excel file will be generated with the data displayed corresponding to the current filtering options

C) Super-User mode

The interface for data editing is accessible to Super-Users only, by clinking the **"Superuser interface"** button.

Access credentials (username - under the form of the MSD email address - and password) are requested.

The initial password will be communicated by the Admin. The Super User will be prompted to change the initial password at first login.

Super-users can **edit, add, or delete** a program by toggling to the **Table view** and then by clicking on the **"Edit Table" button**.

They are responsible for the quality and accuracy of the input data. Each modification is tracked and requires approval from the tool Admin before being updated into the main table.
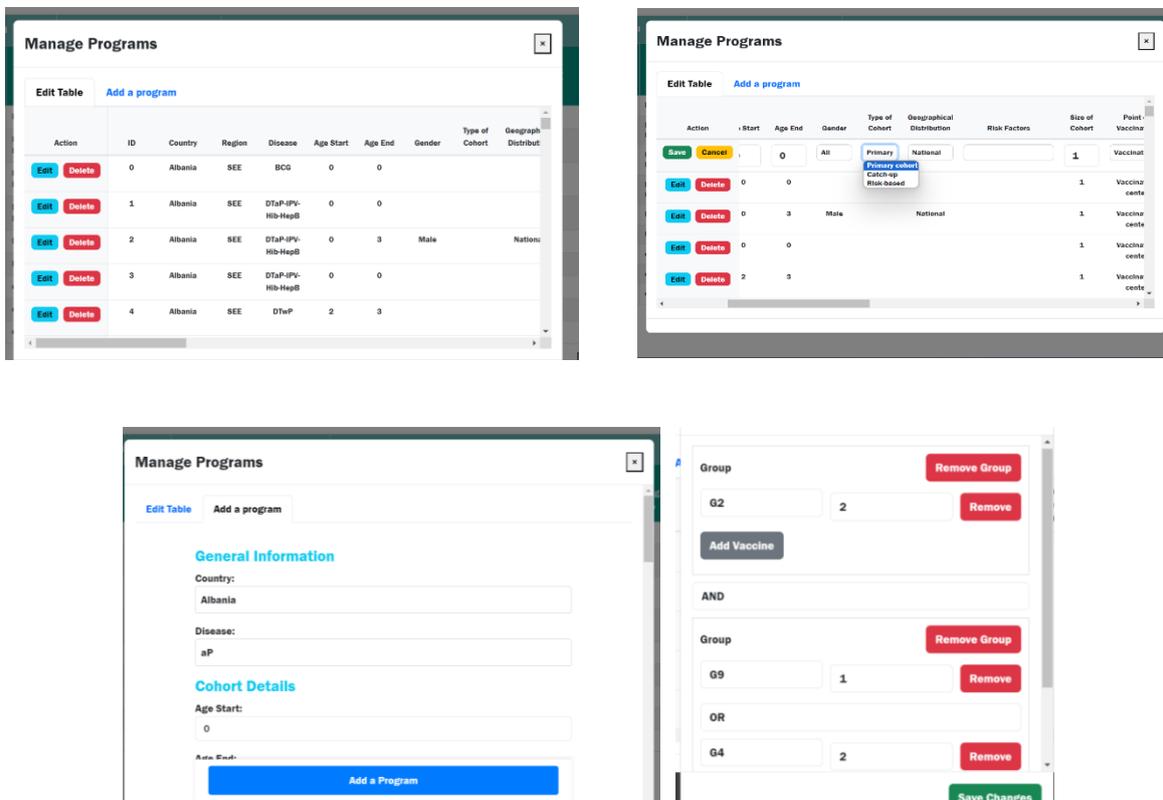
When a modification is approved or rejected by the tool Admin, the super-user receives a notification visible in the bell icon on the homepage.

Minimum data fields required when **adding a new program** appear marked in red when attempting to save incomplete information.
It is the responsibility of the super-user to regularly update the country's best practices on the country card page.

D) Admin mode

The Admin has overall responsibility for the dataset on which the tool is based. They have full rights to the data and are responsible for approving or rejecting any changes made by a super-user.

Additionally, the Admin is responsible for regularly saving the data table by exporting it to Excel once

every six months.
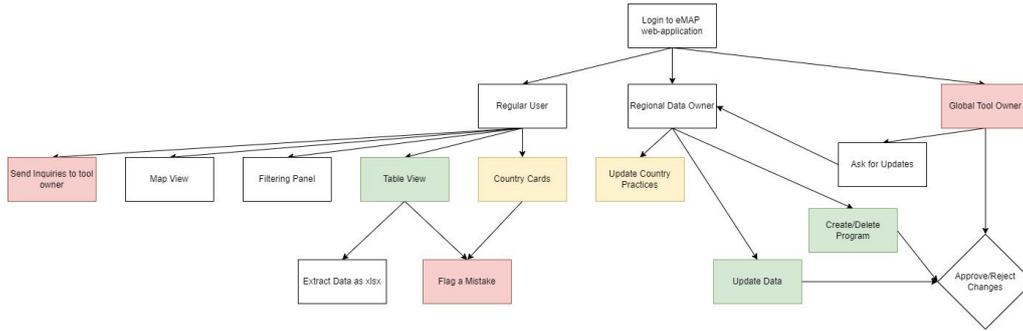
System diagram

On the home page, the tool Admin receives notifications. By clicking on the details, they are directed to a backdoor administration page where it is possible to approve, disapprove, save, or delete any inquiry.

The tool Admin needs to regularly delete all pending modifications to remove them from the super-user notification system. Once a month is suitable, although initially, due to the initial data loading, the frequency may be higher to clear the interface.

Adding super users

The tool Admin can create new superusers on demand *(possibly coming from the "Contact us" button from the homepage)*.

To do so, just change tool web address from **/map/** to **/admin/** and get redirected toward main side administration page where user gestion is handled.
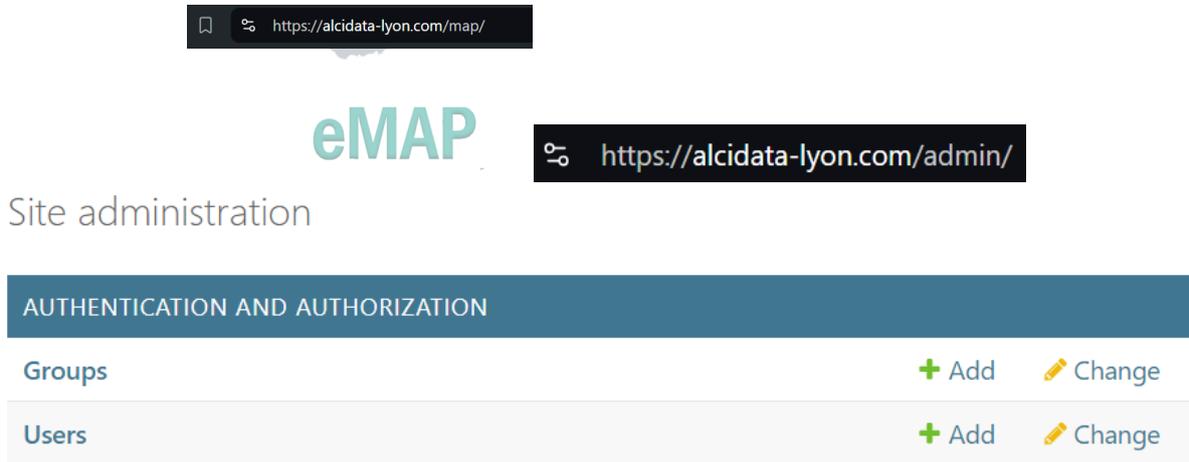
Then simply **Add** a new user first with username and password then with regional options.

GUIDELINES & DEFINITIONS

* The Brave browser presents some incompatibilities with the tool; please try not to use
** Program: in eMAP programs are the way to describe vaccine policies. A program is a list of data including:

- **Program information:** *country, disease, and population*
- **Cohort details:** *age, gender, type of cohort, geographical distribution, and risk factors*
- **Recommendation details:** *vaccines, number of doses, ongoing status, HTA decision, immunization recommendation body, type of recommendation, starting year of the recommendation, last update of the recommendation*
- **Public funding:** *public funded, public funding source, public funding level, ongoing funding*
- **Delivery framework: P**oint of vaccination, and procurement type*

COHORT	A group of individuals described by age or risk factors, for which vaccination against a disease is recommended with a schedule of one or more vaccines and doses
ID	A unique identification number automatically allocated to each cohort / entry in the database
AGE START	The lowest age at which individuals are eligible to receive the first dose of a vaccine schedule
AGE END	The highest age at which individuals are eligible to receive the last dose of a vaccines schedule
PRIMARY	Routine vaccination of individuals targeted to receive a specific vaccine schedule for the first time
CATCH-UP	Vaccination of individuals who missed primary vaccination
BOOSTER	Vaccination of individuals targeted to receive additional doses of a vaccines schedule, after receiving the primary vaccination
AT-RISK	Groups of individuals with an increased likelihood of exposure or development of a disease. Typically including chronic disease
HIGH-RISK	Groups of individuals, a subset of at-risk groups, who are at a particularly high risk of severe outcomes and often require more urgent or specialized preventive measures. Typically including immunocompromise
AGE-BASED	Vaccination of individuals defined only based on age, other than Primary
GEOGRAPHICAL	The administrative-territorial public health authority issuing the recommendation
RISK FACTORS	Factors which increase the risk of developing a disease or the severity of the disease
POINT OF VACCINATION	Type of institution where the vaccine is administered
IMMUNIZATION RECOMMENDATION BODY	The type of institution which issued the vaccination recommendation
VACCINES RECOMMENDED	A vaccination schedule comprises one or more doses of vaccine, administered in a particular order and interval. Alternative vaccination schedules are available when two or more different vaccines (or combinations thereof) can be used interchangeably. Brand names are available to select for diseases for which an MSD vaccine exists (e.g. Rotarix, Rotateq), and generic vaccines names are used for the rest (e.g. dTaP-IPV)

DOSES RECOMMENDED	The number of doses of each vaccine in the recommended schedule
ONGOING RECOMMENDATION	Defines if a vaccination recommendation is current
PUBLICLY FUNDED	Reimbursement or funding from public sources (national or subnational)
HTA DECISION	Specifies whether a recommendation and/or funding was supported by an HTA typically submitted by the manufacturer of a given product
PUBLIC FUNDING SOURCE	The type of institution providing the funding of the recommended vaccination schedule
PUBLIC FUNDING LEVEL	The % of the cost of the vaccination scheme which is funded from public sources
PROCUREMENT TYPE	The predominant method for procurement of publicly funded vaccine

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