

PROJECT DOCUMENT

Support to Tonga Response to COVID-19

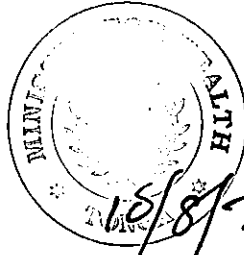
Addressed to

India-UN Development Partnership Fund Commonwealth Window

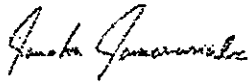
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Project overview

From: WHO Regional Office for the Western Pacific (WPRO)

To: India-UN Development Partnership Fund

Title of the project: Support to Tonga response to COVID-19

Implementation period: 01/05/2021- 31/12/2021

Geographical focus: Tonga

Implementing partners: WHO, Ministry of Health

WPRO responsible officer: Dr Yutaro Setoya

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Proposed Budget Overview

End of Programme Outcome: All PICs have access to the latest science, technical guidance, clinical care, equipment & supplies to reduce preventable morbidity, mortality and the adverse social and economic impacts of COVID-19	Estimated costs (in US\$)
Objective 1: To ensure that Tonga has access to critical equipment & supplies to reduce preventable morbidity, mortality and the adverse social and economic impacts of COVID-19	\$1,018,698
1.1 Activity- Provision of critical medical supplies for COVID-19 health response	\$924,324.47
	Sub-total \$924,324.47
	PSC (7%) \$64,702.71
	UN GMS \$29,670.82
	Total \$1,018,698

1. Situational analysis

In late December 2019, WHO was alerted to a cluster of viral pneumonia cases caused by a previously unknown pathogen that emerged in Wuhan City, Hubei Province of the People's Republic of China (PRC). The initial reported cases were linked to exposure in a seafood market in Wuhan. Upon further investigation, a novel coronavirus (nCoV), a new strain of coronavirus first detected in humans, was identified. On 30 January 2020, the WHO Director-General declared that the outbreak of COVID-2019 constitutes a Public Health Emergency of International Concern and accepted the IHR Emergency Committee's advice and issued this advice as Temporary Recommendations under the IHR. COVID-19 was declared to be a pandemic on 11 March based on the rapid spread of the virus outside China to 114 countries, with 118,000 confirmed cases including 4,291 deaths.

The IHR Emergency Committee recommended that the world should be prepared for containment, including active surveillance, early detection, isolation and case management, contact tracing and prevention of onward spread of infection, and to share full data with WHO. Countries were advised to place emphasis on reducing human infection, preventing secondary transmission and international spread, and contributing to the international response through multi-sectoral communication and collaboration and active participation in increasing knowledge on the virus and the disease.

Epidemiological evidence shows that COVID-19 is transmitted from person to person through respiratory droplets released into the air through coughing and sneezing, personal contact, and from the surface of contaminated objects. Unlike the closely related SARS-CoV there is increasing evidence of virus shedding in COVID-19 up to two days before the onset of symptoms, and a variable number of asymptomatic cases whose role in transmission is not known. Aerosol-generating procedures are a particular risk to unprotected health care workers (HCWs) i.e. HCWs who are not wearing the recommended PPE for the activities being carried out.

From 30 December 2019 through 11 October 2020, over 37 million COVID-19 cases and 1 million deaths have been reported globally. Nearly half of these cases (48%) and deaths (55%) continue to be reported in the Region of the Americas with the United States of America, Brazil and Argentina accounting for the greatest numbers of new cases and deaths in the region. In the week preceding 11 October, over 2.2 million new cases and 39,000 deaths of COVID-19 have been reported across all six WHO regions. This is the highest number of reported cases so far in a single week.

The World Health Organization (WHO)-led Western Pacific Joint Incident Management Team (JIMT) for COVID-19 has been working on supporting health sector preparedness and response activities throughout the Pacific since January 2020. Work in the Western Pacific Region has been aligned with the WHO Global Response Strategy for COVID-19 and the draft *WHO Western Pacific Regional Action Plan for Response to Large-scale Community Outbreaks for COVID-19* (17 March 2020).

The JIMT phase 1 response plan was developed with a focus on mitigating the risk of COVID-19 importation, supporting the rapid identification, containment and management of imported cases in PICs and supporting health system preparedness for an escalation in circumstances.

A Phase 2 *Pacific COVID-19 Action Plan for Preparedness and Response* is now underway. It focuses on: **Containment** of the outbreak through the slowing and stopping of COVID-19 transmission, prevent outbreaks and spread. **Mitigation** of the effects of an outbreak through reducing preventable morbidity and mortality, minimizing negative health, social and economic impacts and facilitating early recovery.

Activities conducted under the phase 2 plan will work towards accomplishing the following overarching **end of program outcomes**:

1. Country readiness and response operations for COVID-19 scaled up for containment and mitigation
2. All PICs have access to the latest science, technical guidance, clinical care, equipment & supplies to reduce preventable morbidity, mortality and the adverse social and economic impacts of COVID-19
3. Health care workers are kept safe through access to the knowledge, skills and resources needed for safe practice, including access to personal protective equipment and optimal infection prevention and control practices
4. COVID-19 transmission reduced through non-pharmaceutical interventions, risk communication and community engagement.

Tonga remains as one of the few countries globally without any confirmed COVID-19 cases. Tonga's borders remain closed with repatriation and cargo flights only permitted, only in compliance with strict procedures. Mandatory government-controlled quarantine is in place for all incoming passengers. The Ministry of Health is establishing facilities for potential isolation and treatment of any COVID-19 cases.

2. Rationale

The support from the India-UN Development Partnership Fund will be used to support Tonga's readiness to effectively manage any COVID-19 cases or suspect or possible cases. In particular, it will focus on ensuring that Tonga has the necessary core medical supplies to implement rigorous quarantine procedures, and isolate and treat any suspect or confirmed COVID-19 cases. It will also be used to strengthen cold chain, in preparation for vaccine rollout.

The support from the India-UN Development Fund will support the procurement of critical medical supplies including for infection prevention and control, medical management of cases, isolation of cases and the effective operation of quarantine locations. This will include safe disposal of medical waste, safe disposal of dead bodies and also strengthening of the cold chain for vaccine rollout.

The procurement list is in line with the JIMT phase II plan agreed supply list for Tonga, and the use of all supplies is being supported by technical training, guidance and advice from the JIMT (not covered under this funding arrangement). Detailed discussions with the Tonga Ministry of Health has ensured that the planned procurement will not duplicate other donations and is consistent with their needs.

The list of procurement has been modified from that originally requested due to donations and grants from other agencies who have been able to meet some of the original needs. The replacement items will allow the Ministry to set-up additional quarantine facilities, which are

needed due to the considerable number of Tongans wishing to return home to Tonga at this time. The new list encompasses the needs that will come with planning for vaccine rollout and ongoing needs for infection prevention and control.

3. Implementing partners

This Fund will be implemented by WHO. The WHO will undertake all the procurement involved. Transport of some supplies may be supported through the World Food Programme (WFP) supported Pacific supply chain system. The WFP is a member of the JIMT logistics pillar and discussions will occur to ensure that the most cost-effective and time efficient options for transport of items to Tonga takes place. The WHO will work closely throughout with the Ministry of Health in Tonga. The Country Liaison Office of the WHO in Tonga, which is based in the Ministry of Health will continuously update the Ministry on progress.

Governance arrangements:

The list of procurement has been agreed already with the Ministry of Health and as procurement processes will follow those of the WHO and UNICEF globally, the focus of the oversight will be for update purposes and to discuss communications and visibility only. As such it is proposed to establish two virtual project meetings with representatives from the High Commission of India, the Ministry of Health and the WHO/UNICEF. The agenda for the meetings will be:

- Ensure all members are aware of the items to be purchased using the Funds from the Government of India and expected timelines for delivery
- Discuss and agree how the contribution of the Government of India can be acknowledged once items are received.

The meeting schedule is proposed in the first quarter 2021 and again closer to the time when handover of donation is expected.

4. Expected outcomes

In line with the Phase II JIMT plan, the following outcomes are expected:

- A. Capacity for quarantine and/or isolation (of cases) for containment strengthened in multiple health facilities in Tonga
 - a. Activity – provision of beds, mattresses, linen, draw sheets and washing machines
 - b. Activity – provision of EMR workstations, wheelchairs and IV stands and autoclaves
- B. Infection prevention and control strengthened for case management, testing and dead body management
 - a. Activity – provision of biosafety cabinets to ensure safe testing at health facilities
 - b. Activity – provision of mortuary related equipment to allow for safe storage, transport and disposal of dead bodies
 - c. Activity – provision of incinerator to allow for safe medical waste disposal (considering increase in medical waste from PPE and vaccine supply particularly)
- C. Strengthened cold chain for vaccine delivery
 - a. Activity – provision of multiple cold boxes and vaccine carriers

Outputs:

Ministry of Health is provided with:

- 25 hospital beds, 1000 items of bed linen, 300 bed mattresses and 1000 heavy duty draw sheets for quarantine/isolation strengthening
- 5 professional washing machines for quarantine/isolation strengthening
- 16 EMR workstation on wheels, 75 wheelchairs, 30 portable IV stands and 5 autoclaves to strengthen ability to manage quarantine/isolation safely
- 3 biosafety cabinets for effective infection prevention and control for testing
- 3 each of mortuary lifters, refrigerated mortuary cabinets, and mini mortuary cooling eqpt for infection prevention control for dead body management
- 50 small (3 liter), 20 medium (20 liter) and 6 large (240liter) vaccine storage items

Indicator:

All indicated items are provided to the Ministry of Health

5. Planned activities

After WHO has declared the Public Health Emergency of International Concern in January 2020, the Pacific countries have remained alert to COVID-19 global outbreak and all countries have declared the state of emergency to alert its population and to implement public health interventions as needed. Among the interventions that have been in place in national COVID-19 plans, Point of Entry (POE) control by quarantining inbound travellers has been important to prevent imported cases by early recognition and quarantining. With this regard, Tonga has been implementing very strict POE measures with limiting flight services. At this stage, this country only allows special repatriation flights only for its nationals and restricts unnecessary air and sea travel such as for tourism.

However, Tonga is preparing for the repatriation of Tongan citizens from high-risk countries and therefore, for possible cases of COVID-19. A key preparatory action is the procurement of much-needed medical equipment to prepare all health centres and hospitals for a potential shift in essential services and for implementation of isolation/quarantine protocols. Patient care items such as wheelchairs, beds, and linens are needed to ensure infection and prevention control (IPC) measures are possible. While procurement of biosafety cabinets and autoclaves will support Tonga MOH with not only IPC but expansion of Tonga's COVID-19 testing capacity. Procurement of mortuary equipment is included to ensure the MOH is prepared for possible adverse outcomes as a result of COVID-19 since over 70% of Tonga's adult population is at increased risk for severe COVID-19 due to noncommunicable diseases such as obesity, diabetes, hypertension, etc.

In addition, Tonga is developing plans for COVID-19 vaccine introduction and Tonga is preparing for this; as such cold storage procurement is a planned activity.

Tonga is among the island nations bearing the brunt of the negative effects of climate change. While incineration is undoubtedly needed, one planned activity is to procure a more efficient incinerator which would allow Tonga to dispose of medical waste properly while having a lower negative impact on the environment.

Critical equipment will be procured. This will support existing

- Procurement of critical items for: case management, infection protection and control (including WASH), quarantine and isolation as well as laboratory strengthening.
- The list of items to be procured is provided in the budget table All items have been agreed with the Ministry of Health aligned with their needs and gaps.

- All items will be procured and delivered in 2021
- This funding covers only procurement and complements the broader Phase II plan of support.

This Funding will cover only procurement. All items will be procured by the WHO and donated to the Ministry of Health. While technical support will be provided by the WHO and other partners towards COVID-19 preparedness and response, this is not included in this proposal.

Communications and visibility

Support of India would be mentioned in all publicity materials related to the project. India-UN Fund logo and UNOSSC logos will be displayed in all communication materials. When procured items arrive in Tonga, formal handover events will be arranged. A representative of the Indian High Commission will be invited to join this/these remotely. Press releases will be jointly developed and released to highlight the critical support from the Government of India. Further discussions on opportunities to further highlight the support will be discussed at the above-mentioned meetings and may include affixing stickers to donated items, social media posts and parallel event in Suva and Tonga. The procured items are likely to arrive in more than one consignment and as such multiple handover events will be arranged if feasible/appropriate.

Monitoring

As all of the budget is for procurement. Updates will be provided to all stakeholders (including UNOSSC) when

- Confirmed shipment dates are received
- Items are received in-country
- Items are handed over to the Ministry of Health.

Financial and narrative Reporting will be provided every quarter to UNOSSC. Monthly progress updates of 2-3 bullet points to be emailed to UNOSSC every month

6. Estimated budget

Detailed budget for all procurement is provided below

Objective 1: To ensure that Tonga has access to critical equipment & supplies to reduce preventable morbidity, mortality and the adverse social and economic impacts of COVID-19

All items will be procured and provided in 2021.

Description	Quantity	Unit Price in \$	Total price
Outcome : Capacity for quarantine and/or isolation (of cases) for containment strengthened in multiple health facilities in Tonga			
Hospital beds (movable beds)	25	\$549.69	\$13,742.24
Bed linen	1000	\$25.53	\$25,529.40
Professional Washing machines	5	\$16,714.28	\$83,571.40
Hospital bed mattress	300	\$206.47	\$61,940.97

Heavy duty mackintosh draw sheets	1000	\$13.70	\$13,700.70
EMR workstation on wheels	16	\$4,017.09	\$64,273.50
Wheelchair	75	\$82.09	\$6,156.41
Portable IV stand	30	\$40.29	\$1,208.72
Autoclave (280L)	5	\$5,806.95	\$29,034.75
Outcome: Infection prevention and control strengthened for case management, testing and dead body management			
Bio safety cabinet	3	\$5,662.19	\$16,986.58
Shipping of IPC and patient care items	1	\$ 38 912,78	\$ 38 912,78
Mortuary lifter	3	\$3,416.99	\$10,250.97
Refrigerated mortuary cabinet 2-body storage	3	\$12,462.03	\$37,386.10
Mini Mortuary Cooling System	3	\$6,428.57	\$19,285.71
Shipping of Mortuary equipment	1	\$13,127.41	\$13,127.41
Incinerator (75-100kg/hr)	1	\$385,600	\$385,600
Incinerator shipping	1	\$20,427.46	\$20,427.46
Incinerator installation & training and backup support – all provided by supplier	1	\$30,000	\$30,000
Outcome: Strengthened cold chain for vaccine delivery			
Vaccine storage capacity: 3 Liters	50	\$292.50	\$14,625.00
Vaccine storage capacity: 20 Liters	20	\$519.48	\$10,389.60
Vaccine storage capacity: 240 L	6	\$4,695.80	\$28,174.77
Total			\$924,324.47
Sub-total			\$924,324.47
PSC (7%)			\$64,702.71
UN GMS			\$29,670.82
Total			\$1,018,698

7. Conclusions

The support from the India-UN Development Partnership Fund will provide critical and much-needed support to enable Tonga to continue its work so far to prepare for and mitigate the risks of COVID-19. While the pandemic continues, Tonga remains vulnerable to the introduction of COVID-19. This funding will further strengthen the considerable work already undertaken by the Government of Tonga to protect its people.

All items provided to the Ministry of Health Tonga will be in line with their requirements and meet any available quality standards from the WHO. The items are in line with existing JIMT and WHO guidance on COVID-19 and training and support for their use is being provided by the JIMT.