## **PROPOSAL**

# Kiribati: Assistance for COVID-19 Response



## January 2021

PROPOSAL SUBMITTED TO:

INDIA – UN DEVELOPMENT PARTNERSHIP FUND

UN OFFICE FOR SOUTH -SOUTH COOPERATION

UNICEF PACIFIC

unicef for every child

# Joint Programme Document: Cover Page

India-UN Development Partnership Fund
Kiribati
3. Ensure healthy lives and promote well-being for all ages
Kiribati: Assistance for COVID-19 Response
UNICEF Pacific Multi-Country Office
12 months
USD \$1,000,000 (Co-funding from other donors \$1.2 million)
10,930 people (health/frontline workers, women, children and community members)
Ministry of Health and Medical Services of the Government of Kiribati
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Deputy Representative
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#### Short description

in line with Phase 2 of the COVID-19 Pacific Action Plan (PAP) for health sector preparedness and response which focuses on mitigation and containment, the project will specifically contribute to the second and third objectives of the Plan to ensure that All Pacific Island Countries (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 and that health care workers are kept safe through access to the knowledge, skills and resources needed for safe practice, including access to personal protective equipment (PPE) and optimal infection prevention and control practices. The project will fund the procurement of PPE and medical supplies for health care workers in Kiribati to prevent the spread of COVID-19. In addition, Health Emergency Management Operation Centre Equipment and Supplies will be procured to support the effective management and coordination of the COVID-19 response.

#### Key words

- COVID-19 Response
- Personal Protective Equipment
- Sustainable Development Goals
- Pacific Islands Countries
- Kiribati

Overview of Budget to be spent by Agency

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UNICEF	970,874
UNOSCC	29,126
TOTAL Programme Funds	1,000,000
Other Funds contributing to Programme Objectives	1,200,000

#### **Timeframe**

Start Date	End Date	Duration
1st April 2021		Duration
1" April 2021	1 <sup>st</sup> April 2022	12 months

#### **Partners**

Ministry of Health and Medical Services, Kiribati World Health Organisations

Signature page

Resident Coordinator

Sanaka Samarasinha, MRC

Date:

Signature and Seal:

National Coordinating Authority

Name: Mrs Eretii Timeon Director for Public Health Services, Ministry of Health and Medical Services

Date:

Signature and Sea

al:

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TARAWA, KIRIBATI

**Participating UN Organisation** 

Name of PUNO: UNICEF

Name of Representative: Sheldon

Date:

Signature and Seal:

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## I. List of Acronyms

COVID-19 HCWs HEOC JHR JEC IPC JIMT LMIC MHMS nCoV PICS PPE RCCE UNICEF WASH WFP WHO	Coronavirus disease 2019 Health Care Workers Health Emergency Operation Centre International Health Regulations Information and education materials Infection Prevention and Control Joint Incident Management Team Low-to-middle income countries Ministry of Health and Medical Services novel coronavirus Pacific Island Countries Personal Protective Equipment Risk Communication and Community Engagement Committee United Nations Children's Fund Water, sanitation and hygiene World Food Programme World Health Organization
******	world Health Organization

#### II. Executive Summary

In line with Phase 2 of the COVID-19 Pacific Action Plan (PAP) for health sector preparedness and response which focuses on mitigation and containment, the project will specifically contribute to the First, second and third objectives of the Plan to ensure that All Pacific Island Countries (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 and that health care workers are kept safe through access to the knowledge, skills and resources needed for safe practice, including access to personal protective equipment (PPE) and optimal infection prevention and control practices. The project will fund the procurement of PPE for health care workers in the Kiribati.

The COVID-19 Pacific Action Plan covers the 14 Pacific Islands of the American Samoa, Cook Islands, Fiji, French Polynesia, Guam, Kiribati, Marshall Islands, Federated States of Micronesia, Nauru, New Caledonia, Niue, Commonwealth of the Northern Mariana Islands, Palau, Pitcairn Island, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu, Vanuatu & Wallis and Futuna and has a total planned budget of US \$43 million.

### III. Background and Rationale

In December 2019, the novel coronavirus (nCov), a new strain of coronavirus detected in humans was identified. By end of January 2021, the World Health Organization (WHO) declared that the outbreak of this new coronavirus, COVID-19, constitutes a Public Health Emergency of International Concern. WHO declared it a global pandemic in March 2020 after it has spread to some 114 countries. Between December 2019 and October 2020, over 37 million COVID-19 cases and 1 million deaths were reported globally. In the week preceding 11 October, over 2.2 million new cases and 39,000 deaths of COVID-19 have been reported, the highest number of reported cases so far in a single week. Towards the end of 2020, second waves are hitting countries all over the world and Governments once again are struggling to mount COVID-19 response plans along with mitigation and containment responses. Small island states are not spared.

Governments of 14 Pacific Island Countries (PIC) are implementing phase 2 of the COVID-19 Pacific Action Plan for health sector preparedness and response which is supported by the WHO-led Western Pacific Joint Incident Management Team (JIMT) for COVID-19. UNICEF Pacific is a member of the JIMT and provides technical, operational, and procurement assistance. The JIMT for COVID-19 has been working on supporting health sector preparedness and response activities throughout the Pacific since January 2020, in complete alignment with the WHO Global Response Strategy for COVID-19 and the draft JIMT Pacific Regional Action Plan for Response to Large-scale Community Outbreaks for COVID-19 (17 March 2020).

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. there are HCWs who are not wearing the recommended Personal Protective Equipment (PPE) for the activities they carry out.

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
- 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
- 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
- COVID-19 transmission reduced through non-pharmaceutical interventions, risk communication and community engagement.

In this request for support, focus is on procurement of PPE and materials for Health Emergency Operations Centres (HEOC) under outcomes 1, 2 and 3 and will contribute to keeping health care workers safe through procurement of supplies and management of emergency response through HEOCs. Adequate emergency operations equipment along with supply of and correct use of PPE in clinical, quarantine, and isolation settings is critical to the for main strategies for infection prevention and control (IPC) to reduce the spread of COVID-19 include the use of sterilization and testing equipment, PPE, WASH and waste management supplies. PPE includes gloves, medical/surgical masks, protective eye covering, gowns, respirators and other medical equipment, as identified in the WHO's guidance document COVID-19 Technical Specifications for Personal Protective Equipment and Related IPC supplies. To prevent shortages of PPE and medical diagnostic and treatment needs in Kiribati, key procurement considerations and justification were done.

In early 2020, UNICEF procured and disbursed PPE for the Primary Health Care systems in Kiribati, based on possible outbreak scenarios. Towards the end of 2020, these consumable items need replenishment to ensure protection of HCWs and to reduce the risk of morbidity and mortality from COVID-19 transmission.

This proposal for funding from the Government of India will expand Kiribati's ability to set up effective, safe COVID-19 responses through the procurement of PPE, WASH, medical equipment, and conference room equipment to ensure medical communication and management is well maintained.

As of December 2020, Kiribati is one of the few countries in the world with zero confirmed cases of COVID-19. With technical and financial support from UNICEF, the Risk Communication and Community Engagement Committee (RCCE) was formed under the operational arm of the Health Promotion Unit. The RCCE leads COVID-19 preparedness activities in the country. To support this effort, the Kiribati National COVID-19 Preparedness and Response Plan was developed to ensure enhanced risk communication and community engagement mechanisms were established to effectively communicate and engage with vulnerable and at-risk populations, as well as with the general population.

Multiple actions have been undertaken to ensure communities, health workers and other at-risk populations are prepared to manage their COVID-19 response. Key activities include training of healthworkers on COVID-19, as well as continuity of essential health services; development and distribution of information and education materials (IECs) through print, radio, song and drama; household visits and community dialogues on COVID-19; and, engagement with religious leaders, Island Councils and NGO's.

#### IV. Expected Results

The support from the India-UN Development Partnership Fund will be used to support the Government of Kiribati to procure needed PPE items, medical equipment, communication tools, as well as waste management items needed to ensure safety guidelines are followed. The PPE needed to prevent the spread of COVID-19 include disposable items (face shield, masks - surgical and N95, surgical gowns and coveralls, hand sanitizer, etc) which create a barrier to prevent blood, bodily fluids or respiratory secretions from passing from one person to another. For Kiribati, critical medical equipment needed include oxygen concentrators, and supportive medical equipment including nasal prongs and oxygen tubes. Other medical items requested are autoclave benchtop sterilizers to ensure adequate sterilization of equipment, transport ventilator, a laryngoscope for potential intubations, pulse oximeters, an adult resuscitator, disposable cannulas, and other equipment. To support medical waste management, bio-hazard bags, labels, and signage tags are also included in this request. To support WASH needs, water purifiers, and cleansing products are included.

Additionally, UNICEF requests support to establish conference rooms needed for management of the COVID-19 response, including VHF GP3 and GM3 by Motorola, a portable radio kit to enhance communication, and various office supplies including microphone, GPS unit, laptops, HF radios, printers and toner, projectors and screens, networks and routers, air conditioners, a generator and other needed items to establish a functioning conference room for medical management. Finally, this request includes GENEEXPERT equipment, Spotchem analyzers, and a blood donation couch to support testing needs to identify potential COVID-19 cases. One solar refrigerator is also included. All PPE, laboratory, management, communication, and waste management needs were identified by the MHMS in partnership with UNICEF, as below:

Medical	Equipment		
3	Portable oxygen concentrator	100	Set of wooden steel depressors (disposable)
100	Oxygen prongs, nasal, non-sterile, single use	5	Resuscitator, adult
100	Oxygen tube, extension with mask	20	Airway, Guedel, sterile, single use (range of
2	Transport Ventilator	100	Infusion giving set
20	ECG Machine	100	Disposable canula
15	Pulse Oximeter	100	Non-rebreather mask
4	Autoclave (50I) + Equipment	21	
5	Laryngoscope	20	Autoclave machine (Benchtop Sterilizer) Thermometers
Personal	Protective Equiptment (PPE)		mermometers
500	Coveralls	276	Goggles
24	Bio Bottles with Ice Packs	7,411	Gown
5,391	Bio-hazard bag	2,626	Hand Sanitizer (500ml)
232	Chlorine (.5kg)	12,214	Mask N95
6,353	Face shield	215.237	Surgical Mask
580,942	Gloves (piece)	223,237	Spi Bical Mask
Health Er	mergency Operations Centres		
2	VHF portable kit motorola GP380	1	Projector
1	VHF station kit motorola GM360	1	Projector Screen
1	GPS unit Garmin	1	UPS 1500 VA APC
1	Teleconference microphone & speaker	1	Air conditioner
1	Teleconference camera	2	Flipchart, stand, markers, etc.
1	Wifi switch - router (mln 8 people)	2	White board large
2	Laptop (incl:windows 10, office, antivirus)	1	White board sticker
2	Computer Keyboard & mouse;standalone	1	Generator set diesel SKVA
1	HP Laserjet pro printer	1	First aid kit
1	toner cartridges for printer multi color : set	1	Conference table

20	Immediate Response WASH & Dignity Kit	450	
400		150	Hand Cleanser 1ltr
	Water-cont,LDPE,10l,collapsibl.,w/o logo	9	Trolleys for medical waste
20000	Water purif.(NaDCC) 33mg tabs/BOX-10000	4	Large medical waste containers
1000	Paper Towels	17	signage for waste storage area
102	Janola (Bleach) 2ltr	34	Labels for biohazardous waste
25	Hand cleanser Dispenser		FRACIS (OF DIONAZA) COUS W42(6
Laborato	ry Items		
1	GXIV-4-L GENEXPERT IV R2 4 MODULE	1	Spotchem analyzer D-concept (plus installation
1	SPOTCHEM EZ SP-4430 Analyzer (plus	1	Blood Donor couch
Supply m	anagement and communication	*	BIGGG DONG! COUCH
4	HF Radio complete set and accessories	2	Laptop (incl:windows 10, office,antivirus)
Cold chair	n equipment		captop (incr.windows 10, office, antivirus)
6	Solar Direct Drive refrigerator (SDD)		

Through UNICEF support, and through Phase 2 of the COVID-19 Pacific Action Plan for Preparedness and Response, Kiribati has a clear understanding of their current PPE inventory, including their utilization rate. In 2021, Kiribati will need to procure additional PPE supplies to protect HCWs as they implement quarantine and isolation procedures. Section X details the list of items and budget requested for PPE, medical testing and treatment equipment, waste management materials and needed supplies to set up medical communication processes to manage the COVID-19 response.

In line with Phase 2 JIMT plan, the project will contribute to the following outputs:

- 1.1 National Emergency Operations Centre (EOC) and/or Health Emergency Operations Centres (HEOC) prepared to respond to escalation of outbreak
- 2.5 Essential medical equipment and supplies procured as prepositioning or in response to outbreak (including training staff in use)
- 3.3 PIC HCW's can respond to a COVID-19 outbreak in a safe manner
- **3.5** WASH in health facilities, environmental hygiene and biohazardous waste management systems strengthened

#### V. Target Audience

The target audience of the project includes a total of 10,930 people in Kiribati including:

- 330 health and frontline workers
- 9,000 community people through WASH
- 1,600 children under 5 and pregnant women

### VI. Implementing Modality

UNICEF will support the MHMS in the procurement of PPE listed in Section IX on Detailed Budget. Policy guidance and documents for PPE procurement from WHO will be used as reference and guidance to the MHMS. UNICEF will continue to provide ongoing national preparedness support in the public health sectors. UNICEF will partner with the World Food Programme (WFP), a member of the JIMT logistics pillar, to support transportation needs to deliver supplies from regional warehouses to Kiribati given the border closure and non-availability of commercial flights. Most of the supplies will

be procured via UNICEF Supply Division in Copenhagen while few items will be procured locally. The freight costs have been included in the proposed budget. All procurement will be conducted based on availability, cost-effectiveness and will consider efficient timing options. All procurement will be done in partnership with the MHMS.

Governance arrangements: In line with India/UN Fund Guidelines, some oversight of the project is needed which includes representatives of the Embassy/Government of India, the Ministry of Health and the WHO/UNICEF. As this funding is only to be used for procurement, it is intended to keep the processes light, particularly to reduce unnecessary meetings for the Ministry of Health. 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 and again closer to the time when handover of donation is expected.

Management arrangements for the project will be similarly placed in the relevant mechanisms of the JIMT as well as under UNICEF's Health Section under the Deputy Representative in close collaboration with WFP and MHMS. The Communicable Disease Surveillance and Response Committee (CDSRC) for COVID 19 of the Government of Kiribati will be responsible for coordination, management, implement and monitor these supplies at all levels.

## VII. Monitoring and Reporting

The implementation and delivery of the project will be monitored within the monitoring framework in place for the implementation of the COVID-19 Pacific Action Plan Phase 2. Specific to the Project, the Ministry of Health and Medical Services of Kiribati will provide inputs on the satisfactory delivery of PPE, WASH, and HEOC equipment and the appropriate distribution and use. Arrangements will also be made for the participation in key monitoring activities by the nominated Indian representatives from the High Commission of India in Suva, Fiji.

UNICEF Pacific will submit to UNOSSC a Financial Report every quarter and narrative report every six months in the duration of the project.

In addition, monthly updates of two-three bullet points will be emailed to the UN Office for South-South Cooperation (UNOSSC). This will start from inception until the conclusion of the project and will provide inputs to UNOSSC' monthly updates to all partners.

### VIII. Results Framework

This project will contribute to the results of the larger COVID-19 Pacific Action Plan for Health Sector Preparedness and Response, Phase 2, targets 1.1, 2.5, 3.3 and 3.5.

Goal: 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, minimising negative health, social and economic impacts and facilitating early recovery.

End of Program Outcome 1 (EPO1): Country readiness and response operations for COVID-19 scaled up for containment and mitigation

	Outputs	Activities	Indicators
1.1	National Emergency Operations Centre (EOC) and/or Health Emergency Operations Centres (HEOC) prepared to respond to escalation of outbreak	<ul> <li>ICT and telecommunications technical support for Health EOCs (including exploration of options for outer Island communication methods)</li> <li>Support to strengthen coordination between health &amp; disaster risk management sectors and clusters for humanitarian response</li> </ul>	clear EOC/HEOC structures on standby or activated short code community hotlines in place

End of Program Outcome 2 (EPO2): 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

	Outputs	Activities	Indicators
2.5	Essential medical equipment and supplies procured as prepositioning or in response to outbreak (including training staff in use)	<ul> <li>Procure and distribute medical kits for case management, including resources to manage comorbidities, secondary infections and complications</li> <li>Maintain a Pacific emergency stockpile of PPE, vector control equipment and supplies and selected water and sanitation supplies</li> </ul>	No stockout of PPE

End of Program Outcome 3 (EPO3): Health care workers are kept safe through access to the knowledge, skills and resources need for safe practice, including access to personal protective equipment and optimal infection prevention and control practices.

	Outputs	Activities	Indicators
3.3	PIC HCW's can respond to a COVID-19 outbreak in a safe manner	HCWs trained in the safe PPE use and IPC PPE and IPC supplies procured and distributed for standard, droplet, contact and respiratory precautions, safety boxes, biohazard bags etc. Support for developing IPC strategies in low resource settings (or in the absence of adequate PPE)	No stockout of PPE
3.5	WASH in health facilities, environmental hygiene and biohazardous waste management systems strengthened	Access to soap, water and hand sanitizer in hospitals Access to functioning incinerators or demonstration of safe alternative methods of hazardous waste disposal	

### IX. Results-Based Budget

Goal: 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, minimising negative health, social and economic impacts and facilitating early recovery.

End of Program Outcome 1 (EPO1): Country readiness and response operations for COVID-19 scaled up for containment and mitigation

	Immediate Outcomes	Activities	20	021
			India Funds	Other Funds
1.1	National Emergency Operations Centre (EOC) and/or Health Emergency Operations Centres (HEOC) prepared to respond to escalation of outbreak	ICT and telecommunications technical support for Health EOCs (Including exploration of options for outer island communication methods) Support to strengthen coordination between health & disaster risk management sectors and clusters for humanitarian response	201,151	

End of Program Outcome 2 (EPO2): 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

Immediate Outcomes	Activities	20	21
		India Funds	Other Funds
5 Essential medical equipment and supplies procured as prepositioning or in response to outbreak (including training staff in use)	Procure and distribute medical kits for case management, including resources to manage comorbidities, secondary infections and complications  Maintain a Pacific emergency stockpile of PPE, vector control equipment and supplies and selected water and sanitation supplies	280,696	500,000

End of Program Outcome 3 (EPO3): Health care workers are kept safe through access to the knowledge, skills and resources need for safe practice, including access to personal protective equipment and optimal infection prevention and control practices.

	Immediate Outcomes	Activities	2021	
			India Funds	Other Funds
3.3	PIC HCW's can respond to a COVID-19 outbreak in a safe manner	HCWs trained in the safe PPE use and IPC PPE and IPC supplies procured and distributed for standard, droplet, contact and respiratory precautions, safety boxes, biohazard bags etc. Support for developing IPC strategies in low resource settings (or in the absence of adequate PPE)	415,268	700,000
3.5	WASH in health facilities, environmental hygiene and biohazardous waste management systems strengthened	Access to soap, water and hand sanitizer in hospitals Access to functioning incinerators or demonstration of safe alternative methods of hazardous waste disposal	27,528	
		Total UNICEF programmable	924,642	
		UNICEF Recovery cost (5%)	46,232	
		Total received by UNICEF	970,874	HE 254 727
		UNOSSC/UNDP general management services (3%)	29,126	
		Grand total	1,000,000	ALIKA STANIA

# X. Detailed Budget: PPE Procurement List of Items

Type of Materia	Techny .	No.	Estimated cost (USD)
Medical Equipmer	18-11-controller	3	
Medical Equipmer		100	2,835
Medical Equipmen	Oxygen tube, extension with mask	100	300
Medical Equipmen		2	2,835
Medical Equipmen		20	89,100
Medical Equipmen	t Pulse Oximeter	15	32,805
Medical Equipmen	t Autoclave (50I) + Equipment	4	4,034
Medical Equipmen			42,326
Medical Equipmen		5	3,506
Medical Equipment	Resuscitator, adult	100	909
Medical Equipment		5	2,792
Medical Equipment	// vicino, single use fidilge in cirpe)	20	1,688
Medical Equipment		100	91
Medical Equipment		100	455
Medical Equipment		100	439
Viedical Equipment	( Construction Steringer)	21	15,540
Medical Equipment		20	1,517
PE	Coveralls		201,172
PE	Bio Bottles with Ice Packs	500	5,000
PE	Bio-hazard bag	24	432
PE	Chlorine (.5kg)	5,391	2,911
PE	Face shield	232	200
PE	Gloves (piece)	6,353	9,363
PE	Goggles	580,942	25,149
PE	Gown	276	1,094
PE		7,411	65,536
PE	Hand Sanitizer (500ml)	2,626	10,822
PE	Mask N95	12,214	9,197
PE	Surgical Mask	215,237	95,165
EOC	SUB-TOTAL		224,869
OC .	VHF portable kit motorola GP380	2	1,069
OC	VHF station kit motorola GM360	1	1,355
OC	GPS unit Garmin	1	238
OC	Teleconference microphone & speaker	1	650
	Teleconference camera	1	520
OC .	wifi switch - router (min 8 people)	1	150
OC .	Laptop (incl:windows 10, office,antivirus)	2	1,600
OC .	Computer Keyboard & mouse;standalone	2	100
OC	HP Laserjet pro printer	1	358

HEOC	toner cartridges for printer multi color : set	1	780
HEOC	Projector	1	2,000
HEOC	Projector Screen	1	160
HEOC	UPS 1500 VA APC	1	204
HEOC	Air conditioner	1	2,000
HEOC	Flipchart, stand, markers, etc	2	150
HEOC	White board large	2	200
HEOC	White board sticker	1	100
HEOC	Generator set diesel 5KVA	1	2,660
HEOC	First aid kit	1	250
HEOC	Conference table	1	5,000
HEOC	SUB-TOTAL	1	19,544
WASH Material	Immediate Response WASH & Dignity Kit	20	
WASH Material	Water-cont,LDPE,10l,collapsibl.,w/o logo	400	3,845
WASH Material	Water purif.(NaDCC) 33mg tabs/BOX-10000	20000	973
WASH Material	Paper Towels	1000	9,690
WASH Material	Janola (Bleach) 2ltr	102	221
WASH Material	Hand cleanser Dispenser	25	
WASH Material	Hand Cleanser 1ltr	150	794
WASH Material	Trolleys for medical waste	9	2,000
WASH Material	Large medical waste containers	4	1,800
WASH Material	signage for waste storage area	17	1,600
WASH Material	Labels for biohazardous waste		680
WASH Material	SUB-TOTAL	34	340
-4.	GXIV-4-L GENEXPERT IV R2 4 MODULE		22,053
Laboratory items	CONFIGURATION L (equipment)	1	17,500
aboratory items	SPOTCHEM EZ SP-4430 Analyzer (plus installation	1	17,128
	reagents Spotchem analyzer D-concept (plus instaliation		17,120
aboratory items	reagents	1	26,374
aboratory items	Blood Donor couch	1	4,500
aboratory	SUB-TOTAL		65,502
upply nanagement and ommunication	HF Radio complete set and accessories	4	140,000
upply Ianagement and Immunication	Laptop (incl:windows 10, office,antivirus)	2	1,600
anagement and ommunication old chain	SUB-TOTAL		141,600
pid chai <b>n</b> Juipment	Solar Direct Drive refrigerator (SDD)	6	66,000
old chain Juipment	SUB-TOTAL		66,000

740,740
183,902 924,642
46,232
970,874
29,126
1,000,000

## XI. Communications and Visibility

UNICEF Pacific, with the Ministry of Health and Medical Services of Kiribati, will undertake efforts to acknowledge the contribution from the Government of India on appropriate occasions. For any major and national events, arrangements will be made to ensure the participation of the High Commission of India at Suva, Fiji at the highest level as possible. The High Commission would be kept regularly informed on the progress of the project. 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 as appropriate.