

Situational Report on COVID-19 – June 2020

Additions and modifications have been highlighted

Situation Overview

In December 2019, China alerted the WHO to a new type of coronavirus, identified in the city of Wuhan, that causes pneumonia-like symptoms. This coronavirus has since been officially designated COVID-19. Due to the rapid global spread of COVID-19, cities and countries around the world have implemented restrictions on transportation and workplaces to contain the spread of the disease. GHSC-PSM is continuously gathering information on this dynamic situation and is working with internal teams, country leadership, and USAID and global stakeholders to mitigate supply chain risks.

Particular attention is focused on China and India as they are the sources for many of the raw and intermediate materials as well as finished pharmaceutical products (FPP) used by health programs around the world. As of June 3, 2020, manufacturing and logistics are improving in India, China, and Europe, but remain constrained due to lockdowns, export restrictions, and backlogs at seaports, airports, and land borders. Manufacturing and logistics services are increasingly facing cost hikes due to rising global demand. Additionally, some manufacturers are being compelled to shift production from routine products to pandemic-related personal protective equipment (PPE), diagnostic tests, and pharmaceuticals, which is restricting their capacity for routine production.

Five generic pharmaceutical manufacturers have reportedly reached a licensing agreement to make the antiviral drug remdesivir for 127 countries in response to COVID-19. This deal is “royalty-free” until the World Health Organization (WHO) declares COVID-19 no longer a global outbreak.

Maintaining Routine Supply

In response to the impact of COVID-19 on procurement and supply mechanisms, GHSC-PSM is taking the following actions to support our in-country partners:

Coordination with Suppliers and Logistics Contractors

The project is receiving regular updates (daily or as needed) from suppliers and logistics contractors to inform responses to mitigate impact. Activities have included:

- Due to the shutdown in India causing logistics backlogs, the project coordinated to deliver two shipments of HIV/AIDS and malaria supplies to Nigeria via charter flights.
- Due to the shutdown in India reducing production capacity for a malaria RDT supplier, the project shifted orders from the India supplier to a facility in South Korea.

- The project has converted shipments from ocean to air and vice versa in order to respond to changing freight capacity.
- As destination countries began to restrict access across borders in March, the project expedited shipments that had not yet obtained waivers to destination countries where possible and pre-position cargo at destination as quickly as possible on available flights or by ocean.

Strategic Planning

- Reviewing supply plan and inventory data and conducting prioritization exercises across task orders and across procurers to ensure that the most urgent need is met (across products and countries)
- Assessing capacity for modification to countries' shelf life requirements
- Preordering and building stockpiles of key commodities
- To ensure storage space for expedited routine supplies and for COVID-19 commodities, the project encouraged countries to:
 - Move commodities as close to service delivery points as possible
 - Explore opportunities for supplementary storage (e.g., private warehouses, containers)

Weekly updates from GHSC-PSM to USAID leadership, which include details on impact to specific commodity categories, is available on [Google drive](#).

Technical Assistance

- In collaboration with the GHSC Francophone Task Order, the project updated the Emergency Supply Chain Playbook to include COVID-19 resources and conducted two webinars to share the resources with internal and global audiences.
- Developing a suite of job aids and resources to assist countries in their COVID-19 response.
- On April 30, 2020, the project presented during an Office of HIV/AIDS (OHA) webinar for USAID Missions and PEPFAR implementing partners (IPs) on solutions for lab sampling during COVID-19. Theo Faruna, the Nigeria Lab & Logistics Director, presented on the National Integrated Specimen Referral Network (NISRN) and how GHSC-PSM is coordinating with laboratories and clinical IPs in Nigeria to ensure that samples are picked up and delivered to labs in a timely manner.
- The project will provide virtual MNCH support to country offices via phone calls and others virtual mediums. The purpose of this support is to provide targeted MNCH supply chain information to ensure that MNCH commodity levels are maintained during the time of COVID.

Collaboration

The project is coordinating with global donors and stakeholders to develop innovative means for responding to supply chain interruptions. Activities include:

- Participating in the Global Logistics Continuity Working Group (led by Logistics Cluster, WFP) on a global logistics network for humanitarian goods. Among other outputs, this may create options for moving global health products if commercial freight is not available.
- Participating on three task forces that support the WHO-convened COVID-19 Work Stream 3 on malaria commodities. These task forces include participants from USAID/PMI, the Global Fund, WHO, UNICEF, the Clinton Health Access Initiative (CHAI), the Gates Foundation, Médecins Sans Frontières (MSF), Medicines for Malaria Venture (MMV) and other parties to assess and coordinate actions to mitigate impact of COVID-19 on malaria commodities. The task forces include:
 - A malaria rapid diagnostic test (RDT) task force for COVID-19, based on the existing malaria RDT Procurement Taskforce
 - A task force on malaria medicines

- A task force on indoor residual spraying (IRS) and LLINs based on the work that the Alliance for Malaria Prevention is spearheading.
- Presenting to UNICEF and the Maternal Health Supplies Caucus (MHSC) on observations of the global supply of maternal, newborn and child health (MNCH) commodities and impacts on in-country MNCH supply chains. As a result of these conversations, UNICEF and the MHSC will increase coordination through joint meetings to monitor the impact of COVID-19. GHSC-PSM will participate and contribute to actions to mitigate impacts where possible.

Policy

The project is coordinating with USAID, global stakeholders, and national governments to implement flexible policies that maintain critical health supply chains.

Contracts

The project's actions to maintain routine supply include:

- Shifted to spot-bidding with logistics providers to be more competitive in obtaining cargo space, due to reduced air and ocean capacity in China, Europe, and India.
- Obtained pre-approval for some ocean shipments to be able to respond quickly when costs changed.
- Sought relaxed USAID rules for securing charter flights
- Requesting product registration waivers until new suppliers can get their products registered

Governance

The project's actions to mitigate supply chain disruptions include:

- Encouraging countries to assign essential services classifications to health supply chains, including pharmaceutical, PPE, and other commodities, and to health product manufacturing facilities and logistics providers

Import/Export

- Working with USAID Missions to obtain blanket duty waivers for existing orders
- Working with USAID Missions to obtain essential personnel designations and secure safe passage for commodities crossing regional and international borders by land.

Quality Assurance (QA)

To reduce order delays, the project adjusted the QA process by increasing use of a risk-based approach to reduce inspections and testing. The project also introduced remote inspections for consignments that could not be inspected in person due to COVID-19 restrictions and is coordinating with the Global Fund on broader QA activities to mitigate impact to orders.

Advocacy

The project is working with USAID, other U.S. government bodies, and global stakeholders to advocate for supply chain priorities with regards to reducing the spread of COVID-19 and to protecting routine global health programs. The project continues to promote strong, resilient supply chains as critical to routine health programs as well as crisis situations. Activities include:

- Leveraging the WHO/WTO statement on need for cross-border movement of health products and partnering with other donors to advocate for similar flexibilities

- Provided information to Congress to inform interventions to prepare and protect national and global health supply chains.
- Provided input to the Secretary of State to support advocacy efforts through the U.S. Embassy in India to facilitate the manufacture and movement of essential commodities including pharmaceuticals and malaria test kits
- Advocating in collaboration with global funders and procurers to ensure existing suppliers of malaria RDTs and other supplies continue to prioritize fulfilling global malaria RDT demand.

Responding to COVID-19 Demand

In addition to ongoing efforts to mitigate disruptions to routine supply and respond to the pandemic, the USG allocated additional funding to GHSC-PSM for COVID-19 response activities. This includes:

- Central funding for supply chain technical assistance and commodity procurement available for seven countries
- Field support funding for commodity procurements.
- USG funding to procure health commodities for Italy
- USG funding for procurement of U.S.-sourced ventilators for Russia and Slovakia.
- USG funding for procurement of U.S.-sourced ventilators for South Africa, El Salvador, Pakistan, India and Honduras, with additional funding expected for a total of 40 countries.

Some activities the project is conducting using these funds include:

- General COVID-19 procurement of medical equipment and supplies, pharmaceuticals, and non-medical supplies.
- Market research of rapid-deploying field intensive care units (ICUs), local supply of oxygen in sub-Saharan Africa, COVID-19 treatment such as remdesivir, and landscaping studies of availability of COVID-19 diagnostics.
- Support to the U.S. Embassy in Rome to coordinate with Government of Italy stakeholders to define product specifications supporting U.S. government assistance to the people of Italy.
- Ventilator procurements: The first deliveries were completed in record time in May 2020 to South Africa, Russia and El Salvador. Each procurement and delivery was completed in approximately one week, reduced from non-pandemic timing of weeks to months. Upcoming procurements are expected for Brazil, Honduras, India, Pakistan, Indonesia, and Ethiopia.

South Africa

On May 4, 2020, GHSC-PSM received a request from USAID to procure ventilators for South Africa's COVID-19 response. On May 11, barely one week later, 50 ventilators were delivered to Johannesburg. This rapid pace represents a supply chain victory for GHSC-PSM, which mobilized all available resources, including additional staff from within the project, to speed up a process that can take up to several months to complete in non-pandemic times. The project identified and contracted with a U.S. supplier, obtained and packaged the ventilators, secured documentation and export waivers, booked flights, and saw the ventilators arrive on the ground to a warm welcome from the U.S. Ambassador to South Africa Lana Marks in just seven days.

Country Response

GHSC-PSM is responding to COVID-19 using flexible and innovative strategies. Examples include:

Angola

- Coordinated with a third-party logistics (3PL) company to arrange for containers to be stored in the 3PL's warehouse if needed due to increased COVID-19-related demand.
- In Luanda, contraceptives are typically distributed by hospital ambulances, which are currently being used to satisfy needs related to COVID-19. The project is working with PSI to secure alternative contraceptive distribution options, including delivering products using project vehicles to the municipal and district family planning (FP) focal points. From the focal points, last mile distribution was coordinated by the municipal authorities to health facilities, including the DOOR project facilities in Luanda province. GHSC-PSM also supported the FP program to develop distribution plans, leveraged the national pharmaceutical transportation mechanism executed by CECOMA and monitored distribution to confirm reception across all provinces by tracking proof of deliveries virtually.

Botswana

The project is re-structuring planning so refresher training on the quantification tools and process for ARVs, essential medicines and HIV-related lab commodities can be conducted remotely through virtual meetings.

Burkina Faso

- Added a COVID-19 job aid to the existing Emergency Supply Chain (ESC) Playbook disease guidelines.
- Providing technical assistance on COVID-19 to the Centre of Health Emergency Response. Operations (CORUS) and working with the MOH, COVID-19 Logistics Commission and USAID's MEASURE Evaluation project to integrate COVID-19 commodities and logistics data reporting tools into the ONEHEALTH platform developed by the MOH.

Burma

- The Government of Burma is accelerating the rollout of multi-month dispensing (MMD) to mitigate disruptions to access caused by COVID-19, with the goal of 100 percent of patients on MMD by June 2020, speeding up from the previous goal of 100 percent of patients on MMD by December 2021. The project is supporting the National AIDS Programme (NAP) in the MMD roll-out by analyzing stock status and pipeline data.
- The project is supporting the NAP and United Nations Office for Project Services (UNOPS) in estimating procurement needs for routine supplies in the context of COVID-19 supply chain delays.

Central America

- The project is coordinating with USAID implementing partners (IPs) including Care and Treatment, Plan International, and PSI to develop strategies for following up on activities that we conduct at the clinic level. With many countries in the region in lockdown, particularly Guatemala, and project staff unable to conduct site visits, the partners have mobilized personnel at each data collection site to provide the information to complete the reports.

Eswatini

- Due to partial lockdown, after an initial hold on routine supportive supervision visits, the project resumed supportive supervision physically and remotely (by telephone) to support PPE and COVID-19 commodity management at the facility level.

Ethiopia

- Supporting the Global Health Security Agenda team in adapting the ESC Playbook to COVID-19.

Haiti

- Established an emergency team to monitor and prevent potential interruptions to the cold chain for ARV and lab products.
- Increasing TO1, TO3 and TO4 commodity deliveries to SDPs to facilitate increased multi-month dispensing (MMD) where applicable to help prevent exposure to and spread of COVID-19 by reducing the number of patient visits to facilities. As of June 1, all health sites in all 10 departments received ARV, lab, opportunistic infections, FP and MNCH commodities for up to 7.5 months of consumption for the majority of products stocked at the project warehouse.

Indonesia

- Collaborated with the Linkages project to support a private transport company to pick up lab specimens for viral load testing. The private company delivers to public labs, improving turnaround time for testing services and mitigating delays related to COVID-19.
- Due in part to delays in orders from India and to avoid disruption in treatment, the project is supporting an accelerated transition of some patients from tenofovir disoproxil fumarate (TDF)/lamivudine/efavirenz (TLE) to single dose tenofovir, lamivudine, and dolutegravir (TLD) or TDF by accelerating local manufacture and procurement.

Kenya

- Participating on the team advising the Kenyan Government on COVID-19 and assisted the National Emergency Operation Centre in quantifying and costing supplies that would be required to attend to approximately 100 COVID-19 cases.

Liberia

- Partnered with FHI360/LINKAGES and the National AIDS and STI Control Program to identify HIV commodity gaps in the 13 HIV high-burden facilities in Montserrado county, which is also a high-burden COVID-19 county, to inform the movement of commodities to these facilities based on OGAC guidance.
- Working with the USAID Mission to redirect funding to support pre-positioning and redistribution of PPE for health workers using existing GHSC-PSM transport mechanisms.
- Replacing in-person health facility visits with phone calls to continually engage with the health facilities.
Coordinating with the National Malaria Control Program to explore remote options for malaria commodity quantification.

Malawi

The project conducted a two-year quantification of lab supplies remotely to prevent in-person contact during COVID-19. The project first conducted a training on the ForLab Quantification 2.0 tool for MOH staff and the national laboratory quantification team, which included installation of the tool and a simulated quantification exercise. The project then added country data to ForLab and the group completed the quantification, which will be reviewed by the MOH.

Nigeria

Due to the shutdown in India causing significant backlogs for exported products, including essential pharmaceuticals, the project faced an urgent need to secure an alternative shipping method for critical HIV/AIDS and malaria commodities. The project secured space on two charter flights, successfully delivering

much-needed antiretroviral (ARV) and artemisinin-based combination therapy (ACT) commodities from India and the United Arab Emirates to Nigeria.

Nepal

In Nepal, GHSC-PSM provides supply chain technical assistance to government entities, including the Ministry of Health. With the arrival of COVID-19 procurements and donations in the country, the Government of Nepal (GON) expressed a desire to track these commodities. In less than three weeks, GHSC-PSM provided remote technical assistance to complete an eLMIS roll-out that had been delayed since November 2018. Using remote communication methods, the project updated the eLMIS for COVID-19 commodity tracking and coordinated with staff in 39 COVID-19 target facilities to install software and train users on the eLMIS. The project also created a COVID-19 dashboard within the eLMIS that the country's COVID-19 Crisis Management Committee is using for decision-making.

Pakistan

With support from the Government of Pakistan, the project assembled a COVID-19 team of supply chain, technology, laboratory and procurement experts. The team designed several tools including:

- [COVID-19 Traveler's Surveillance Management Information System](#)
- [COVID-19 Inventory Management System](#)
- [COVID-19 Procurement Module](#)
- [COVID-19 PPE Online Calculator](#) and [training videos](#)
- [Advanced forecasting calculator](#)
- [Sindh COVID-19 training MIS](#)

Over 130 government staff in Pakistan have been trained on the tools, which are also being used internationally. Nepal's Ministry of Health and Population used Pakistan's COVID-19 PPE Online Calculator for a national quantification. The I+ Solutions Academy of the Netherlands adapted the COVID-19 Forecasting Calculator into an online course titled Quantification of PPE for COVID-19, offered in English, French, Spanish, Portuguese and Russian, with over 400 individuals from 69 countries trained as of May 8, 2020.

Procurement and Supply Management

Guidance for GHSC-PSM Countries

To prevent delays, GHSC-PSM country teams are asked to ensure that supply plans are up to date and month of stock (MOS) statuses are accurate. MOS status will be a key factor in prioritizing urgent orders. For questions related to individual orders, countries should contact their PMU Director.

Status Update and GHSC-PSM Response

- PEPFAR announced that essential PPE may now be procured by implementing partners for HIV clinical services under two conditions:
 - For the protection of, and use by PEPFAR-supported health care providers
 - Locally or regionally, provided that such items are not, and could not reasonably be expected to be, meant for the United States market, including but not limited to, instances where such procurements are needed to ensure continuity of safe and effective implementation of foreign assistance programs.

Implementing partners should ensure that facility and community-based staff providing HIV services are equipped with PPE appropriate to their job duties (e.g., HIV testing, handling of drugs, etc), in accordance with available local guidelines for use of PPE. Partners should consider PPE requirements and needs for community health workers, home visit staff and other community staff according to

national and WHO guidelines for community-based care during COVID-19.

Note: HIV testing (or other direct HCW-patient interaction for HIV services) should not take place where routine adequate PPE is not available, (e.g. gloves or masks for phlebotomy). Further guidance will be forthcoming.

Please see [PEPFAR guidance for PPE procurement \(p. 38\)](#) and [WHO Guidance on Rational Use of PPE for COVID-19](#) for additional details.

- Pharmaceuticals, LLINs, family planning supplies, and diagnostic tests continue to face longer production lead times, logistics delays, and cost increases due to country restrictions and shifting global demand. The project is monitoring this situation and working with suppliers, logistics providers, and country-level and global stakeholders including USAID, the WHO, UNICEF, the Global Fund, and others to mitigate risk within the changing supply chain environment.
- Destination countries are facing various levels of disruption including shutdowns, quarantines, and reduced interstate and international border crossings. The project is working with country offices, local governments, and global stakeholders to move commodities closer to service delivery points, to prepare alternative warehousing and logistics options, and to ensure proper safety and security measures are in place for staff and commodities.

Media

Even under normal circumstances, GHSC-PSM has a strict protocol that staff must follow when approached by the media. Essentially, staff may not engage with the media unless they have written approval from the Mission (if in-country) and USAID/W. Upon receipt of a media inquiry staff should immediately contact:

- [Veena Menon](#), Knowledge Management and Communications Manager, vmemon@ghsc-psm.org and cc [Jane Gotiangco](#), Chemonics Director of Strategic Communications, jgotiangco@chemonics.com

Helpful Resources

GHSC-PSM

- [Approved Commodity List for Purchase with COVID-19 Funds \(please login to ARTMIS to view\)](#)
- [COVID-19 Commodity Quantification and Budget Calculator](#)
- [Emergency Supply Chain landing page](#)
- [COVID-19 Job Aid \(available in English, French and Spanish\)](#)
- [Questions to Consider to Maintain Routine Supply of Public Health Commodities and Support COVID-19 Response \(available in English, French, Spanish, and Portuguese\)](#)
- [Actions to Take Now to Ensure Routine Supplies are Available: COVID-19 Response Recommendations \(available in English, French, Spanish, and Portuguese\)](#)
- [Keeping Supply Chain Workers Safe During a Pandemic \(available in English, French, Spanish, and Portuguese\)](#)
- [Use of Containers for Temporary Emergency Storage: Tips to Mitigate Temperature and Humidity \(available in English, French, Spanish, and Portuguese\)](#)
- [Tips to Optimize Storage during Emergencies \(available in English, French, Spanish, and Portuguese\)](#)

USAID

- [PEPFAR Technical Guidance in the Context of COVID-19 \(updated June 3, 2020\)](#)
- [PMI Technical Guidance in the Context of COVID-19 Pandemic](#)

- [USAID/OHA Call to Implementing Partners](#)
- [USAID Pediatric & Maternal Branch Updates](#)
- [USAID/OHA Quarter I Performance Overview](#)
- [USAID COVID-19 Global Response Fact Sheet #1](#)

WHO

- [WHO Guidance: Tailoring malaria interventions in the COVID-19 response](#)
- [WHO Technical guidance on laboratory testing for COVID-19.](#)
- [WHO Guidance for health workers](#)
- [WHO Rational Use of PPE for COVID-19 Guidance](#)
- [WHO Academy COVID-19 reference app for health care workers](#)