December 2020

CONCEPT NOTE:
Financing USAID's existing COVID-19 TA to Pakistan can help finish achieving visibility efforts

USAID COVID-19 Response:

Under Task Order 1 COVID-19 rapid response, the USAID is globally providing support for strengthening laboratory diagnostics and improving the management of COVID-19 patients. In Pakistan, the USAID funded Global Health Supply Chain Program – Procurement and Supply Management (GHSC-PSM) project, has provided 200 made-in-USA ventilators; surveillance and supply chain systems, biomedical training, human capacity, M&E and four mobile biosafety laboratories are expected to be handed over soon. With USAID support, the project established partnerships with local biomedical and transportation industries, and surveyed 73 COVID-facilities, delivered 200 ventilators at 64 hospitals and trained more than 550 individuals across Pakistan.

There are several COVID 19 vaccine candidates under development, with some of these in phases of human trials. Pakistan is also running a multi country phase III clinical trial of a potential vaccine. Governments all over the world are struggling to procure the COVID 19 vaccine. Pakistan has allocated $250m and signed non-disclosure agreements with various multinationals. Moreover, GAVI has also pledged to provide vaccine for 20pc population which comes to 45 million people in later half of 2021. A PPE procurement management system is already in place with the MoNHSR&C and NDMA with USAID assistance.

TO 3&4 are complementary to USAID TO1 COVID-19 Vaccine Supply Chain Management Response in Pakistan:

The USAID fudned projects have been providing public health supply chain system strengthening support to federal and provincial governments since 2016. In addition to ventilators and laboratory elements of USAID COVID support to Pakistan, it included initially $615,062 for assessment, human capacity, MEL and joint supportive supervision. These MEL funds are expected to reduce to ~$25,000 only given the latest submission. Pakistan LMIS systems is a USAID legacy intervention being used for a number of health products (TO3&4 support specific products) and therefore, we are proposing to establishing systems and caapcity for COVID-19 vaccine forecast, procurement, storage, transportation, temperature and vaccine recipient onitoring (both for first and second doses). During pandemic, we provided technology support for efficient management of COVID-19 procurement and supplies.

1. System Adaptation and Deployment

Under the USAID supported Digital Health and Social Sector Strategy (draft), technical lead of National Institute of Health (NIH)/ MoNHSR&C, the project in-house MIS team will adapt and deployment the COVID-19 Vaccine LMIS throughout Pakistan. This consensus building process would involve extensive consultations with the stakeholders. The LMIS will also entail forecasting and supply planning, procurement, warehousing/inventory management, distribution, and reporting of COVID. The LMIS would enable vaccine tracking and tracing up to last mile and client level for better governance, accountability and systems strengthening. The USAID supported Vaccine Logistics Management Information System (vLMIS) www.lmis.gov.pk (TO4) is the countrywide platform for vaccine and cold chain management for Expanded Program on Immunization and therefore, USAID can capitalize on vLMIS for COVID-19 vaccine including system adaptation, human capacity, joint field monitoring and supportive supervision with all tiers of vaccine delivery and service system. USAID funded client-based D-TALK

system for Insulin for diabetic patients can be easily adapted for COVID vaccine.

2. Use of System and Human Capacity

The project would train the health staff at all levels of application on the use of system and how to upload encrypted client-based information with unique identifiers. Training guides/manuals will be developed and mounted on all health facilities for ready reference and guide.

3. Monitoring, Evaluation and Learning (MEL) / Joint Supervision

The COVID-19 Vaccine LMIS will have multiple analytical data and dashboards of process, output, monitoring and policy levels, with the aim to ensure supply of COVID-19 vaccine. The project team along with the Government officials will conduct need based data driven Joint Field Monitoring visits to provincial, regional and district headquarters.

Estimated Budget Request (two years):

Cost Head	Total Estimated Cost in USD
System adaptation and deployment (complete vaccine visibility solution)	250,000
Use of system and human capacity	370,000
MEL (including joint supervision)	225,000
Grand total cost is USD	**845,000**

Application hosting will be covered through data center TA to the NIH/MoNHSR&C