

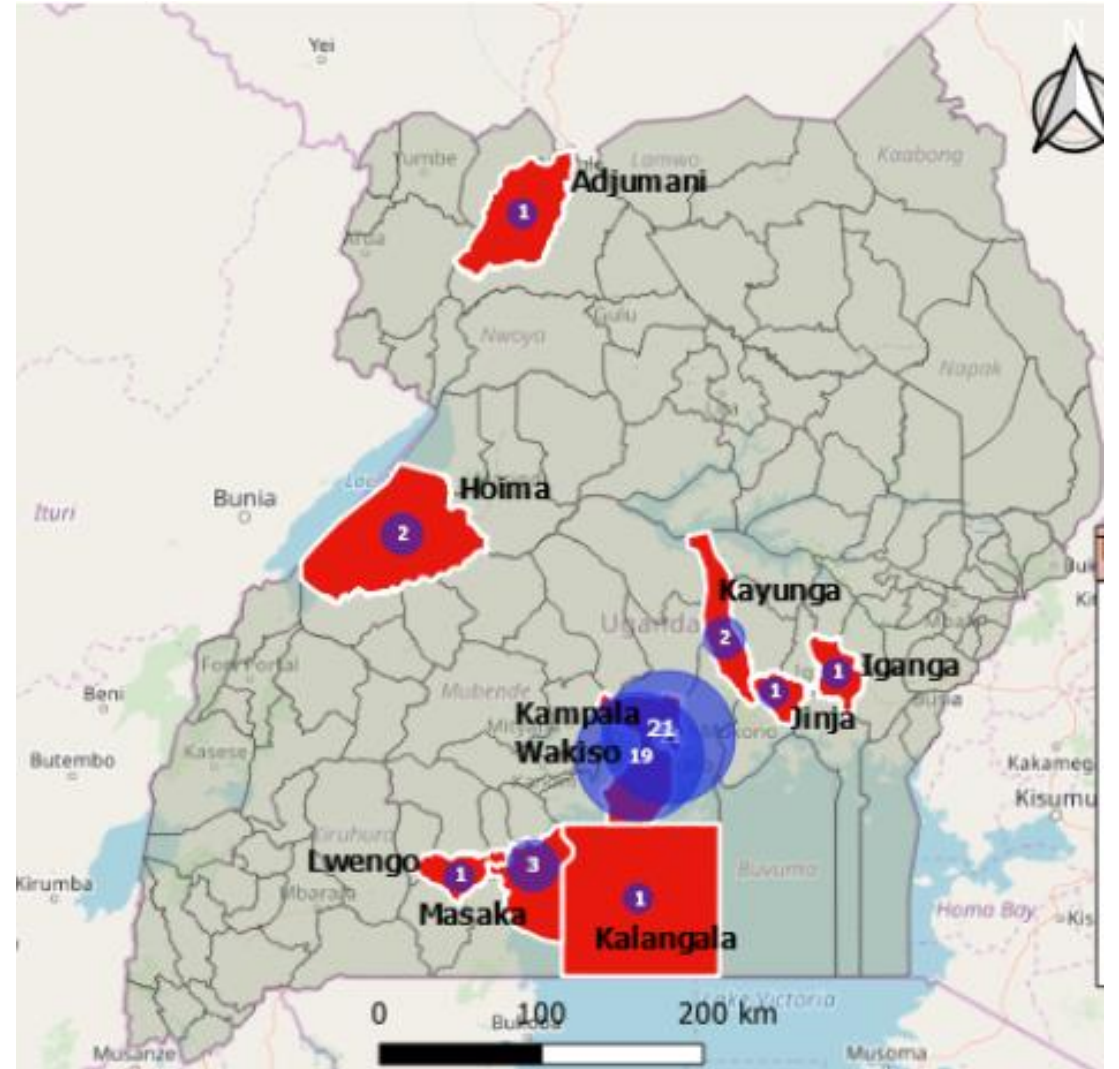
HDP update to LDPG on current situation COVID 19 and budget overview

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Current situation

- Uganda registered the first COVID-19 confirmed case on March 21st, 2020. To date, the country has registered 52 confirmed cases. Most of these are imported cases from countries with high COVID-19 burden.
<https://covid19.gou.go.ug>
- A National Incident Management Structure has been adopted to replace the National Task Force, this is new and still being worked out but critical for a rapidly evolving outbreak like this.
- National COVID Response Plan developed and comprehensive budget being updated to also include committed funds. Gap analysis exercise is ongoing.



Impact of COVID on the health sector

Health Financing

- Sector financing from both GOU and HDP has been affected and funds are being re-programmed to support the COVID response.
- The prices for major essential commodities have also escalated affecting the procurement plans and supplies required in country.

Service delivery:

- Focus has shifted to implementation of the COVID response plan.
- Critical health services potentially affected include reproductive, maternal, newborn and child health, HIV and TB services.

Health Information Systems:

- Reporting challenges for routine health services due to limited access by health workers to facilities.
- Delayed health sector scale up of new functionality of systems (such as the viral load exchange) and EMR across facilities in the country.

Laboratory:

- Significant reduction in sample transportation and all other laboratory work including sample collection and testing for non COVID samples.
- Increased price in diagnostic reagents for other diseases and challenges getting orders in country.

Essential medicines & Commodities

- In country distribution of essential medicines from National Medical Stores and other central warehouses has greatly been affected due to limited movement

Human Resources for Health:

- Movement restrictions have affected health worker productivity across the board- service delivery and reporting
- Affected ongoing efforts to recruit HRH in the districts on replacement as only essential services are to continue during this period.

Impact of COVID on the health sector

- Ministry of Health has developed guidance based on WHO to ensure continued provision of essential services for HIV, TB, Malaria, Immunization, etc.
- Use of electronic systems, e.g. Zoom for communication, virtual meetings, training and mentorship
- Laboratory at Uganda Virus Research Institute has been certified to conduct COVID test
- MOH working with HDP to review the stock status and ensure adequate stock of key health commodities for COVID and essential health services.
 - Efforts are being made to frontload any orders and have them shipped as cargo to ensure 3 or more months of stock in country.
- GOU and HDP are working to meet high demand for PPE, test kits and related supplies for the COVID response amidst the limited global supply.
 - At the decentralized level, HDP through their implementing partners are supporting distribution of health commodities.
- Existing human capacity is being strengthened in various areas of the COVID response from coordination, surveillance, laboratory and sample taking, case management in high dependency and intensive care units.
- GOU is expediting recruitment of ~250 health workers as surge capacity- key cadres e.g. epidemiologists, anesthesiologists, social workers as part of the COVID response.

What is happening with HDPG coordination:

- This response requires *immediate, real-time* response and a *coordinated* response
- HDPs are implementing a system for constant, real-time communication between the National Incident Management Team and the health development partners
 - Resources to the COVID-19 response need to be deployed by the central response team
 - The needs are going to be fast, and urgent; weekly or even twice weekly meetings are not adequate
 - Weekly meetings will still be held to review all requests made, honored, or rejected by HDPs from the response, and to update on unfilled needs
- HDPs are placing a full-time seconded staff (UNICEF contribution) to sit with the MOH team in charge of ensuring continuity of health services
 - Will perform similar role, of immediate real-time information sharing between MOH and partners providing health services outside of COVID-19 response
- MOH is hosting twice weekly 'partner coordination meetings' to help fill the need for updates, and information sharing

Current needs:

- **Advocate for funding of the comprehensive budget for the national COVID response plan.** MOH and HDP need to document and map support at all levels to ensure complementarity of support and avoid duplication.
- **Support GOU make procurements for essential medicines and COVID supplies**
- **Provide good internet connectivity at health facilities** to allow for quick and effective communication using the Zoom platform and ensure continued routine reporting of essential health services
- **Ensure general improvement in facility working environment-** provide adequate PPE and other related commodities to health workers and support waste management infrastructure improvement
- **Support for Oxygen supply limitations at Mulago Hospital and other facilities** even where intensive care beds and ventilators exist, the supply of oxygen is inadequate
- **Monitor continuity of provision of essential health services** and community access to these services given the lockdown.
- **Have a plan to ensure reallocation of GOU and external funds to essential health programs once the COVID pandemic ends.**
- **Medium to long term focus on housing near health facilities** for human resources for health

Overview of the budget for MOH COVID Response Plan (work in progress)

Ministry of Health COVID response plan budget (draft) work in progress. Gap analysis still being conducted

Pillar	Total (USD)	Total (UGX)
Case Management	10,378,579	39,438,598,571
Coordination	691,451	2,627,512,000
Human Resource	30,297,475	115,130,406,072
ICT and Innovation	232,079	881,900,000
Logistics	308,253,676	1,171,363,968,380
Mental Health and Psychosocial Support	411,395	1,563,300,000
Risk communication and community engagement	5,227,162	19,863,215,000
Surveillance	149,484	568,040,000
Total	355,641,301	1,351,436,940,023

Logistics Requirements for the COVID-19 Response

Assumptions

- Case scenario for hard hit countries by the Corona virus
 - Period 6 Months
 - National attack rate – 4% of total population (42 million) = 1,680,000
 - Hospitalization Rate (20%) = 336,000
 - ICU Rate – 5% = 16,800
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- **Medicines and Health Supplies Requirement for 6 months estimated at \$5m**
 - **Disinfectants and Biohazard Management for 6 Months estimated at \$2,600,042**
 - **Oxygen plant update at Mulago not yet included, estimated at \$1,000,000**

Logistical requirements for COVI-19 response (USD)

ITEM	Total amount required	Amount Available	Funding gap (Assumed)	Comments
PPE	39,457,484	4,870,272	34,587,212	Still dealing with global shortage
Laboratory testing	10,728,000	596,600	8,228,920	Includes funding commitment of \$2m from WB, GF, WHO, Jack Ma
General Health Facility Equipment	750,192		750,192	
Health infrastructure	14,085,132		14,085,132	
Medical equipment for ICU 17 referral hospitals	7,145,919		7,145,919	
Equipment for an ICU ward	8,866,050		8,866,050	
Civil infrastructure and energy requirement for ICU at RRHs and identified hospitals	1,676,569		1,676,569	
Other Logistics	22,331,250		22,331,250	
Total	105,040,596	5,466,872	97,671,244	

Committed HDP support: financial and in kind

HDP new funds committed to the MOH COVID response plan*

AGENCY	Pillar to be supported	New funds available (USD)	Comments
World Bank	<u>All pillars:</u> <ul style="list-style-type: none"> Range of strategic COVID and health security interventions in the national plan 	\$27.5 million as allocation from the Global COVID-19 Fast Track Facility	<ul style="list-style-type: none"> \$15 million has already been made available through a Contingent Emergency Response Component under URMCHIP and the balance of \$12.5 millions being processed through a fast track project
Global Fund	<u>Logistics:</u> <ul style="list-style-type: none"> PPE items and lab supplies 	\$4.4 million	<ul style="list-style-type: none"> Generated from grant savings Emergency procurement of commodities
GAVI	<u>Logistics:</u> <ul style="list-style-type: none"> PPE and small equipment 	~\$2.5 million	<ul style="list-style-type: none"> Pending approval Reprogrammed from existing grant
CDC	<u>Coordination, Surveillance, Laboratory, Emergency Operations</u>	\$150,000 new funds so far	<ul style="list-style-type: none"> Reprogrammed from existing grant Masks & gloves also mobilized from PEPFAR in-country supplies
UK		500,000 pounds	
Denmark		\$1,000,000	
Irish Embassy	<ul style="list-style-type: none"> Contribution to WHO to support MOH 	\$896,400 (830,000 EUR)	
GAVI	Contribution to WHO	\$500,000	
WHO		100,000	

Some of the HDP in kind support- Information received to date

Pillar	Agency	Support
Coordination	WHO CDC UNICEF	<ul style="list-style-type: none"> • Functionalizing and maintenance of the Public Health Emergency Operation Center at MOH • Call center support in terms of orientation of call center staff and additional HR support • Support to MOH to develop COVID guidelines and standard operating procedures
Case Management	WHO CDC USAID UNHCR UNICEF	<ul style="list-style-type: none"> • Capacity building for health care workers at national and sub-national level on COVID management • Refurbish and gazette of isolation points in hard-to-reach areas especially targeting refugees
Human Resource	CDC WHO UNICEF	<ul style="list-style-type: none"> • Support public health fellows train health workers in COVID-19 management, surveillance and epidemic investigations • Additional HR / at EOC and regional hubs
ICT & Innovation	UNDP WHO CDC USAID UNICEF	<ul style="list-style-type: none"> • Support for information systems to improve communication and coordination between the central level and RRHs, district hospitals and lower level health centers using online platforms such as zoom technology • ICT and information management, GoData Platform at EOC
Logistics & Laboratory	CDC USAID UNICEF UNHCR CHAI WHO	<ul style="list-style-type: none"> • Procurement and distribution of essential commodities including PPEs, testing kits, etc • Support to Uganda Virus Research Institute and Central Public Health Laboratories for sample testing • Support to the National Sample Transportation Network and delivery of results for the COVID 19 response • Infection prevention and control at laboratory and health facility level • Support to refugee health and foods • WASH and nutrition supplies • Provision of PPE and medical supplies as well as test kits
Risk Communication Community Engagement Mental Health & Psychosocial Support	UNICEF WHO USAID UN WOMEN	<ul style="list-style-type: none"> • Develop risk communication guidelines and SOPs • Support use of the media to air out messages • Support to MOH risk communication and counter misinformation around COVID response • Print and disseminate IEC materials at national and sub-national levels • Community support and mobilization
Surveillance	IOM WHO CDC	<ul style="list-style-type: none"> • Technical assistance for screening and case identification at all major entry points including the international airport and other border points • Support for contact tracing, field epidemiology response

HDP ask to LDPG

- Request MOH leadership to share the comprehensive health sector COVID response workplan budget with commitments and gaps to inform additional HDP in kind and financial support
- Agencies need to confirm their support financial and in kind (costed) as soon as possible
 - request clarification on the commitment
 - Work with liaison / focal points
 - Continuity of services – UNICEF with WHO
 - COVID-19 response – CDC with WHO

THANK YOU
Questions & Discussion