

TC Document

I. Basic Information for TC

▪ Country/Region:	REGIONAL
▪ TC Name:	Support to the Council of Ministers of Health of Central America and Dominican Republic (COMISCA) for COVID-19 Activities
▪ TC Number:	RG-T3680
▪ Team Leader/Members:	Iriarte Carcamo, Emma Margarita (SCL/SPH) Team Leader; Sanchez, Maria Deni (SCL/SPH) Alternate Team Leader; Bermudez Plaza, Neili Carolina (SCL/SPH); Davila Perez, Javier (VPC/FMP); De Dobrzynski, Esteban (LEG/SGO); Dinarte Mendoza, Mauricio Jose (SCL/SPH); Lazo, Juan Carlos (VPC/FMP); Perez Calvo, Rafael Mauricio (SCL/SPH); Velazquez, Gumersindo G. (VPC/FMP)
▪ Taxonomy:	Client Support
▪ Operation Supported by the TC:	.
▪ Date of TC Abstract authorization:	01 Apr 2020.
▪ Beneficiary:	Belize, Honduras, and Nicaragua
▪ Executing Agency and contact name:	Secretaria Ejecutiva Del Comisca, Inter-American Development Bank
▪ Donors providing funding:	Japan Special Fund(JSF)
▪ IDB Funding Requested:	US\$750,000.00
▪ Local counterpart funding, if any:	US\$150,000.00 (In-Kind)
▪ Disbursement period (which includes Execution period):	24 months (execution period included)
▪ Required start date:	May, 2020
▪ Types of consultants:	Individual, firms, and goods
▪ Prepared by Unit:	SCL/SPH-Social Protection & Health
▪ Unit of Disbursement Responsibility:	CID/CES-Country Office El Salvador
▪ TC included in Country Strategy (y/n):	No
▪ TC included in CPD (y/n):	No
▪ Alignment to the Update to the Institutional Strategy 2010-2020:	Social inclusion and equality

II. Objectives and Justification of the TC

- 2.1 On March 11, the Director-General (DG) of the World Health Organization (WHO) declared the outbreak of a novel coronavirus, COVID-19 Public Health Emergency of International Concern, as a pandemic, due to its rapid spreads across the world. The virus has rapidly spread from China to 185 countries and regions. As of April 27, 2020, there are more than 2,900,000 confirmed cases of COVID-19 across 185 countries, with 205,923 deaths. In Latin America and the Caribbean, over 166,000 confirmed cases of COVID-19 have been reported spanning 25 countries and 10 territories. The number of cases, deaths, and affected countries are expected to continue to rise. The potential health and economic impact of COVID-19 on the Central American territories can be devastating. Furthermore, tourism, migration, and market interconnectivity can facilitate rapid spread to and within the Region.

- 2.2 The rapid increase in the number of COVID-19 cases in the region is putting pressure on health systems, which will likely compromise their ability to provide a timely, high-quality response to the pandemic. At a recent meeting of the Ministries of Health of the Central American region on March 26th, several countries indicated their limited capacity to manage (detect, isolate, treat, contact trace) COVID-19 and voiced their concerns that without this capacity, the widespread transmission of COVID-19 can potentially translate into large numbers of people needing medical care, overwhelming their already strained national health systems. To date, COVID-19 cases have been reported in all Central American countries. The rapidly evolving situation now requires readiness and rapid response. In addition to a growing demand for testing as the number of cases of COVID-19 increases, the countries also need more investment to close gaps in their preparedness and response capacity, take key measures to contain the transmission, improve detection rates, respond to the importation of cases and local transmission, increase their capacity for surveillance and update their pandemic preparedness plans, as a matter of urgency.
- 2.3 **The general objective** of the TC is to support the implementation of the [Regional Contingency Plan for COVID-19](#)¹, led by the Executive Secretariat of the Council of Ministers of Health of Central America and Dominican Republic (SE-COMISCA) as delegated by seven Heads of State through a Regional Declaration² to respond to the COVID-19 pandemic. The TC will provide technical assistance and financing to beneficiary countries for detecting, diagnosing, treating and reporting COVID-19 cases. This TC supports two out of four of the Strategic Lines of Actions of the Regional Contingency Plan: the First Strategic Line “Health and Risk Management” and its Component 1.2 for case management, Component 1.4 for access to medicines, medical devices, and other sanitary products, through the Joint Negotiation of COMISCA®. Interventions proposed in this TC are closely aligned with the recommendations made by the WHO/Pan American Health Organization (PAHO) for the COVID-19 strategic preparedness and response at the in-country plan level. Aggregated procurement facilitates higher volume of demand, which is more attractive to providers, especially in a context of broken chains of production and distribution. SE-COMISCA offers then, economy of scale, lower prices and experience in joint negotiations of prices. SE-COMISCA has 10 years of experience in joint negotiations of prices and as of today the savings of the 8 country members using this scheme are around US\$93 million. Only between 2018 y 2019 savings are around US\$23 million.³
- 2.4 Under the Salud Mesoamerica and the Regional Malaria Initiatives, IDB has coordinated with SE-COMISCA the provision of technical assistance to countries of this region. Under normal circumstances, SE-COMISCA conducts joint negotiation of prices of supplies, medicines, and equipment consolidating requests from at least three countries. In the context of the COVID-19 pandemic, an emergency decree⁴

¹ Aimed at complementing national efforts for the prevention, containment, and treatment of COVID-19 and other rapidly spreading diseases. Document approved by SICA in March 2020.

² Declaración de los Jefes de Estado y de Gobierno de Belize, Costa Rica, Guatemala, Honduras, Nicaragua, Panamá y República Dominicana ante la pandemia del COVID-19, March 2020.

³ Source: SE-COMISCA Biannual report, 2019.

⁴ SE-COMISCA as one of the implementors of the Regional Contingency Plan will apply the provisions of Art. 56 and Art. 57 of the COMISCA Regulation 02-2017 called “Regulation for the COMISCA Joint Negotiation of medicines, medical devices and other goods of health interest for the member states of SICA”, to expeditiously conduct Exceptional Negotiations of the necessary supplies for the prevention, containment, and treatment of COVID-19. Likewise, Article 57 allows the purchase in exceptional cases

allows SE-COMISCA not only to negotiate prices but also to purchase items related to COVID-19 on behalf of at least two countries. The Bank, through its FMP division, has provided no objection to this mechanism as one option for regional and consolidated or aggregated procurement for COVID-19. This TC will, therefore, support the component 1.4 of the Regional Contingency Plan. A digital tool will be also developed to collect data in real-time to improve the surveillance system and the decision making to respond to the pandemic.

- 2.5 **Strategic alignment.** This TC is consistent with the Second Update to the Institutional Strategy (UIS) (AB-3190-2) as it is strategically aligned with the development challenges of: (i) social inclusion and equality, by supporting the regional inter-governmental collaboration to explore regionally integrated efforts to address common health problems; and (ii) productivity and innovation by increasing and maintaining the competitiveness of each participating country and at the same time, countries of the CID region. The TC will also contribute to the Corporate Results Framework 2020-2023 (GN-2727-2) by supporting the strengthening of health institutions in the CID region. In addition, the TC is squarely aligned with the following priority actions set out in the Health and Nutrition Sector Framework Document (GN-2735-7) by: (i) improving population health by supporting countries' efforts to strengthen their preparation and response capacity to address public health emergencies through fostering greater efficiency in the mobilization, pooling, and use of resources and strengthening key sector management capacities, health intelligence, and intersectoral coordination; and (ii) strengthening partnerships and promoting joint actions in supporting systems for health surveillance and control of public health events with COMISCA based on recommendations by PAHO/WHO.

III. Description of activities/components and budget

- 3.1 According to the WHO guidelines, any preparedness, readiness and response plans for COVID-19 should be focused on the following strategic lines: (i) Slow and stop transmission, prevent outbreaks, and delay spread; (ii) Provide optimized care for all patients, especially the seriously ill; and, (iv) Minimize the impact of the epidemic on health systems, social services, and economic activity. This TC will support countries of Central America, specifically Belize, Honduras, and Nicaragua in their efforts to stop transmission of the COVID-19. SE-COMISCA will be responsible for executing the Component 1 and project execution, and IDB will be responsible for executing the Component 2.
- 3.2 **Component 1: Enhancing critical preparedness, readiness, and response actions (US\$460,000).** This component will increase the capacity to detect and manage COVID-19 patients⁵; health providers of the hospital level of beneficiary countries will increase their competences and capacities to manage cases. Contents of the training are operational guidelines (already developed by PAHO/WHO); and flowcharts, and protocols for clinical management which will be developed by SE-COMISCA using the in-kind counterpart funding. Training will be conducted virtually through current platforms available. This component will also fund the procurement of medical devices, tablets and Personal Protection Equipment (PPE) for the health

of medicines, medical devices, or other goods of sanitary interest, for the SICA Member States. in case any member needs to execute funds received at the regional level from multilateral cooperation or grants.

⁵ As detailed in SICA Regional Contingency Plan, Axe 1, Component 1.2, action 3, it is needed to promote the supply of PPE, according to national protocols.

providers in order to be able to detect and manage COVID-19 cases with less risk of transmission. This component will also finance the additional costs SE-COMISCA will have to negotiate, contract, monitor the delivery and set quality control measures of goods procured.

- 3.3 Component 2: Strengthening real-time disease surveillance and response (US\$261,000).** This component seeks to support the Ministries of Health of Honduras and Nicaragua⁶ to implement mHealth tools to improve the collection of cases and contact information within hospitals and health centers, based on WHO/PAHO guidelines.⁷ This will result in more accurate and timely data for decision making at the national and sub-national levels. Without this data, it is impossible to make critical decisions regarding staffing, inputs, patient flow, and quality of care. This component will finance: (i) the development of the digital application (APP) which will contain two main modules: the first for data collection, visualization and report of information; and the second for the development of flowcharts and protocols for clinical management. Individual consultants will be hired to develop the APP; (ii) capacity building on competencies for clinical management and use of the digital tool for data management; and, (iii) connectivity as required. Technical services include the programming adjustments of a new digital tool and open-source digital health tool created by the WHO, CommCare, and DHIS2. All technical materials created will be replicable at the regional level and included in +Digital and follow the digital development principles endorsed by IDB in 2018.
- 3.4 Sustainability.** To ensure sustainability: (i) all online training materials/videos will be available for further use and scalability with the other State members of COMISCA; (ii) The Central American Integration System (SICA)/SE-COMISCA has committed its political support to encourage the countries to provide follow-on funding for the surveillance activities.
- 3.5** The total cost of this TC will be US\$900,000, of which US\$750,000 will be financed by the Japan Special Fund (JSF) and US\$150,000 corresponds to in-kind counterpart resources. These in-kind contributions cover the salaries of the SE-COMISCA personnel for: (i) the negotiation, procurement and follow up of the goods; (ii) developing the flowcharts, protocols for case detection and management; (iii) overall project management. The total execution and disbursement period will be 24 months, activities of component 1 will be executed in the first 9 months after eligibility and those of component 2 will be executed in about 18 months. For execution of the auditing and evaluation, 6 months have been planned.

Indicative Budget in (US\$)

Component	Component and Activities	IDB/JSF Fund	Local counterpart (In-kind)	Total
Component 1: Enhancing critical preparedness, readiness and response actions	Belize -procurement of supplies and equipment	130,000	-	130,000
	Honduras -procurement of supplies and equipment	175,000	-	175,000
	Nicaragua -procurement of supplies and equipment	132,000	-	132,000
	Expenses of SE-COMISCA to organize, receive, and evaluate the suppliers offer	8,000	60,000-	68,000

⁶ In Belize this activity will be supported through a grant from IDB LAB.

⁷ [WHO's Health System Challenges of Digital Health Interventions.](#)

	Development of flowcharts and protocols for case management	0	90,000	90,000
	Data collection of cases and management through technological equipment - tablets	15,000	-	15,000
Component 1. Sub-total		460,000	150,000	510,000
Component 2: Strengthening real-time disease surveillance and response	Development and validation of the digital tool by individual consultants	184,000		184,000
	Training of health providers in the use of the APP modules including flows and protocols	41,000		41,000
	Host services for data storage and on-line updates (24 months x 3 countries)	36,000		36,000
Component 2. Sub-total		261,000	90,000	351,000
Other costs: Project administration.	Financial Audit	10,000		10,000
	Evaluation	4,000		4,000
	Coordination and management expenses for 24 months	15,000		15,000
Other costs. Sub-total		29,000		29,000
Total cost		750,000	150,000	900,000

IV. Executing agency and execution structure

- 4.1 The SE-COMISCA will be the principal Executing Agency for the TC and is accountable for Components 1 and project administration. SE-COMISCA will require an estimation of PPE [and related supplies from the beneficiary countries], consolidate the demand and then negotiate with the suppliers for procurement. Once the negotiation ends, the suppliers will dispatch the PPE and related supplies to the countries, the Ministries of Health will receive the goods at the point of service. SE-COMISCA will make a payment for the goods received based on contract conditions and will be accountable for confirming, verifying, and monitoring in-country quality check. SE-COMISCA has professional staff and key operational and administrative tools in place to implement these components.
- 4.2 Joint Negotiation of COMISCA® is an option for aggregated procurement acknowledge by FMP as described in paragraph 2.4. SE-COMISCA is familiar with the Bank's reporting tools and the Bank's financial management and procurement procedures and has proven to be adept at (i) managing TC resources, its implementation schedule and financial plan; (ii) preparing Terms of Reference and bidding documents; (iii) conducting selection processes and awarding of contracts; and (iv) monitoring contracts' execution. The designated focal point at the IDB is Emma Iriarte, Principal Health Sector Specialist (SCL/SPH) and project team leader who will be responsible for project supervision.
- 4.3 The project will benefit from the synergies within the existing administrative structure at SE-COMISCA which currently manages the following IDB funded TCs: ATN/OC-17785-RG (Efficient Health Systems: Roadmap for Disease and Death Reduction for the 2030 Sustainable Development Agenda of the Central American Integration System (SICA) Region) and ATN/MM-17487-RG (Results-Based Financing of Regional Entities in Support of the Regional Malaria Elimination Initiative (RMEI) in Mesoamerica and the Dominican Republic). SE-COMISCA also continues to work with countries and other partners [besides IDB] as CABI, PAHO, and CDC towards a harmonized regional response.

- 4.4 Due to the technical capacity and implementation experience of SPH in e-health platforms, CommCare and DHIS2 through the Salud Mesoamerica Initiative, IDB would implement the second component. SE-COMISCA agrees that IDB will be the co-executing agency responsible for executing component 2 in order to speed-up the design and implementation of the digital application. IDB's procurement (under the Salud Mesoamerica and Regional Malaria Elimination Initiative) has developed an expertise to contract, direct and monitor the consultants for the development, validation and implementation of regional and in-country digital tools, and flowcharts and protocols for clinical management following WHO guidelines.
- 4.5 **Procurement.** Goods, non-consulting services, and consulting services for Components 1 and project administration will be in accordance with the Policies for the Procurement of Goods and Works financed by the IDB (GN-2349-15) and the Policies for the Selection and Contracting of Consultants financed by the IDB (GN-2350-15). The TC will also benefit from the special measures under the Policies for the Procurement of Goods and Works, and the Policies for the Selection and Contracting of Consultants financed by the IDB for the immediate public health response authorized by the Board of Executive Directors in response to the COVID-19 Pandemic Outbreak (GN-2996).
- 4.6 The Bank, as executor, will be responsible under Component 2 for the selection and hiring of the consultants and executing activities under Component 2 following Bank's established hiring and procurement methods (AM-650 Complementary Workforce-CW). The financial management of the operation will be governed by the provisions of the Financial Management Guide for Projects Financed by the IDB (OP-273-6).
- 4.7 **Monitoring and Evaluation.** SE-COMISCA and the bank will monitor the output and outcome indicators as set out in the Results Matrix and a project evaluation report will be completed within six (6) months after project completion. IDB will monitor the execution of the activities under this TC using administrative data generated by the project execution plan, disbursement plan, technical supervision, and the Audited Financial Statements and Final Audited Financial Statement which will be submitted by the executing agency to IDB. The project team will also share a progress report with the IDB Country representative, CID general manager, and FMP every six months. This progress report will be discussed and consolidated along with COVID-19 portfolio reformulation status each SPH specialist presents. IDB country offices will also share reports with the corresponding Embassy Offices in each country.
- 4.8 Regarding Nicaragua, the MOH of Nicaragua will request to IDB country office no-objection of the goods to be acquired: inputs/ medicines/ equipment to be delivered to hospitals. A technical annex will be attached including: (i) priority items; (ii) health units list and quantity of equipment's to be distributed in the health networks; (iii) a table with information about other financing sources acquiring this same inputs, so IDB can coordinate appropriately with the others financiers/ donors; (iv) the procedures and timetable for the complete distribution of goods; (v) the timetable of reports which will include the evidence of the goods delivered and received at the points of service. IDB will issue its no-objection and sent to SE-COMISCA the list of inputs to start the procurement process. IDB reserves the right to include the assessment and audit of the whole process, from contracting to deliver of goods in the external audit.
- 4.1 **Visibility of JSF.** In keeping with Annex 1 of the April 2016 Operating Guidance for the JSF, once the TC is approved, a joint press release will be issued by the Bank and Government of Japan through the Japanese Embassy of the participating Countries,

and will include El Salvador, where SE-COMISCA is based. The press release will include the financial contribution from the Government of Japan and provide a summary of the project objective and activities of the TC that will address COVID-19 in the participating countries.

V. Major issues

- 5.1 Given the time-sensitive nature of this COVID-19 public health emergency, it is critical that SE-COMISCA carry out the project activities within rigorous timelines. This requires solid project planning and execution; SE-COMISCA has the experience and has managed projects like this on an annual basis up as the Joint Negotiation of Prices is a continuous activity managed but this Secretariat. The Ministers of Health have delegated this mandate to the SE-COMISCA. This unit will report directly to the Executive Secretary which will facilitate rapid decision making and project implementation.
- 5.2 Due to the higher global demand of COVID-19 inputs and broken chain of production and distribution, there is a risk of important delays in inputs availability; consequently, delaying the TC implementation. Mitigation actions include permanent monitoring of suppliers and its stocks as well as close coordination with PAHO and other procurement entities.
- 5.1 Given the in-house expertise of the Bank regarding digital tools in the health sector, SE-COMISCA agrees with IDB as the executor of component II. The Bank will also provide close project management and procurement support through a hands-on approach and active TC supervision.

VI. Exceptions to Bank policy

- 6.1 Given this public health emergency situation and recognizing that the time-sensitive nature of this COVID-19 pandemic requires critical inputs to enhance the capacity and response time at the Hospital level, two exceptions are requested: (i) to the procurement of goods which exceeds 30% of the overall budget is justified in keeping with TC Policy (GN-2470-2, Annex I, Par. 2.4); and (ii) the counterpart funding to this TC which is under 20% (Japan Special Fund (JSF), including the Japan Quality Infrastructure Initiative (JQI), and Japanese Trust Fund for Consultancy Services (JCF) Operating Guidance for Application and Implementation, No.11.

VII. Environmental and Social Strategy

- 7.1 According to the Environmental and Safeguards Compliance Policy (OP-703), Indigenous Peoples (OP-765), and Gender Equality (OP-270), this TC is classified as category "C". The TC will not finance infrastructure or civil works. The proposed interventions are expected to cause minimal to no negative impacts and are expected to align with the WHO/ PAHO and CARPHA guidelines for the COVID-19 strategic preparedness and response plans in each country. See filters [SPF](#) and [SSF](#).

Required Annexes:

[Request from the Client 40878.pdf](#)

[Results Matrix 52139.pdf](#)

[Terms of Reference_78780.pdf](#)

[Procurement Plan_43813.pdf](#)