USAID GLOBAL HEALTH
SUPPLY CHAIN PROGRAM
Procurement and Supply Management

EMERGENCY SUPPLY CHAIN PREPAREDNESS
in the Context of
COVID-19
Welcome, introductions, and objectives of today’s session

Review of the global supply chain impact of COVID-19

Function and highlights of the Emergency Supply Chain Playbook with COVID-19 country updates and a deeper dive into components of emergency supply chain response

Questions and discussion around emergency supply chain response

WELCOME!
Your presenters today

Presenters:

Netsy Woldesemait, GHSC-PSM Burundi Manager and PSM ESC Playbook Coordinator

Matt Craven, MD – Partner & Infectious Diseases Lead, McKinsey & Company

Voice from the field – Parfait Edah, GHSC-PSM Burkina Faso Country Director
Global supply chain impact of COVID-19
## Global Pharmaceutical Supply Chain Impacts of COVID-19

<table>
<thead>
<tr>
<th>Supply</th>
<th>Transportation</th>
<th>Resulting Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduced manufacturing output</td>
<td>Increasing competition between health supply chains and commercial demands for transport</td>
<td>If COVID-19 continues to spread, delays and shortages of pharmaceuticals are likely, given lean supply chains globally and minimal storage of key inputs in factories</td>
</tr>
<tr>
<td>Hoarding of key starting materials and finished pharmaceutical products</td>
<td>Reduction in airline operations</td>
<td></td>
</tr>
<tr>
<td>Quality testing backlogs</td>
<td>Congestion and delays at ocean ports</td>
<td></td>
</tr>
</tbody>
</table>

**GHSC-PSM Supply Chains**

In-country stock levels remain secure for all GHSC-PSM commodities.

Headquarters and country offices are working to shift delivery methods and/or arrival dates.

The U.S. FDA has announced the first drug shortage due to COVID-19
Manufacturing & supply chain

Critical medical supplies manufacturers face challenges scaling up production to match demand

There is a major supply shortfall in affected areas, where healthcare needs are compounded by general public ordering surgical masks, seeking to maximize preventive measures

- Frontline response requires 7% to 10% of total market capacity to protect China's healthcare workers
- Stockpiles of advanced medical masks (N95 masks) are depleted; there is a 4- to 6-month backlog as global stocks are insufficient to meet the needs of frontline healthcare workers
- City of Xiaogan - the second-worst hit city in Hubei - faces a shortfall of 24,000 protective gear, 60,000 masks, as well as 15,000 goggles and face shields

Typical supply is from China and Taiwan, but many factories in affected areas have not yet reopened due to restrictions

- Governments have restricted exports of masks, instructing companies to prioritize domestic need
- Prestige Ameritech, a Texas company, received orders from governments of Hong Kong, Singapore, and Taiwan
- Chinese and Taiwanese manufacturers typically source parts for masks and respirators from variety of countries so limitations on transport in and around China will prevent quick turnaround
- Some companies have taken the decision to only supply masks to medical professionals, given limited stock of PPE and high demand among non-medical staff

Alternative supply is from Western companies in USA and Europe, but are facing challenges to ramp up their production

- Small players are ramping up production and using automation (e.g., Pardam, Czech company sold out of entire stock of 2000 masks in 1 week)
- Case study: Kolmi Hopen, a manufacturer in France, makes about 170 million masks a year, but received orders for a half a billion in first week of February

Source: Press research

USAID GLOBAL HEALTH SUPPLY CHAIN PROGRAM - Procurement and Supply Management
A strong supply chain is a prepared supply chain while COVID-19 presents unique challenges

Major areas of ESC preparedness and response. Under these areas are key elements involved in building in-country emergency supply chain preparedness capability. The journey of implementing this capability will involve doing work across each of these elements.

<table>
<thead>
<tr>
<th>People and processes</th>
<th>Commodity planning</th>
<th>Logistics and transport</th>
<th>Transition &amp; other special considerations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clear structures of governance, accountability, and processes that enable the esc to function</td>
<td>Pre-defined commodities that the esc will be responsible for and plans for how to get them</td>
<td>Systems for how to store, move, and track commodities to get them where they need to go</td>
<td>Plan for end of the response and additional considerations</td>
</tr>
</tbody>
</table>

**Governance and organizational structure:**
- Need for cross border collaboration

**Triggers:**
- Clear protocols to provide guidance needed
- Workers instructions on how to protect themselves

**Financing:**
- Pressure test scenarios to define resources needed in this situation, inc. potential budget items to deprioritize

**Commodity forecasting:**
- New commodity list required
- Case forecasting difficult rapid evolution of spread

**Procurement and sourcing:**
- Potential global stock-outs due to higher demand
- Supply chain disruption from China factories shutdowns

**Stockpiling:**
- Risk of panic behavior depleting initial stockpiles

**Warehousing and storage:**
- Transition & other special considerations
  - Long term consequences of COVID-19 unknown – Tracking of routine services disruption needed
  - Risk of discriminatory behaviors

**Transport and logistics:**
- Rapidly changing nature of the epidemic

**Data visibility:**
- Logistical challenges may occur due to the increasing number of travel restrictions, increasing costs, labor shortage (e.g. staff not presenting because of fear of contagion), etc.
Highlights of the emergency supply chain materials
Emergency Supply Chain (ESC) materials

1. Best Practices Report
2. ESC Playbook
3. Simulation Exercise
Best practices in supply chain preparedness for public health emergencies

- A review of best practices in preparedness from historical health events, based on case studies, literature, and interviews from technical experts

- Topics include:
  - *One health* - human, animal, environmental considerations
  - Country-centric approaches
  - Landscape assessments
  - Governance, financing, and personnel
  - Emergency protocols
  - Emergency procurement and supply chain
  - Pitfalls to avoid
  - References to resources
Welcome to your Emergency Supply Chain Playbook!
One size does not fit all: The playbook was designed for customization

Variations of the Playbook:

1. **General Playbook**: A baseline set of materials to cover essential competencies in emergency supply chain management.

2. **Customized Country Playbook**: 16 countries have customized the baseline materials for their supply chain and public health contexts to facilitate implementation and eventual country ownership and adoption.
ESC Playbook materials

**A** Management Checklist for ESC lead, summarizing key outputs from each part of the emergency supply chain to track completion and to maintain preparedness

**B** ESC Preparedness Overview for senior leaders, providing introduction to emergency supply chain concepts and what the work of preparing emergency supply chains entails

**C** Technical User Guide providing detailed technical instructions and templates to assist the ESC core team members, summarizing all the content necessary to strengthen the emergency supply chain over ~4-6 months. The manual provides step-by-step implementation guides and tools to support capability-building across each of the emergency supply chain functions. Tools are in Excel on Memory Key.

**D** Response Job Aids for any actors involved in a response, providing a “crash course” on disease overview, supply chain considerations, and response protocol for priority diseases

**E** Response Quick Guide for all ESC core team members, summarizing response protocols under each supply chain function to put in action when an outbreak occurs.
Response components

**Disease Job Aids:** Disease-specific cards to help ESC staff prepare supply chains at the outbreak of a disease. Includes checklist of commodities for each disease, ESC protocols, and contact information. To be used by all levels of ESC staff during an emergency response effort. *Example below.*

**Response Quick Guide:** Reference for ESC staff protocols to respond during an outbreak and/or emergency. Includes the action and checkbox, person responsible, and timeframe. To be used by all levels of ESC staff during an emergency response effort. *Example below.*

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**Ebola Supply Chain Job Aid**

**Description:** Ebola is a severe form of hemorrhagic fever. Outbreaks have occurred sporadically and are associated with significant human suffering and high mortality rates. This disease is not new, but understanding its impact and management is key to responding in an effective manner.

**SUPPLY CHAIN CONSIDERATIONS**
- MS access to light, heat, humidity, simple infrastructure, and physical access
- Limited access to medical/surgical equipment with limited infrastructure
- Limited access to medical/surgical equipment with limited infrastructure

**LABORATORY TEST EQUIPMENT AND REAGENTS**
- Limited access to medical/surgical equipment with limited infrastructure
- Limited access to medical/surgical equipment with limited infrastructure

**HEALTH FACILITIES INFRASTRUCTURE AND EQUIPMENT**
- Limited access to medical/surgical equipment with limited infrastructure
- Limited access to medical/surgical equipment with limited infrastructure

**WASTE AND SANITATION**
- Limited access to medical/surgical equipment with limited infrastructure
- Limited access to medical/surgical equipment with limited infrastructure

**MEDICAL EQUIPMENT**
- Limited access to medical/surgical equipment with limited infrastructure
- Limited access to medical/surgical equipment with limited infrastructure

**BIOLOGICALS**
- Limited access to medical/surgical equipment with limited infrastructure
- Limited access to medical/surgical equipment with limited infrastructure

**MEDICINES**
- Limited access to medical/surgical equipment with limited infrastructure
- Limited access to medical/surgical equipment with limited infrastructure

**PERSONAL PROTECTIVE EQUIPMENT (PPE)**
- Limited access to medical/surgical equipment with limited infrastructure
- Limited access to medical/surgical equipment with limited infrastructure

**RESPONSE QUICK GUIDE**

**ACTION**
- Get input from the LOC Planning section regarding the list of commodities required and their quantities
- Reach out to the HCIT team to know which quantities of which commodities the provider can supply
- Identify the needs for procurement, based on the gap between the input from the LOC Planning section and the DCHS's stock
- Contact all suppliers identified in the Supplier Database to negotiate agreements and order the adequate quantities
- Work with suppliers to identify any potential gaps or bottlenecks in terms of available quantities and delivery delays
- Refer to the International Partners' Invention Protocol to mobilize the remaining commodities among international partners in case of capacity gap with the suppliers
- Provide suppliers with necessary customs protocols to follow
- Maintain clear documentation of all steps in the procurement process, including inspection and documentation of goods received
- Increase limits of approval and authorization and check signing limits for the purchasing
- Support the requirement for multiple quotes, public bidding procedures and authorize single source purchases
- Update the Procurement Database tracker in the playbook, to document any additional information that you gathered on suppliers

**RESPONSIBLE**
- Procurement team
- Procurement team
- Procurement team
- Procurement team
- Procurement team
- Procurement team
- Procurement team
- Procurement team
- Procurement team

**TIME FRAME**
- Day 1
- Day 1
- Day 1
- Day 1
- Day 1
- Day 1
- Day 1
- Week 1
- Week 1

**COMMODITY PLANNING**

**RESPONSE QUICK GUIDE**

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- Procurement team

**TIME FRAME**
- Day 1
- Day 1
- Day 1
- Day 1
- Day 1
- Day 1
- Day 1
- Week 1
- Week 1
### Supply chain protocols and contacts

#### Essential ESC Protocols

<table>
<thead>
<tr>
<th><strong>IMMEDIATELY</strong></th>
<th><strong>ONGOING</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>- <strong>Activate emergency supply chain organizations.</strong> Contact all people identified on emergency supply chain organization chart.</td>
<td>- <strong>Update plans for emergency supply chain response.</strong> Technical leads for procurement, transport, and storage should continually update plans with new information.</td>
</tr>
<tr>
<td>- <strong>Arrange a meeting with all stakeholders.</strong> Make contact with emergency supply chain partners and regional counterparts.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Hold initial meeting with EOC logistics function</strong> to make sure the emergency supply chain lead and the EOC logistics function coordinate.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Plan emergency supply chain response.</strong> Technical leads for procurement, transport, and storage should make detailed plan for their areas and coordinate with relevant partners.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Activate transport.</strong> Contact emergency transporters to activate agreements in place on emergency supply chain transport.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Eliminate customs bottlenecks.</strong> Contact customs to activate emergency customs procedures expediting emergency supplies.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Use stockpiles.</strong> Release stockpiled commodities to affected areas.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Contact suppliers and resupply.</strong> Contact suppliers to activate agreements in place and immediately begin replenishing stocks.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Prioritize emergency over routine supply chain.</strong> Follow protocol that emergency supply chain takes precedence over routine.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Liaise with leadership and partners to secure funding.</strong> Secure funding for emergency supply chain from response reserve fund.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Ensure ESC safety.</strong> Follow security and safety protocol for all supply chain operators.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Dispose carefully.</strong> Follow waste management protocol.</td>
<td></td>
</tr>
<tr>
<td>- <strong>Resupply stocks.</strong> Contact suppliers to replenish stocks.</td>
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</tr>
</tbody>
</table>

#### In-country ESC contacts

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- [ ]
- [ ]
## Response Quick Guide – Examples of developed protocols

<table>
<thead>
<tr>
<th>ACTION</th>
<th>RESPONSIBLE</th>
<th>TIME FRAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify necessary commodities based on disease specifications and</td>
<td>EOC Operations Section</td>
<td>Day 1</td>
</tr>
<tr>
<td>commodities database, confirming with experts, and determine “indicator”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>commodities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use the ‘Response Scenario’ tracker to forecast initial quantities</td>
<td>EOC Operations Section</td>
<td>Day 1</td>
</tr>
<tr>
<td>required depending on the type of outbreak (disease, number of</td>
<td></td>
<td></td>
</tr>
<tr>
<td>projected cases)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Convene the EOC Operations Section to validate the forecasted</td>
<td>EOC Operations Section</td>
<td>Day 2, Ongoing</td>
</tr>
<tr>
<td>quantities and make any adjustment, if necessary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Get input from the EOC Planning section regarding the list of</td>
<td>Procurement Lead</td>
<td>Day 1</td>
</tr>
<tr>
<td>commodities required and their quantities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reach out to the Stockpiling team to know which quantities of which</td>
<td>Procurement Lead</td>
<td>Day 1</td>
</tr>
<tr>
<td>commodities they can supply</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increase limits of approval and authorization and checks signatory</td>
<td>Procurement Lead</td>
<td>Week 1, Ongoing</td>
</tr>
<tr>
<td>limits for purchases</td>
<td></td>
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</tr>
<tr>
<td>Identify the relevant permanent and temporary storage and warehouses</td>
<td>Logistics &amp; Transport</td>
<td>Day 1, Ongoing</td>
</tr>
<tr>
<td>to use, depending on their geographical location, their capacity</td>
<td>team</td>
<td></td>
</tr>
<tr>
<td>characteristics (e.g. cold chain)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Call identified permanent &amp; temporary warehousing and storage</td>
<td>Logistics &amp; Transport</td>
<td>Day 1, Ongoing</td>
</tr>
<tr>
<td>contacts to share emergency response plan and ensure they are</td>
<td>team</td>
<td></td>
</tr>
<tr>
<td>properly preparing capacity (e.g., clearing waste and designating</td>
<td></td>
<td></td>
</tr>
<tr>
<td>emergency storage space) and get their available capacity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prepare the distribution plan based on the needs expressed by the</td>
<td>Logistics &amp; Transport</td>
<td>Day 1, Ongoing</td>
</tr>
<tr>
<td>planning section and procurement leads</td>
<td>team</td>
<td></td>
</tr>
<tr>
<td>Contact Customs office to activate agreements for expedited goods</td>
<td>Logistics &amp; Transport</td>
<td>Day 1</td>
</tr>
<tr>
<td></td>
<td>team</td>
<td></td>
</tr>
<tr>
<td>Activate coordination mechanisms with other relevant sectors (e.g.</td>
<td>Logistics &amp; Transport</td>
<td>Day 1</td>
</tr>
<tr>
<td>Ministry of Transport, Ministry of Defense, etc) to help unload cargo</td>
<td>team</td>
<td></td>
</tr>
<tr>
<td>at airport/seaports</td>
<td></td>
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COVID-19 Supply Chain Job Aid

**Description:** Clinical presentation among reported cases of COVID-19 varies in severity from asymptomatic infection or mild illness to severe or fatal illness. Some reports suggest the potential for clinical deterioration during the second week of illness. Acute respiratory distress syndrome (ARDS) developed in 17–29% of hospitalized patients, and secondary infection developed in 10%. Among hospitalized patients with pneumonia, the case fatality proportion has been reported as 4–15%. No specific treatment for COVID-19 is currently available. COVID-19 is caused by infection with SARS-CoV-2 virus, which is a beta-coronavirus, like MERS-CoV and SARS-CoV. Frequently reported signs and symptoms include fever, cough, myalgia or fatigue, and shortness of breath at illness onset. Data from human infection with other coronaviruses (e.g. MERS-CoV, SARS-CoV) suggest that the incubation period may range from 2-14 days.

**Mode of transmission:** Based on current information it is assumed that COVID-19 is transmitted through respiratory droplets. Airborne and fecal-oral transmission are likely but the clinical significance in the context of an outbreak is unknown.

**SUPPLY CHAIN CONSIDERATIONS**
- Supply chain personnel should follow PPE protocols if they are entering treatment red zones or coming into contact with suspected cases
- Respiratory support is recommended for patients with severe respiratory distress

**SUGGESTED COMMODITY LIST**

<table>
<thead>
<tr>
<th>DIAGNOSTICS</th>
<th>HEALTH FACILITIES INFRASTRUCTURE AND EQUIPMENT</th>
<th>MEDICAL EQUIPMENT</th>
<th>DISINFECTION CONSUMABLES/BIOHAZARDOUS WASTE MANAGEMENT</th>
<th>DRUGS AND MEDICAL CONSUMABLES</th>
<th>ADVANCED</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ ELISA and RT PCR Laboratory equipment and reagents</td>
<td>□ Ambulance with air isolation system for transport of contagious patients</td>
<td>□ Infrared thermometer</td>
<td>□ Alcohol based hand-rub</td>
<td>□ Paracetamol</td>
<td>□ Home Care Kits for home isolation of asymptomatic cases or mildly symptomatic</td>
</tr>
<tr>
<td>□ Mobile, basic diagnostic X-ray system</td>
<td>□ Portable ultrasound</td>
<td>□ Laryngoscope, adult, child set</td>
<td>□ Bag, disposable for biohazardous waste PPE and clinical waste without sharps</td>
<td>□ Oxygen</td>
<td>□ Antivirals/vaccines (under review/in development)</td>
</tr>
<tr>
<td>□ Resuscitator</td>
<td>□ Medical triage/treatment/isolation facilities</td>
<td>□ Endotracheal tubes</td>
<td>□ Body bags (suitable for burial or cremation)</td>
<td>□ Infusion compound (Ringer’s lactate)</td>
<td>□</td>
</tr>
</tbody>
</table>
Voices from the field
Latin America and Caribbean Region
Burkina Faso
## LAC Region – Impact during COVID-19

### Select country examples

<table>
<thead>
<tr>
<th>Country</th>
<th>Stakeholders</th>
<th>Examples of perceived impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Honduras</strong></td>
<td>Honduras’ Ministry of Health (SESAL); Honduran Social Security Institute (IHSS); Permanent Contingency Commission (COPECO); and Armed Forces (FFAA)</td>
<td>“Being exposed to uncommon scenarios in the simulation, like Ebola, allowed us to problem solve different alternative approaches, outside the scope of our immediate roles and responsibilities”</td>
</tr>
<tr>
<td><strong>Paraguay</strong></td>
<td>Paraguay’s Ministry of Health (MSyBS); Instituto público de salud; Secretariat Nacional de Emergencia (SEN); SENEPA</td>
<td>“Responding now to the COVID-19 epidemic, we are thinking about the 10 levers constantly – it feels like this work was meant to prepare us for this”</td>
</tr>
<tr>
<td><strong>Guatemala</strong></td>
<td>Guatemala’s Ministry of Health (MSPAS) and the Guatemalan Social Security Institute (IGSS)</td>
<td>“We have identified open contract databases as a unique way to virtually stockpile the supplies we need going forward”</td>
</tr>
<tr>
<td><strong>Dominican Republic</strong></td>
<td>The Dominican Republic’s Ministry of Health (MSP); Servicio Nacional de Salud (SNS); Programa de Medicamentos Esenciales/Central de Apoyo Logístico (PROMESE/CAL)</td>
<td>“This is the first time all of our organizations collaborate together – just understanding each others’ roles is key here”</td>
</tr>
</tbody>
</table>
## Additional supply chain considerations

<table>
<thead>
<tr>
<th>Themes</th>
<th>Expert input</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governance and organizational structure</td>
<td>It is important to consider the role of the MoH in coordinating various stakeholders. At times, multiple bodies are tapping into the same supply chain but coordinating independently.</td>
</tr>
<tr>
<td></td>
<td>- Humanitarian Supply Chain Expert</td>
</tr>
<tr>
<td>Triggers</td>
<td>One incident in Guinea can lead to 20,000 deaths in Sierra Leone and Liberia in our new globalized world [...] Each nation has different immunity patterns so spread can occur.</td>
</tr>
<tr>
<td></td>
<td>- Emergency Supply Chain Consultant, Academic Think Tank</td>
</tr>
<tr>
<td>Commodity forecasting</td>
<td>Budgeting experts often allow for surge capacity of 10 to 15% but more robust methods may include tracking vaccination rates, water sanitation, etc. to understand which outbreaks are likely.</td>
</tr>
<tr>
<td></td>
<td>- Emergency Response Expert, Professor</td>
</tr>
<tr>
<td>Data visibility</td>
<td>It’s hard to know what the situation might be. There are instances where the displaced are integrated and don’t want to be identified, don’t want to be known for disease.</td>
</tr>
<tr>
<td></td>
<td>- Regional Logistics Coordinator, Non-Profit</td>
</tr>
<tr>
<td>Transition</td>
<td>The transition happens when the burden of disease in the displaced population matches the one of the host population. Then, you need to move from an emergency supply chain to strengthening the routine supply chain.</td>
</tr>
<tr>
<td></td>
<td>- Emergency Response Expert, Professor</td>
</tr>
</tbody>
</table>

### 5 key additional considerations

<table>
<thead>
<tr>
<th>Themes</th>
<th>Descriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governance and organizational structure</td>
<td>Refugee/IDP emergencies may be more politically charged than natural disasters or other types of epidemics</td>
</tr>
<tr>
<td>Triggers</td>
<td>There is higher likelihood risk of infectious diseases spreading between displaced and national populations due to immunity differences (i.e., different endemic diseases, variation in vaccination rates, etc.)</td>
</tr>
<tr>
<td>Commodity forecasting</td>
<td>Significant forecasting difficulty given two layers of uncertainty: type of epidemic and number affected across both host and displaced population</td>
</tr>
<tr>
<td>Data visibility</td>
<td>Difficulty tracking supply and demand due to rapid changes (e.g., locations in need, number of stakeholders involved); displaced population’s distrust of authority may further limit visibility</td>
</tr>
<tr>
<td>Transition</td>
<td>There is no initial “status quo” for displaced populations in the host country, leading to long-term planning needs (e.g., integration, settlements, etc.) with potential transition points identified for displaced population to be served by routine supply chain</td>
</tr>
</tbody>
</table>
# Key lessons to date

## Scope and value

| Lesson 1 | ESC capability building has significant benefit |
| Lesson 2 | ESC preparedness can reveal routine supply chain inefficiencies |
| Lesson 3 | Preparedness is a state to maintain rather than a one-time activity to complete |

## Stakeholder engagement

| Lesson 4 | Partner organizations will remain critical in supporting ESC response over the medium-term |
| Lesson 5 | Countries value peer learning and support from colleagues in other countries |
| Lesson 6 | ESC preparedness typically requires participation across entities and can serve as chance to build or strengthen inter-departmental cooperation |

## ESC playbook implementation

| Lesson 7 | Preparedness activities may fall outside the core job responsibilities of relevant government personnel |
| Lesson 8 | Preparedness training is highly technical and can seem dry for adult learners |
| Lesson 9 | Diagnosing challenges with the ESC requires the triangulation of information from multiple sources |
| Lesson 10 | An effective national preparedness plan should combine external best practices with existing protocols and structures |
| Lesson 11 | The transition from emergency to routine supply chains is an especially important area of focus |

This COVID-19 outbreak is a unique time to assess the preparedness of countries and value of this training.
Burkina Faso – In the context of COVID-19

Key Stakeholders: USAID; National Emergency Supply Chain team - ESC-NT (Includes representatives of Ministries of Health, Animal Resources, Environment and Agriculture, National Defense, Finance & Economy, and National Solidarity); CAMEG (central medical store)

ESC Playbook modules and activities in response to COVID-19

People and Processes

✓ Governance - The Health Emergency Response Operations Centre (CORUS) has set up an Incident Management System (IMS) for COVID-19. GHSC-PSM is represented in the Incident Management Team and assisted in developing two documents:
  ▪ The Preparedness and Response Plan to the COVID-19 outbreak

✓ Triggers - The ESC-NT decided to immediately take COVID-19 into account in the list of priority diseases treated under the emergency Supply Chain.

✓ Financing – GHSC-PSM Burkina Faso has Global Health Security Agenda (GHSA) funding which is being used to provide technical support to COVID-19 activities with prior USAID approval.

Activities supported:

Technical support to the logistics committee of the COVID-19 management commission set up by CORUS under Prime Minister Leadership for the development of:
  ▪ Supply management plan for certain commodities (plan is updated daily)
  ▪ SOPs for COVID-19 supply management (under development/ongoing)
  ▪ Google drive database to facilitate online collaboration for the logistics committee
Commodity Planning

✓ Commodity Forecasting - The ESC-NT held several meetings to identify health commodities for COVID-19 management. The list of commodities was cross-referenced with the WHO and national guidelines for a consolidated list of health commodities for COVID-19 management.

✓ COVID-19 Disease Job Aid: GHSC-PSM and the ESC-NT worked closely with the CORUS and other key stakeholders on the job aid; completed on March 19th.

✓ Next steps:
  • Integration of the developed commodities list into the Playbook templates (to be ongoing)
  • Quantification of the required commodities

Successes

• One health coordination and collaboration (human, animal, environment) has been achieved amongst the Burkinabe stakeholders which enables joint preparedness efforts to tackle all forms of disease outbreaks (human and zoonotic)

• The setup of the IMS with the logistics committee of the emergency supply chain national team which enables designated staff to utilize equipment and communications to effectively respond to the disease outbreak

Challenges

• Initial challenges with obtaining collective buy-in from the pertinent ministries

• Current lack of interface amongst the stakeholders due to current isolation measures to prevent spread; stakeholders are working remotely
Burkina Faso – In the context of COVID-19

Quotes from Burkinabe stakeholders

Governance

“It is good to see that the system in place is adaptable. After the identification of commodities for the 10 priority diseases, we decided to extend the list to 5 other diseases. To rapidly respond to the COVID-19 outbreak, the ESC-NT quickly took the lead in integrating this new disease in the Playbook.” ~ Dr. Pascaline Sanou, ESC-NT lead

Logistics

“GHSC-PSM helped us to set up a supply management plan for COVID-19 commodities. This tool is crucial because it helps to determine a weekly average consumption to guide the resupply of COVID-19 treatment sites.” It also helps us to better control the commodities stocks, to follow up on commodities acquisition and to identify the gap for each commodity on daily basis. ~Dr. Robert Sawadogo, COVID-19 Logistics Committee

Simulation Exercises

“These exercises allowed us to move away from theory to practical way of handling diseases outbreaks ….Today, with the playbook, we are prepared to react to an emergency.” ~Dr. Haoua Ouedraogo, from CAMEG, Head of Logistics Section, ESC-NT

Simulation exercise opening session in the presence of the USAID Health Office Director (Photo credit: GHSC-PSM)

COVID-19 Logistics Committee working session at CORUS office (Photo credit: GHSC-PSM)
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<th>Project</th>
<th>Governance</th>
<th>Financing</th>
<th>Triggers</th>
<th>Data visibility</th>
<th>Commodity forecasting</th>
<th>Stockpiling</th>
<th>Procurement &amp; sourcing</th>
<th>Warehouse &amp; storage</th>
<th>Transport &amp; waste Mgmt</th>
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GHSC Program countries – In the context of COVID-19

USAID GLOBAL HEALTH SUPPLY CHAIN PROGRAM - Procurement and Supply Management
Additional available tools that can be implemented now

1. Actions to Take Now to Ensure Routine Supplies Are Available

2. Questions to Consider to Maintain Routine Supply of Health Commodities during COVID-19

3. Keeping Supply Chain Workers Safe During a Pandemic

4. Use of Containers for Temporary Emergency Storage: Tips to Mitigate Temperature Management

5. Tips to Optimize Storage During Emergencies
Questions and Discussion