USAID MEDICINES, TECHNOLOGIES, AND PHARMACEUTICAL SERVICES (MTAPS) PROGRAM

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COVID-19 MONTHLY REPORT DECEMBER 2020



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PROJECT OVERVIEW

Program Name:		USAID Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program			
Reporting Period:		December I-30, 2020			
Activity Start Date and En	d Date:	September 20, 2018 – September 19, 2023			
Name of Prime Implement	ing Partner:	Management Sciences for Health			
Contract Number:		7200AA18C00074			
	Core Partners:	Boston University, FHI360, Overseas Strategic Consulting, Results for Development, International Law Institute-Africa Centre for Legal Excellence, NEPAD			
MT DC D	Global Expert Partners:	Brandeis University, Celsian Consulting, Deloitte USA, Duke- National University of Singapore, El Instituto de Evaluacion Technologica en Salud, IC Consultants, MedSource, IQVIA, University of Washington			
MTaPS Partners:	Capacity Resource Partners:	African Health Economics and Policy Association, Ecumenical Pharmaceutical Network, U3 SystemsWork, University of Ibadan, African Collaborating Centre for Pharmacovigilance an Surveillance, Kilimanjaro School of Pharmacy, Muhimbili University, Pharmaceutical Systems Africa			
	Collaborators:	International Pharmaceutical Federation, Howard University, University of Notre Dame, WHO, World Bank			

Recommended Citation

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ACRONYMS AND ABBREVIATIONS

ARI	acute respiratory infection				
COVID-19	coronavirus disease 2019				
eSC	emergency supply chain				
HCW	health care workers				
HCWM	health care waste management				
IPC	infection prevention and control				
мон	Ministry of Health				
MTaPS	Medicines Technologies and Pharmaceutical Services Program				
PPE	personal protective equipment				
SARI	severe acute respiratory infection				
SOP	standard operating procedure				
TA	technical assistance				
ТоТ	training of trainers				
TWG	technical working group				
WHO	World Health Organization				

COVID-19 INDICATORS

Indicators across all MTaPS-supported countries

		Total
#	Indicator	(as of December 30, 2020)
I	# of MTaPS-supported health facilities whose staff received COVID-19-related IPC training:*	3,100
I.a	# of facilities trained in IPC for COVID-19	2,676
I.b	# of facilities trained in emergency supply chain management	642
l.c	# of facilities trained in health care waste management (HCWM)	2,275
2	# of health workers who received COVID-19-related training	40,357
2.a	female	22,942
2.b	male	17,199
2.c	sex unknown	216
3	% of MTaPS-supported facilities in compliance with IPC COVID-19	46%
	guidelines/SOPs	(700/1,536)
4	% of MTaPS-supported facilities that report stock data for IPC commodities	96%
	with required frequency	(721/738)

^{*} Because some health facilities received training in more than one technical area, indicator I and sub-indicators Ia, Ib, and I.c are counted separately to prevent double counting.

Table 1. CV	1: # MTaPS-suf									8		
		Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Total
	Bangladesh	88	538	16	77	2	2	I	0	2	0	726
	Burkina Faso				26	4	18	14	0	0		62
	Cameroon		10	0	3	4	9	4	0			30
	Côte d'Ivoire		I	0	12	6	6	0	7	6		38
	Ethiopia	0	2	79	41	31	243	139				535
	Jordan						3	13	8	5	7	36
C	Kenya	112	201	24	39	28	2	0				406
Country	Mali			19	41	0	0	0	0			60
	Mozambique				18	55	19	34	2	0	_	128
	Philippines		24	33	42	23	14	8				144
	Senegal			I	5	20	0	0	2			28
	Tanzania			35	0	0	4	10				49
	Uganda				125	582	151	0				858
	Total	200	776	207	429	755	471	223	19	13	7	3,100
	eSC	0	538	23	24	15	12	16	2	0	3	633
Technical area	HCWM	112	207	187	320	745	443	211	18	-	_	2,275
ai Ca					320	/45	463	211	10	5	7	2,273
	IPC	200	391	190	412	755	466	223	19	13	7	2,676
	IPC Hospital	200 88	391 573									
				190	412	755	466	223	19	13	7	2,676
Facility	Hospital	88	573	190 97	412 210	755 96	466 134	223 81	19	13	7	2,676 1,302
Facility type	Hospital Health Center	88	573	190 97 7	412 210 143	755 96 565	466 134 234	223 81 127	9	7 0	7 7 0	2,676 1,302 1,079
	Hospital Health Center Clinic	88 0 0	573 0 0	190 97 7 0	412 210 143 23	755 96 565 52	466 134 234 47	223 81 127	9 3 0	7 0 0	7 7 0 0	2,676 1,302 1,079 123
	Hospital Health Center Clinic Other	88 0 0	573 0 0	190 97 7 0	412 210 143 23 12	755 96 565 52	466 134 234 47 51	223 81 127 1	9 3 0 7	7 0 0 6	7 7 0 0	2,676 1,302 1,079 123 101
type	Hospital Health Center Clinic Other Unknown Public Private not-for- profit	88 0 0 0 0	573 0 0 0 0 203	97 7 0 0	412 210 143 23 12 41	755 96 565 52 11 31	466 134 234 47 51	223 81 127 1 14 0	9 3 0 7 0	13 7 0 0 6	7 7 0 0 0	2,676 1,302 1,079 123 101 495
Facility ownership	Hospital Health Center Clinic Other Unknown Public Private not-for-	88 0 0 0 0 112	573 0 0 0 0 203 22	190 97 7 0 0 103 73	412 210 143 23 12 41 303 18	755 96 565 52 11 31 547 93 78	466 134 234 47 51 5 411 12	223 81 127 1 14 0	19 9 3 0 7 0 14 1	13 7 0 0 6 0 10 0	7 7 0 0 0 0 0	2,676 1,302 1,079 123 101 495 1,588
type Facility	Hospital Health Center Clinic Other Unknown Public Private not-for- profit Private for-	88 0 0 0 112 0	573 0 0 0 203 22 0	190 97 7 0 0 103 73	412 210 143 23 12 41 303 18	755 96 565 52 11 31 547 93	466 134 234 47 51 5 411	223 81 127 1 14 0 207 3	19 9 3 0 7 0 14	13 7 0 0 6 0	7 7 0 0 0 0 0	2,676 1,302 1,079 123 101 495 1,588 128

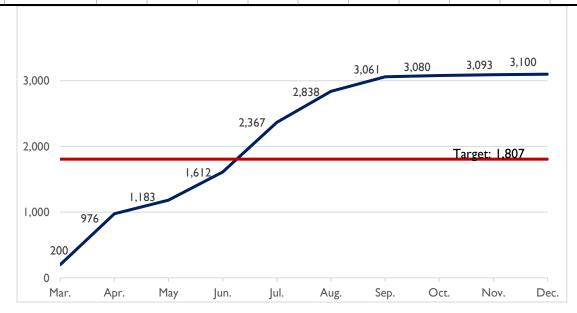


Figure 1. CV 1: Total # of MTaPS-supported health facilities whose staff received COVID-19-related IPC training across all countries

		Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Total
	Bangladesh	560	1,530	376	1,114	88	88	75	0	274	227	4,332
	Burkina Faso	0	0	0	26	100	300	462	0	0		888
	Cameroon	0	25	0	360	81	204	177	0	0		847
	Côte d'Ivoire	0	30	0	507	60	151	171	235	100		1,254
	Ethiopia	15	125	312	228	741	657	403	0	0		2,481
	Jordan	0	0	0	0	0	98	342	231	147	361	1,179
	Kenya	321	1,091	200	311	34	57	0	0	0		2,014
Country	Mali	0	0	30	89	0	0	170	0	0		289
	Mozambique	0	0	0	243	2,142	1,889	2,244	83	0		6,601
	Philippines	0	1,711	6,948	2,091	2,326	405	597	0	0		14,078
	Senegal	0	0	31	28	62	0	0	13	0		134
	Tanzania	0	0	524	0	0	248	40	0	0		812
	Uganda	0	0	0	350	4,368	730	0	0	0		5,448
	Total	896	4,512	8,421	5,347	10,002	4,827	4,681	562	521	588	40,357
	Female	338	2,275	5,663	2,821	5,855	2,615	2,592	247	217	319	22,942
Sex	Male	558	2,205	2,722	2,482	4,050	2,209	2,085	315	304	269	17,199
	Unknown	0	32	36	44	97	3	4	0	0	0	216
	Hospital	0	1,766	7,423	2,688	3,963	2,943	2,885	402	421	572	23,063
	Health Center	0	0	91	467	4,494	1,324	1,513	53	0	0	7,942
Facility	Clinic	0	0	0	44	225	217	3	0	0	0	489
type	Other	0	0	19	299	47	284	280	107	100	16	1,152
	Unknown	896	2,746	888	1,849	1,273	59	0	0	0	0	7,711
	Public	0	1,268	4,307	2,005	6,663	4,247	4,083	436	479	410	23,898
Facility	Private not-for- profit	0	0	I	271	310	34	150	23	0	0	789
ownership	Private for-	0	498	3,225	1,222	2,125	530	426	103	42	54	8,225
•												
type	Other Unknown	0 896	0 2,746	0	0 1,849	904	0	22	0	0	124	146 7,299

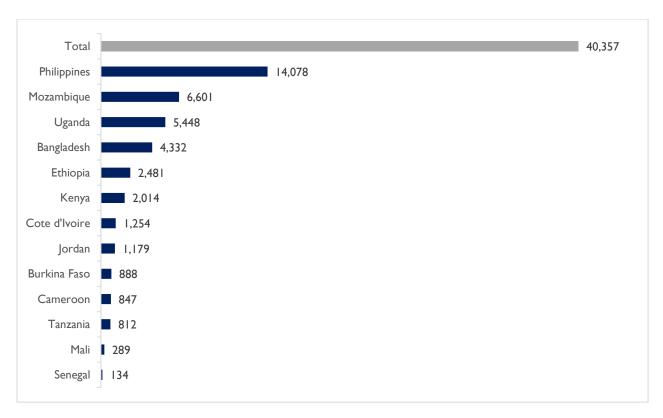


Figure 2. CV 2: Total # of persons who received COVID-19-related training, by country

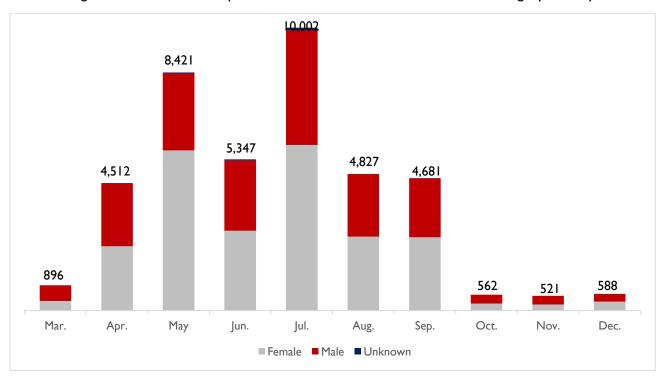


Figure 3. CV 2: Total # of persons who received COVID-19-related training, by month and sex

Table 3. CV	3: # MTaPS-sup	ported h					COVID-		uidelines	SOPs		
		Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Total
	Bangladesh										2	
	Burkina Faso								15			
	Cameroon					0	7	2	0	5		
	Côte d'Ivoire		0	13	2	7	0	5	2	7		
	Ethiopia		2	4	10	26	197	95	0			
	Jordan						4	12	6	I	6	
.	Kenya	2	65	11	36	0	21	0	0			2
Country	Mali				0	2	10	0	0			
	Mozambique					2	5	9	2	0		
	Philippines		0	0	0	11	6	14				
	Senegal											
	Tanzania			0	0	0	I	0				
	Uganda				0	73	0	0				
	Total	2	67	28	48	121	25 I	137	25	13	8	2
	Hospital	0	0	0	0	3	10	2	3	7	0	0
	Health Center	0	0	0	0	56	124	67	15	0	0	0
Facility type	Clinic	0	0	0	0	11	16	I	0	0	0	0
суре	Other	0	0	0	0	3	10	2	3	7	0	0
	Unknown	2	67	15	46	26	0	0	0	0	0	0
	Public	0	0	13	14	47	231	121	20	12	2	0
Facility	Private not-for- profit	0	0	0	10	17	0	0	I	I	0	0
ownership type	Private for- profit	0	0	0	14	31	20	15	4	0	I	0
-7F -	Other	0	0	0	0	0	0	I	0	0	5	0
	Unknown	2	67	15	10	26	0	0	0	0	0	0

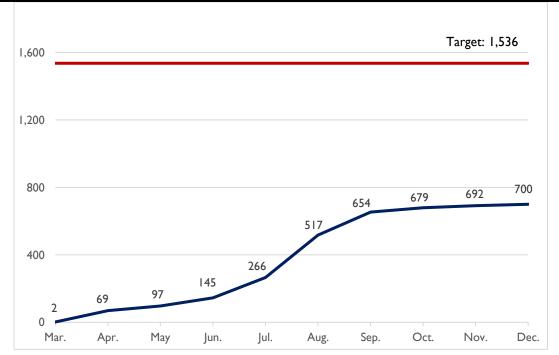


Figure 4. CV 3: # MTaPS-supported health facilities in compliance with COVID-19 IPC guidelines/SOPs, across all countries

Table 4. CV 4: country	Table 4. CV 4: # of MTaPS-supported facilities that routinely report stock data for IPC PPE or HCWM commodities by country										
	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	
	# (%)	# (%)	# (%)	# (%)	# (%)	# (%)	# (%)	# (%)	# (%)	# (%)	
Bangladesh		617 (94%)	639 (97%)	641 (98%)	646 (98%)	646 (98%)	647 (98%)	647 (98%)	649 (99%)	650 (99%)	
Jordan								8 (67%)	7 (58%)	10 (83%)	
Mozambique							5 (24%)	8 (38%)	14 (67%)		
Philippines		0 (%)	36 (86%)	36 (86%)	37 (88%)	42 (100%)	42 (100%)				
Uganda				0 (%)	4 (67%)	5 (83%)					

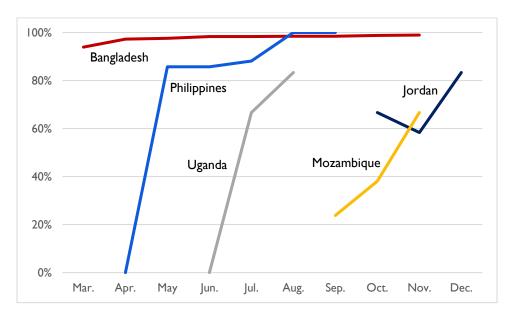


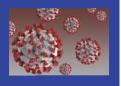
Figure 5. CV 4: % of MTaPS-supported facilities that routinely report stock data for IPC PPE or HCWM commodities, by country



Medicines Technologies and Pharmaceutical Services COVID Response Country Report 2020

Bangladesh

December



Contact for any Questions and Clarifications: mtaps-hgcovid19@mtapsprogram.org

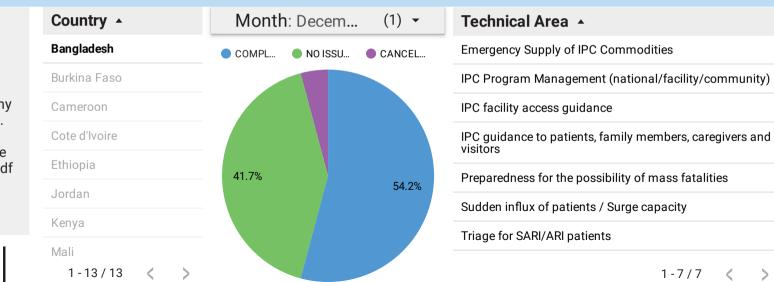
Report Filters

Ouick Guide:

Please Click and select both a Country and a Month.

You can Right Click to export any table after selecting your filters.

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I	Progress on	Activities			
	Country	Action Area* (Technical area)	Activity Description	Deliverables	December
	Bangladesh	IPC guidance to patients, family members, caregivers and visitors	 Adapt guidance/ SOPs along existing WHO guidance for COVID-19 to 	 Adapted training materials 	This activity is completed.
	Bangladesh	IPC guidance to patients, family members, caregivers and visitors	 Provide training using existing training packages for COVID-19 	 Number of people trained in IPC for COVID-19 by gender/position/type of facility/community 	This activity is completed.
	Bangladesh	IPC guidance to patients, family members, caregivers and visitors	 Adapt guidance/ SOPs along existing WHO guidance for COVID-19 to 	Guideline/SOP/checklis t Job aid for key IPC element (incl IPC commodities lists)	The development of IPC guidance materials is completed and this activity is closing.
	Bangladesh	Emergency Supply of IPC Commodities	 Support to regular meetings with the national coordination mechanisms 	After-action report	The MTaPS team did not attend any meetings of the Procurement and Logistics Pillar in December; MTaPS provided information on PPE stock to the forum.
	Bangladesh	Emergency Supply of IPC Commodities	 Rapid emergency supply chain stakeholders mapping 	 Rapid response strategy/plan 	This activity is completed.
	Bangladesh	Emergency Supply of IPC Commodities	 Rapid emergency supply chain preparedness assessment 	 Emergency response capacity assessment report with technical recommendations 	This activity is completed.
	Bangladesh	IPC facility access guidance	 Adapt guidance/ SOPs along existing WHO guidance for COVID-19 to 	Guideline/SOP/checklis t Job aid for key IPC element (incl IPC commodities lists)	The installation of triage flow chart was completed at 20 hospitals. This activity is now complete.
	Bangladesh	IPC facility access guidance	Conduct simulation exercise (table top, drill, functional or	• Simulation exercise report	MTaPS has conducted the simulation exercise on triage in eight hospitals of Dhaka, using the video developed by the program. This activity is

		tull-scale)		now complete.
Bangladesh	IPC facility access guidance	 Provide training using existing training packages for COVID-19 	• Number of people trained in IPC for COVID-19 by gender/position/type of facility/community	Eight simulation exercises on triage were conducted at the Dhaka Medical College Hospital, the National Institute of Chest Disease & Hospital (NIDCH), the Sheikh Russel Gastro Liver Institute and Hospital, the Kurmitola General Hospital, the Mugda Medical College & Hospital, the Impulse Hospital, the Green Life Medical College Hospital and the Mohammadpur Fertility Service and Training Center (MFSTC), Dhaka, for a 145 staff (79 men and 66 women) working in triage.
Bangladesh	Emergency Supply of IPC Commodities	 Apply/adapt simple operating procedures and tools for the management of ordering, issuing, distributing, receiving, rational utilization 	Guideline/SOP/checklis t Job aid for key IPC element (incl IPC commodities lists)	The distribution of 100 ventilators in 45 facilities has been succeessfully completed.
Bangladesh	Emergency Supply of IPC Commodities	• Conduct training on SOPs	• Number of people trained in IPC for COVID-19 by gender/position/type of facility/community	MTaPS conducted four training sessions on COVID-19 eLMIS and quantification have been conducted. In total, 82 participants (67 men and 15 women) from CMSD, ICR, DGHS,10 District Hospitals, and 12 Civil Surgeon Offices attended the trainings. Categories of participants included RMO/EMO, store keepers and statisticians. Notification of eight additional training sessions has been issued by the MIS unit, DGHS.
Bangladesh	Emergency Supply of IPC Commodities	 Conduct supportive supervision to ensuring adherence 	 Compliance tracking and reporting system 	The activity is completed.
Bangladesh	Emergency Supply of IPC Commodities	Implement simple IPC and PPE commodity tracking system	Compliance tracking and reporting system	The activity is completed. Currently, 99% (650 of 657) of facilities are reporting COVID-19 commodity stock status through the SCM electronic reporting system as of December 30, 2020. Reporting timeliness is 76%. Based on the current consumption and available stock, the national stock status of PPE KIT is 10.14 months as of December 30, 2020. Stock status of other commodities could be found here: https://scmpbd.org/index.php/covid-19-dashboard
Bangladesh	IPC Program	 Conduct rapid 	 Emergency response 	The activity is completed.

J. T. T.	Management (national/facilit y/community)	assessment of IPC for COVID-19 capacity (national/county levels)	capacity assessment report with technical recommendations	
Bangladesh	IPC Program Management (national/facilit y/community)	 Provide training using existing training package on triage for Covid-19 	 Number of people trained in IPC for COVID-19 by gender/position/type of facility/community 	Training on triage at eight hospitals in Dhaka City has been conducted in December.
Bangladesh	IPC Program Management (national/facilit y/community)	 Strengthen facility COVID-19 IPC response coordination mechanism/task force 	Coordination/task force mechanism	MTaPS is continuously coordinating COVID-19 IPC assistance with the Development Partners (DP) consortium and government counterparts through different pillar meetings and coordination meetings.
Bangladesh	Triage for SARI/ARI patients	Assess and monitor compliance	 Status reports by key IPC element (supervision, IPC performance, supplies, etc.) 	MTaPS has completed monitoring compliance with key IPC requirements in eight hospitals in Dhaka City by using the government-developed checklist. Data entry and analysis are ongoing. Results will be reported next month
Bangladesh	Preparedness for the possibility of mass fatalities	 Provide training using existing training packages for COVID-19 	 Adapted training materials 	The development of training materials has been completed and this activity is now closing.
Bangladesh	Emergency Supply of IPC Commodities	 Define list of supplies and specification 	After-action report	No new items were included this month.
Bangladesh	Emergency Supply of IPC Commodities	• Support/facilitate quantification exercises	• Guideline/SOP/checklis t Job aid for key IPC element (incl IPC commodities lists)	MTaPS has conducted total four trainings on COVID-19 eLMIS and quantification. Total 82 participants (67 men and 15 women) were attended from CMSD, ICR, DGHS, 10 district hospitals, and 12 Civil Surgeon Offices. Categories of participants were RMO/EMO, store keeper, and statistician.
				Notification of another eight training sessions has been issued by the MIS unit, DGHS.
Bangladesh	Emergency Supply of IPC Commodities	 Design agile distribution and inventory holding policy 	Guideline/SOP/checklis t Job aid for key IPC element (incl IPC commodities lists)	MTaPS shared the final draft of the Bangladesh Distribution Strategy and Inventory Policy for COVID-19 Commodities with the DGHS, MOHFW. This activity is now complete.

Bangladesh	Sudden influx of patients / Surge capacity	 Adapt guidance/ SOPs along existing WHO guidance for COVID-19 to 	• Guideline/SOP/checklis t Job aid for key IPC element (incl IPC commodities lists)	The strategy to address shortage of personal protective equipment (PPE) for COVID-19 has been finalzied and uploaded. This activity is now complete.
Bangladesh	IPC guidance to patients, family members, caregivers and visitors	 Adapt guidance/ SOPs along existing WHO guidance for COVID-19 to 	• Guideline/SOP/checklis t Job aid for key IPC element (incl IPC commodities lists)	This activity is complete.
Bangladesh	Sudden influx of patients / Surge capacity	 Analyze systems and systemic dependencies 	After-action report	This activity is complete.

MTAPS/BANGLADESH COVID-19 INDICATORS

Table 5. Ba	ingladesh CV I:	# and % <i>I</i>	MTaPS-	supporte	ed healt	h faciliti	ies whos	se staff r	eceived	COVID	-19-rela	ted IPC					
Indicator and	d Disaggregation	Target	Mar.	Apr.	Мау	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Cum.				
# health	facilities per month		88	538	16	77	2	2	I	0	2	0	726				
Cumulativ	e # health facilities		88	626	642	719	721	723	724	724	726	726	726				
	% (Cum./target)		26%	187%	192%	215%	216%	216%	217%	217%	217%	217%	217%				
	eSC		0	538	0	0	0	0	0	0	0	0	538				
Technical area	HCWM																
	IPC		88	153	16	77	2	2	I	0	2	0	341				
	Hospital	ľ	88	538	16	77	I	2	0	0	2	0	724				
Facility type	Health Center		0	0	0	0	0	0	I	0	0	0	I				
	Clinic	334	0	0	0	0	0	0	0	0	0	0	0				
	Other		0	0	0	0	I	0	0	0	0	0	I				
	Unknown	ľ					0	0	0	0	0	0	0	0	0	0	0
	Public		0	0	0	66	I	I	I	0	I	0	70				
Facility	Private not-for- profit		0	0	0	0	0	0	0	0	0	0	0				
Facility ownership type	Private for- profit		0	0	0	П	I	I	0	0	I	0	14				
	Other		0	0	0	0	0	0	0	0	0	0	0				
	Unknown		88	538	16	0	0	0	0	0	0	0	642				

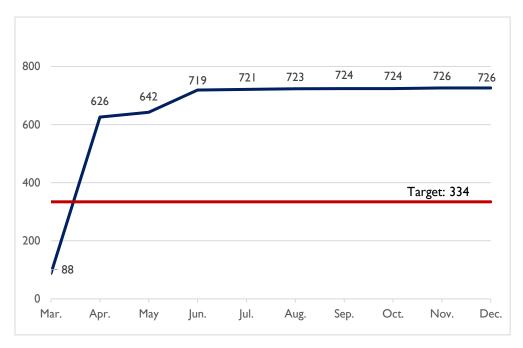


Figure 6. Bangladesh CV I: # MTaPS-supported health facilities whose staff received COVID-19-related IPC training

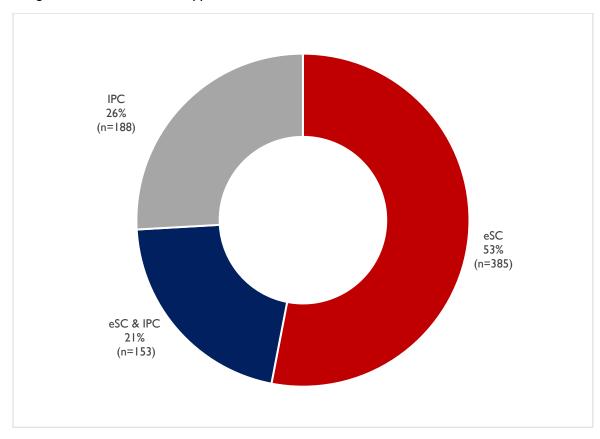


Figure 7. Bangladesh CV I: # and % MTaPS-supported health facilities whose staff received COVID-19-related IPC training, by technical area

Table 6. Ba	ingladesh CV 2: # of	persons v	vho rec	eived C	OVID-I	9-relate	ed train	ing					
Indicator	and Disaggregation	Target	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.	Cum.
	# trained per month		560	1,530	376	1,114	88	88	75	0	274	227	4,332
	Cumulative # trained		560	2,090	2,466	3,580	3,668	3,756	3,831	3,831	4,105	4,332	4,332
	% (Cum./target)		15%	57%	67%	98%	100%	102%	104%	104%	112%	118%	118%
Sex	Female		203	478	166	428	12	49	63	0	96	81	1,576
	Male		357	1,052	210	686	76	39	12	0	178	146	2,756
	Hospital		0	0	0	0	66	88	0	0	274	211	639
	Health Center		0	0	0	0	0	0	75	0	0	0	75
Facility type	Clinic	3,668	0	0	0	0	0	0	0	0	0	0	0
	Other		0	0	0	0	22	0	0	0	0	16	38
	Unknown		560	1,530	376	1,114	0	0	0	0	0	0	3,580
	Public		0	0	0	0	66	26	75	0	249	191	607
Facility	Private not-for-profit		0	0	0	0	0	0	0	0	0	0	0
ownership	Private for-profit		0	0	0	0	22	62	0	0	25	36	145
type	Other		0	0	0	0	0	0	0	0	0	0	0
	Unknown		560	1,530	376	1,114	0	0	0	0	0	0	3,580

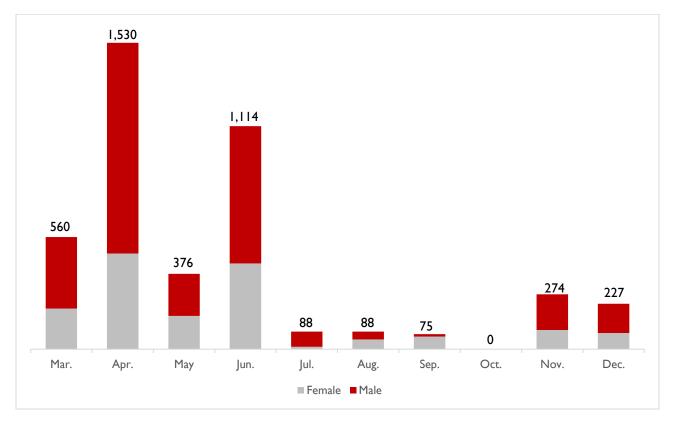


Figure 8. Bangladesh CV 2: # of persons who received COVID-19-related training, by month and sex

	gladesh CV 3: # MTaPS-su vith COVID-19 IPC guideli			ilities in
Indicato	or and Disaggregation	Target	Dec.	Cum.
	# trained per month		2	2
	Cumulative # trained		2	2
	% (Cum./target)		100%	100%
	Hospital		2	2
	Health Center		0	0
Facility type	Clinic		0	0
	Other	2	0	0
	Unknown		0	0
	Public		2	2
Facility	Private not-for-profit		0	0
ownership	Private for-profit		0	0
type	Other		0	0
	Unknown		0	0

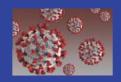
Indicator ar	d Disaggregation	Target	Mar.	Apr.	May	Jun.	Jul.	Aug.	Sep.	Oct.	Nov.	Dec.
# healt	h facilities per month		617	639	641	646	646	647	647	649	650	61
	%		94%	97%	98%	98%	98%	98%	98%	99%	99%	949
	Hospital		617	639	641	646	646	647	647	649	650	61
,	Health Center		0	0	0	0	0	0	0	0	0	
Facility type	Clinic		0	0	0	0	0	0	0	0	0	
	Other		0	0	0	0	0	0	0	0	0	
Facility	Unknown	657	0	0	0	0	0	0	0	0	0	
	Public		0	0	0	0	645	646	646	648	649	
acility	Private not-for- profit		0	0	0	0	ı	ı	1	ı	ı	
ownership type	Private for-profit		0	0	0	0	0	0	0	0	0	
	Other		0	0	0	0	0	0	0	0	0	
	Unknown		617	639	641	646	0	0	0	0	0	6



Medicines Technologies and Pharmaceutical Services COVID Response Country Report 2020

Jordan

December



Contact for any Questions and Clarifications: mtaps-hgcovid19@mtapsprogram.org

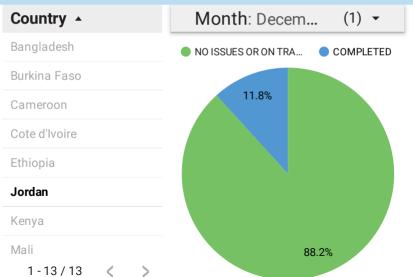
Report Filters

Quick Guide:

Please Click and select both a Country and a Month.

You can Right Click to export any table after selecting your filters.

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Technical Area

Emergency Supply of IPC Commodities

Application of COVID-19 Precautions by HCW, patients

IPC Program Management (national/facility/community)

IPC facility access guidance

Source control (isolation)

Sudden influx of patients / Surge capacity

Triage for SARI/ARI patients

Progress or	n Activities			
Country	Action Area* (Technical area)	Activity Description	Deliverables	December
Jordan	IPC Program Management (national/facilit y/community)	Conduct rapid assessment of IPC for COVID-19 capacity (national/county levels)	• Emergency response capacity assessment report with technical recommendations	MTaPS continued to conduct pre-training visits to targeted hospitals for rapid assessments of COVID-19 IPC capacity using the tailored scorecard, in addition to assessment of logistics training needs and arrangements. An additional MOH hospital and one other private hospital in the medical tourism program were assessed during the reporting period. The private hospital was found to advanced IPC capacity, while some gaps were found during assessment of the MOH hospital. Gaps were mainly related to lack of triage system, PPE, and the need for training for healthcare workers. The assessments have been finalized and this activity is closing.
Jordan	IPC Program Management (national/facilit y/community)	 Adapt/draft regulatory support documentation for the implementation of COVID-19 response based on WHO COVID-19 guidance 	Guideline/SOP/checklis t Job aid for key IPC element (incl IPC commodities lists)	MTaPS shared job aids, including standard triage aid and PPE donning and doffing videos. The development of materials is finalized and this activity is closing
Jordan	IPC Program Management (national/facilit y/community)	• Strengthen facility COVID-19 IPC response coordination mechanism/task force	Coordination/task force mechanism	MTaPS continues to coordinate with the IPC Department and provide the MOH focal point the needed details about MTaPS' activities on a weekly basis. MTaPS continues to coordinate with other USAID implementing partners as members of AL-Basheer Hospital COVID19 task force.
Jordan	Application of COVID-19 Precautions by HCW, patients	• Just-in-time IPC training	• Number of people trained in IPC for COVID-19 by gender/position/type of facility/community	MTaPS conducted IPC training in the following hospitals, with a total of 361 HCWs (66% females) trained: Al-Basheer Hospital Al-Rasheed Hospital AL-Zarqa Gov. Hospital Prince Rashed Hospital King Talal Hospital

				Queen Alia Hospital Prince Ali Hospital
Jordan	Application of COVID-19 Precautions by HCW, patients	• Oversee the implementation	 Status reports by key IPC element (supervision, IPC performance, supplies, etc.) 	MTaPS is following up with previously visited hospitals, providing technical support and advice to further bolster hospital prepardness.
Jordan	Source control (isolation)	• Just-in-time IPC training	• Number of people trained in IPC for COVID-19 by gender/position/type of facility/community	MTaPS conducted IPC training in the following hospitals, with a total of 361 HCWs (66% females) trained: Al-Basheer Hospital Al-Rasheed Hospital AL-Zarqa Gov. Hospital Prince Rashed Hospital King Talal Hospital King Hussien Hospital Queen Alia Hospital Prince Ali Hospital
Jordan	Source control (isolation)	Oversee the implementation	 Status reports by key IPC element (supervision, IPC performance, supplies, etc.) 	MTaPS is following up with previously visited hospitals, providing technical support and advice to further bolster hospital prepardness.
Jordan	Source control (isolation)	 Assess and monitor compliance 	 Compliance tracking and reporting system 	MTaPS is following up with previously visited hospitals, providing technical support and advice to further bolster hospital prepardness.
Jordan	IPC facility access guidance	• Just-in-time IPC training	• Number of people trained in IPC for COVID-19 by gender/position/type of facility/community	MTaPS conducted IPC training in the following hospitals, with a total of 361 HCWs (66% females) trained: Al-Basheer Hospital Al-Rasheed Hospital AL-Zarqa Gov. Hospital Prince Rashed Hospital King Talal Hospital King Hussien Hospital Queen Alia Hospital Prince Ali Hospital
Jordan	IPC facility access guidance	Oversee the implementation	 Status reports by key IPC element (supervision, IPC performance, supplies, etc.) 	MTaPS is following up with previously visited hospitals, providing technical support and advice to further bolster hospital prepardness.

Jordan	Triage for SARI/ARI patients	• Just-in-time IPC training	• Number of people trained in IPC for COVID-19 by gender/position/type of facility/community	MTaPS conducted IPC training in the following hospitals, with a total of 361 HCWs (66% females) trained: Al-Basheer Hospital Al-Rasheed Hospital AL-Zarqa Gov. Hospital Prince Rashed Hospital King Talal Hospital King Hussien Hospital Queen Alia Hospital Prince Ali Hospital
Jordan	Triage for SARI/ARI patients	Oversee the implementation	 Status reports by key IPC element (supervision, IPC performance, supplies, etc.) 	MTaPS is following up with previously visited hospitals, providing technical support and advice to further bolster hospital prepardness.
Jordan	Sudden influx of patients / Surge capacity	 Develop plans and strategies following existing guidelines 	 Surge capacity plan/MoU/MoA for resource-sharing 	The MTaPS-developed surge capacity strategy was approved by AL-Basheer Taskforce. It was suggested for it to be disseminated to all Jordan hospitals; the content was included in the IPC and PSM trainings.
Jordan	Sudden influx of patients / Surge capacity	• Just-in-time IPC training	• Number of people trained in IPC for COVID-19 by gender/position/type of facility/community	MTaPS conducted IPC training in the following hospitals, with a total of 361 HCWs (66% females) trained: Al-Basheer Hospital Al-Rasheed Hospital AL-Zarqa Gov. Hospital Prince Rashed Hospital King Talal Hospital King Hussien Hospital Queen Alia Hospital Prince Ali Hospital
Jordan	Emergency Supply of IPC Commodities	 Support/facilitate quantification exercises 	• Status reports by key IPC element (supervision, IPC performance, supplies, etc.)	MTaPS facilitated online training on eSC and quantification of health products to Al-Bashir hospital. The training was organized based on the request from MOH/PSD and Al-Bashir hospital COVID-19 Task Force. 12 participants attended the training and further action points are discussed. The Task Force requested to have more practical exercises for all health commodities beyond COVID-19.
Jordan	Emergency Supply of IPC	 Identify quick supply chain 	• Guideline/SOP/checklis	MTaPS' continuous support of implementing (training and remote support) the PPF reporting

	Commodities	response time for immediate availability of COVID-19 commodities at treatment sites	t Job aid for key IPC element (incl IPC commodities lists)	and requistion procedures at the hospital level is appreciated by the MOH/PSD. This support has helped initiate direct procurement of key PPE commodities, such as N95 and gloves (large size) to avoid stock outs. MTaPS is discussing with the MOH/PSD on how to support newly established field hospitals to introduce the PPE tracking systems for continuous availability of PPE.
Jordan	Emergency Supply of IPC Commodities	Implement simple IPC and PPE commodity tracking system	Compliance tracking and reporting system	MTaPS continued providing remote support to the 12 hospitals via phone calls and WhatsApp group messages on tracking COVID-19 commodities and use the data for decision making. This month eight hospitals (out of 12) submitted a complete bi-weekly report and requisition (fourth and fifth cycle). MTaPS aggregated and analyzed data from the first two reporting cycles, including the stock status of all PPE at reporting hospital. MTaPS shared and discussed action points to be taken to avoid stockouts.

MTAPS/JORDAN COVID-19 INDICATORS

Indicator a	and Disaggregation	Target	Aug.	Sep.	Oct.	Nov.	Dec.	Cum.
# h	ealth facilities per month		3	13	8	5	7	36
Cun	nulative # health facilities		3	16	24	29	36	30
	% (Cum./target)		8%	41%	62%	74%	92%	92%
	eSC		0	12	2	0	3	17
Technical area	HCWM		3	13	8	5	7	30
area	IPC		3	13	8	5	7	30
	Hospital	39	3	13	8	5	7	3(
	Health Center		0	0	0	0	0	(
Facility	Clinic		0	0	0	0	0	(
type	Other		0	0	0	0	0	
	Unknown		0	0	0	0	0	(
	Public		2	4	3	3	ſ	1.
Eacility	Private not-for-profit		0	0	ı	0	0	
Facility ownership	Private for-profit		1	8	4	2	1	I
type	Other		0	1	0	0	5	
	Unknown		0	0	0	0	0	

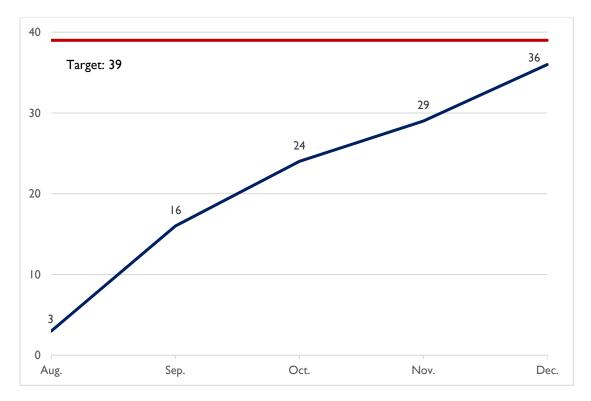


Figure 9. Jordan CV I: # MTaPS-supported health facilities whose staff received COVID-19-related IPC training

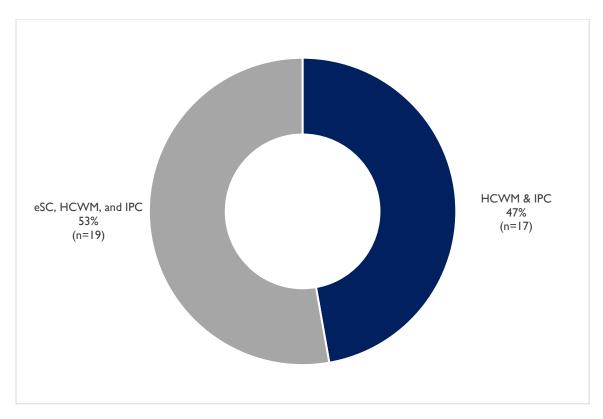


Figure 10. Jordan CV 1: # MTaPS-supported health facilities whose staff received COVID-19-related IPC training, by technical area

Table 10. Jor	dan CV 2: # of persons wh	o receive	d COVID-	19-related	l training			
Indicato	or and Disaggregation	Target	Aug.	Sep.	Oct.	Nov.	Dec.	Cum.
	# trained per month		98	342	231	147	361	1,179
	Cumulative # trained		98	440	671	818	1,179	1,179
	% (Cum./target)		10%	44%	67%	82%	118%	118%
Sex	Female		41	184	121	81	238	665
SCX	Male		57	158	110	66	123	514
	Hospital		98	325	231	147	361	1,162
	Health Center		0	0	0	0	0	0
Facility type	Clinic	1,000	0	0	0	0	0	0
	Other		0	17	0	0	0	17
	Unknown		0	0	0	0	0	0
	Public		85	139	105	130	219	678
Facility	Private not-for-profit		0	0	23	0	0	23
ownership	Private for-profit		13	181	103	17	18	332
type	Other		0	22	0	0	124	146
	Unknown		98	342	231	147	361	0

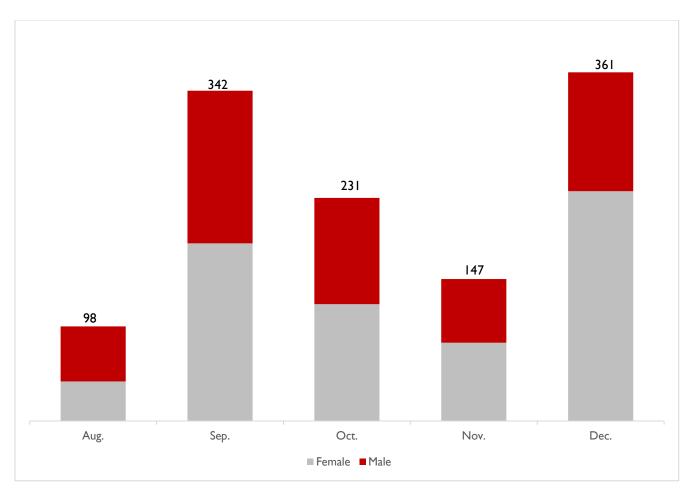


Figure 11. Jordan CV 2: # of persons who received COVID-19-related training, by month and sex

Indicato	r and Disaggregation	Target	Aug.	Sep.	Oct.	Nov.	Dec.	Cum.
	# trained per month		4	12	6	I	6	29
	Cumulative # trained		4	16	22	23	29	29
	% (Cum./target)		10%	41%	56%	59%	74%	74%
	Hospital	<u> </u>	4	12	6	I	6	29
F 49.	Health Center		0	0	0	0	0	0
Facility type	Clinic		0	0	0	0	0	0
	Other	39	0	0	0	0	0	0
	Unknown		0	0	0	0	0	0
	Public	Ī	ı	2	I	0	0	4
Facility	Private not-for-profit	·	0	0	1	I	0	2
ownership	Private for-profit		3	9	4	0	I	17
Facility ownership type	Other		0	1	0	0	5	6
	Unknown	ľ	0	0	0	0	0	C

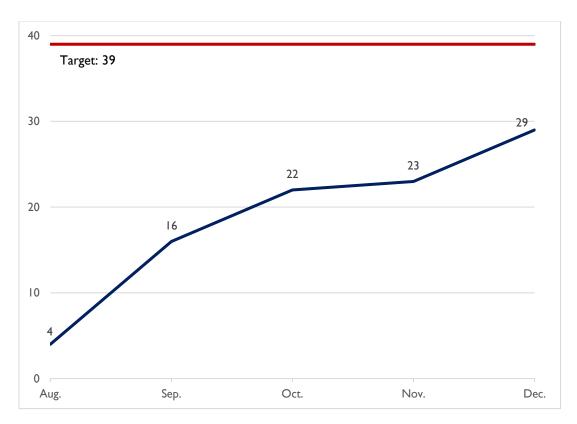


Figure 12. Jordan CV 3: # MTaPS-supported health facilities in compliance with COVID-19 IPC guidelines/SOPs, by month

	dan CV 4: # of MTaPS	S-support	ed facilitie	es that rou	ıtinely reţ	oort stock	data for
Indicator	and Disaggregation	Target	Aug.	Sep.	Oct.	Nov.	Dec.
#	health facilities per month		8	7	10	8	7
	%		57%	50%	71%	57%	50%
	Hospital		8	7	10	8	7
	Health Center		0	0	0	0	0
Facility type	Clinic		0	0	0	0	0
	Other		0	0	0	0	0
	Unknown		0	0	0	0	0
	Public		8	7	10	8	7
Facility	Private not-for-profit		0	0	0	0	0
ownership type	Private for-profit		0	0	0	0	0
сурс	Other		0	0	0	0	0
	Unknown		0	0	0	0	0