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# Our Contribution to the Procurement of Essential COVID-19 Equipment and Supplies

UNICEF, in collaboration with WHO, provided support to the Ministry of Health and Family Welfare (MoHFW) in COVID-19 preparedness and response actions. UNICEF emergency response included the procurement and supply of medical equipment and oxygen products as required by the Government of India (GoI).

## Personal Protective Equipment (PPE) kits

In early March 2020, as the number of COVID-19 cases were on the rise, there was a huge demand for Personal Protective Equipment (PPE). As soon as the lockdown was announced by the GoI, stocks of masks, sanitisers and gloves were in short supply. Approximately 10 million PPE kits were required. During this period, UNICEF raised orders for a total of **11 million USD providing emergency procurement of PPE, diagnostic tests and oxygen products** to support the GoI in its efforts to ramp up capacity to test and manage COVID-19 cases. Apart from these, through in-kind contribution from IKEA, **one million triple layered masks** were procured and supplied by UNICEF for Mumbai and Karnataka. With contributions in kind from Johnson & Johnson, over **20,000 hygiene kits** were presented as an appreciation to healthcare workers in Madhya Pradesh. UNICEF also supported state governments, other development partners, and Civil Society Organizations (CSOs) to reach out to **2,318,481 vulnerable populations** of rural and urban areas across **15 states** with critical supplies such as soaps, PPEs, disinfectants and sanitary pads.



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**Procurement and supply of PPE kits, medical equipment and thermal scanners** were few of the most challenging tasks during the lockdown. While materials were available and vendors were known, ban on international and domestic travel made it almost impossible to source the PPE kits and other medical equipment. In order to overcome the shortage of PPE, UNICEF identified stocks with a vendor that was contracted by the UN World Food Programme (WFP) in their Hyderabad warehouse. However, these could not be shipped due to the lockdown. Only certain stocks from their Delhi warehouse could be procured after physical visits to the facility and third party inspection. There were also some items in the kit such as shoe covers, N95 masks, goggles, and gloves that were unavailable in country. Hence, these were procured from China by arranging special chartered flights. Within country procurement by the MoHFW was through Hindustan Lifecare Limited. Peak demand for PPE kits was thus managed till July 2020 after which Indian manufacturers had started their regular supply. The factors that had to be tackled innovatively at various stages included:



**Lack of transport**



**Strict quarantine rules**



**Procedural hurdles**



**Need for faster turnaround times**

However, with the support from MoHFW, funders and the supply division in Copenhagen, UNICEF was able to fulfil its commitments in a timely manner.

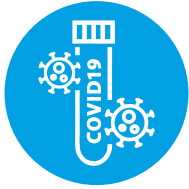
## Mass Thermal Scanners

UNICEF was allotted the responsibility of procuring **10 thermal scanners for eight international airports, each costing Rs. 35-40 Lakhs.**

This procurement was a tripartite partnership between the Asian Development Bank (ADB), UNICEF and the GoI. ADB provided the funding and UNICEF procured the scanners for MoHFW based on WHO specifications. Following the successful installation in eight airports, request for scanners in 62 locations was made by MoHFW.

**Procurement of thermal scanners ran into a few roadblocks. Since there was only one supplier of thermal scanners based in Singapore, UNICEF had to work around its single vendor procurement policy. There were also several hurdles that had to be overcome during installation.** For instance, in Kempegowda International Airport Bengaluru, the necessary infrastructure to install the thermal scanners was not available. Arrangements for these had to be made by coordinating between multiple organizations within the Airports Authority of India (AAI) and the Bengaluru Airport authorities. The Bengaluru Airport had its own authorised vendor and no other vendor including that of UNICEF could build the infrastructure. Apart from this, UNICEF could not directly pay the authorised vendor of the Bengaluru Airport. Hence, an agreement was arrived at; that the vendor of Bengaluru Airport shall build the infrastructure and upon completion of work, the vendor of UNICEF will make the payment. However, several rounds of negotiations were required with the vendor of Bengaluru Airport to undertake the work as they could not initiate the work without an advance payment. In addition to this, the quarantine rules that prevailed during the lockdown meant that anyone who had entered an airport had to be quarantined for 14 days. This had serious implications for the staff involved and total time taken to complete the installation process.





## COVID-19 Test Kits

As testing was low in the country, there was an urgent requirement for Reverse Transcription Polymerase Chain Reaction (RT-PCR) test kits. UNICEF procured **328 RT-PCR and RNA Extraction Thermo Fisher test kits (328,000 reactions)** for the Indian Council of Medical Research (ICMR). This effort was financially supported by the Government of Germany. An online handover ceremony was arranged between the German Ambassador, UNICEF and ICMR.



## Oxygen Concentrators

UNICEF procured a total of **3,014 oxygen concentrators** through the supply division. The MoHFW tested these concentrators in two hospitals. As part of the Kumbh Mela preparedness and mitigation measures, these concentrators have been deployed in Haridwar, Uttarakhand after appropriate training and monitoring efforts. Once the Mela is over, the concentrators will be distributed to 19 states and union territories of India.

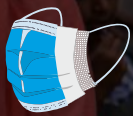


## Mannikins for Newborn Care

UNICEF procured and delivered **1,471 mannikins** for training on newborn care and pneumonia management to 15 states. These mannikins have been used during trainings and webinars.

## HIGHLIGHTS

Across the country, UNICEF provided PPE within health facilities and communities to **34,700 healthcare workers** which included:



**3.5 million** items of PPEs 



**300,000** RT-PCR test kits



**3** rounds of COVID-19 treatment facility assessment

UNICEF helped in screening of passengers through the supply of **10 mass thermal scanners** installed in **eight international airports**. To increase the capacity of the country to treat patients with COVID-19 symptoms, **20 oxygen plants** were installed in critical points of various hospitals in the north-east along with **3,014 state-of-the-art oxygen concentrators**.





**KfW**  
Bankengruppe  
(KfW Bank)



**Asian**  
Development  
Bank (ADB)



**Government**  
of Japan



**IKEA**



**Johnson**  
& Johnson

## Reflections and Learnings

Exceptional situations such as COVID-19 required exceptional thinking. UNICEF under the health sector leadership of WHO worked in complete co-ordination and alignment with various divisions of MoHFW and the ICMR. Some of the challenges were:

- » Hampered commodity availability
- » Increased prices
- » Enduring quality of supplies
- » Changing government priorities

UNICEF was successfully able to address these by:

- » Establishing a 'core intersectoral team'
- » Organizing charters to deliver to India
- » Utilising special contracting mechanisms
- » Working in close collaboration and coordination with multiple division of the MoHFW



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## Way Forward

Making best use of the gains in strengthening the healthcare system, UNICEF proposes to focus on the:

- Availability of oxygen
- Improved laboratory system
- Enhanced capacity of healthcare providers at community and facility levels in COVID-19 prevention, identification and management, as well as on safety and infection prevention and control protocols

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