
Funding Request Form

Global Fund COVID-19 Response Mechanism

Summary Information

Country	Ukraine
Funding for COVID-19 response already accessed with Global Fund grant flexibilities	\$1 383 094
Priority 1 funding request	\$4 896 685,8
Priority 2 funding request: contingent on additional sources of funding	\$5 019 269,86

Section 1: Funding Request

1.1 Context

a) Briefly describe the **country context** that informed the development of this funding request. If there is a national COVID-19 response plan you are invited to attach it and refer to this document.

The first case of coronavirus infection COVID-19 in Ukraine was registered on the 3rd of March 2020 in the west of the country in Chernivtsi region. There was a steady increase in the number of cases until the incidence stabilized in the middle of May, but started to increase again at the beginning of June. As of the 25th of August, there were 110 0856 registered cases of COVID-19. 2354 people have died. It should be noted that confirmed cases are related to the number of conducted laboratory tests, so there is a concern that the actual number of cases may be significantly higher. As of today, the highest number of cases registered on a single day is 2328 new cases (21th of August). The most affected areas of Ukraine are Chernivtsi, Lviv, Ivano-Frankivsk, Rivne, Ternopil and Transcarpathia oblasts and the capital Kyiv. There is no data from the non-governmentally controlled territories of Ukraine in Donetsk and Lugansk Oblasts and Crimea.

The government of Ukraine has taken the required emergency measures in order to prevent the spread of SARS_CoV-2 coronavirus infection. The initial measures have been prescribed in the relevant order of the MoH 185 of 24 January 2020 and included:

- Establishment of emergency headquarters to prevent the introduction and spread of the infection;
- Introduction of guidelines for action upon detection of the infection;
- Assessment of healthcare facilities' preparedness to provide medical care to persons with the infection;
- Initiation of in-service training of medical personnel to ensure compliance with the requirements of the anti-epidemic regime, biological safety and biological protection in case of detection of the infection;
- Strengthening of sanitary and quarantine units at checkpoints across the State border of Ukraine.

The order of the Cabinet of Ministers of Ukraine 93 of 3 February 2020 "On measures to prevent the introduction and spread in Ukraine of acute respiratory disease COVID-19 caused by coronavirus SARS-CoV-2 elaborated and approved regional response plans; identified checkpoints that need to be activated in case of declaration of emergencies; developed operational plans (medical examination, isolation, transportation to the hospital, communications, etc.) at airports, ports, land transport hubs, at the border; identified major hospitals in each region for the treatment of COVID-19; hospital restructuring scenarios; the need to calculate needs and distribution of supplies; regular updating of guidelines for detection, surveillance, case management, treatment and infection control.

The Resolution of the Cabinet of Ministers № 211 (11 March 2020) declared quarantine throughout Ukraine from 12 March to 22 April.

MoH Order № 663 of 13 March approved the composition of the operational headquarters, standards of medical care, standards of pharmaceutical care, and recommendations for laboratory centers.

On March 28, 2020, order №663 was repealed by the new order of the Ministry of Health №722 "Organization of medical care for patients with coronavirus disease (COVID-19). Order №722 was amended 7 times, the last order of the Ministry of Health amending June 16, 2020 №1411.

The main sections of this order are:

- Standard of emergency medical care "Coronavirus disease (COVID-19)"
- Standards of care "Coronavirus disease (COVID-19)", which includes the organization of anti-epidemic measures and medical care in the center of SARS-CoV-2 infection, outpatient care for patients with suspected COVID-19 and inpatient treatment of patients with COVID-19
- Standard of pharmaceutical care "Coronavirus disease" (COVID-19) "

In March the government defined the list of border checkpoints to be closed (CM order № 288 of 13 March) and suspended the operation of checkpoints on the border with the temporarily occupied territory of the Autonomous Republic of Crimea and the city of Sevastopol (CM order № 291 of 14 March).

The quarantine measures were further strengthened on 16 March (CM order 215) – closure of educational institutions, ban on mass public events, business entities visited by the public, transportation of more than

10 people simultaneously in one vehicle of public transport, the work of the metro, and railway transport. On 17 March 2020 the Parliament adopted the Law "On Amendments to Certain Legislative Acts of Ukraine Aimed at Preventing the Occurrence and Spread of Coronavirus Disease". The law introduced fines for violating restrictive measures and abolished some tax requirements in order to provide financial benefits to businesses, employees and retirees affected by the economic crisis. The law also allows people to work remotely or take leave and provides additional allowances for medical personnel and other personnel involved in responding to COVID-19.

On 20 March 2020, the Resolution of the Cabinet of Ministers of Ukraine № 225 defined the list of purchases that are exempt from import duties and value added tax.

Resolution of the Cabinet of Ministers of March 20, 2020 № 242 approved the list of administrative services provided through the centers of administrative services during the quarantine period.

On March 23, 2020, the Resolution of the Cabinet of Ministers of Ukraine № 246 "Some issues of remuneration of medical and other workers directly involved in the elimination of acute respiratory disease COVID-19 caused by coronavirus SARS-CoV-2" was adopted, which establishes additional surcharges 200 percent of the salary.

On April 24, 2020, the Resolution of the Cabinet of Ministers of April 24, 2020 № 331 determined the implementation of additional surcharges for medical and other employees.

The procedure for compulsory hospitalization and self-isolation was approved by the Resolution of the Cabinet of Ministers of March 25 № 245.

The Resolution of the Cabinet of Ministers of March 29, 2020 № 241 establishes the procedure for self-isolation and observation for persons crossing the state border.

On April 1, 2020, the Verkhovna Rada adopted Law № 3268 "On Amendments to Certain Laws of Ukraine Concerning the Treatment of Coronavirus Diseases". The law allows unregistered medicines, registered medicines for indications not specified in the instructions for medical use, provided that there is a proven effectiveness in the treatment of coronavirus disease (COVID-19), recommended by the official body of the United States, European Union member states, UK, The Swiss Confederation, Japan, Australia, Canada, the People's Republic of China, the State of Israel for the treatment of coronavirus disease (COVID-19) in the respective country.

On April 22, 2020, the quarantine on the territory of Ukraine was extended until May 11, 2020, which was approved by the resolution of the Cabinet of Ministers of April 22, 2020 № 291.

Quarantine in Ukraine was extended until May 22, which was approved by the Resolution of the Cabinet of Ministers of May 4, 2020 № 343 "On Amendments to Certain Acts of the Cabinet of Ministers of Ukraine".

On May 7, the Verkhovna Rada passed 2 laws:

- Law № 587-IX "On Amendments to Certain Legislative Acts of Ukraine Concerning Provision of Treatment of Coronavirus Disease (COVID-19)", which provides for regular testing of medical workers; Temporary incapacity benefit is paid in the amount of 50 percent of the average salary (income) regardless of insurance experience, except for medical workers, who in such cases are paid in the amount of 100 percent of the average salary (income) regardless of insurance experience.

- Law № 588-IX "On Amendments to Article 39 of the Law of Ukraine" On Protection of the Population from Infectious Diseases "on Additional Guarantees of the Rights of Medical and Other Workers Protected from Infectious Diseases and Members of Their Families", which provides in the case of establishing a disability group within one calendar year due to coronavirus disease (COVID-19), depending on the disability group established by the employee and the degree of disability, but not less than 300 times the subsistence level established by law for able-bodied persons per 1 January of the calendar year; in case of death of the employee - in 750 times the subsistence level established by law for able-bodied persons on January 1 of the calendar year; if the death of a medical worker is due to infection with a coronavirus disease (COVID-19), it is equated in status to a serviceman who served in the military, whose death was due to injury, contusion, mutilation, illness related to military service. The family members of such an employee, his parents and dependents enjoy all the rights and guarantees provided by law.

On May 14, 2020, adaptive quarantine began on the territory of Ukraine. Resolution of the Cabinet of Ministers of Ukraine № 377 "On Amendments to Clause 2 of the Resolution of the Cabinet of Ministers of Ukraine of March 11 № 211" adopts measures for gradual removal of restrictions, in particular.

However, the quarantine was extended until June 22, which was approved by the Resolution of the Cabinet of Ministers of May 20, 2020 № 392 "On establishing quarantine to prevent the spread of acute respiratory disease COVID-19 caused by SARS-CoV-2 coronavirus and stages of mitigation of countermeasures »

By Resolution № 642 of July 22, 2020, the Cabinet of Ministers of Ukraine extended the adaptive quarantine until August 31, 2020. Depending on the epidemic situation in the region or individual

administrative-territorial units - districts, a green, yellow, orange or red level of epidemic danger of COVID-19 spread is established. The level is determined by automated software based on defined algorithms and collected data and approved by the National Commission for Energy and Emergency Situations. Therefore, these are the following quarantine restrictions for the "green zone":

- in public buildings it is mandatory to wear a mask or respirator;
- mass events can take place ensured that no more than 1 person per 5 square meters is present;
- cinemas must be filled by no more than 50%;
- passenger of public transport should only take place for seated passengers.

According to the decree, a region with a significant prevalence of COVID-19 is considered to be one that has at least one of the following features:"

- bed occupancy in health care facilities designated for hospitalization of patients with a confirmed case of COVID-19 is more than 50%;
- the average number of PCR and ELISA tests is less than 24 per 100 thousand population in the last seven days;
- the rate of detection of cases of COVID-19 infection is more than 11%;
- the rate of growth of COVID-19 infections is more than 10%.

Resolution of the Cabinet of Ministers № 712 of August 12, 2020 amended Resolution № 641. New changes to quarantine are the attempt to make quarantine restrictions as comfortable as possible for Ukrainians and at the same time prevent the spread of coronavirus. Currently, the level of COVID-19 threat in the regions is determined by three indicators - the occupancy of beds in medical institutions, the average number of tests and the incidence rate in administrative-territorial units.

The MOH has developed and endorsed the unified national protocol for treatment of patients with COVID-19. The protocol prescribes outpatient treatment of all patients with mild form of the disease who do not belong to groups with heightened risk of complications, as well as recovering patients who do not require constant clinical observation. Healthcare workers conduct constant monitoring of patient's condition and their contacts remotely or provide home counselling. Healthcare workers and contacts of the patients are required to use individual protection means. Outpatient treatment is prohibited for patients who belong to risk groups for complications or have symptoms indicating medium to severe disease progression.

The national protocol is based on the updated WHO recommendations adapted to the needs of Ukrainian healthcare system. Special mobile rapid response units are created in all oblasts of the country. The units respond to calls to family doctors, emergency healthcare services and other healthcare workers to patients with suspected COVID-19 in order to collect samples for laboratory analysis. This significantly decreases the mobility of people with symptoms of acute viral infection and require testing.

The current prognoses suggest that up to 21 000 000 people in Ukraine can be affected by COVID-19 (Plan for emergency response to the COVID-19 pandemic, March, 2020). The national response plan includes studying the impact of the COVID-19 pandemic on access to medical and social services, ensuring access to the required medicines for people with tuberculosis, HIV, hepatitis and other vulnerable populations; improving national response algorithms to the spread of COVID-19 and introducing systemic changes to existing ways of providing assistance to vulnerable populations. People living with advanced HIV infection, low CD4 levels and high viral load, as well as people who are not taking antiretroviral therapy, are generally at increased risk for various infections and related complications and until more information is available, all people with advanced HIV infection or poorly controlled HIV infection receive additional attention. The expected redirection of existing resources and staff of healthcare facilities to areas most affected by COVID-19 may be limiting availability of other necessary medical services in communities. In particular, access to HIV/tuberculosis treatment, provision of safe childbirth and newborn care, access to dialysis systems and other treatment of chronic diseases require constant supervision and may create a gap in healthcare service availability to other groups of patients.

Several hotlines have been introduced to address questions from the public about COVID-19 including the MOH hotline. The hotline addresses specific individual concerns that cannot be resolved through public media.

Another challenge relates to the impact of the armed conflict which has exhausted the healthcare system in the eastern part of Ukraine and resulted in the aging of the local population and increased vulnerability to the COVID-19 epidemic, also exacerbated by restricted access to HIV and TB services.

The proposed set of activities address the described challenges as well as ensure uninterrupted access to HIV and TB services for key populations by removing obstacles posed by the quarantine measures and introducing alternative ways of access such as home delivery of medications and services, scaled utilization of online platforms as information access and service entry points, extensive use of professional supervision including remote supervision of healthcare providers, and strengthened generation and utilization of strategic information to inform intervention development.

All CCM members are required to endorse this funding request. Note that CCM Eligibility Requirement 1 applies to this funding request submission.

b) Summarize how a range of stakeholders, including **civil society and key populations**, have been engaged in the development and decision-making on the priorities in this funding request.

The principal recipients have been engaged with civil society partners and key population organizations and networks throughout the epidemic and had ongoing mutual exchange of information regarding the epidemic development, prevention measures, detection strategies, treatment options, specific considerations affecting key populations, development of epidemic responses at community level and ensuring uninterrupted delivery of HIV and TB services. The requests from partner organizations guided the development and prioritization of proposed interventions.

Decision making at CCM involves representatives of all stakeholder constituencies including civil society and key populations. All the constituencies have attended the virtual CCM meeting that has endorsed the proposed application.

The COVID-19 outbreak context and quarantine measures have also been discussed and considered during the development of the main country proposed to the Global Fund. Many of the proposed interventions related to HIV and TB responses in COVID-19 context were incorporated in the present proposal.

1.2 Priority 1: Primary Funding Request

a) Indicate your allocation in the table below, and **calculate funds available** for COVID-19 Response Mechanism support.

2020-2022 total allocation	\$119 478 266
Funds available for COVID-19 Response Mechanism support	\$3 883 044

The designated funds available for financial support can be used for any of the following areas:

- Mitigating COVID-19 impact on HIV, TB, malaria programs
- Reinforcing the national COVID-19 response
- Urgent improvements in health and community systems

b) Briefly describe your **Priority 1 funding request**. Note that Global Fund investments must be in line with Global Fund technical guidance and WHO recommendations, and should support a national strategic preparedness and response plan.

The proposed set of interventions is designed to achieve the following objectives under the three areas supported by the Global Fund:

1. Ensure Uninterrupted and safe delivery of existing HIV and TB services (Area 1)
2. Introduce and expand complementary service delivery modalities and access points for KPs (Area 1)
3. Ensure access of KPs to reliable information and advice on COVID-19 (Area 2)
4. Ensure early detection and effective treatment of COVID-19 in high-risk populations (Area 2)
5. Ensure timely access to strategic information required to inform the response to pandemic (Area 3)

	Funding Requested	Activities proposed and rationale
Mitigating COVID-19 impact on HIV, TB, Malaria programs ¹		<p>In order to ensure uninterrupted and safe delivery of existing HIV and TB services (Objective 1) the following activities are proposed:</p> <p>A4: Procurement and supply of PPE to TB facilities Procurement and supply of PPE for personnel involved in the delivery of healthcare services to patients, as well as for patients treated in inpatient and outpatient TB facilities. The demand is calculated in accordance with the Standard of infection control and international recommendations, and considers the existing stock of PPE and projected supplies from all sources (respirators, masks, disinfectants, etc.). 30% of all related costs are prioritized under priority 1 allocation, and the rest are classified as priority 2.</p> <p>A5: Providing personal protective equipment to project staff, working with key populations, under the support of the state budget and the GF In order to prevent the spread of coronavirus infection among the employees and clients and to avoid interruption of services delivered with support from the Global Fund, it is necessary to supply the clients and workers with personal protection equipment. This includes procurement of FFP3 respirators, hand and surface disinfectants, masks for social workers (two items per day) and clients (one item per visit), disposable gloves, and thermometers. 35% of all related costs are prioritized under priority 1 allocation, and the rest are classified as priority 2.</p> <p>A7: NGCA: Personal protective equipment for TB outpatients and Hotline to address any COVID issues Includes procurement and supply to NGCA (Donetsk+Luhansk together) of 70 sets of protective clothing for working with COVID patients, masks for medical staff and patients, protective gloves, and disinfectants.</p> <p>In order to introduce and expand complementary service delivery modalities and access points for KPs (Objective 2) the following activities are proposed:</p> <p>A8: Rapid Delivery of Harm Reduction Commodities, Diagnostics and Medicines by mobile delivery units, Online outreach, screening, counselling and navigation to HIV services for key populations Includes delivery of services by teams of social workers and healthcare specialists (if required). The service will be piloted in three geographic locations with staged introduction of additional units. Services will be delivered by online or telephone appointments to client's home, office or other acceptable location. The service will allow to avoid interrupted access to commodities, diagnostics and medicines during quarantine (suspended operations of public transport), as well as enable serving the underserved segments of key populations with high risk of HIV transmission/acquisition, limited mobility or specific confidentiality concerns.</p> <p>The online work will enable continued engagement of new clients from key populations despite the quarantine restrictions. Based on social interaction of KPs, Internet and social media, the proposed activities will engage new clients in HIV prevention, detection and care services. Activities include marketing and further development of the existing online platforms for KPs, online outreach work, risk screening, delivery of information, online counselling by verified and ranked psychologists and healthcare providers, delivery of prevention and harm reduction commodities to registered program participants and navigation to offline services required for</p>

¹ Interventions to mitigate the impact of COVID-19 on HIV, TB and malaria programs should be informed by the COVID-19 Technical Guidance Pages published and regularly updated on the Global Fund website www.theglobalfund.org/en/covid-19/technical-guidance/

treatment initiation. Through online counselling and referrals, the intervention will also address the identified mental health needs of key populations, which are increasing in the context of COVID-19 and the quarantine measures. The service relies on existing infrastructure and cadre. Specialists from Postgraduate Medical Education Academy will be involved in in-service training and supervision of mental health specialists and ensure necessary licensing and professional qualifications, as well as the development and rollout of professional standards and guidelines. Online and offline services will be delivered by verified providers based on providers' territory and will not require any additional infrastructural investment thus ensuring high sustainability of the proposed activity.

N1: Providing personal protective equipment to project staff who deliver care and support services under the support of the state budget

In order to prevent the spread of coronavirus infection among workers and HIV-positive clients and to create safe conditions, it is necessary to provide staff and clients with personal protective equipment and antiseptics. The costs include procurement of hand and surface disinfectants, masks for social workers (two per day) and clients (one per visit). 35% of all related costs are prioritised under priority 1 allocation, and the rest are classified as priority 2.

N2: ART delivery

The intervention involves the organization of delivery of ARV therapy to patients under quarantine restrictions. The intervention involves the receipt of drugs by a social worker at the AIDS Center or on the ART site, and the organization of delivery to patients. Delivery will be carried out in two ways: through postal services (for 70% of clients) and by delivery by car (for 30% of clients). Cold storage requirements will be maintained during delivery, as the drugs will be delivered in cooler bags. Under quarantine conditions, in the absence of transport, people with HIV are unable to receive ART, which is a direct threat of mass disruption of treatment. The coverage is 38500 people and is equal to 35% of the number of people on ART as of 01.05.2020. There are 2 deliveries for each person, based on the assumption that one delivery is for 2-3 months and that the strict quarantine period will last up to 6 months. 60% of associated costs are included under priority 1 and the remaining costs – under priority 2.

N3: Assistance to HIV positive people in access to medical services for HIV support in the conditions of quarantine restrictions

The intervention is aimed at ensuring the continuity of medical and social support of HIV positive people and the availability of medical services within quarantine and is complementary to the service of ART delivery by car. Clients living in remote areas tend to have a much lower commitment to treatment. This intervention is aimed mostly at them. It is assumed that when ART is delivered by car to remote settlements, the client will also receive a doctor's consultation, a social worker's consultation, blood sampling will be performed for routine diagnosis (CD4, viral load) or urgent diagnostics. Blood sampling for COVID ELISA test will also be performed. The service will be provided in the format of a multidisciplinary team. Coverage is 11 550 persons and calculated as 30% of the total coverage of clients to whom ART is delivered under this project.

N10: Procurement of personal protective equipment

The availability of protective equipment for medical staff is mandatory when caring for patients with coronavirus infection, as well as in the provision of any other medical care by doctors. Ukraine occupies a leading position in the infection of medical personnel. Disposable medical coats, insulation suits with boot covers, respirators, medical gloves, protective glasses, medical face shields, medical masks (surgical), medical hats, high shoe covers, and alcohol-containing hand antiseptic will be procured.

		<p>N11: Provision of preventive measures in penitentiary institutions in the context of COVID19 through the use of personal protective equipment</p> <p>SARS-CoV-2 - the pathogen COVID-19 is transmitted through close contacts and droplets. In the group of people with the highest risk of infection - people who have been in close contact with the patient or people who care for patients. In addition to key general preventive measures (such as hand hygiene, respiratory hygiene and cough etiquette, wearing a medical mask in case of respiratory symptoms and social distance), additional preventive measures should be taken that are necessary for medical and non-medical staff to protect themselves and prevent transmission of pathogen COVID-19 - is the use of personal protective equipment (STANDARDS OF MEDICAL CARE "CORONAVIRUS DISEASE (COVID-19)" https://moz.gov.ua/uploads/3/19713-standarti_med_dopomogi_covid_19.p).</p> <p>It is planned to purchase medical masks, protective overalls and respirators for medical staff of institutions, non-medical staff of institutions, convicts / prisoners who have respiratory symptoms, and supply PPE to penitentiary institutions to ensure infection prevention.</p> <p>N12: Organization of testing for COVID-19 in penitentiary institutions</p> <p>According to WHO guidelines, all newcomers should be screened for body temperature and respiratory symptoms (http://www.euro.who.int/en/health-topics/health-emergencies/coronavirus-covid-19/novel-coronavirus-2019-ncov-technical-guidance-OLD / coronavirus-disease-covid-19-outbreak-technical-guidance-europe-OLD / prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention / faq-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention # 441897). Assessment of individual risk factors as well as screening that includes temperature monitoring and respiratory symptoms should be performed for all staff (medical and non-medical) as well as visitors to facilities. If symptoms are present, a person suspected of having COVID 19 should be isolated for further examination and testing. If COVID19 virus is detected, individuals who have had contact with COVID19 patients should also be tested. Testing for the virus will be performed by PCR on GeneXpert®, which are available in penitentiaries.</p> <p>It is planned to purchase non-contact thermometers for primary screening, cartridges for GeneXpert® for testing. The activity targets newly arrived prisoners / convicts, medical and non-medical staff of institutions, visitors and contact persons who are in penitentiary institutions. The services include:</p> <ol style="list-style-type: none"> 1) Primary screening of newcomers for symptoms of COVID-19 2) Screening of visitors to institutions for symptoms of COVID-19 3) Screening of prisoners / convicts with respiratory symptoms of COVID19 virus 4) Screening of staff of institutions (medical and non-medical) that have respiratory symptoms of COVID-19 5) Isolation of persons (prisoners, convicts, staff of institutions) in case of symptoms of COVID-19. 6) PCR testing for individuals with symptoms of COVID-19 to detect the virus. 7) PCR testing for contact persons. 8) Transportation of samples for testing to another institution (if the institution is not provided with GeneXpert®).
Reinforcing national		<i>[If requesting COVID-19 diagnostic tests, please additionally complete Annex 2]</i>

<p>COVID-19 response²</p>		<p>In order to ensure access of KPs to reliable information and advice on COVID-19 (Objective 3) the following activities are proposed:</p> <p>C1: Ensuring uninterrupted operation of the Ministry of Health of Ukraine COVID-19 Hotline</p> <p>The spread of COVID-19 infectious disease is of concern to the citizens of Ukraine. Here are numerous phone calls with questions about the ways of spread, symptoms of the disease, information on how to apply to the hospital for diagnosis, treatment, etc. In order to ensure coordinated work on providing quick, professional answers to citizens' inquiries on various issues of COVID-19, there is a need to support the work of the Ministry of Health of Ukraine COVID-19 Hotline 0-800-505 201. It is planned to support 6 highly qualified specialists of the Ministry of Health of Ukraine, which will provide answers to questions from citizens of Ukraine regarding COVID-19. [support for the work of 6 consultants of the COVID-19 hotline (6*1200\$*10 months)]. The first 14 weeks of the hotline operations are included under priority 1 and the remaining 26 weeks are included under priority 2.</p> <p>In order to ensure early detection and effective treatment of COVID-19 in high risk populations (Objective 4) the following activities are proposed:</p> <p>Ensuring effective detection of COVID-19 cases in order to reduce the risk of transmission as well as to enable effective clinical management of TB/COVID-19 co-infection will be implemented through activities C2 – C5.</p> <p>C2: Procurement and supply of rapid tests for detection of COVID-19 among the target populations in order to ensure screening of patients with TB for COVID-19 and screening of COVID-19 patients for TB, as well as screening of healthcare workers. Patients with COVID-19 and those with TB demonstrate similar symptoms, hence it is necessary to ensure access of the general population with signs of TB to the diagnosis of TB/COVID-19, namely the microbiological TB laboratory must have the equipment with sufficient capacity for the detection of TB and COVID-19. Early detection of COVID-19 will be achieved through procurement of cartridges for the detection of COVID-19 for the existing GeneXpert systems installed at the primary and secondary levels of healthcare delivery of the civil and penitentiary sectors, as well as in microbiological laboratories specializing in TB diagnosis. The existing equipment allows to conduct tests to detect coronavirus infection COVID-19 without compromising the capacity to diagnose TB and fully satisfy the normal needs of the TB service.</p> <p>According to the order of the Ministry of Health from 12.05.2020 №1109 `Changes to the Standards of care `Coronavirus disease` patients who receive medical care in the hospital must have the results of testing for SARS-COV2 by PCR. To date, the delay in hospitalization, including TB patients, is up to 4 days. As of August 1, 2020, 135 GeneXpert systems were installed and 33 systems were purchased in medical institutions, thus 168 GeneXpert systems will operate in Ukraine. The PHC specialists calculated the capacity of each machine, which took into account:</p> <ul style="list-style-type: none"> - the average number of studies conducted on TB; - implementation of sample preparation of biomaterial, work with laboratory journal; - 8 hour working day; - 10 hour working day.
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² Early response investments must be in line with WHO recommendations and could include, but are not limited to: COVID-19 response planning, preparation and surveillance (Technical Assistance, in-country planning missions, meetings, M&E investments); Protection of front-line health workers including those working for Global Fund programs (PPE, hospital infection control products, set up of isolation and quarantine wards); Diagnosis of infection (lab equipment and lab consumables, lab staff, specimen transportation); Treatment (ancillary treatment, equipment, hospital beds, systems for home-based care).

	<p>Given the time and average number of studies on TB, the estimated capacity of GeneXpert machines for testing for SARS-COV2 is from 8 to 24 tests. Thus, access to early diagnosis of TB in medical institutions of different levels of TB care will not be limited for TB patients.</p> <p>Cartridges for the laboratories of the Ministry of Defense will also be procured - for 4 existing GeneXpert systems and for 4 new systems that will be procured in the framework of this funding request.</p> <p>[PHC expects to procure 72 800 CoV-2 cartridges at \$22.4 each (including 2 800 cartridges for the Ministry of Defense). The total cost of the cartridges including 3% logistics costs is \$1 679 642.] 25 480 cartridges are included under priority 1 and 47 320 cartridges are included under priority 2.</p> <p>C3: Organization of biomaterial logistics for detection of coronavirus infection COVID-19 and TB from remote districts to provincial TB treatment facilities and other appropriately equipped facilities. This will be achieved by developing effective routes for the delivery of biological material and courier and transport services in 13 regions of Ukraine by the end of 2020. In other regions, the logistics of biological material are to be supported by the USAID-funded Support TB Control Efforts in Ukraine project. [The total cost of logistics for 5 months of 2020 and the first quarter of 2021 is \$43 520] Half of the required amount is included under priority 1 and the remaining costs are included under priority 2 allocation.</p> <p>C4: Strengthening the capacity of phthisiopulmonology centers to work with critically ill patients with COVID-19 and TB</p> <p>Currently, 240 first-wave hospitals that will be the first to receive patients with coronavirus have been identified for the hospitalization of patients with COVID-19, but their list may increase if necessary should the situation exacerbate. Most TB facilities do not currently treat patients with COVID-19 coronavirus infection, however, there may be a need to receive and treat such patients. As of May 2020, 4 regional phthisiopulmonology centers are included in the first wave of COVID-19 medical care (Lviv, Ivano-Frankivsk, Ternopil, Transcarpathia regions).</p> <p>In view of the above, the Public Health Centre has collected information from these TB facilities on the need for equipment to enable the provision of quality medical care in an emergency situation related to COVID-19 for critically ill patients in intensive care units and wards. According to the results of the analysis, the need for additional purchase of artificial lung ventilation devices, oxygen generators, pulse oximeters, oxygen masks was determined.</p> <p>To ensure proper infection control, 3rd level microbiological laboratories for the diagnosis of TB of civil and penitentiary sector are equipped with biosafety cabinets of 2A class (separately for sample preparation, allocation of MBT and production of DST), laboratory specialists work with sputum - contagious biomaterial, which may contain other diseases, therefore laboratory specialists are equipped with disposable gowns, gloves, respirators and glasses, and additional procurement of PPE is also envisioned. In order to mitigate the risk of infecting COVID patients with TB the rules of infection control will be observed, the patients will be hospitalized in separate boxes, separate patients flow.</p> <p>46.5% of the required costs are included under priority 1 and the remaining costs are included under priority 2.</p> <p>C5. Procurement of the reagents for the Abbott m2000rt / m2000sp machines for the diagnosis of COVID-19. There are 13 Abbott m2000rt / m2000sp devices in Ukraine, which can be used for diagnosis of COVID-19. The current need for testing using these devices is 15 thousand tests per month. This is 25% of the maximum load on these devices. The remaining capacity will be used for HIV needs.</p> <p>The number of tests to satisfy essential needs during 4 months is 60 000 tests at 21.85 USD each.</p>
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		<p>The additional use of machines to diagnose COVID-19 will not impact the routine HIV diagnostic.</p> <p>A3: Ensuring effective detection of COVID-19 cases in order to reduce the risk of transmission in the Ministry of Defence system</p> <p>Procurement of GeneXpert systems will allow to detect COVID-19 infection without compromising the ability to diagnose tuberculosis and fully meet the needs of the Ministry of Defence in the fight against tuberculosis. It is planned to equip 4 hospitals - Lviv, Odesa, Vinnytsia, Dnipro. Currently there are no GeneXpert systems installed in these facilities. After COVID-19 epidemic the machines will be utilized for TB/HIV testing. Total of 4 systems will be procured at \$17 500 each.</p> <p>N4: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions</p> <p>The intervention is aimed to secure access to diagnostics on COVID at the intersection points of the demarcation line (the diagnostics will be carried out by the method of PCR). Target group – people, who are crossing the demarcation line. Within this intervention these points will be provided by appropriate equipment (GeneXpert) and other materials (cartridges, kit for collecting biomaterial). It is planned to implement activities at 4 intersection points. Total coverage - 10 000 people who are crossing the demarcation line.</p> <p>N5: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions</p> <p>Provision of personal protective equipment for medical personnel who will perform COVID testing at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions. It is planned to implement activities at 4 intersection points. Number of medical staff -8 persons.</p> <p>N6: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions</p> <p>Training for the staff - on-site training for staff on equipment usage.</p> <p>N8: Purchase of equipment for intervention "Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions"</p> <p>It is planned to collect biomaterial for providing COVID testing by PCR method. Total coverage is 10,000 persons who are crossing the demarcation line.</p>
Urgent improvements in health and community systems ³		<p>In order to ensure timely access to strategic information required to inform the response to pandemic (Objective 5) the following activities are proposed:</p> <p>C6: Population seroprevalence study</p> <p>The proposed study aims to determine the prevalence of antibodies to SARS-CoV2 among the population of Ukraine to assess the true burden of COVID-19 and effectiveness of routine surveillance.</p> <p>Information about intensity and features of COVID-19 spread is crucial for planning and adapting measures to contain the epidemic. For Ukraine, the only source of such information is routine surveillance performed by the network of oblast laboratory centers and with data aggregated at the national level at the national Public Health Center. Indicators and predictors</p>

³ Initiatives to make urgent improvements in health and community systems should focus on interventions required to adapt to COVID-19, enabling the maintenance and impact of existing HIV, TB and malaria programs, and supporting the country's COVID-19 response (including with respect to laboratory networks, supply chains and engagement with vulnerable communities). These interventions should draw on the appropriate COVID-19 Technical Guidance Pages.

		<p>used for regional adaptive quarantine and modeling and forecasting are based on the number of registered cases in the national surveillance system and number of tests performed. Although efforts are made to ensure case detection, contact tracing and relevant information flow, there are a number of factors negatively influencing this process, including the lack of resources in the regions. Assessment of routine surveillance system was not completed so far, and there are debates among experts about the true burden of COVID-19 and the percentage of cases caught by surveillance. While it is known that seroprevalence of antibodies to SARS-CoV-2 in Europe and US is low demonstrating that herd immunity cannot be gained even in the areas with intensive epidemics, there are circulating speculations about 50% seroprevalence in Russian Federation and Kazakhstan, which influence perception, practices and decisions for Ukraine.</p> <p>The proposed study design is a cross-sectional population-based seroprevalence study with testing for IgG to SARS-Cov-2 by enzyme-linked immunosorbent assay (ELISA). The sampling techniques will be employed to represent the population of Ukraine with an attempt to reach both the population of big cities and remote rural areas to reflect the population structure. The study participants will also be asked to fill in a questionnaire about demography, previous symptoms and/or diagnosis, and basic risk factors.</p> <p>The obtained seroprevalence of antibodies to SARS-CoV2 in population of Ukraine will allow to estimate the actual number of people who had been infected by SARS-CoV2. This will become a basis for assessing the intensity of COVID-19 epidemics and comparing with the results of routine surveillance to assess effectiveness. Additionally, the data will allow to preliminary assess seroprevalence in selected populations, develop hypotheses about risk factors, areas and groups, and hypothesize the reasons for cases drop-out from surveillance. Estimated numbers of immune population and active cases might be used to adjust modelling and forecasting with susceptible-infectious-recovered (SIR) model.</p> <p>The costs include literature review, field testing of recruitment approach, training of field teams, data and sample collection, laboratory testing, monitoring costs, data processing, analysis and basic administrative costs.</p> <p>N14: Strengthened country preparedness and response to outbreaks and health emergencies, including COVID-19 by creating an Epidemics Emergency Interagency Response Mechanism</p> <p>Preparedness and response guidance for the COVID-19 pandemic is crucial to implement strategies to minimise disease transmission in Ukraine. It includes involvement and coordination of all stakeholders working collaboratively with state and regions as well as all government partners. At the national level, the response to the COVID-19 outbreak is led by the National Coordination Council, which has been set up by the President. However, Ukraine is facing significant gaps in coordination of efforts, as well as in the technical and operational implementation of preparedness and response policies set up by the Council. Therefore, technical support and broader policy dialogue for multi-sectoral action are needed, to better mitigate the health, social and economic consequences of COVID-19, and future epidemics. For this, the 100% LIFE will support the Government's nationwide preparedness and response mechanisms, which includes drafting policies, action plans, and technical guidance. It will undertake activities aimed to monitor and investigate outbreaks as they occur, identify and characterise the nature of the virus and the clinical severity of the disease, research disease-specific management strategies, respond to minimise the outbreak impact, undertake strategies to minimise the risk of further disease transmission, and contribute to the rapid and confident recovery of individuals, communities and services. Not only the national</p>
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		efforts but also the preparedness and response of regional communities will be supported. This will be achieved by the development of the technical guidelines for local authorities including reopening measures and action plans in case of the 'second wave' of COVID-19 pandemic in Ukraine.
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c) If you are requesting COVID-19 diagnostic tests and will be using machines currently used for TB testing and HIV viral load testing, indicate your **plan to mitigate the impact** on these activities.

<p>Early detection of COVID-19 will be achieved through procurement of cartridges for the detection of COVID-19 for the existing GeneXpert systems installed at the primary and secondary levels of healthcare delivery of the civil and penitentiary sectors, as well as in microbiological laboratories specializing in TB diagnosis. The existing equipment allows to conduct tests to detect coronavirus infection COVID-19 without compromising the capacity to diagnose TB and fully satisfy the normal needs of the TB service.</p> <p>According to the order of the Ministry of Health from 12.05.2020 №1109 `Changes to the Standards of care `Coronavirus disease` patients who receive medical care in the hospital must have the results of testing for SARS-COV2 by PCR. To date, the delay in hospitalization, including TB patients, is up to 4 days. As of August 1, 2020, 135 GeneXpert systems were installed and 33 systems were purchased in medical institutions, thus 168 GeneXpert systems will operate in Ukraine. The PHC specialists calculated the capacity of each machine considering the average number of studies conducted on TB, implementation of sample preparation of biomaterial, work with laboratory journal, 8 hour working day and 10 hour working day. Given the time and average number of studies on TB, the estimated capacity of GeneXpert machines for testing for SARS-COV2 is from 8 to 24 tests. Thus, access to early diagnosis of TB in medical institutions of different levels of TB care will not be compromised by the use of COVID-19 diagnostic tests.</p> <p>To ensure proper infection control, 3rd level microbiological laboratories for the diagnosis of TB of civil and penitentiary sector are equipped with biosafety cabinets of 2A class (separately for sample preparation, allocation of MBT and production of DST), laboratory specialists work with sputum - contagious biomaterial, which may contain other diseases, therefore laboratory specialists are equipped with disposable gowns, gloves, respirators and glasses, and additional procurement of PPE is also envisioned. In order to mitigate the risk of infecting COVID patients with TB the rules of infection control will be observed, the patients will be hospitalized in separate boxes, separate patients flow.</p>

1.3 Priority 2: Additional Funding Request

Briefly describe the **additional prioritized investments** you would request the Global Fund support, in case additional funding becomes available.

	Funding Requested	Activities proposed and rationale
Mitigating COVID-19 impact on HIV, TB, Malaria programs		<p>In order to ensure uninterrupted and safe delivery of existing HIV and TB services (Objective 1) the following activities are proposed:</p> <p>A4: Procurement and supply of PPE to TB facilities Procurement and supply of PPE for personnel involved in the delivery of healthcare services to patients, as well as for patients treated in inpatient and outpatient TB facilities. The demand is calculated in accordance with the Standard of infection control and international recommendations, and considers the existing stock of PPE and projected supplies from all sources (respirators, masks, disinfectants, etc.). 30% of all related costs are prioritised under priority 1 allocation, and the rest are classified as priority 2.</p> <p>A5: Providing personal protective equipment to project staff, working with key populations, under the support of the state budget and the GF</p> <p>In order to prevent the spread of coronavirus infection among the employees and clients and to avoid interruption of services delivered with support from the Global Fund, it is necessary to supply the clients and workers with personal protection equipment. This includes procurement of FFP3 respirators, hand and surface disinfectants, masks for social workers</p>

(two items per day) and clients (one item per visit), disposable gloves, and thermometers. 35% of all related costs are prioritized under priority 1 allocation, and the rest are classified as priority 2.

N1: Providing personal protective equipment to project staff who deliver care and support services under the support of the state budget

In order to prevent the spread of coronavirus infection among workers and HIV-positive clients and to create safe conditions, it is necessary to provide staff and clients with personal protective equipment and antiseptics. The costs include procurement of hand and surface disinfectants, masks for social workers (two per day) and clients (one per visit). 35% of all related costs are prioritised under priority 1 allocation, and the rest are classified as priority 2.

N2: ART delivery

The intervention involves the organization of delivery of ARV therapy to patients under quarantine restrictions. The intervention involves the receipt of drugs by a social worker at the AIDS Center or on the ART site, and the organization of delivery to patients. Delivery will be carried out in two ways: through postal services (for 70% of clients) and by delivery by car (for 30% of clients). Cold storage requirements will be maintained during delivery, as the drugs will be delivered in cooler bags. Under quarantine conditions, in the absence of transport, people with HIV are unable to receive ART, which is a direct threat of mass disruption of treatment. The coverage is 38500 people and is equal to 35% of the number of people on ART as of 01.05.2020. There are 2 deliveries for each person, based on the assumption that one delivery is for 2-3 months and that the strict quarantine period will last up to 6 months. 60% of associated costs are included under priority 1 and the remaining costs – under priority 2.

N3: Assistance to HIV positive people in access to medical services for HIV support in the conditions of quarantine restrictions

The intervention is aimed at ensuring the continuity of medical and social support of HIV positive people and the availability of medical services within quarantine and is complementary to the service of ART delivery by car. Clients living in remote areas tend to have a much lower commitment to treatment. This intervention is aimed mostly at them. It is assumed that when ART is delivered by car to remote settlements, the client will also receive a doctor's consultation, a social worker's consultation, blood sampling will be performed for routine diagnosis (CD4, viral load) or urgent diagnostics. Blood sampling for COVID ELISA test will also be performed. The service will be provided in the format of a multidisciplinary team. Coverage is 11 550 persons and calculated as 30% of the total coverage of clients to whom ART is delivered under this project.

N10: Procurement of personal protective equipment

The availability of protective equipment for medical staff is mandatory when caring for patients with coronavirus infection, as well as in the provision of any other medical care by doctors. Ukraine occupies a leading position in the infection of medical personnel. Disposable medical coats, insulation suits with boot covers, respirators, medical gloves, protective glasses, medical face shields, medical masks (surgical), medical hats, high shoe covers, and alcohol-containing hand antiseptic will be procured.

N11: Provision of preventive measures in penitentiary institutions in the context of COVID19 through the use of personal protective equipment

SARS-CoV-2 - the pathogen COVID-19 is transmitted through close contacts and droplets. In the group of people with the highest risk of infection - people who have been in close contact with the patient or people who care for patients. In addition to key general preventive measures (such as hand hygiene, respiratory hygiene and cough etiquette, wearing a

		<p>medical mask in case of respiratory symptoms and social distance), additional preventive measures should be taken that are necessary for medical and non-medical staff to protect themselves and prevent transmission of pathogen COVID-19 - is the use of personal protective equipment (STANDARDS OF MEDICAL CARE "CORONAVIRUS DISEASE (COVID-19)" https://moz.gov.ua/uploads/3/19713-standarti_med_dopomogi_covid_19.p.</p> <p>It is planned to purchase medical masks, protective overalls and respirators for medical staff of institutions, non-medical staff of institutions, convicts / prisoners who have respiratory symptoms, and supply PPE to penitentiary institutions to ensure infection prevention.</p> <p>N12: Organization of testing for COVID-19 in penitentiary institutions</p> <p>According to WHO guidelines, all newcomers should be screened for body temperature and respiratory symptoms (http://www.euro.who.int/en/health-topics/health-emergencies/coronavirus-covid-19/novel-coronavirus-2019-ncov-technical-guidance-OLD / coronavirus-disease-covid-19-outbreak-technical-guidance-europe-OLD / prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention / faq-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention # 441897). Assessment of individual risk factors as well as screening that includes temperature monitoring and respiratory symptoms should be performed for all staff (medical and non-medical) as well as visitors to facilities. If symptoms are present, a person suspected of having COVID 19 should be isolated for further examination and testing. If COVID19 virus is detected, individuals who have had contact with COVID19 patients should also be tested. Testing for the virus will be performed by PCR on GeneXpert®, which are available in penitentiaries.</p> <p>It is planned to purchase non-contact thermometers for primary screening, cartridges for GeneXpert® for testing. The activity targets newly arrived prisoners / convicts, medical and non-medical staff of institutions, visitors and contact persons who are in penitentiary institutions. The services include:</p> <ol style="list-style-type: none"> 1) Primary screening of newcomers for symptoms of COVID-19 2) Screening of visitors to institutions for symptoms of COVID-19 3) Screening of prisoners / convicts with respiratory symptoms of COVID19 virus 4) Screening of staff of institutions (medical and non-medical) that have respiratory symptoms of COVID-19 5) Isolation of persons (prisoners, convicts, staff of institutions) in case of symptoms of COVID-19. 6) PCR testing for individuals with symptoms of COVID-19 to detect the virus. 7) PCR testing for contact persons. 8) Transportation of samples for testing to another institution (if the institution is not provided with GeneXpert®). <p>In order to introduce and expand complementary service delivery modalities and access points for KPs (Objective 2) the following activities are proposed:</p> <p>A6: Ensuring safe storage and handling of take-home opioid agonist medication.</p> <p>The increasing number of patients accessing take home doses of opioid agonists requires education of family members, partners and friends of PWUD on safe storage and handling of medications. The intervention includes introduction of individual lockers for safe storage of opioid agonists by patients.</p> <p>A8: Rapid Delivery of Harm Reduction Commodities, Diagnostics and</p>
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	<p>Medicines by mobile delivery units, Online outreach, screening, counselling and navigation to HIV services for key populations</p> <p>Includes delivery of services by teams of social workers and healthcare specialists (if required). The service will be piloted in three geographic locations with staged introduction of additional units. Services will be delivered by online or telephone appointments to client's home, office or other acceptable location. The service will allow to avoid interrupted access to commodities, diagnostics and medicines during quarantine (suspended operations of public transport), as well as enable serving the underserved segments of key populations with high risk of HIV transmission/acquisition, limited mobility or specific confidentiality concerns.</p> <p>The online work will enable continued engagement of new clients from key populations despite the quarantine restrictions. Based on social interaction of KPs, Internet and social media, the proposed activities will engage new clients in HIV prevention, detection and care services. Activities include marketing and further development of the existing online platforms for KPs, online outreach work, risk screening, delivery of information, online counselling by verified and ranked psychologists and healthcare providers, delivery of prevention and harm reduction commodities to registered program participants and navigation to offline services required for treatment initiation. Through online counselling and referrals, the intervention will also address the identified mental health needs of key populations, which are increasing in the context of COVID-19 and the quarantine measures. The service relies on existing infrastructure and cadre. Specialists from Postgraduate Medical Education Academy will be involved in in-service training and supervision of mental health specialists and ensure necessary licensing and professional qualifications, as well as the development and rollout of professional standards and guidelines. Online and offline services will be delivered by verified providers based on providers' territory and will not require any additional infrastructural investment thus ensuring high sustainability of the proposed activity.</p>
<p>Reinforcing national COVID-19 response</p>	<p><i>[If requesting COVID-19 diagnostic tests, please additionally complete Annex 2]</i></p> <p>In order to ensure access of KPs to reliable information and advice on COVID-19 (Objective 3) the following activities are proposed:</p> <p>C1: Ensuring uninterrupted operation of the Ministry of Health of Ukraine COVID-19 Hotline</p> <p>The spread of COVID-19 infectious disease is of concern to the citizens of Ukraine. Here are numerous phone calls with questions about the ways of spread, symptoms of the disease, information on how to apply to the hospital for diagnosis, treatment, etc. In order to ensure coordinated work on providing quick, professional answers to citizens' inquiries on various issues of COVID-19, there is a need to support the work of the Ministry of Health of Ukraine COVID-19 Hotline 0-800-505 201. It is planned to support 6 highly qualified specialists of the Ministry of Health of Ukraine, which will provide answers to questions from citizens of Ukraine regarding COVID-19. [support for the work of 6 consultants of the COVID-19 hotline (6*1200\$*10 months)]. The first 14 weeks of the hotline operations are included under priority 1 and the remaining 26 weeks are included under priority 2.</p> <p>N13: Improved IT solutions for HIV patients' remote management</p> <p>The activity is aimed at enhanced remote communication by the health-care provider and HIV patient. The information exchange will be done through improved existing IT decisions within the country: HIV MIS and "100% Life" app for patients already integrated with HIV MIS. Currently it is a one-way communication, when patient receives ART prescription, test results on his / her own app. The functionalities will be extended to inform the physician on some ART problems in patient and to allow two-way communication</p>

between a patient and a physician.

In order to ensure early detection and effective treatment of COVID-19 in high risk populations (Objective 4) the following activities are proposed:

C2: Ensuring effective detection of COVID-19 cases in order to reduce the risk of transmission as well as to enable effective clinical management of TB/COVID-19 co-infection

Procurement and supply of rapid tests for detection of COVID-19 among the target populations in order to ensure screening of patients with TB for COVID-19 and screening of COVID-19 patients for TB, as well as screening of healthcare workers. Patients with COVID-19 and those with TB demonstrate similar symptoms, hence it is necessary to ensure access of the general population with signs of TB to the diagnosis of TB/COVID-19, namely the microbiological TB laboratory must have the equipment with sufficient capacity for the detection of TB and COVID-19.

Early detection of COVID-19 will be achieved through procurement of cartridges for the detection of COVID-19 for the existing GeneXpert systems installed at the primary and secondary levels of healthcare delivery of the civil and penitentiary sectors, as well as in microbiological laboratories specializing in TB diagnosis. The existing equipment allows to conduct tests to detect coronavirus infection COVID-19 without compromising the capacity to diagnose TB and fully satisfy the normal needs of the TB service.

Cartridges for the laboratories of the Ministry of Defense will also be procured - for 4 existing GeneXpert systems and for 4 new systems that will be procured in the framework of this funding request.

[PHC expects to procure 72 800 CoV-2 cartridges at \$22.4 each (including 2 800 cartridges for the Ministry of Defense). The total cost of the cartridges including 3% logistics costs is \$1 679 642.] 25 480 cartridges are included under priority 1 and 47 320 cartridges are included under priority 2.

C3: Ensuring effective detection of COVID-19 cases in order to reduce the risk of transmission as well as to enable effective clinical management of TB/COVID-19 co-infection

Organization of biomaterial logistics for detection of coronavirus infection COVID-19 and TB from remote districts to provincial TB treatment facilities and other appropriately equipped facilities, by developing effective routes for the delivery of biological material and courier and transport services in 13 regions of Ukraine by the end of 2020. In other regions, the logistics of biological material are to be supported by the USAID-funded Support TB Control Efforts in Ukraine project. [The total cost of logistics for 5 months of 2020 and the first quarter of 2021 is \$43 520] Half of the required amount is included under priority 1 and the remaining costs are included under priority 2 allocation.

C4: Strengthening the capacity of phthisiopulmonology centers to work with critically ill patients with COVID-19 and TB

Currently, 240 first-wave hospitals that will be the first to receive patients with coronavirus have been identified for the hospitalization of patients with COVID-19, but their list may increase if necessary should the situation exacerbate. Most TB facilities do not currently treat patients with COVID-19 coronavirus infection, however, there may be a need to receive and treat such patients. As of May 2020, 4 regional phthisiopulmonology centers are included in the first wave of COVID-19 medical care (Lviv, Ivano-Frankivsk, Ternopil, Transcarpathia regions).

In view of the above, the Public Health Centre has collected information from these TB facilities on the need for equipment to enable the provision of quality medical care in an emergency situation related to COVID-19 for critically ill patients in intensive care units and wards. According to the results of the analysis, the need for additional purchase of artificial lung

		<p>ventilation devices, oxygen generators, pulse oximeters, oxygen masks was determined. 46.5% of the required costs are included under priority 1 and the remaining costs are included under priority 2.</p> <p>A1: Ensuring effective treatment of COVID-19 cases in the health care facilities of the Ministry of Defence of Ukraine Procurement of centralized oxygen supply stations (generator, network, connection to hospital beds). It is planned to equip all Military Medical Clinical Centers (Kyiv, Kharkiv, Lviv, Odesa, Dnipro, Vinnytsia) - 6 stations at \$50 000 each.</p> <p>A2: Ensuring functioning of centralized oxygen supply stations in the health care facilities of the Ministry of Defence of Ukraine Involvement of a technical specialist to support procurement and installation of centralized oxygen supply stations.</p> <p>N4: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions The intervention is aimed to secure access to diagnostics on COVID at the intersection points of the demarcation line (the diagnostics will be carried out by the method of PCR). Target group - people who are crossing the demarcation line. Within this intervention these points will be provided by appropriate equipment (GeneXpert) and other materials (cartridges, kit for collecting biomaterial). It is planned to implement activities at 4 intersection points. Total coverage - 10 000 people who are crossing the demarcation line.</p> <p>N5: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions Provision of personal protective equipment for medical personnel who will perform COVID testing at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions. It is planned to implement activities at 4 intersection points. Number of medical staff -8 persons.</p> <p>N6: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions Training for the staff - on-site training for staff on equipment usage.</p> <p>N7: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions Organizing and conducting COVID testing, which includes the collection of biomaterial, diagnostics, registration of results and referral of the patient to a medical facility (in case of a positive result). To ensure the provision of these services, payment for a nurse and a doctor will be provided. It is planned to implement activities at 4 intersection points.</p> <p>N8: Purchase of equipment for intervention "Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions" It is planned to collect biomaterial for providing COVID testing by PCR method. Total coverage is 10,000 persons who are crossing the demarcation line.</p>
Urgent improvements in health and community systems		<p>In order to ensure timely access to strategic information required to inform the response to pandemic (Objective 5) the following activities are proposed:</p> <p>N9: Study to determine the level of COVID-19 impact on members of key populations and PLHIV and identify barriers to obtaining health related services The COVID-19 pandemic has been a strong catalyst for strengthening</p>

		<p>barriers to access to services and could be a source of new ones. This, in turn, could increase inequalities in access to both medical and social services. It is expected that among the main objectives of the study will be: identifying barriers to obtaining services related to the preservation of health and life of vulnerable groups and their categorization; determine the level of impact (short-term, long-term, overcoming, insurmountable) on members of vulnerable groups. As an additional source of information service providers will be used. This will help gather and analyse information on how prepared providers were to support vulnerable groups during the pandemic. Which of the existing resources were sufficient for them and which needs were not met due to the lack of knowledge or resources (including human).</p> <p>N14: Strengthened country preparedness and response to outbreaks and health emergencies, including COVID-19 by creating an Epidemics Emergency Interagency Response Mechanism</p> <p>Preparedness and response guidance for the COVID-19 are crucial for implementing of the strategies to minimize disease transmission in Ukraine. It includes the involvement and coordination of all stakeholders working with the state and regions, as well as all government partners. At the national level, the response to the COVID-19 outbreak is headed by the National Coordinating Council, established by the President. However, Ukraine faces significant gaps in the coordination of efforts, as well as challenges related to the technical and operational implementation of the readiness and response policies approved by the Council. Therefore, technical support and a broader policy dialogue on cross-sectoral actions are needed to mitigate the social and economic consequences of COVID-19, as well as the health consequences and prospects for responding to future epidemics. This intervention does not envision the creation of a separate coordination mechanism, but aims to support the existing one. For this, the NGO "100% Life" will support the government's national preparedness and response mechanism, which includes the development of strategies, action plans and technical recommendations. Interventions include supporting activities to monitor and investigate outbreaks in case of their occurrence, identifying and determination of the characteristics and nature of the virus, clinical severity of the disease, study strategies for managing specific diseases, respond to minimize the impact of outbreaks, adopt strategies to minimize the risk of further disease transmission and to promote the rapid and confident recovery of people, communities and services. Not only national efforts will be supported, but also the availability of regional community preparedness and response capabilities. This will be achieved through the development of technical recommendations for local authorities, including measures to restore action plans in case of a `second wave` of the COVID-19 pandemic in Ukraine.</p>
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Note: this prioritized request, in addition to funding for the COVID-19 response already accessed with Global Fund grant flexibilities and the Priority 1 funding request above, should not go beyond 10% of the total 2020-2022 allocation. Although there is no guarantee that additional funds will become available, the Global Fund requests that countries complete this section to ensure the Global Fund can fully assess demand. Countries are encouraged to exhaust all flexibilities under grant savings and reprogramming in the interim, following guidance available on the Global Fund website <https://www.theglobalfund.org/en/covid-19/grants/>.

1.4 Implementation

Describe planned **implementation arrangements for each activity**, including Principal Recipient(s) and Sub-recipient(s). These must be existing Global Fund implementers. Indicate the grant(s) into which the funding will be integrated and the planned year of implementation.

Activity	Principal Recipient	Sub-recipient(s)	Grant into which funding will be integrated	Year of implementation (2020 or 2021)
Priority 1				
A4: Procurement and supply of PPE to TB facilities	APH	Healthcare facilities	UKR-C-AUA	2020/2021
A5: Providing personal protective equipment to project staff, working with key populations, under the support of the state budget and the GF	APH	Local NGO partners involved in the implementation of GF grants	UKR-C-AUA	2020/2021
A7: NGCA: Personal protective equipment for TB outpatients and Hotline to address any COVID issues	APH	Local NGO partners involved in the implementation of GF grants	UKR-C-AUA	2020/2021
A8: Rapid Delivery of Harm Reduction Commodities, Diagnostics and Medicines by mobile delivery units, Online outreach, screening, counselling and navigation to HIV services for key populations	APH	Local NGO partners involved in the implementation of GF grants	UKR-C-AUA	2020/2021
N1: Providing personal protective equipment to project staff who deliver care and support services under the support of the state budget	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N2: ART delivery	Network	Healthcare facilities and local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N3: Assistance to HIV positive people in access to medical services for HIV support in the conditions of quarantine restrictions	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N10: Procurement of personal protective equipment	Network	Healthcare facilities and local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N11: Provision of preventive measures in penitentiary institutions in the context of COVID19 through the use of personal protective equipment	Network	Penitentiary institutions and local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021

N12: Organization of testing for COVID-19 in penitentiary institutions	Network	Penitentiary institutions and local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
C1: Ensuring uninterrupted operation of the Ministry of Health of Ukraine COVID-19 Hotline	PHC	None	UKR-C-PHC	2020
C2: Procurement and supply of rapid tests for detection of COVID-19 among the target populations in order to ensure screening of patients with TB for COVID-19 and screening of COVID-19 patients for TB, as well as screening of healthcare workers	PHC	Healthcare facilities	UKR-C-PHC	2020/2021
C3: Organization of biomaterial logistics for detection of coronavirus infection COVID-19 and TB from remote districts to provincial TB treatment facilities and other appropriately equipped facilities	PHC	Healthcare facilities	UKR-C-PHC	2020/2021
C4: Strengthening the capacity of phthiopolmonology centers to work with critically ill patients with COVID-19 and TB	PHC	Healthcare facilities	UKR-C-PHC	2020
C5: Procurement of the reagents for the Abbott m2000rt / m2000sp machines for the diagnosis of COVID-19	PHC	Healthcare facilities	UKR-C-PHC	2020
A3: Ensuring effective detection of COVID-19 cases in order to reduce the risk of transmission in the Ministry of Defence system	APH	Ministry of Defence	UKR-C-AUA	2020/2021
N4: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020
N5: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N6: Organization of testing for COVID at the intersection points of the demarcation line in the	Network	Local NGO partners involved in the implementation of GF	UKR-C-AUN	

particular districts of Donetsk and Luhansk regions		grants		2020
N8: Purchase of equipment for intervention "Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions"	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
C6: Conducting of population seroprevalence study	PHC	National Virology Reference Laboratory	UKR-C-PHC	2020/2021
N14: Strengthened country preparedness and response to outbreaks and health emergencies, including COVID-19 by creating an Epidemics Emergency Interagency Response Mechanism	Network	Epidemics Emergency Interagency Response Mechanism	UKR-C-AUN	2020/2021
Priority 2				
A4: Procurement and supply of PPE to TB facilities	APH	Local NGO partners involved in the implementation of GF grants	UKR-C-AUA	2020/2021
A5: Providing personal protective equipment to project staff, working with key populations, under the support of the state budget and the GF	APH	Local NGO partners involved in the implementation of GF grants	UKR-C-AUA	2020/2021
N1: Providing personal protective equipment to project staff who deliver care and support services under the support of the state budget	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N2: ART delivery	Network	Healthcare facilities and local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N3: Assistance to HIV positive people in access to medical services for HIV support in the conditions of quarantine restrictions	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N10: Procurement of personal protective equipment	Network	Healthcare facilities and local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021

N11: Provision of preventive measures in penitentiary institutions in the context of COVID19 through the use of personal protective equipment	Network	Penitentiary institutions and local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N12: Organization of testing for COVID-19 in penitentiary institutions	Network	Penitentiary institutions and local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
A6: Ensuring safe storage and handling of take-home opioid agonist medication.	APH	Local NGO partners involved in the implementation of GF grants	UKR-C-AUA	2020/2021
A8: Rapid Delivery of Harm Reduction Commodities, Diagnostics and Medicines by mobile delivery units, Online outreach, screening, counselling and navigation to HIV services for key populations	APH	Local NGO partners involved in the implementation of GF grants	UKR-C-AUA	2020/2021
C1: Ensuring uninterrupted operation of the Ministry of Health of Ukraine COVID-19 Hotline	PHC	None	UKR-C-PHC	2020
N13: Improved IT solutions for HIV patients' remote management	Network	None	UKR-C-AUN	2020/2021
C2: Procurement and supply of rapid tests for detection of COVID-19 among the target populations in order to ensure screening of patients with TB for COVID-19 and screening of COVID-19 patients for TB, as well as screening of healthcare workers	PHC	Healthcare facilities	UKR-C-PHC	2020/2021
C3: Organization of biomaterial logistics for detection of coronavirus infection COVID-19 and TB from remote districts to provincial TB treatment facilities and other appropriately equipped facilities	PHC	Healthcare facilities	UKR-C-PHC	2020/2021
C4: Strengthening the capacity of phthisiopulmonology centers to work with critically ill patients with COVID-19 and TB	PHC	Healthcare facilities	UKR-C-PHC	2020

A1: Ensuring effective treatment of COVID-19 cases in the health care facilities of the Ministry of Defence of Ukraine	APH	Ministry of Defence	UKR-C-APH	2020/2021
A2: Ensuring functioning of centralized oxygen supply stations in the health care facilities of the Ministry of Defence of Ukraine	APH	Ministry of Defence	UKR-C-APH	2020/2021
N4: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020
N5: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N6: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020
N7: Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N8: Purchase of equipment for intervention "Organization of testing for COVID at the intersection points of the demarcation line in the particular districts of Donetsk and Luhansk regions"	Network	Local NGO partners involved in the implementation of GF grants	UKR-C-AUN	2020/2021
N9: Study to determine the level of COVID-19 impact on members of key populations and PLHIV and identify barriers to obtaining health related services	Network	TBD	UKR-C-AUN	2021
N14: Strengthened country preparedness and response to outbreaks and health emergencies, including COVID-19 by creating an Epidemics Emergency Interagency Response Mechanism	Network	Epidemics Emergency Interagency Response Mechanism	UKR-C-AUN	2020/2021

Section 2: Coordination

The Global Fund must ensure that all COVID-19 Response Mechanism funding awarded is complementary to funding from other partners.

List any applications for funding for the COVID-19 response you have made, or intend to make, to international donors. If the funding requests are completed, please attach the applications. Indicate if any of these applications have already been approved.

Indicate name of international donor and focus of funding request	Indicate status of application: [completed or in-progress]	Has this funding request been approved? [Yes/No] If Yes, indicate how much was approved and for what activities
Coalition PLUS Focus: ensuring timely and safe access of key populations and other vulnerable groups to HIV testing and ART initiation, TPT and HIV-related services in the highest COVID-19 burden regions of Ukraine	Completed	Yes, the funding approved EUR 50 000 The funding was approved for PPE (face masks, respirators, protective glasses, hand disinfectants, etc.) for 4 COVID high burden regions (Zakarpattia, Rivne, Ternopil, Chernivtsi)
USAID, emergency technical support to cover the needs for a consolidated national response to the disease outbreak.	Completed	Yes, total 3 millions of USD. 1. Strengthened country preparedness and response to outbreaks and health emergencies, including COVID-19. 1.1. Assist the government with implementation of risk communication and community engagement (RCCE) strategy for emergency preparedness and response. 1.2. Provide technical assistance to improve the government's preparedness and response to outbreaks. 1.3. Strengthen government capacity to collect, analyze and use data for outbreak preparedness and response. 1.4. Ensure supply of vital commodities.
EJAF. Maintaining access to PrEP among MSM in Kyiv, Kharkiv, and Dnipro	Completed	Yes £16 000. Approved, contract pending
PITCH (MOFA Netherlands through Frontline AIDS)	Completed	Yes \$44 999. Approved
Drug-Resistant Tuberculosis Lifeline QuickFire Challenge	Completed	No, decision pending

Annex 1: Documents Checklist

Use the list below to verify the completeness of your application package:

<input type="checkbox"/>	Funding Request Form
<input type="checkbox"/>	CCM Endorsement of Funding Request⁴
<input type="checkbox"/>	National COVID-19 Response Plan (if available)
<input type="checkbox"/>	Funding applications to international donors (as relevant)

⁴ <https://www.theglobalfund.org/en/funding-model/applying/materials/>

Annex 2: Only Required if Requesting COVID-19 Diagnostic Tests

Context: There is a currently a global shortfall in supply of COVID-19 diagnostics. Please submit your request for number of tests and sample collection kits for the full amount needed over the next 16 weeks, noting that due to supply constraints the actual amount provided may be less than that or be distributed in tranches over the period rather than as a single batch. We will be transparently communicating updated diagnostic volumes on a frequent basis as and when more supply becomes available. More granular guidance on the exact operational model will be issued shortly. In addition, we are cognizant that there is an evolving landscape of manual and rapid diagnostic tests, and we will be revising our approach and guidance as the WHO guidance evolves on those products. Currently, the Global Fund will focus primarily on funding automated rather than manual tests. The following information is required if requesting COVID-19 diagnostic tests:

A. Manufacturer / Type	B. Name of COVID-19 test kit	C. Required Instrument Model	D. Number of instruments available for COVID-19 testing in Country	E. Indicative Cost per Test (USD)*	F. Number of Tests Requested	G. Implied Cost of Requested Tests (column E x column F)	H. Indicative Cost per Sample Collection Kits (USD)**	I. Number of Tests Requested	J. Implied Cost of Requested Sample Collection Kits (column H x column I)	K. Implied Total Cost of Requested Sample Collection Kits (column G + column J)
Abbott Molecular Diagnostics	Abbott RealTime SARS-CoV-2 Amplification Reagent Kit	Abbott m2000rt/ Abbott m2000sp	13	\$21,85	60000	\$1 311 000,00	\$2,00	0	\$0,00	\$1 311 000,00
Cepheid HBDC	Xpert Xpress SARS-CoV-2 kit	GeneXpert IV, 4 sites analyser with Laptop/ GeneXpert IV, 4 sites analyser with Desktop	168	\$22,80	24000	\$547 200,00	\$2,00	0	\$0,00	\$547 200,00

Optional: Please detail out below any needs for additional platforms beyond what is existing in your country that may be required to deliver your COVID-19 testing strategy.

[Applicant response]

Optional: Please provide a description of any other diagnostic-specific health products that may be required to deliver your COVID-19 testing strategy.

[Applicant response]

Optional: Please provide a description and indicative budget for any technical assistance needed to implement your COVID-19 diagnostics strategy.

[Applicant response]

Notes and references:

Note: COVID-19 diagnostics will be procured and utilized in full compliance with the requirements for health products in the relevant grant agreement.

Reference: For a Diagnostics procurement framework reference, see Global Fund HIV Viral Load and Early Infant Diagnosis Selection and Procurement Information Tool; whilst developed for viral load, many of the concepts are applicable to COVID-19 diagnostics.

https://www.theglobalfund.org/media/5765/psm_viralloadearlyinfantdiagnosis_content_en.pdf?u=637166002690000000

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