



Report No: RES00272

RESTRUCTURING PAPER
ON A
PROPOSED PROJECT RESTRUCTURING
OF

OECS Regional Health Project
APPROVED ON 29-Aug-2019

TO

Caribbean Public Health Agency (CARPHA), Commonwealth of Dominica,
Grenada, Organisation of Eastern Caribbean States (OECS), Saint Lucia, Saint
Vincent and the Grenadines

Health, Nutrition & Population
Latin America And Caribbean

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ABBREVIATIONS AND ACRONYMS

CARPHA	Caribbean Public Health Agency
CD	Country Director
CERC	Contingency Emergency Response Component
DHIS	District Health Information Software
E&S	Environmental and social
FELTP	Field Epidemiology and Laboratory Training Program
ICD-11	International Classification of Diseases 11th Revision
IDA	International Development Association
ISR	Implementation Status and Results Report
OECS	Organisation of Eastern Caribbean States
PDO	Project development objective
PEF	Pandemic Emergency Financing Facility
RPAC	Regional Project Advisory Committee
WB	World Bank



BASIC DATA

Product Information

Operation ID P168539	Operation Name OECS Regional Health Project
Product/Financing Instrument Investment Project Financing (IPF)	Geographical Identifier OECS Countries
Approval Date 29-Aug-2019	Current Closing Date 30-Jun-2026
Original EA Category Partial Assessment (B) (PAD Approval Package-29 Aug 2019)	

Organizations

Borrower Caribbean Public Health Agency (CARPHA), Commonwealth of Dominica, Grenada, Organisation of Eastern Caribbean States (OECS), Saint Lucia, Saint Vincent and the Grenadines	Responsible Agency Dominica - Ministry of Health, Wellness and New Health Investment, Grenada - Ministry of Health, Social Security and International Business, St Vincent and the Grenadines - Public Sector Investment Programme Management Unit (PSIPMU), St. Lucia - Ministry of Health and Wellness
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OPERATION STATUS

Project Development Objective (DO)

Original Development Objective

The objective of the Project is to (i) improve preparedness capacities of health systems for public health emergencies in the OECS region, and (ii) provide a response in the event of eligible crises or emergencies.



Disbursement Summary (in USD million)

Source of Funds	Net Commitment	Disbursed	Balance	% Disbursed
IBRD	--	--	--	0
IDA	40.60	20.40	20.20	50.23
Grants	0.88	0.88	0.00	100.00

Policy Waivers

Does this restructuring trigger the need for any policy waiver(s)?

No



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I. PROJECT STATUS AND RATIONALE FOR RESTRUCTURING

A. Introduction

1. **This restructuring paper seeks the approval of the Country Director (CD) for a Level II Restructuring of the Organisation of Eastern Caribbean States (OECS) Regional Health Project (P168539) to extend the closing date of the Caribbean Public Health Agency (CARPHA) grant (International Development Association (IDA) Grant Number D512) by 23 months from July 31, 2024, to June 30, 2026.** The implementation arrangements, the Project's development objective (PDO) and relevant environmental and social (E&S) standards would remain unchanged. If approved, this would be the fourth restructuring¹ of the Project and the first extension of the CARPHA's grant closing date.

B. Project Background

2. **The OECS Regional Health Project aims to: (a) improve preparedness capacities of health systems for public health emergencies in the OECS region, and (b) provide a response in the event of eligible crises or emergencies.** The Project includes participation from four countries (Dominica, Grenada, Saint Lucia, and Saint Vincent and the Grenadines) and two regional agencies (CARPHA and the OECS Commission). The Project was initially financed by four credits totaling US\$21 million² and two grants totaling US\$9.6 million³ that were approved by the World Bank (WB)'s Executive Board of Directors on August 29, 2019 and declared effective between January 13, 2020 and March 5, 2020.⁴ Although the Project is implemented by country recipients, CARPHA plays a pivotal role in ensuring effective coordination among countries. It also focuses on building countries' capacity in key areas relevant to the OECS Regional Health Project, such as public health surveillance, disease control, laboratory services, and the training of health care workers, among other. The Project consists of four components: (1) Improved Health Facilities and Laboratory Capacity, which is financing enhancements to the resilience and capacity of selected health facilities and laboratories to effectively respond to public health emergencies; (2) Strengthening Public Health Surveillance and

¹ The Project was previously restructured on: (1) June 26, 2020 simultaneously with the approval of an additional financing to update the PDO, modify the results framework, and replenish funds to reflect the activation of the Contingency Emergency Response Component (CERC); (2) November 25, 2020 to reallocate funds across disbursement categories and modify Component 4? costing using Bank-administered Pandemic Emergency Financing Facility (PEF) funding following a cost overrun; and (3) May 24, 2024 to extend the closing dates of the IDA credits for Dominica, Grenada, Saint Lucia, and Saint Vincent and the Grenadines by 23 months, from July 31, 2024 to June 30, 2026, adjust the component costing, modify the Project's results framework, and update the disbursement projections and implementation schedule accordingly.

² This included SDR 2.2 million (US\$3 million equivalent) to the Commonwealth of Dominica; US\$6 million to Grenada; US\$6 million to Saint Lucia; and US\$6 million to Saint Vincent and the Grenadines.

³ This included SDR 4.8 million (US\$6.6 million equivalent) to CARPHA and SDR 2.2 million (US\$3 million equivalent) to the OECS Commission.

⁴ To declare the regional project effective, the IDA credits for both regional entities and at least two countries were required to have been declared effective, (i.e., the Financing Agreement signed, and the legal opinion issued).



Emergency Management, which is financing efforts to strengthen public health preparedness by enhancing surveillance and emergency response capabilities at national and regional levels; (3) Institutional Capacity Building, Project Management and Coordination; and (4) a Contingency Emergency Response Component (CERC), activated in 2020 to respond to the COVID-19 pandemic.

C. Project Status and Performance

- 3. Progress towards achievement of the PDO is rated Moderately Satisfactory, as confirmed in the latest Implementation Status and Results Report (ISR), dated June 25, 2024.** As of June 2024, only one PDO indicator (PDO 5 - Designated laboratories with COVID-19 diagnostic equipment, test kits, and reagents) has been achieved, though project entities are making progress towards achievement of the remaining four indicators. Countries have made strides on activities related to the SMARTing of twenty health facilities (design and supervision contracts are underway), with works expected to begin in the next few months (St. Lucia and Saint Vincent and the Grenadines are leading these processes). Activities are also advancing on laboratory and surveillance, as well as on emergency management. These include, for example, activities to support laboratories' accreditations or improved surveillance (e.g., procurement of laboratory equipment, reagents, and provision of capacity building), construction of a new public health laboratory in Saint Vincent and the Grenadines, improved isolation capacity, and Field Epidemiology and Laboratory Training Program (FELTP) trainings. During the proposed 23-month extension period, CARPHA will focus on achieving the remaining indicator targets that are yet to be met. This includes various indicators related to strengthening surveillance capacities, such as enhancing indicator and event-based surveillance (PDO3 indicator), utilizing electronic tools for surveillance, and developing protocols for gender-specific surveillance. Additionally, CARPHA will concentrate on strengthening the capacities of countries in key project areas. This will involve conducting in-country workshops to increase the number of trained and certified shippers of infectious substances, providing various training sessions on laboratory equipment and services, and boosting overall capacities to meet and measure their indicators' targets.
- 4. Overall Implementation Progress is also rated Moderately Satisfactory.** As of July 17, 2024, the US\$0.88 million Pandemic Emergency Financing Facility (PEF) grant is fully disbursed and US\$20.4 million of the US\$40.6 million total IDA proceeds (equivalent to 50.2 percent) have been disbursed. Disbursements up to June 30, 2023 (date of CERC closure) primarily focused on CERC-related expenditures. To improve project implementation, between November 2023 and March 2024 all four countries developed detailed, time-bound action plans to accelerate disbursement and activities, now under implementation. These plans, combined with a strategic shift since mid-2022 to focus on Components 1 and 2, and the additional allocation of staff by participating countries, have led to improved performance. CARPHA, in turn, has disbursed US\$3.89 million of its US\$6.38 million equivalent grant (60.9 percent). The remaining funds are allocated for strengthening laboratory services through procurement and harmonization of equipment and reagents, improving procurement systems, training on equipment maintenance, procuring laboratory equipment and reagents for the Caribbean Reference Laboratory, and enhancing CARPHA and countries' laboratories' information systems. Funds will also enhance surveillance capacities through FELTP trainings, including mentorship, train-the-trainer courses, and upgrading an e-learning platform. Additional efforts include



strengthening mortality surveillance, supporting the International Classification of Diseases 11th Revision (ICD-11) rollout, implementing District Health Information Software (DHIS) at CARPHA and in participating countries, and developing an online technical platform for data management. Emergency management activities include developing a regional preparedness and response action plan. CARPHA will also provide additional capacity building to participating countries in areas such as monitoring and evaluation and procurement.

5. **Project Management.** Safeguards performance is rated Satisfactory, and the Project remains in compliance with environmental and social commitments. Other key Project ratings (Financial Management, Project Management, Procurement, Monitoring and Evaluation) remain assessed as Moderately Satisfactory. CARPHA's interim financial reports are up to date, there are no overdue audit reports, and all audit reports received to date have been considered satisfactory to the Bank. CARPHA remains in compliance with key legal covenants. Considering the challenges of this complex project and the various implementation agencies, the WB team continues to put in place mitigation measures to ensure effective project supervision. For example, the WB has provided additional procurement support to the entities, including to CARPHA, through the hiring of an international Procurement Specialist, utilizing the generous funding of the Canada-Caribbean Resilience Facility Trust Fund. In addition, the team has also ensured monitoring and evaluation of key indicators through support of short-term consultants with expertise in Emergency Management and Surveillance during the first few years of project implementation. As requested by the four participating countries, CARPHA will deploy part of its grant during the 23-months extension to continue enhancing procurement and monitoring and evaluation capacities in them. This effort aims to improve compliance, accelerate project implementation, and build long-lasting capacities in these countries that will extend beyond the life of the project.

D. Rationale for Restructuring

6. **On July 5, 2024, the CARPHA sent a formal request to the WB to restructure the Project to extend the respective grant closing date by 23 months.** The request was initiated following the 10th Regional Project Advisory Committee (RPAC) meeting, held on June 5-6, 2024 in Washington, D.C. The meeting included hybrid participation from all six project entities. At this meeting, the four participating countries highlighted the significance of CARPHA's involvement for the successful execution of the project's regional strategy. CARPHA is instrumental in coordinating the biannual RPAC meetings, enhancing capacity in monitoring and evaluation, surveillance, and laboratory services, and facilitating regular discussions among project stakeholders to make informed decisions on emergency management. As a regional body, CARPHA assists the participating countries in carrying out their respective activities. Despite the proximity of the current closing date and the recent increase in funds availability for similar objectives, CARPHA has indicated its readiness to extend support throughout the proposed 23-month extension period with the available undisbursed grant allocation. The agency is recruiting additional staff to manage its increased workload from other new grant sources available to it.
7. **CARPHA developed and shared with the WB a detailed action plan to complement the country-specific action plans for the remainder of the revised project implementation period, addressing specific participating country**



requests. The plan specifies adjusted timelines for activities that will not be finalized by the current grant closing date, ensuring alignment with the respective country action plans and full disbursement of the grant. It also incorporates requests from the countries to bolster laboratory, monitoring and evaluation, and procurement capacity building for Ministry of Health personnel. This proposed extension would allow sufficient time to complete CARPHA grant-financed activities, thereby facilitating full utilization of the grant proceeds and giving continuation to the Project’s regional approach.

II. DESCRIPTION OF PROPOSED CHANGES

- 8. **The proposed restructuring would extend the closing date of the CARPHA grant (IDA Grant Number D512) under the OECS Regional Health Project by 23 months from July 31, 2024, to June 30, 2026.** This extension would align with the closing dates of the IDA credits for the participating countries and is needed to both allow sufficient time to finalize ongoing CARPHA’s activities and to enhance coordination among the four participating countries and bolster their capacity to carry out project activities.
- 9. **The Project’s implementation schedule and disbursement estimates, as well as the end target date for indicators not yet achieved, would be adjusted accordingly to reflect the closing date extension.** No other changes are proposed. Disbursement projections will be updated to reflect the extension in timeline for use of grant funds under Component 1-3, as well as projections generated in the action plan, in the next ISR submission following this restructuring.

III. PROPOSED CHANGES

Operation Information	Proposed Changes	Operation Information	Proposed Changes
Results	Yes	Loan Closing Date Extension	Yes
Disbursements Estimates	Yes	Implementation Schedule	Yes
Development Objective	No	Loan Cancellations	No
Safeguard Policies Triggered	No	Reallocations	No
ISDS	No	Financial Management	No



MFD/PCE	No	Procurement	No
Risks	No	Institutional Arrangement	No
Legal Covenants	No		
Conditions	No		
Implementation Modalities	No		
Disbursements Arrangements	No		
DDO	No		
Clients	No		
Appraisal Summary	No		
Components	No		

IV. DETAILED CHANGE(S)

COSTS & FINANCING

Private Capital Facilitation

Is this an MFD-Enabling Project (MFD-EP)?

Is this project Private Capital Enabling (PCE)?

LOANS

Loan Closing

Loan/Credit/T rust Fund	Status	Original Closing	Revised Closing(s)	Proposed Closing	Proposed Deadline for Withdrawal Applications
IDA-64760-001	Effective	31-Jul-2024	30-Jun-2026		
IDA-64770-001	Effective	31-Jul-2024	30-Jun-2026		
IDA-64780-001	Effective	31-Jul-2024	30-Jun-2026		
IDA-64810-001	Effective	31-Jul-2024	30-Jun-2026		



IDA-67300-001	Effective	31-Jul-2024	30-Jun-2026		
IDA-67310-001	Effective	31-Jul-2024	30-Jun-2026		
IDA-67320-001	Effective	31-Jul-2024	30-Jun-2026		
IDA-D5120-001	Effective	31-Jul-2024	31-Jul-2024	30-Jun-2026	30-Oct-2026
IDA-D5130-001	Effective	31-Jul-2024	31-Jul-2024		
TF-B4548-001	Closed	31-Jan-2021	31-Jan-2021		

DISBURSEMENTS**Operation Dates & Projection Details**

Reasons to change the full Disbursement date and/or the projection

Restructuring, Change in Pace of Implementation

Implementation Start Date

29-Aug-2019

Operation Closing Date

30-Jun-2026

Projected Date for Full Disbursement

30-Oct-2026

Expected Disbursements (in US \$) (Absolute)

Year	Original Estimation at Preparation (Approval Package – 29 Aug 2019)	Revised Estimation	Actual
FY2020	110,251.80	4,675,000.00	5,077,577.68
FY2021	3,237,051.60	9,342,857.00	7,032,646.52
FY2022	6,050,323.80	11,200,000.00	3,080,796.52
FY2023	8,450,128.80	9,300,000.00	2,968,439.53
FY2024	8,508,483.00	5,300,000.00	3,115,700.33
FY2025	3,022,637.40	1,300,000.00	0.00
FY2026	0.00	0.00	0.00
FY2027	0.00	0.00	0.00



RESULTS

COUNTRY: Dominica, Grenada, St. Lucia, St. Vincent and the Grenadines
OECS Regional Health Project

PDO Indicators by PDO Outcomes

Table with 5 main columns: Indicator Name, Baseline (Result, Month/Year), Actual (Previous) (Result, Date), Actual (Current) (Result, Date), and Closing Period (Result, Month/Year). The table details the 'Public health emergency preparedness' indicator, showing a baseline of 0.00 in Apr/2019 and a current actual of 0.00 as of 05-Mar-2024, with a closing period target of 4.00 by Jun/2026. Comments describe progress in design and supervision consultancies across the four countries.



			<p>launched for procurement of SMART retrofitting works. Works may start in Q1 FY25.</p> <p>SVG: One health facility to be retrofitted out of the 3 selected due to budget shortage and prioritization of the public health lab construction. Bidding process was relaunched due to lack of proposals received. Contract signature is expected in August for works. **</p> <p>This indicator reflects a combined value of the Hospital Safety Index (HSI) and Green Score based on the Smart Hospital/Health Facilities Index developed by PAHO. HSI category A reflects a facility that is able to continue functioning following a disaster. A Green Score of 70 reflects achievement of 70 percent on the Green checklist. This reflects the total number of countries that have Smart Health Facilities supported by the OECS Regional Health Project.</p>					
Dominica: Health system capacity to withstand extreme weather events based on Smart Health Facility standards (Number)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	3.00	Jun/2026
	Comments on achieving targets		Indicator based on Smart Hospital/Health Facilities Index. This reflects the number of health facilities Smarted under the OECS Regional Health Project.					
Grenada: Health system capacity to withstand extreme weather events based on Smart Health Facility standards (Number)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Indicator based on Smart Hospital/Health Facilities Index. This reflects the number of health facilities Smarted under the OECS Regional Health Project.					
Saint Lucia: Health system capacity to withstand extreme weather events based on Smart Health Facility standards (Number)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	11.00	Jun/2026
	Comments on achieving targets		Indicator based on Smart Hospital/Health Facilities Index. This reflects the number of health facilities Smarted under the OECS Regional Health Project.					
	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	1.00	Jun/2026



Saint Vincent and the Grenadines: Health system capacity to withstand extreme weather events based on Smart Health Facility standards (Number)	Comments on achieving targets	Indicator based on Smart Hospital/Health Facilities Index. This reflects the number of health facilities Smarted under the OECS Regional Health Project.						
Public health emergency preparedness								
Indicator Name	Baseline		Actual (Previous)		Actual (Current)		Closing Period	
	Result	Month/Year	Result	Date	Result	Date	Result	Month/Year
	1.00	Apr/2019	1.00	05-Mar-2024	1.00	05-Mar-2024	5.00	Jun/2026
Number of countries/regional entities with laboratory testing capacity for detection of priority diseases based on achievement/sustainment of a JEE score of 4.0 or higher (Number)	Comments on achieving targets		<p>*** Updates as of June 2024: Countries continue advancing in various processes for the strengthening of lab capacities. Specifically:</p> <ul style="list-style-type: none"> - Dominica: Ultra low temperature freezers and equipment procurement is underway to enhance lab capacities, and bidding documents for the accreditation of the national lab are being prepared. - Grenada: Grenada is pursuing lab accreditation (contract underway) and procurement of diagnostic equipment for labs (contract signature expected in June/July), IT equipment procurement for labs is in evaluation phase. The procurement processes for various other lab strengthening activities may be started in the next few months, depending on progress in defining the specifications. These involve: procurement of furniture and equipment for labs and to strengthen LMIS operations, consultancy to deliver short term training for medical lab technicians, consultancy to develop a national training programme for lab technicians, STC to support lab accreditation processes, the development of the medtech curriculum. - Saint Lucia: Accreditation of two labs is ongoing, as well as the procurement of equipment for entomology lab (contract underway). In the next six months, the procurement of refrigerators for storage of specimen will be advanced, as this is currently under evaluation of quotes. 					



		<p>- Saint Vincent and the Grenadines: the country main initiative under the project to strengthen lab capacity is to build a new public health lab (PHL) for the expansion of lab services. Detailed designs are under development, with the Bank having already provided feedback. Procurement of lab equipment, computer software and hardware, and reagents for the PHL will be done under the project, in coordination with the construction timeline. Other activities for the enhancement of detection capacities relate to the supply of labs equipment (such as Molbio equipment for the detection of food and water bourne pahogens), for which the procurement process is underway, and the lab data management and interoperabiliuty with health and surveillane system (specifications being developed). An activity for Training and capacity building for laboratory services as well as an activity to strenghten LQMS through lab accreditation, will be launched in the next six months.***</p> <p>JEE Question D.1.1. Capacity graded on a scale of 1-5 where: 1 = no capacity (laboratory surveillance system is not capable of conducting any core tests) 2 = limited capacity (laboratory system is capable of conducting 1-2 out of 10 core tests) 3 = developed capacity (laboratory system is capable of conducting 3-4 of 10 core tests) 4 = demonstrated capacity (laboratory system is capable of conducting 5 or more of 10 core tests) 5 = sustainable capacity (laboratory system is capable of conducting 5 or more of 10 core tests and quality assurance systems are in place and tested)</p>						
Dominica: Laboratory testing capacity for detection of priority diseases based on JEE score (Number)	2.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.1.					
	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026



Grenada: Laboratory testing capacity for detection of priority diseases based on JEE score (Number)	Comments on achieving targets		Capacity graded as described in JEE Question D.1.1.					
Saint Lucia: Laboratory testing capacity for detection of priority diseases based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.1.					
Saint Vincent and the Grenadines: Laboratory testing capacity for detection of priority diseases based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.1.					
CARPHA: Laboratory testing capacity for detection of priority diseases based on JEE score (Number)	4.00	Apr/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jul/2024
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.1. It is important to note that while the baseline and targets are the same, IHR capacities also refer to maintaining all essential public health functions needed to apply and comply with the IHR. In other words, efforts need to continuously be made to maintain higher scores achieved.					
Public health emergency preparedness								
Indicator Name	Baseline		Actual (Previous)		Actual (Current)		Closing Period	
	Result	Month/Year	Result	Date	Result	Date	Result	Month/Year
Number of countries/regional entities with indicator and event-based surveillance established based on achievement/sustainment of JEE score of 4.0 or higher (Number)	1.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	5.00	Jun/2026
	Comments on achieving targets		*** Updates as of June 2024: Gains continue to be made across countries for this indicator - moving closer to a "4" target for each country. FETP training has been conducted in all countries (and continues), with the support from CARPHA, which is the training provider. Grenada: surveillance strengthening activities include the training to provide morbidity and mortality surveillance; Consultancy on ICD 10; cancer registry activity. In the next six months, a consultancy to optimize HMIS will be developed. Saint Lucia: In the last six months, the country has					



			<p>developed the TORs for the improvement of the online functionality of the National Communicable Disease Surveillance Manual, to be launched in the next six months. Two additional activities will be advanced to enhance the surveillance capacity in the country: a) The country is developing the specifications for a consultancy to support the Event-based Surveillance Strategy; b) procurement of electronic surveillance system (PIU working with the health information unit to develop specifications). Saint Vincent and the Grenadines: in the last six months, the country has focused on producing the bidding documents to enhance surveillance through a consultancy to Develop Port Health Protocols and Environmental Health Surveillance System Manuals. By the next ISR the project would have been launched and advanced these activities. Training on Vector Control management is ongoing. ****</p> <p>JEE Question D.2.1. Capacity graded on a scale of 1-5 where: 1 = no capacity (no indicator or event-based surveillance system exists) 2 = limited capacity (indicator or event-based surveillance system established in next year) 3 = developed capacity (indicator or event-based surveillance system in place) 4 = demonstrated capacity (indicator and event-based surveillance system in place) 5 = sustainable capacity (indicator and event-based surveillance system in place and regularly evaluated and updated, and country/regional entity contributes to regional/international surveillance networks)</p>					
Dominica: Indicator and event-based surveillance established based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.1.					
Grenada: Indicator and event-based surveillance established based on JEE score (Number)	2.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.1.					



Saint Lucia: Indicator and event-based surveillance established based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.1.					
Saint Vincent and the Grenadines: Indicator and event-based surveillance established based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.1.					
Revise CARPHA: Indicator and event-based surveillance established based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.1. It is important to note that while the baseline and targets are the same, IHR capacities also refer to maintaining all essential public health functions needed to apply and comply with the IHR. In other words, efforts need to continuously be made to maintain higher scores achieved.					
Public health emergency preparedness								
Indicator Name	Baseline		Actual (Previous)		Actual (Current)		Closing Period	
	Result	Month/Year	Result	Date	Result	Date	Result	Month/Year
Number of countries with emergency operations center (EOC) capacities, procedures, and plans in place based on achievement/sustainment of JEE score of 4.0 or higher (Number)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		<p>**Update as of June 2024: While, all countries have an HEOC in place, capacity must be at least at a score of 4 to be recorded here. All countries are advancing on this regard:</p> <p>Dominica: Dominica has made advances in terms of emergency management under the project, thus upgrading their EM indicators. A Multi-Hazards Plan and Concept of Operations was completed and approved by Cabint following assistance received from World Bank consultants. Socialization, through a stakeholders engagement event will be needed and pursued in the next six months (note: government has requested the TA from the WB funded emergency management consultant for this activity). In addition, in the next six months, the procurement of equipment for HEOC will be advanced (bidding documents prepared</p>					



already). PAHO is supporting EM activities in the country, with WB supporting the logistics in some of these activities.

Grnada: an AAR has been completed. A training workshop for the Health Disaster Committee and key stakeholders to present the updated Multi-Hazard Plan and procedures will be pursued; the recruitment of a short-term consultant/consulting firm to train a cadre of EMT's for EOC operation will advance in the next six months (client is identifying possible suppliers to define specifications); specifications for comms equipment for HEOC are being identified to advance the procurement in the next six months, among others. Saint Lucia: the country advanced in the last six months with the reports on an AAR and the assessment of risk using the STAR assessment. Also, a radio communications network assessment has been started under the project and the consultancy is expected to be completed in the next six months. Also, in the next six months, the following activities will be kicked off: the development of an emergency management training syllabus, training and simulation exercise in the use of the EOCs; updating the national health sector multi-haard emergency/disaster management plan. Saint Vincent and the Grenadines: In the next six months, the following will be a dvanced: the update of the National One Health All-Hazard Management Plan (bidding process started, evaluation ongoing); procurement of EOC equipment (specifications being prepared).

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JEE Question R.2.2. Capacity graded on a scale of 1-5 where: 1 = no capacity (no EOC structure or plans/procedures in place) 2 = limited capacity (EOC structure in place and responds to emergencies on ad hoc basis) 3 = developed capacity (EOC structures, plans, resources and trained staff in place. Not yet capable of responding to an alert within 120 minutes) 4 = demonstrated capacity (National EOC system in place and able to respond to emergency within 120 minuts, functions have been tested and updated in past 2 years. Structures and plans available at sub-national level.) 5 = sustainable capacity (All national and sub-national



			systems tested and updated regularly. EOC operations can be sustained for large-scale or concurrent emergencies.)					
Dominica: Emergency operations center (EOC) capacities, procedures, and plans in place based on JEE score (Number)	1.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question R.2.2.					
Grenada: Emergency operations center (EOC) capacities, procedures, and plans in place based on JEE score (Number)	1.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question R.2.2.					
Saint Lucia: Emergency operations center (EOC) capacities, procedures, and plans in place based on JEE score (Number)	3.00	Apr/2019	5.00	05-Mar-2024	5.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question R.2.2.					
Saint Vincent and the Grenadines: Emergency operations center (EOC) capacities, procedures, and plans in place based on JEE score (Number)	1.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question R.2.2.					
Response to eligible public health emergencies								
Indicator Name	Baseline		Actual (Previous)		Actual (Current)		Closing Period	
	Result	Month/Year	Result	Date	Result	Date	Result	Month/Year
Designated laboratories with COVID-19 diagnostic equipment, test kits, and reagents (Number)	1.00	May/2020	2.00	13-Dec-2023	2.00	13-Dec-2023	2.00	Dec/2021
	Comments on achieving targets		Indicator's target achieved.					



Grenada - Designated laboratories with COVID-19 diagnostic equipment, test kits, and reagents (Number)	0.00	May/2020	1.00	13-Dec-2023	1.00	13-Dec-2023	1.00	Dec/2021
SVG - Designated laboratories with COVID-19 diagnostic equipment, test kits, and reagents (Number)	1.00	Jun/2020	1.00	13-Dec-2023	1.00	13-Dec-2023	1.00	Dec/2021

Intermediate Results Indicators by Components

Improved Health Facilities and Laboratory Capacity								
Indicator Name	Baseline		Actual (Previous)		Actual (Current)		Closing Period	
	Result	Month/Year	Result	Date	Result	Date	Result	Month/Year
Number of countries with 100% of proposed facility upgrades completed to withstand extreme weather events based on Smart Health Facility standards (Percentage)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026
	Comments on achieving targets		*** See updates by country regarding the SMARTing of health facilities in respective PDO indicator comments. *** Percentage of facilities completed according to program plans					
Dominica: Completed proposed facility upgrades to withstand extreme weather events based on Smart Health Facility standards (Percentage)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026
	Comments on achieving targets		Percentage of facilities completed according to program plans					
	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026



Grenada: Completed proposed facility upgrades to withstand extreme weather events based on Smart Health Facility standards (Percentage)	Comments on achieving targets		Percentage of facilities completed according to program plans					
Saint Lucia: Completed proposed facility upgrades to withstand extreme weather events based on Smart Health Facility standards (Percentage)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026
Saint Lucia: Completed proposed facility upgrades to withstand extreme weather events based on Smart Health Facility standards (Percentage)	Comments on achieving targets		Percentage of facilities completed according to program plans					
Saint Vincent and the Grenadines: Completed proposed facility upgrades to withstand extreme weather events based on Smart Health Facility standards (Percentage)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026
Saint Vincent and the Grenadines: Completed proposed facility upgrades to withstand extreme weather events based on Smart Health Facility standards (Percentage)	Comments on achieving targets		Percentage of facilities completed according to program plans					
Number of countries/regional entities that complete 100 percent of proposed laboratory upgrades (Percentage)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	5.00	Jun/2026
Number of countries/regional entities that complete 100 percent of proposed laboratory upgrades (Percentage)	Comments on achieving targets		**** See updates by country regarding the lab upgrades in respective PDO indicator comments. *** Percentage of facilities completed according to program plans					
Dominica: Completed proposed laboratory upgrades (Percentage)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026
Dominica: Completed proposed laboratory upgrades (Percentage)	Comments on achieving targets		Percentage of facilities completed according to program plans					
Grenada: Completed proposed laboratory upgrades (Percentage)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026
Grenada: Completed proposed laboratory upgrades (Percentage)	Comments on achieving targets		Percentage of facilities completed according to program plans					
	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026



Saint Lucia: Completed proposed laboratory upgrades (Percentage)	Comments on achieving targets		Percentage of facilities completed according to program plans					
Saint Vincent and the Grenadines: Completed proposed laboratory upgrades (Percentage)	0.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	100.00	Jun/2026
	Comments on achieving targets		Percentage of facilities completed according to program plans					
CARPHA: Completed proposed laboratory upgrades (Percentage)	0.00	Apr/2019	60.00	05-Mar-2024	100	19-Jul-2024	100.00	Jul/2024
	Comments on achieving targets		Percentage of facilities completed according to program plans					
Number of countries/regional entities with specimen referral and transportation systems based on achievement/sustainment of JEE score of 4.0 or higher (Number)	0.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	5.00	Jun/2026
	Comments on achieving targets		<p>*** See updates by country in respective PDO indicator comments. Dominica and Grenada are the two countries that still need to achieve the target for this indicator. On this regard: a) Dominica: Ultra low temperature freezers to enhance specimen referral and transportation; lab accreditation procurement process will be launched shortly; b) Grenada is pursuing lab accreditation (contract underway) and procurement of equipment for labs, which may influence in their specimen referral and transportation systems (more information to be provided in the next ISR). ***</p> <p>JEE Question D.1.2. Capacity graded on a scale of 1-5 where: 1 = no capacity (no system in place to transport specimens from sub-national to national labs; transportation is ad hoc) 2 = limited capacity (system is in place to transport specimens to national labs from <50% of sub-national labs for advanced diagnostics) 3 = developed capacity (system is in place to transport specimens to national labs from 50-80% of sub-national labs for advanced diagnostics) 4 = demonstrated capacity (system is in place to transport specimens to national labs from at least 80% of sub-national labs for advanced diagnostics) 5 = sustainable capacity (systems in place to transport specimens to/from other labs in the region and funded from host country budget)</p>					



Dominica: Specimen referral and transportation systems based on JEE score (Number)	2.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.2.					
Grenada: Specimen referral and transportation systems based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.2.					
Saint Lucia: Specimen referral and transportation systems based on JEE score (Number)	1.00	Apr/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.2.					
Saint Vincent and the Grenadines: Specimen referral and transportation systems based on JEE score (Number)	3.00	Apr/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.2.					
CARPHA/OECS: Specimen referral and transportation systems based on JEE score (Number)	3.00	Apr/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jul/2024
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.2.					
Number of countries/regional entities with quality laboratory systems based on achievement/sustainment of JEE score of 4.0 or higher (Number)	1.00	Apr/2019	1.00	05-Mar-2024	1.00	05-Mar-2024	5.00	Jun/2026
	Comments on achieving targets		<p>***See updates on lab quality systems in respective PDO indicators. Most countries under the project have lab accreditation processes underway for improvement of lab quality systems.***</p> <p>JEE Question D.1.4. Capacity graded on a scale of 1-5 where: 1 = no capacity (no national laboratory standards) 2 = limited capacity (quality standards developed but no system for verifying their implementation) 3 = developed capacity (system of licensing laboratories including conformity to national standards exists but is voluntary or is not a requirement for all</p>					



			laboratories) 4 = demonstrated capacity (mandatory licensing of all laboratories is in place and conformity to national standards is required) 5 = sustainable capacity (mandatory licensing of all laboratories is in place and conformity to an international standard is required)					
Dominica: Quality laboratory systems based on JEE score (Number)	2.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.4.					
Grenada: Quality laboratory systems based on JEE score (Number)	2.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.4.					
Saint Lucia: Quality laboratory systems based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.4.					
Saint Vincent and the Grenadines: Quality laboratory systems based on JEE score (Number)	3.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.4.					
CARPHA: Quality laboratory systems based on JEE score (Number)	4.00	Apr/2019	5.00	05-Mar-2024	5.00	05-Mar-2024	4.00	Jul/2024
	Comments on achieving targets		Capacity graded as described in JEE Question D.1.4. It is important to note that while the baseline and targets are the same, IHR capacities also refer to maintaining all essential public health functions needed to apply and comply with the IHR. In other words, efforts need to continuously be made to maintain higher scores achieved.					
CARPHA/OECS: System in place for activating and coordinating medical countermeasures during a public health emergency (Number)	3.00	May/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jul/2024
	Comments on achieving targets		***Updates to be provided in the next ISR *** JEE Question R.4.1. Capacity graded on a scale of 1-5 where: 1 = no capacity (no national countermeasure plans in place) 2 = limited capacity (plans have been drafted, but no exercises have been conducted) 3 = developed capacity (plans are in place, and tabletop exercises have been conducted to demonstrate sending or receiving of medical countermeasures during a public health emergency) 4 = demonstrated					



capacity (plans are in place, and at least one response/formal exercise/simulation within the previous year in which medical countermeasures were sent or received) 5 = sustainable capacity (Country participates in a regional/international partnership or has formal agreement with another country or international organization that outlines criteria and procedures for sending and receiving medical countermeasures and has participated in an exercise or response within the past year to practice deployment or receipt of medical countermeasures)

Strengthening Public Health Surveillance and Emergency Management

Indicator Name	Baseline		Actual (Previous)		Actual (Current)		Closing Period	
	Result	Month/Year	Result	Date	Result	Date	Result	Month/Year
Revise Number of public health emergency plans that document incorporation of feedback from key populations (Number)	0.00	Apr/2019	1.00	05-Mar-2024	1.00	05-Mar-2024	4.00	Jun/2026
Revise CARPHA: Protocols developed for gender-specific surveillance of priority infectious diseases (Yes/No)	No	May/2019	No	05-Mar-2024	No	05-Mar-2024	Yes	Jun/2026
Revise OECS: Number of countries with training in the Minimum Initial Service Package for sexual and reproductive health in emergencies and disasters (Number)	1.00	May/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jul/2024
Number of countries/regional entities that use electronic tools for surveillance based on achievement/sustainment of JEE score of 4.0 or higher (Number)	1.00	Apr/2019	0.00	05-Mar-2024	0.00	05-Mar-2024	5.00	Jun/2026
	Comments on achieving targets		***** Updates as of June 2024: - Grenada: In the next six months, the procurement process for a consultancy to optimize HMIS will be developed, taking into account the results of assessments recently completed by PAHO. - Saint Lucia: the PIU					



			<p>is working with the health information unit to develop the specifications for the procurement of an electronic surveillance system. - Saint Vincent and the Grenadines: EOC equipment to be procured under the project will be used to improve electronic surveillance. In addition, surveillance systems will be improved through updates manuals and protocols (consultancy to Develop Port Health Protocols and Environmental Health Surveillance System Manuals), as well as training (Vector Control management training ongoing). ****</p> <p>JEE Question D.2.2. Capacity graded on a scale of 1-5 where: 1 = no capacity (no electronic tool to collect, report or analyze surveillance data) 2 = limited capacity (ad hoc electronic tools have been developed to collect, report or analyze surveillance data or the country is developing an integrated electronic real-time reporting system for public health surveillance) 3 = developed capacity (integrated electronic real-time reporting system for public health surveillance in place at all levels of health system, but system is not able to share data in real time) 4 = demonstrated capacity (integrated electronic real-time reporting system for public health surveillance in place at all levels of health system, and data can be shared in real time) 5 = sustainable capacity (integrated electronic real-time reporting system for public health surveillance in place at all levels of health system, and system is linked to with other regional and/or international systems to promote data sharing)</p>					
Dominica: Use of electronic tools for surveillance based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.2.					
Grenada: Use of electronic tools for surveillance based on JEE score (Number)	2.00	Apr/2019	3.00	12-Jun-2024	3.00	12-Jun-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.2.					
	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026



Saint Lucia: Use of electronic tools for surveillance based on JEE score (Number)	Comments on achieving targets		Capacity graded as described in JEE Question D.2.2.					
Saint Vincent and the Grenadines: Use of electronic tools for surveillance based on JEE score (Number)	3.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.2.					
Revise CARPHA: Use of electronic tools for surveillance based on JEE score (Number)	4.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.2.2. It is important to note that while the baseline and targets are the same, IHR capacities also refer to maintaining all essential public health functions needed to apply and comply with the IHR. In other words, efforts need to continuously be made to maintain higher scores achieved.					
Number of countries/regional entitites receiving FETP or other applied epidemiology training based on achievement/sustainment of JEE score of 4.0 or higher (Number)	1.00	Nov/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	5.00	Jun/2026
	Comments on achieving targets		<p>**** All countries have received FETP training from CARPHA, which are still advancing. This indicator will be updated in the next ISR, as more training may be upcoming in the next few months, considering that St Lucia and Dominica are the two countries that have not achieved the indicator. ***</p> <p>JEE Question D.4.4. Capacity graded on a scale of 1-5 where: 1 = no capacity (no FETP or applied epidemiology training established at national level) 2 = limited capacity (no FETP or applied epidemiology training established at national level, but staff participate in training in other countries) 3 = developed capacity (one level of FETP - basic, intermediate or advanced - or applied epidemiology training in place at national level or in another country through an existing agreement) 4 = demonstrated capacity (two levels of FETP - basic, intermediate or advanced - or applied epidemiology training in place at national level or in another country through an existing agreement) 5 = sustainable capacity (three levels of FETP - basic, intermediate or advanced - or applied epidemiology training</p>					



			in place at national level or in another country through an existing agreement, and there is sustainable national funding)					
Dominica: Basic/frontline FETP training or other applied epidemiology training received based on JEE score (Number)	2.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.4.4.					
Grenada: Basic/frontline FETP training or other applied epidemiology training received based on JEE score (Number)	4.00	Apr/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.4.4. It is important to note that while the baseline and targets are the same, IHR capacities also refer to maintaining all essential public health functions needed to apply and comply with the IHR. In other words, efforts need to continuously be made to maintain higher scores achieved.					
Saint Lucia: Basic/frontline FETP training or other applied epidemiology training received based on JEE score (Number)	3.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.4.4.					
Saint Vincent and the Grenadines: Basic/frontline FETP training or other applied epidemiology training received based on JEE score (Number)	2.00	Apr/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question D.4.4.					
CARPHA: Regional (intermediate/advanced) FETP training or other applied epidemiology training provided based on JEE score (Number)	2.00	Apr/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jul/2024
	Comments on achieving targets		Capacity graded as described in JEE Question D.4.4.					
	0.00	Apr/2019	1.00	05-Mar-2024	1.00	05-Mar-2024	5.00	Jun/2026



<p>Number of countries/regional entities with multi-sectoral, multi-hazard emergency preparedness measures, incl emergency response plans based on achievement/sustainment of JEE score of 4.0 or higher (Number)</p>	Comments on achieving targets		<p>*** Updates by June 2024: All countries are advancing in their EM capacities. Please see updates on respective EM PDO indicator above. Dominica has a Cabinet-vetted plan which is pending stakeholders socialization; Grenada has completed an AAR under the project with support from PAHO, and the update of the multi hazards plan will be kicked off (activity to be launched) in the next six months. SVG has a similar activity is already in evaluation phase. STL has completed an AAR and STAR assessment, and among others, will pursue the updating the national health sector multi-hazard emergency/disaster management plan and training and simulation exercise in the use of the EOCs, even if the indicator target has already been achieved. ****</p> <p>JEE Question R.1.2. Capacity graded on a scale of 1-5 where: 1 = no capacity (no national multi-sectoral, multi-hazard emergency preparedness plan in place) 2 = limited capacity (national multi-sectoral, multi-hazard emergency preparedness plan is in place. SOPs for core emergency response coordination functions have been developed in past two years) 3 = developed capacity (emergency preparedness measures are implemented at national level including points of entry and mass gathering events. Response plans have been exercised or used in actual response operations in past two years.) 4 = demonstrated capacity (preparedness measures are implemented at national, sub-national and local levels. Multi-sectoral, multi-hazard response plans in place at sub-national and local levels as well as points of entry. Response plans have been exercised or used in actual response operations in past two years) 5 = sustainable capacity (dedicated human resources and regular budget funding to support coordination and implementation of emergency preparedness measures. Dedicated resources in place form implementation of multi-sectoral, multi-hazard response plans, contingency plans and SOPs at national, sub-national and local level. Systems are regularly tested, reviewed and updated.)</p>					
	1.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026



Dominica: Multi-sectoral, multi-hazard emergency preparedness measures, incl emergency response plans, based on JEE score (Number)	Comments on achieving targets		Capacity graded as described in JEE Question R.1.2.					
Grenada: Multi-sectoral, multi-hazard emergency preparedness measures, incl emergency response plans, based on JEE score (Number)	2.00	Apr/2019	2.00	05-Mar-2024	2.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question R.1.2.					
Saint Lucia: Multi-sectoral, multi-hazard emergency preparedness measures, incl emergency response plans, based on JEE score (Number)	1.00	Apr/2019	4.00	05-Mar-2024	4.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question R.1.2.					
Saint Vincent and the Grenadines: Multi-sectoral, multi-hazard emergency preparedness measures, incl emergency response plans, based on JEE score (Number)	1.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question R.1.2.					
CARPHA/OECS: Multi-sectoral, multi-hazard emergency preparedness measures, incl emergency response plans, based	2.00	Apr/2019	3.00	05-Mar-2024	3.00	05-Mar-2024	4.00	Jun/2026
	Comments on achieving targets		Capacity graded as described in JEE Question R.1.2.					



on JEE score (Number)								
Contingency Emergency Response Component (CERC)								
Indicator Name	Baseline		Actual (Previous)		Actual (Current)		Closing Period	
	Result	Month/Year	Result	Date	Result	Date	Result	Month/Year
Equipped health facilities with isolation capacity (Number)	2.00	May/2020	4.00	21-Jun-2024	4.00	21-Jun-2024	4.00	Jul/2024
Dominica - Equipped health facilities with isolation capacity (Number)	1.00	May/2020	1.00	13-Dec-2023	1.00	13-Dec-2023	1.00	Jul/2024
Grenada - Equipped health facilities with isolation capacity (Number)	0.00	May/2020	1.00	13-Dec-2023	1.00	13-Dec-2023	1.00	Jul/2024
SVG - Equipped health facilities with isolation capacity (Number)	1.00	May/2020	2.00	13-Dec-2023	2.00	13-Dec-2023	2.00	Jul/2024