



## COVID-19 Response Project (P175131)

EUROPE AND CENTRAL ASIA | Turkmenistan | Health, Nutrition & Population Global Practice |  
IBRD/IDA | Investment Project Financing | FY 2021 | Seq No: 3 | ARCHIVED on 28-Jun-2022 | ISR52200 |

Implementing Agencies: Ministry of Finance and Economy of Turkmenistan, Ministry of Health and Medical Industry of Turkmenistan

### Key Dates

#### Key Project Dates

Bank Approval Date: 30-Jun-2021

Effectiveness Date: 23-Sep-2021

Planned Mid Term Review Date: 20-Jun-2022

Actual Mid-Term Review Date: 21-Jun-2022

Original Closing Date: 30-Jun-2023

Revised Closing Date: 30-Jun-2023

### Project Development Objectives

Project Development Objective (from Project Appraisal Document)

The Program Development Objective is to prevent, detect, and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness in Turkmenistan.

Has the Project Development Objective been changed since Board Approval of the Project Objective?

No

### Components Table

Name
Improving COVID-19 Prevention, Detection and Emergency Response:(Cost \$5.90 M)
Improving Health System Preparedness for COVID-19:(Cost \$12.10 M)
Project Management and Monitoring and Evaluation:(Cost \$2.00 M)

### Overall Ratings

Name	Previous Rating	Current Rating
Progress towards achievement of PDO	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Satisfactory
Overall Implementation Progress (IP)	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Satisfactory
Overall Risk Rating	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial

### Implementation Status and Key Decisions

The Project is rated satisfactory for both achievement towards the Project Development Objective (PDO) and implementation progress. Activities under most components are being implemented on schedule, despite challenges reported earlier, e.g. extensive delivery periods (up to 6 months for some items), high demand for some items (especially medicine), challenges along the transit routes, limitation on transportation options (no regular flights and limited entry points), limitations on domestic travel hampering the delivery of WHO and UNICEF activities as well as other logistical issues. To date actual delivery of goods and services worth around US\$8.1 million has been completed.

Goods delivered include: PCR labs, PCR tests, centrifuges, thermostats, autoclaves, sterilizers, IT equipment, antibody tests, water distillers, lab incubators, biosafety boxes, IT equipment, cardio monitors, defibrillators, mobile X-ray units, mobile ultrasound units, ECG units, pulse oximeters, mobile disinfecting units, vehicles for labs as well as several items from the list of medications approved for procurement under the project. Additional deliveries of goods are expected in the course of the next months.



UNICEF is responsible for activities under the Risk Communication component and has delivered several communication and outreach activities, including a country wide information campaign among schools, which entailed developing Risk Communication and Community Engagement posters with the participation of over 300 schools, including the exhibition of posters; Currently UNICEF is developing materials for pregnant and breastfeeding women and for children aged 5 to 8. UNICEF is discussing engagement of an international partner institution to review the current National Emergency Communication Plan and prepare trainings module for frontline healthcare and social workers. WHO is in charge of the Training and Capacity Building sub-component and has delivered a series of training sessions for physicians and nurses in the capital and provinces on infection prevention and control, on case management. WHO has also assist in strengthening the capacity of lab specialists and is supporting the review of clinical protocols and other relevant documents per the agreed workplan.

### MPA Program Development Objective

The Program Development Objective is to prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness

### Multiphase Programmatic Approach (MPA) Status

As of June 15, 2022, 88 MPA-projects had been approved with a total commitment of US\$4.3 billion. One operation (Guatemala) was cancelled in mid-September 2021, at the request of the Government. Six parent projects have been restructured to include vaccine-related procurement. **Total disbursements as of June 15, 2022, amount to US\$3.6 billion or 84% of overall commitments.** This amount does not include disbursements under MPA-V operations which are reported together with AF-V operations. **Sixty-seven (67) country projects or 77% of projects approved have reached 70-100% disbursement** (reasons for >100% disbursements relate to fluctuations between the Euro and the SDR against the US\$). **Out of the 67 operations, 48 operations or 72% have disbursed over 90% of commitments. Of these, 30 operations are fully disbursed. There are thirteen (13) operations with closing dates by the end of FY22. Other 10 operations which had closing dates by the end of the FY have extended their closing dates. There are 12 operations with disbursements under 50%. Out of these 12 operations, one has not disbursed, and four have disbursed 30 percent or less.** The projects are benefitting around 3.7 billion people or 50% of the global population. Of the 87 active projects: (i) 33 are in Africa – 12 in AFE and 21 in AFW; (ii) 12 in East Asia; (iii) 14 in Europe and Central Asia; (iv) 11 in Latin America and the Caribbean; (v) 8 in Middle East and North Africa; and (vi) 9 in South Asia. Eighty-six (86) or 99% of projects approved are disbursing. MNA has the highest percentage of disbursements, followed by SRA, EAP, ECA and LAC, AFE and AFW. Retroactive Financing represents 26% of commitments. **Country teams for operations, which have been under implementation for twelve months or more by June 30, 2022, are preparing Mid-Term Review (MTR) ISRs to inform the Global MPA MTR, which will be prepared early next FY.**

Streamlined procedures, delegated approvals, coupled with flexible project design and intensified efforts across the Bank have contributed to the progress. Implementation is being guided by Bank teams working in parallel with other health related projects, including Additional Financing operations supporting vaccine procurement and deployment efforts. Implementation continues to face challenges as several countries are still under different levels of mobility restrictions. Bank staff are operating in a hybrid environment with some days at the office and others at home. Notwithstanding the challenges, the MPA is on track to achieve its PrDO, which is to prevent, detect and respond to the threat posed by COVID-19 and strengthen national systems for public health preparedness. The significant level of disbursements attests to the strong implementation of the Bank' response thanks to the commitment of counterparts supported by Bank country teams.

### Risks

#### Systematic Operations Risk-rating Tool



Risk Category	Rating at Approval	Previous Rating	Current Rating
Political and Governance	☐ Moderate	☐ Moderate	☐ Moderate
Macroeconomic	☐ Substantial	☐ Substantial	☐ Substantial
Sector Strategies and Policies	☐ Moderate	☐ Moderate	☐ Moderate
Technical Design of Project or Program	☐ Substantial	☐ Substantial	☐ Substantial
Institutional Capacity for Implementation and Sustainability	☐ Substantial	☐ Substantial	☐ Substantial
Fiduciary	☐ Moderate	☐ Moderate	☐ Moderate
Environment and Social	☐ Substantial	☐ Substantial	☐ Substantial
Stakeholders	☐ Moderate	☐ Moderate	☐ Moderate
Other	--	--	--
Overall	☐ Substantial	☐ Substantial	☐ Substantial

## Results

### PDO Indicators by Objectives / Outcomes

Strengthened government capacity to prevent COVID-19				
► PDO Indicator 1: Development and periodic update of a comprehensive national COVID-19 risk communication plan, including standardized, evidence-based information targeted to different population group (Text, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	No comprehensive national COVID-19 risk communication plan exists	The tender for international expert institution to conduct the review of the plan is finalized. The selected institution will commence the review and development in Q3 of 2022.	The tender for international expert institution to conduct the review of the plan is finalized and the consultant institution has been identified. Introductory meetings were held with the client and the activities are to be implemented during Q3 of 2022.	A comprehensive national COVID-19 risk communication plan has been developed and is periodically updated to include standardized, evidence-based information targeted to different population groups.
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Assesses the capacity of the health system to prevent COVID-19			
► PDO Indicator 4: A National Pandemic Preparedness and Response Plan is regularly updated and tailored for each region. (Text, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	A national Pandemic Preparedness and Response Plan has been adopted exists	A National Pandemic Preparedness and Response Plan was approved in 2021, and, as of March 31, 2022, it has been in	A National Pandemic Preparedness and Response Plan was approved in 2021, and, as of March 31, 2022, it has been in	The National Pandemic Preparedness and Response Plan tailored to each region is regularly updated



		implementation. No revisions and updates are currently envisaged.	implementation. No revisions and updates are currently envisaged.	
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Assesses national systems for public health preparedness			

<b>Strengthened government capacity to detect COVID-19</b>				
▶ PDO Indicator 2: Number of COVID-19 designated laboratories with verified diagnostic equipment and test kits. (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	13.00	13.00	5.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Measures the capacity of the health system to detect COVID-19			

<b>Strengthened government capacity to treat COVID-19</b>				
▶ PDO Indicator 3: Number of designated beds for COVID-19 patients with access to continuous oxygen supply (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	1,000.00	1,000.00	600.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Number of designated beds for COVID-19 patients with access to continuous oxygen supply that are sourced from oxygen generating plants or liquid oxygen in bulk storage tanks.			

### Intermediate Results Indicators by Components

<b>Component 1: Improving COVID-19 Prevention, Detection and Emergency Response</b>				
▶ Number of health staff (physicians and nurses) trained in infection prevention and control in accordance with approved protocols (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	88.00	273.00	4,000.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Measures outputs that will help the health system to prevent and respond to COVID-19.			
▶ Clinical protocols, including a referral system, to care for COVID-19 patients are regularly reviewed or updated (Text, Custom)				



	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Clinical protocols, including a referral system, for COVID-19 patients established	The Clinical protocols, including a referral system, for COVID-19 patients care were prepared and shared by WHO in March 2022. MOHMI initiated seminars and workshops on the protocols.	The Clinical protocols, including a referral system, for COVID-19 patients care were prepared and shared by WHO in March 2022. MOHMI initiated seminars and workshops on the protocols. As of June 2022, two round-tables were held.	Clinical protocols, including a referral system, for COVID-19 patients are regularly reviewed or updated as necessary
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Assesses capacity for surveillance and rapid response to suspected cases of COVID-19			
<b>► Number of COVID-19 designated laboratories with staff trained to conduct COVID-19 diagnosis (Number, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	13.00	13.00	13.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Measures outputs that will help the health system to detect COVID-19			
<b>► Electronic program for tracking and monitoring contacts developed and set up in Sanitary and Epidemiological Safety and Control (SESC) offices in Ashgabat and in five velayats (Text, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	No electronic program for tracking and monitoring contacts exists	Delivery of IT equipment, delayed due to global supply challenges, is expected by the end April 2022.	IT equipment was delivered in June. During the next months, the project will provide further support with TA and additional equipment, software for establishment of a contact tracing and epidemiological surveillance software.	An electronic program for tracking and monitoring contacts is set up in SESC offices in Ashgabat and in five velayats
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Assesses capacity for surveillance of suspected cases of COVID-19, and prevention of pandemic spread			
<b>► National testing strategy, national hospital surge capacity plan and national case management strategy developed (Text, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	No national testing strategy, national hospital surge capacity plan and national case management strategy exist	This activity is being implemented, including through the EU funds. A detailed updated will be provided during the next ISR.	This activity was implemented through additional funds, including from EU. No revisions are required at this stage.	A national testing strategy, national hospital surge capacity plan, and national case management strategy are developed.



Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Measures outputs that will help the health system to respond to COVID-19			
<b>► Number of focus groups conducted to engage communities, understand their needs and receive feedback on the project (Number, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	16.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Supports monitoring and achievement of PDO indicator 1.			
<b>► Number of risk communication messages targeted to different population groups developed (Number, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	3.00	3.00	4.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Measures outputs that will help the health system to prevent COVID-19			
<b>► Number of gender-specific information campaigns delivered. (Number, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	1.00	1.00	2.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Measures outputs that will help the health system to prevent COVID-19			
<b>► Percentage of participants in community meetings/events reporting that the local outreach and community engagement process is effective (disaggregated by gender) (Percentage, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	75.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Number of participants in community meeting/events reporting that local outreach and community engagement process is effective; denominator: total number of participants			
<b>► Number of public health specialists trained on climate-induced vector borne diseases and waterborne diseases (Number, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	75.00	75.00	100.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023



Comments:	Number of public health specialists trained on climate-induced vector borne diseases.			
<b>► Percentage increase in risk awareness of COVID-19 among PHC nurses (Percentage, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	50.00	50.00	50.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Numerator: Number of PHC nurses aware of the risks linked to COVID-19 Denominator: Total number of PHC nurses			

<b>Component 2. Improving health system preparedness for COVID-19</b>				
<b>► Number of hospital and primary care physicians trained in the management of COVID-19 and SARI patients and adherence to COVID-19 protocols (Number, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	357.00	480.00	2,000.00
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Measures outputs that will help the health system to prevent COVID-19. Number of hospital and primary care staff trained in the management of COVID-19 and SARI patients and adherence to COVID-19 protocols with a support from the project.			
<b>► List of equipment, consumables and medications for resuscitation and management of COVID-19 and SARI patients with lung function disorders is defined and regularly updated. (Text, Custom)</b>				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	No verified list of equipment, consumables and medications for resuscitation and management of COVID-19 and SARI patients with lung function disorders exists	MOHMI adopted and approved a list of equipment and drugs. UNDP initiated establishment of the MOHMI working group for the Review and update of the list of equipment.	MOHMI adopted and approved a list of equipment and drugs. A working group for the Review and update of the list of equipment was established and the first meeting took place in May. WHO provided relevant recommendations for the MOHMI's consideration.	A verified list of equipment, consumables and medications for resuscitation and management of COVID-19 and SARI patients with lung function disorders is defined and regularly updated
Date	29-Jan-2021	31-Mar-2022	23-Jun-2022	30-Jun-2023
Comments:	Measures outputs that will help the health system to respond to COVID-19. List of equipment, consumables and medications for resuscitation and management of COVID-19 and SARI patients with lung function disorders is defined and regularly updated with a support from the project.			

**Overall Comments**

Indicator: Number of health staff (physicians and nurses) trained in infection prevention and control in accordance with approved protocols.



- **Comment:** Some trainings were conducted the capital and regions. A total of 273 epidemiologists were trained. This is behind the schedule; the implementation is impeded by restrictions and connectivity issues for on-line trainings. WHO is working to catch-up with the schedule.

Indicator: Number of focus groups conducted to engage communities, understand their needs and receive feedback on the project

- **Comment:** The focus groups are planned to be conducted in Q3-2022 within the information campaigns in schools.

Indicator: Percentage of participants in community meetings/events reporting that the local outreach and community engagement process is effective (disaggregated by gender)

- **Comment:** The feedback gathering meetings/focus group will start taking place in Q4 within information campaign in schools and percentage will be calculated subsequently.

Indicator: Number of hospital and primary care physicians trained in the management of COVID-19 and SARI patients and adherence to COVID-19 protocols

- **Comment:** The number trained on case management 480, or 48% of the interim target. The delay is caused by late receipt of advance payment, and limitations of the travel and poor internet connection in the regions. The WHO is taking measures to achieve the target by the end of June 2022. All trainings have been planned and approved by MOHMI and will continue through end Q2 - Q3 2022.

## Performance-Based Conditions

### Data on Financial Performance

#### Disbursements (by loan)

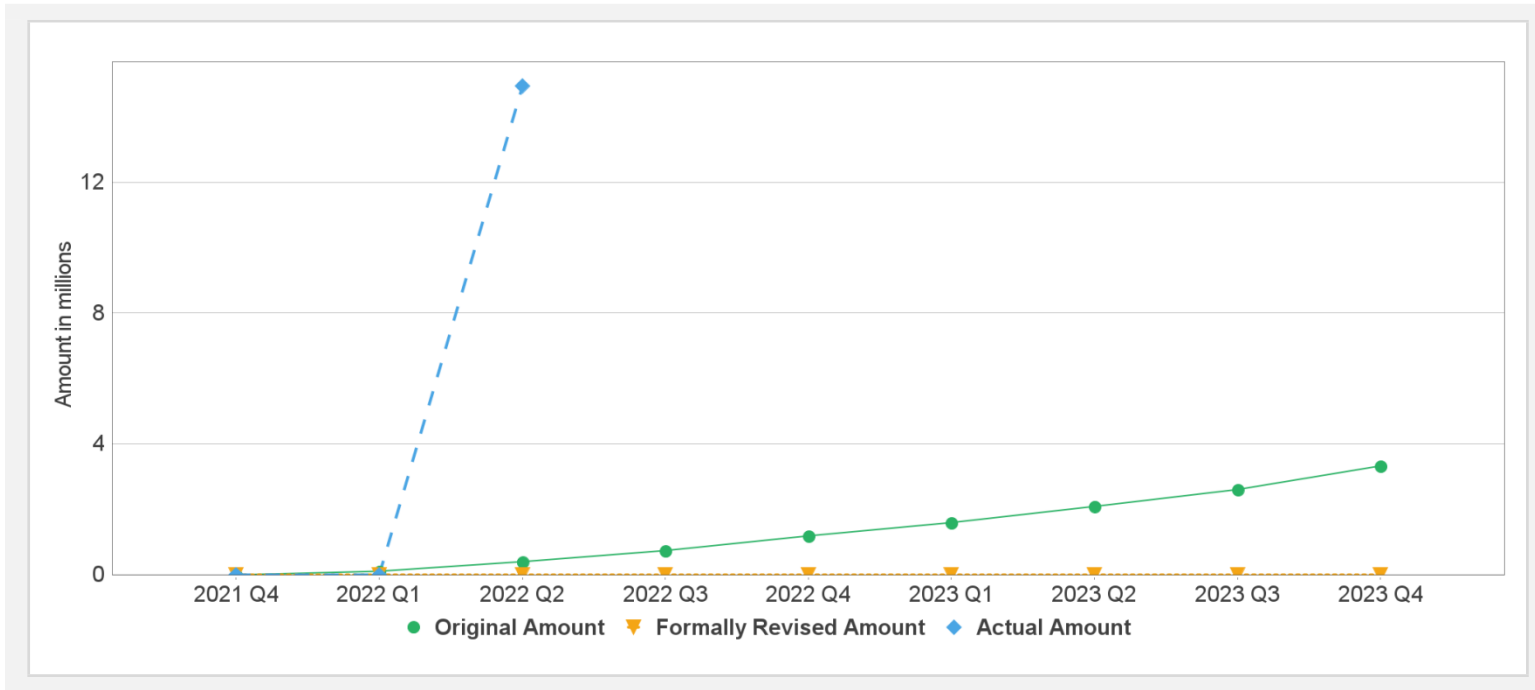
Project	Loan/Credit/TF	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	% Disbursed
P175131	IBRD-92850	Effective	USD	20.00	20.00	0.00	15.01	4.99	75%

#### Key Dates (by loan)

Project	Loan/Credit/TF	Status	Approval Date	Signing Date	Effectiveness Date	Orig. Closing Date	Rev. Closing Date
P175131	IBRD-92850	Effective	30-Jun-2021	26-Jul-2021	23-Sep-2021	30-Jun-2023	30-Jun-2023

### Cumulative Disbursements





### Restructuring History

There has been no restructuring to date.

### Related Project(s)

There are no related projects.