



# COVID-19 RESPONSE IN BOSNIA AND HERZEGOVINA

## 2020 ACTIVITY REPORT





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# Table of Contents



Introduction .....	7
The UNDP integrated response to COVID-19 - global perspective .....	10
UNDP's engagement in the COVID-19 response in Bosnia and Herzegovina.....	13
01 Supporting health systems to respond to the COVID-19 pandemic, including procurement of vital medical supplies and equipment .....	15
02 Multi-sector crisis management and response to COVID-19.....	26
03 Addressing the socioeconomic impact of COVID-19.....	29
Lessons learned.....	37
Annex 1 - Procurement - institutional arrangements, rules and procedures .....	41
Annex 2 - Medical equipment and supplies purchased and delivered with contributions of international partners.....	45
The Delegation of the European Union to Bosnia and Herzegovina.....	46
The Kingdom of Norway .....	52
Sweden.....	54
The Government of Switzerland/SDC.....	58
UNDP.....	58
The Government of Austria/ADA.....	60
Novartis Pharma Services Inc.....	60
Annex 3 - Medical equipment and supplies purchased and delivered with contributions of authorities of Bosnia and Herzegovina .....	61
Institute of Health Insurance of Sarajevo Canton .....	62
Canton Sarajevo .....	64
Republika Srpska Public Health Institute.....	64
City of Doboj .....	64
Central-Bosnia Canton.....	65
Herzegovina-Neretva Canton.....	65
West Herzegovina Canton .....	65
Zenica-Doboj Canton.....	66
Posavina Canton.....	66

# Introduction



At the beginning of February 2021, as the world rejoiced at the beginning of immunisation against COVID-19, the World Health Organization reported more than two million lives lost and more than 102 million COVID-19 cases worldwide. The past months have been challenging, revealing deficiencies that exposed the world to the pandemic and in some cases deepened the existing gaps. Yet the unity and solidarity demonstrated in response to the COVID-19 pandemic has shown that we can achieve so much when working together.

Back in March 2020, as the pandemic was declared, the United Nations mobilised to support governments in their efforts to save lives, control the transmission of the virus and ease the economic fallout. As health systems started to crumble, it became evident that no country could overcome the pandemic alone and that the pandemic cannot be addressed one country at a time. A substantial immediate and sustained global response was crucial.

As part of the United Nations country team in Bosnia and Herzegovina, UNDP mobilized

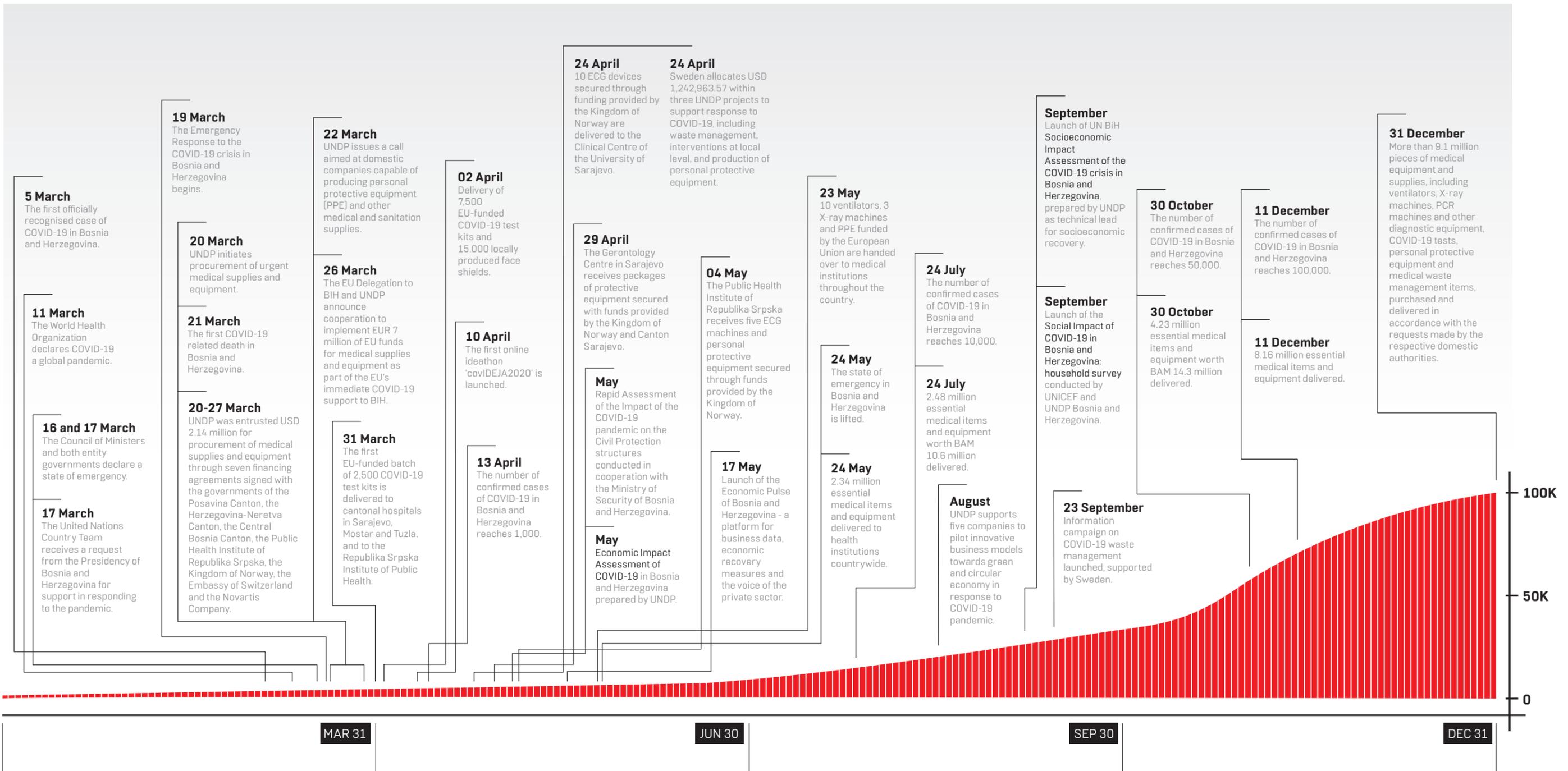
to support the immediate response to COVID-19. The crisis changed the way we worked, our immediate priorities for 2020 and affected all areas of our programme. In a matter of days, UNDP moved its operations online and introduced special procedures to accelerate procurement and decision-making. In March 2020, UNDP presented its **'Prepare, Respond, Recover'**<sup>1</sup> integrated response to COVID-19. It focused on three immediate priorities, namely health systems support, multisector and socioeconomic impact assessment and response. In Bosnia and Herzegovina, UNDP applied these three tracks of response, under the leadership of the UN Resident Coordinator, and working closely with the World Health Organization and other members of the UN country team. This report describes our activities along all three tracks. In 2020, we managed to procure and by 31 December deliver more than 9.1 million items of essential life-saving medical equipment and supplies, funded by 15 domestic and international partners. In parallel to supporting the response of the health systems, we contributed to crisis management and

coordination, understanding the socioeconomic impact and supported business continuity and job retention. Our work and the results achieved were made possible by the strong partnerships with international organisations and domestic institutions with a shared goal in mind: to save and protect the lives of all people in country. The pandemic was a test to cooperation and partnerships and showed, more starkly than ever, how we must respond collectively and in new, more flexible ways to complex and unprecedented global challenges.

Building on the lessons learned since March 2020, the design of UNDP's work in 2021 and beyond will support decision makers look beyond recovery and toward 2030, when making choices and managing the complex and uncertain environment in four main areas: governance, social protection, the green economy, and digital disruption.

<sup>1</sup> [https://www.undp.org/content/undp/en/home/librarypage/hiv-aids/covid-19-undp\\_s-integrated-response.html](https://www.undp.org/content/undp/en/home/librarypage/hiv-aids/covid-19-undp_s-integrated-response.html)

# 2020 TIMELINE



JAN 01

MAR 31

JUN 30

SEP 30

DEC 31

100K  
50K  
0

# The UNDP Integrated Response to COVID-19 - global perspective



*Working at the heart of the United Nations and in close coordination with the World Health Organization (WHO), UNDP responded to the growing volume of requests from countries for help in preparing their response to and later recovering from the COVID-19 pandemic with particular focus on the most vulnerable.*

The support UNDP provides stems from its mission to eradicate poverty, reduce inequality and build resilience to crises and shocks. UNDP draws on its experience from previous crises and outbreaks such as Ebola, HIV, SARS, TB and malaria, as well as on UNDP's long history of working with the private and public sectors.

COVID-19 has highlighted the fact that a pandemic cannot be addressed one country at a time and that no country can address it alone. Most of the outbreaks of crises that

echoed across the world had limited geographic impact. The required resources, goods and supplies were by default provided by countries not affected by a crisis and assistance to crisis response was led by a sense of human solidarity. A concentrated effort can ensure that a hot-zone receives immediate relief. In contrast, the 'old-normal' approach to dealing with crises is comparable to keeping a boat afloat by plugging one hole at a time. The deep disruption that became evident at the onset of the pandemic underlined the need for a

new, more agile and smarter approach.

Being fully operational in 170 countries and territories, UNDP has mobilised all of its assets in response to this unprecedented challenge.

In March 2020, UNDP presented its '**Prepare, Respond, Recover**'<sup>2</sup> integrated response to COVID-19. It focused on three immediate priorities, namely **health systems support, multisector and socioeconomic impact assessment and response**. A COVID-19 Rapid Response

<sup>2</sup> [https://www.undp.org/content/undp/en/home/librarypage/hiv-aids/covid-19-undp\\_s-integrated-response.html](https://www.undp.org/content/undp/en/home/librarypage/hiv-aids/covid-19-undp_s-integrated-response.html)



Facility was launched, using funding from existing resources and initially capitalised to the amount of USD 20 million.

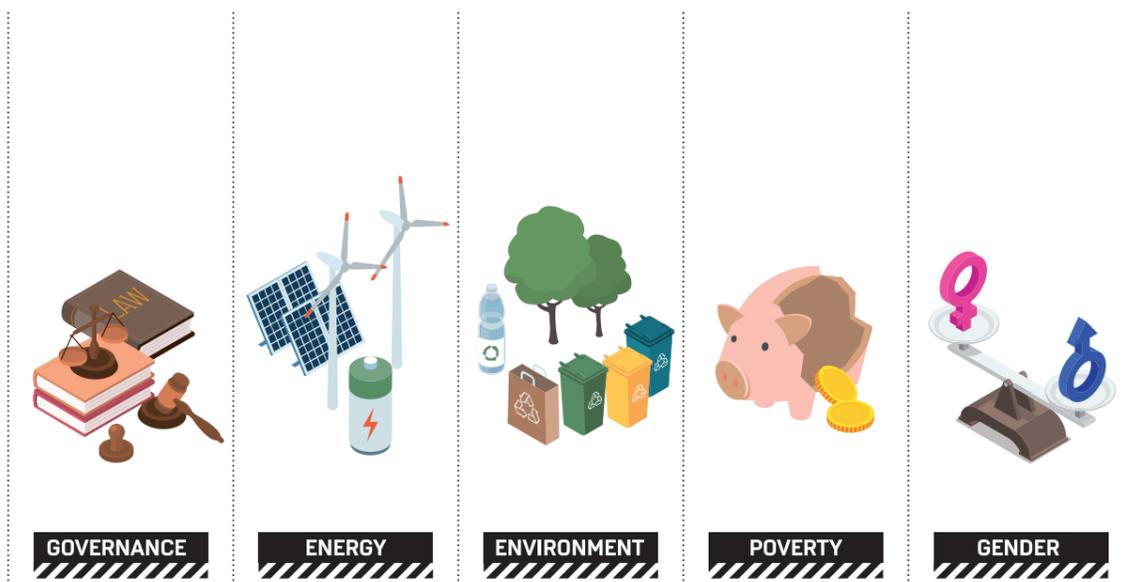
UNDP transitioned all critical operations to digital and virtual platforms. This has enabled our teams to continue to deliver effectively, regardless of the restrictions on movement and physical inter-

action. UNDP has invested in building a **next generation network of innovation and digital solutions** across its global team. This constitutes a crucial institutional asset within the response to this complex and fast-moving crisis. UNDP has streamlined policies and procedures in order to achieve greater agility, increase flexibility to receive and deliver private sector and

other financing and in taking steps to ensure that frontline staff are well supported and cared for as UNDP helps countries through this crisis.

**The UNDP Accelerator Lab Network** senses changes on the ground and sources local solutions and solutions from around the world for the crisis response.

The UNDP COVID-19 response is in line with the UNDP Strategic Plan and builds on its current engagement at the country level, working across our six signature solutions – poverty, governance, resilience, environment, energy and gender – and across multiple development contexts.



Within three months, UNDP had mobilised over USD 170 million in new funding from our partners and in agreement with our donors and partners repurposed over USD 150 million in programme funds. This included USD 30 million disbursed to 130 country offices globally through the new Rapid Response Facility that supports governments in addressing their COVID-19 priorities. The United Nations socioeconomic response, where UNDP serves as technical lead, is one of three critical components of the United Nations effort to save lives, protect people and rebuild better. This runs parallel to the United Nations health

AS THE UNITED NATIONS LEADING DEVELOPMENT NETWORK ON THE GROUND AND A CRITICAL PLAYER IN THE OVERALL UNITED NATIONS RESPONSE TO THE PANDEMIC, UNDP IS WORKING HAND-IN-HAND WITH THE UNITED NATIONS RESIDENT COORDINATORS AND COUNTRY TEAMS AND WITH ITS SISTER DEVELOPMENT ENTITIES GLOBALLY AND REGIONALLY TO SUPPORT AN INTEGRATED UNITED NATIONS RESPONSE TO COVID-19.

response led by the WHO and the humanitarian response, as detailed in the COVID-19 Global Humanitarian Response Plan led by the Office for the Coordination of Humanitarian Affairs.

The next phase of the UNDP COVID-19 crisis response, launched in July 2020, is designed to help decision makers look beyond the recovery and toward 2030, when making choices and managing complex and uncertain situations within four main areas: governance, social protection, green economy and digital disruption. This encompasses UNDP's role as technically leading the United Nations socioeconomic response.

## UNDP's engagement in the COVID-19 response in Bosnia and Herzegovina

Following the declaration of a state of emergency, the Presidency of Bosnia and Herzegovina addressed the United Nations on 17 March 2020 with a request for assistance in dealing with the outbreak and in particular the need for urgently required medical protective equipment, equipment for testing samples, ventilators and mobile X-ray machines.

Further to this, on 25 March 2020, the Ministry of Security of Bosnia and Herzegovina, in its role as the chair-institution of the Civil Protection and Rescue Coordination Body, addressed UNDP with a request for support in regard to the procurement of medical supplies and equipment, coordination of overall assistance and in conducting the necessary assessments of the socioeconomic impacts of COVID-19 in Bosnia and Herzegovina.

Based on its previous experience in disaster emergency and recovery in Bosnia and Herzegovina and in line with

its global corporate offer, the UNDP developed an **integrated support package under the 'Emergency Response to the COVID-19 Crisis in Bosnia and Herzegovina Initiative'**. The initiative comprised the following three components:

- 1 Supporting health systems to respond adequately to the COVID-19 pandemic, including procurement of vital medical supplies and equipment;
- 2 Supporting authorities to provide inclusive and multi-sectoral crisis management and response to COVID-19;
- 3 Addressing the

socioeconomic impact of COVID-19 through a whole-of-society approach.

Within this initiative, UNDP provided a platform for coordination of COVID-19 essential assets and health procurement to the relevant authorities, international partners, the private sector and other designated socioeconomic counterparts at the state, entity, Brčko

District and cantonal level. The COVID-19 initiative served to coordinate with partners on the capacities, needs and requests for assistance stemming from the health institutions and the most vulnerable

communities, as well as for managing the funds for health procurement provided by international and domestic organizations.

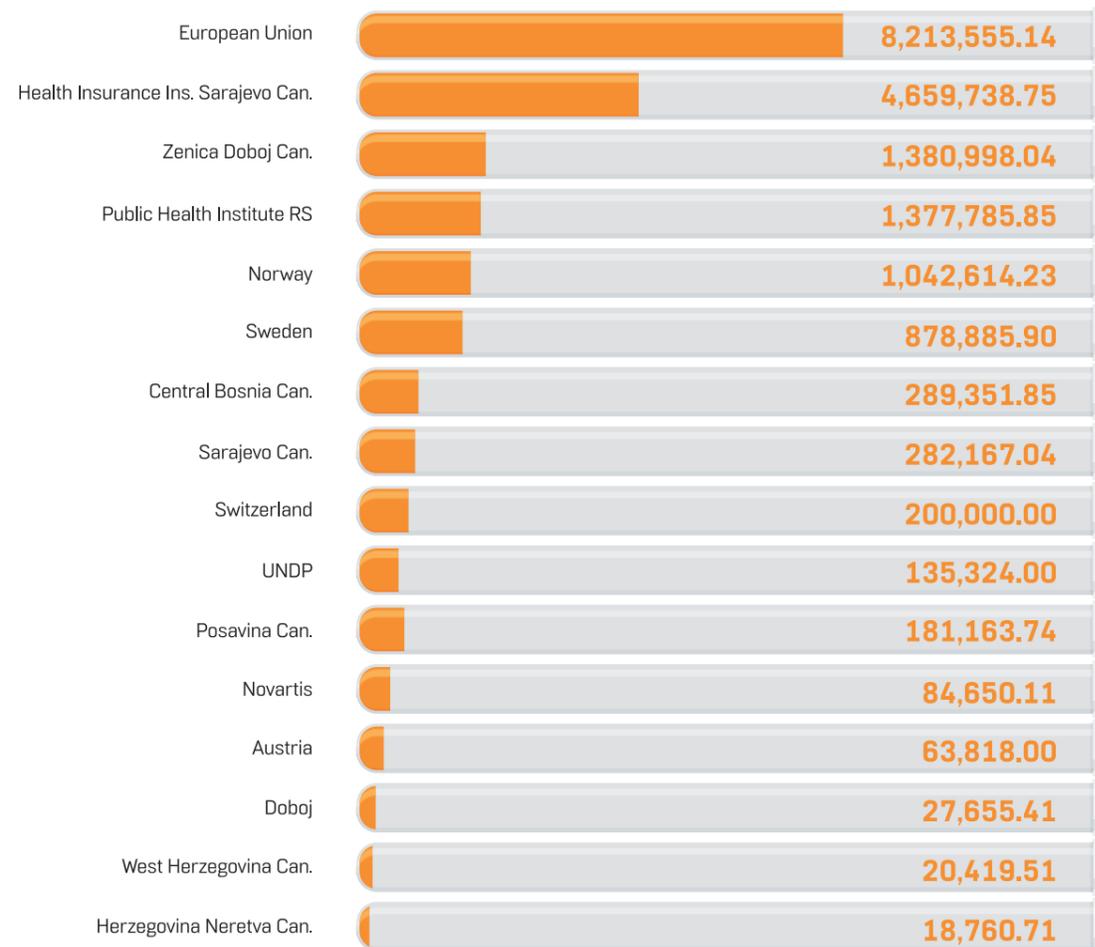
The Initiative managed the procurement of medical supplies, such as personal protective equipment (PPE),

coronavirus tests, ventilators, thermometers and other urgently needed medical equipment and supplies necessary for treating persons infected with the coronavirus, and for ensuring the conditions for the safe and uninterrupted operation of medical staff and other competent services

throughout the country.

**By December 2020, a total of USD 18,856,888.28<sup>3</sup> was entrusted to UNDP by international and domestic partners for the purchase of urgently needed and requested medical supplies and equipment.**

## CONTRIBUTION IN USD



<sup>3</sup> The value reflects funds transferred to UNDP between March and 31 December 2020, while the total sum of contracts signed with international and domestic partners during the mentioned period amounts to 19,038,469.44.

## 01 Supporting health systems to respond to the COVID-19 pandemic, including procurement of vital medical supplies and equipment

### Taking stock of urgent needs

The information and data about the quality, quantity and relevance of the needs was absolutely essential at the early stage of the COVID-19 response, because available resources needed to be directed at procuring what was most needed and for ensuring that it was delivered where the need was greatest. The 17 March 2020 letter from the Presidency of Bosnia and Herzegovina to the United Nations provided compre-

hensive lists of priority equipment and supplies. Further updates on the needs for medical supplies and equipment coming from the relevant health institutions in country were often fragmented and incomplete, and coordination and verification of the information was done by UNDP with WHO's expertise and input. A standardised registry of medical equipment and material specifications were used for fast screening of available

domestic and international vendors.

The complex governance system in Bosnia and Herzegovina represented an additional challenge for crisis management, manifested in issues with horizontal and vertical information management and information coordination, and in coordination across various sectors.

## Procuring and delivering life-saving medical supplies in a context of disrupted supply chains



With medical procurement proving especially sensitive and with local conditions deteriorating and global supply dwindling, special attention was paid to ensuring that the equipment and material being brought in were fit for the intended purpose. As it became evident in joint work with our partners, the consultative and the inclusive nature of cooperation at every step of the way was a crucial element to ensuring an effective response to COVID-19. This was a lesson learned during the flood response and recovery effort in 2014. UNDP, prior to tendering and based on the procedures introduced for this purpose, ensured that the required specifications were discussed and verified by the end beneficiaries as well as crosschecked against the WHO equipment specification registry. The final stage in the process required end user acceptance of the item to be

FROM MARCH THROUGH DECEMBER 2020, MORE THAN 300 COMPANIES WERE CONTACTED AND/OR EXPRESSED THEIR INTEREST IN PARTICIPATING IN PROCUREMENT OF VITAL MEDICAL SUPPLIES AND EQUIPMENT. MORE THAN 70 PROCESSES (INCLUDING THE MODALITIES INVITATION TO BID, REQUEST FOR PROPOSAL, REQUEST FOR QUOTATION) FOR MEDICAL PROCUREMENT RELATED TO COVID-19 WERE LAUNCHED IN 2020 AND 150 CONTRACTS/PURCHASE ORDERS WERE SIGNED.

purchased, including a written statement by the beneficiary institution that the items conformed to the required needs and standards as specified. The tendering conditions stipulated that vendors must provide proof of both the suitability and authenticity of the equipment offered. Naturally, with unprecedentedly high demand and insufficient supply globally, sourcing priority materials and equipment was a challenge. UNDP conducted an immediate market analysis, which included a call to local companies engaged in, or equipped to produce personal protective equipment. Many tenders for essential items, such as ventilators, resulted in a situation where none of the vendors were sufficiently qualified. At the same time, contracts signed with reputable companies were often cancelled after repeated delays in the arrival of goods.

The mitigation strategy applied by UNDP in these instances was to enable sourcing via different channels, including UNDP and United Nations global procurement platforms, and to contract multiple suppliers in order to ensure that at least some of the requested items would arrive. This involved working with both domestic and international sellers.

PROCUREMENT AND INSTALLATION OF 32 UNITS OF AEONMED VG 70 VENTILATORS WAS PROBABLY THE MOST COMPLEX PROCUREMENT UNDP IN BOSNIA AND HERZEGOVINA CONDUCTED WITHIN THE COVID-19 RESPONSE. VENTILATORS WERE IN HIGHEST DEMAND AT THE BEGINNING OF THE PANDEMIC. SINCE NO PROVIDERS WITHIN THE COUNTRY COULD DELIVER VENTILATORS WITHIN A REASONABLE TIMEFRAME, UNDP BOSNIA AND HERZEGOVINA, THROUGH UNDP CHINA, MANAGED TO PLACE AN ORDER AND SECURE VENTILATORS BASED ON A CORPORATE LONG-TERM AGREEMENT WITH AEONMED CO. LTD, BEIJING, CHINA. A SPECIAL AIR CARGO HAD TO BE USED TO TRANSPORT 32 VENTILATORS FROM CHINA. UPON COMPLETION OF COMPLEX IMPORT PROCEDURES, ALL VENTILATORS WERE SUCCESSFULLY INSTALLED AT MORE THAN 15 LOCATIONS THROUGHOUT THE COUNTRY.

The pandemic not only caused disruption to the production chains (supply side) and increased demand, but also had a major effect on the transport sector. Restrictions imposed on commercial and especially passenger air traffic, along with the cancellation of almost three quarters of all flights worldwide meant that air cargo was affected heavily both in terms of reliability and availability and that prices increased significantly. Thus, in one case it took almost three months for goods to arrive in the country with transport at an extremely high price (i.e. at more than 25% of the value of the goods). The complex administrative procedures in Bosnia and Herzegovina required that for each import authorisation UNDP had to obtain several documents from 12 different authorities. For instance, to finalise two shipments, UNDP had to obtain some 120 different documents for 24 import authorisations. For some of UNDP's partners, such as public health institutes, this was the first time that they found themselves in the role of importers and various challenges impeded the process, including lack of capacity to deal with such a situation. For UNDP, this was an important lesson learned: under the current circumstances in Bosnia and Herzegovina and with the current regulations, UNDP's response efficiency strongly depended on the

response rate of the end beneficiary; the outcome and the time invested was not under UNDP's control, regardless of the effort invested. Response times by both international vendors and domestic partners were frequently inadequate and the former were always on the lookout for a better deal as prices skyrocketed on a daily basis and domestic partners struggled with a cumbersome crisis management system that made coordination and communication difficult. All equipment items procured are under global warranties and respecting required CE and ISSO standards, while appropriate installation skills and spare parts for the equipment items procured locally have been ensured with local servicers, registered with the State Agency for Drugs and Medical Supplies. During the reporting period, UNDP has regularly maintained contacts with the recipients of the equipment to keep track of eventual issues and ensure appropriate action is taken. A tracking system was put in place within UNDP to regularly capture data and information on the needs and procurement processes. Detailed monitoring platforms are developed to enable data tracking, financial control, and reporting in real time.

## List and Map of delivery locations - vital medical equipment and supplies<sup>8</sup>



Over the period March - December 2020, in complex procurement circumstances, UNDP in cooperation with international and governmental partners managed to purchase and deliver to health institutions and authorities a total 9,131,137 pieces of various medical goods, health protection and medical waste management supplies. UNDP reconstructed one health facility.

<sup>8</sup> This report includes the medical supplies delivered by 31 December 2020. The schedule of delivery has not always fully coincided with the schedule of payments.

## 8,418,865

pieces of personal protective equipment and disinfectants:

- 3,431,650 protective masks,
- 3,830,260 various gloves,
- 261,349 particulate respirators,
- 19,010 protective suits,
- 131,350 protective single use gowns,
- 26,970 face shields,
- other requested personal protective equipment.

## 33,241

clinical management assets and facilities, including more than 2,300 medical devices and equipment:

- 83 ventilators for critical care,
- 20 ECG machines,
- 48 monitors of vital functions,
- 24 portable ultrasound scanners,
- 15 X-Ray machines,
- 5 haemodialysis machines,
- 2,003 pulse oximeters,
- 10 non-invasive ventilation masks,
- 1 CT device,
- other requested devices and facilities.

## 455,736

testing material<sup>9</sup> and 100 items of laboratory equipment.

## 132,385

items - medicines

<sup>9</sup> Lab tests category includes: tests for COVID19 Detection, universal sterile transport medium for viruses, RNA extraction kits, and multiplex RT-PCR kit.

## 90,760

items for COVID-related medical waste management

## 49

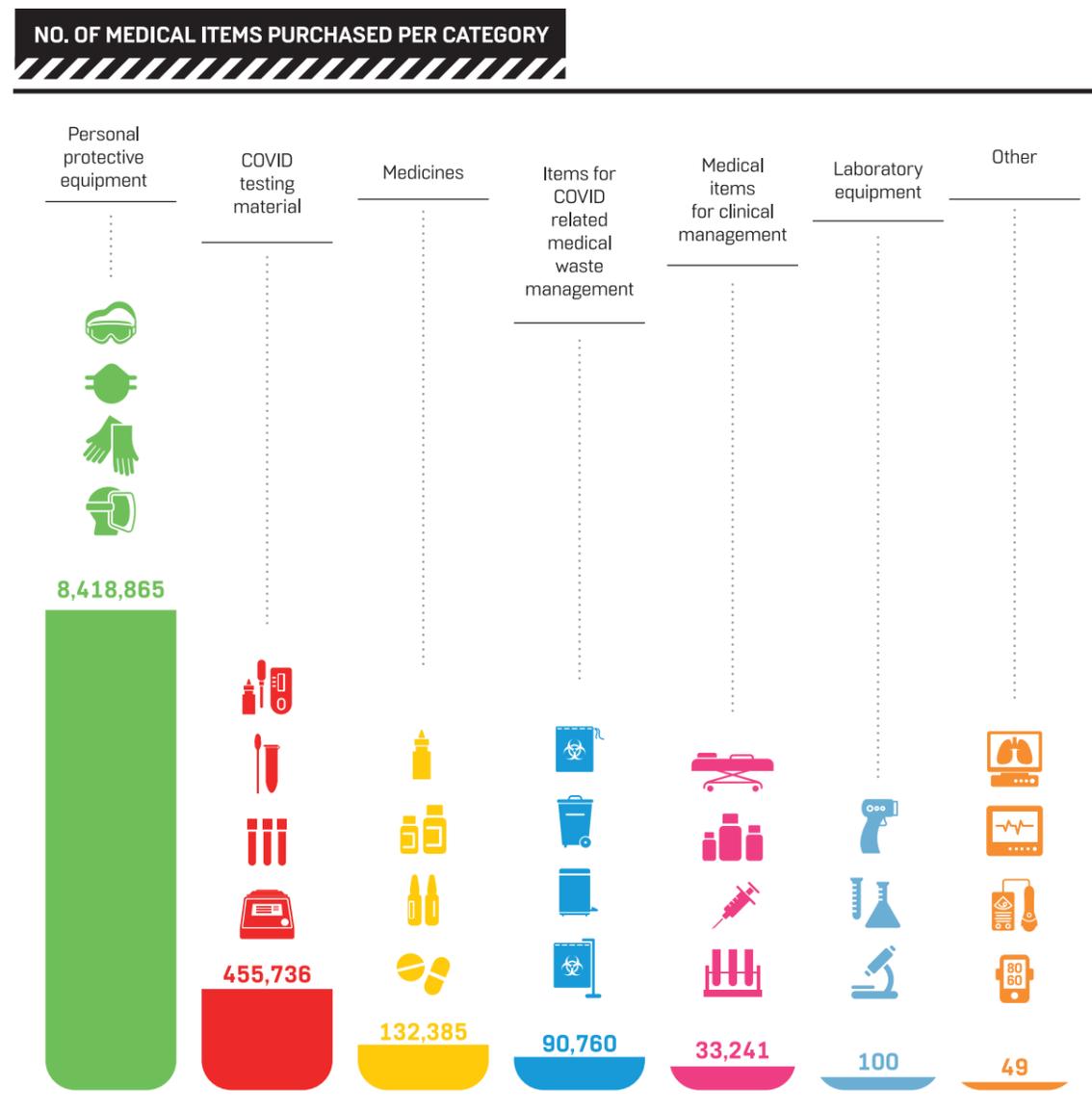
other medical and related items and supplies:

- 12 containers for triage,
- 23 3D printers,
- 2 fuel cards,
- 1 medical waste shredding machine,
- 3 vertical autoclaves,
- 2 medical waste sterilizers,
- 3 specialized vehicles for medical waste transport, etc.

Working together with the Government of Canton Sarajevo and the Kingdom of Norway Embassy to Bosnia and Herzegovina, UNDP has reconstructed and refurbished a new medical ward designed to care for Covid-19 patients within the premises of the General Hospital in Sarajevo.

In case of contributions by domestic partners, distribution of essential items was conducted as per their respective requests. The distribution of equipment and supplies with funds from international partners is based on the Council of Ministers of Bosnia and Herzegovina Decision on the Principles of the Distribution of International Aid for Protection and Rescue as of 16 April 2020. Within the Federation of Bosnia and Herzegovina, the distribution of equipment and supplies is based on the population figures in the cantons.

## Procurement of medical supplies and equipment by contributing partner



### The Delegation of the European Union (EU) to Bosnia and Herzegovina



The EU Delegation to Bosnia and Herzegovina provided the largest financial contribution to the COVID-19 response activities in 2020, managed by UNDP, with a total of USD 8,213,555.14 (EUR 7 million) allocated for the procurement of emergency medical equipment and materials.

From this contribution in 2020, UNDP procured and delivered a total of 3,667,518 medical items to 62 hospitals, health centres and other relevant institutions throughout Bosnia and Herzegovina. This included 2,140 various medical devices (70 ventilators for critical care, 40 monitors of vital

functions/invasive plus non-invasive monitoring modalities, 20 portable ultrasound scanners, 10 X-ray machines, 6 PCR machines, 2,000 pulse oximeters, etc.), 3,648,860 pieces of personal protective equipment, 16,500 testing kits and 8 laboratory equipment, and 10 other items.

## The Kingdom of Norway

The Kingdom of Norway entrusted to UNDP a total of USD 1,042,614.23 for the supply and delivery of 210,275 medical and other essential items by 31 December 2020.

This included 13,432 clinical management items (including 2 ventilators for critical care, 8 monitors of vital functions/invasive plus non-invasive monitoring modalities, 4 portable ultrasound scanners, 1 X-ray machines, 18 ECG machines, 3 pulse oximeters, etc); 4,463 pieces of testing

materials and equipment; 192,369 items of personal protective equipment and disinfectants, and 11 other (7 3D printers, 2 containers for triage, 2 fuel cards), all distributed to 35 institutions throughout Bosnia and Herzegovina.

With the amount USD 122,329 (BAM 198,110), The Kingdom of Norway co-financed equipping of the newly established COVID-19 Isolation Ward of the General Hospital 'Dr Abdullah Nakaš' in Sarajevo, refurbished by UNDP.

In December 2020, UNDP was asked by the Norwegian Embassy in Sarajevo to provide emergency assis-

tance to migrants and refugees residing in temporary reception facilities operated by the International Organization for Migration in Bosnia and Herzegovina. The assistance was meant to secure emergency quantities of personal protective equipment for residents, as well as staff working to provide assistance to migrants, and help curb the spread of the virus within the migrant community and beyond. With the agreement signed in late November, UNDP proceeded to procure and distribute, through IOM, some 500,000 pieces of protective equipment across 11 migrant reception facilities.



## Sweden

With financing provided by Sweden (USD 679,560.90) for medical waste management, UNDP procured and distributed total 321,909 medical and related items, including 231,140 pieces of personal protective equipment, 90,760 items for COVID-19 related medical waste management and 9 specific devices for COVID-19 related waste management. Personal protective equipment was provided to healthcare workers in 24 medical institutions across the country, six waste sterilisers were provided to the clinical centres in Mostar, Banja Luka, Bijeljina and Tuzla and special vehicles for the transport of infectious waste were delivered to the clinical centres in Banja Luka, Bijeljina and Sarajevo. In addition, 268 health medical workers received training in the proper handling and management of waste generated during the COVID-19 pandemic.

UNDP conducted an information campaign using handouts, TV, digital and social media aimed at informing the general population about how to deal with potentially infectious waste. The campaign reached over 1.7 million people in the 10 cities with the highest number of registered COVID-19 cases (Banja Luka, Bihać, Bijeljina, Brčko, Doboj, Mostar, Prijedor, Sarajevo, Tuzla, Trebinje and Zenica). Rapid situation assessment of the state of play in terms of operational health and safety measures was applied by 10 waste utilities in management and treatment of potentially infectious household waste. Personal protective equipment was procured for workers collecting household waste in 10 target communities.

To enable production of needed protective equipment (face shields), a total of USD 199,325.00 was repurposed within the Green Economic Development Project. A total

of 16 3D printers and 3D scanners were purchased and delivered to mechanical engineering faculties in Sarajevo, Zenica, Tuzla, and Faculty of Natural Sciences in Banja Luka.

With the support of Sweden (USD 82,000) through the 'SDGs Roll-out Support and Private Sector Engagement' Project implemented by UNDP, five SMEs were supported in adjusting their original business models and optimizing businesses to the principles of sustainable development. In the context of COVID-19 response, the companies re-focused the production lines to produce personal protective equipment and increase quantities of fresh food production. More importantly, the methodology used has been tested and shared on open online platform for other SMEs, as part of the engagement package to implementation of Agenda 2030.



### The Government of Switzerland/ Swiss Development Cooperation

The financial contribution of the Government of Switzerland worth USD 200,000.00 enabled the procurement and delivery of 2 ventilators for critical care, 1 X-ray machine and 26,000 pieces of personal protective equipment, to health institutions and authorities in Bosnia and Herzegovina.

### UNDP

UNDP in 2020 participated with and disbursed USD 135,324 of core funds to support the supply of urgently needed medical goods and health protection materials.

UNDP procured and delivered to health and other institutions a total of 18,753 medical items of various types in 2020, including 200 medical devices and equipment, 3 desktop computers, 5,000 lab tests and other testing materials and 13,550 pieces of personal protective equipment.

UNDP supported the reconstruction of the Microbiological laboratory in the University Clinical Centre in Mostar, as well as the Isolation Ward of the General Hospital 'Dr Abdulah Nakaš' in Sarajevo with the support of Sarajevo Canton and the Kingdom of Norway.

### The Government of Austria/Austrian Development Agency

With USD 63,818 provided by the Austrian Development Agency (ADA) through the Project 'Emergency Facility Response to COVID-19 in the Western Balkan Region', UNDP in Bosnia and Herzegovina procured a real-time PCR machine, 1,300 RT PCR tests and 1,500 swabs for the Cantonal Hospital in Bihać. Through this support, a training was facilitated for the laboratory staff of the Bihać Cantonal Hospital.

### Novartis Pharma Services Inc.

Novartis supported the supply of two ventilators for critical care in the amount of USD 84,650.11<sup>10</sup>

### The Institute for Health Insurance of Sarajevo Canton

The Institute of Health Insurance of Sarajevo Canton directed to UNDP funds in the amount of USD 4,659,738.75 to manage procurement and delivery of essential medical equipment and supplies, necessary for testing and providing the conditions for the safe and uninterrupted opera-

tion of medical staff and other competent services in Sarajevo Canton.

In 2020, from this contribution, UNDP delivered a total of 3,597,771 medical items, including 414 clinical management facilities and devices (7 ventilators), 184,864 tests and testing material, 3,290,345 pieces of personal protective equipment and 122,150 medicaments, that were distributed to 16 health and other relevant institutions in Canton Sarajevo. The balance of funds remains to be implemented for further response actions in 2021.

### Canton Sarajevo

Canton Sarajevo entrusted USD 282,167.04 to UNDP for procurement and delivery of medical equipment and supplies. UNDP purchased and delivered (to 11 institutions) a total of 215,477 medical items, including 2,026 clinical management items (thermometers, etc.) and 213,450 pieces of personal protective equipment and disinfectants.

Canton Sarajevo provided USD 635,998.22 (BAM 1,041,765.08) for the rehabilitation of the Isolation Ward of the general hospital 'Dr Abdulah Nakaš' in Sarajevo. UNDP implemented the works with additional funding from the Kingdom of Norway.

### Central Bosnia Canton and the Institute of Public Health of the Central Bosnia Canton

The Central Bosnia Canton entrusted UNDP with USD 289,351.85 for medical protective equipment, equipment for testing and medical devices in this canton. The amount of USD 61,050.06 contributed by the Public Health Institute of the Central Bosnia Canton is yet to be implemented. With these funds, UNDP supplied 125,522 medical items, including 15,000 clinical management items, 1 X-Ray machine, 15,086 pieces of testing materials and laboratory equipment, 85,200 pieces of personal protective equipment and 10,235 medicines, all of which was distributed to the relevant institutions of the Central Bosnia Canton.

### The Public Health Institute of Republika Srpska

The Public Health Institute of Republika Srpska signed financial agreement worth USD 2,535,354 with UNDP to support the RS health system's response to COVID-19. In 2020, UNDP procured and delivered a total of 181,128 units of testing and laboratory materials worth USD 1,377,785.85. Procurement and delivery of the medical supplies will continue in 2021.

### The City of Dobož

The City of Dobož allocated to UNDP USD 27,655.41, which allowed purchase and delivery of 30,550 pieces of personal protective items and 2,500 lab materials.

### Zenica-Dobož Canton

The Zenica-Dobož Canton allocated a total amount of USD 1,380,998.04, allowing the purchase of 492,878 medical items that included 2 medical devices, 37,486 tests and testing materials, 455,390 items of personal protective equipment, all of which were distributed to relevant institutions in the canton.

### Posavina Canton

Posavina Canton allocated USD 243,352.79 for COVID-19 emergency support to the health system, to be implemented by UNDP. In 2020, USD 181,163.74 were transferred to UNDP for the purchase of a total of 162,734 medical items, including 23 medical devices, 6,000 lab tests, 156,711 items of personal protective materials, all of which were distributed to the relevant health institutions in the canton.

### Herzegovina-Neretva Canton

The Herzegovina-Neretva Canton allocated USD 18,760.71 for emergency support to health institutions in the Canton. With these funds, in 2020, UNDP procured and delivered 40,000 pieces of personal protective equipment.

### West-Herzegovina Canton

The West-Herzegovina Canton entrusted USD 20,419.51 to UNDP for emergency support to health institutions in the Canton. A total of 35,300 items of personal protection equipment were delivered to the cantonal health institutions in 2020.

**The detailed overview of purchased and delivered medical supplies and equipment is available in the Annex of the Report.**

<sup>10</sup> Since the report covers the deliveries by 31 December 2020 it does not include 22 non-contact infrared thermometers (NCIT) also purchased by Novartis.

## 02 Multi-sector crisis management and response to COVID-19



From the onset of the pandemic in Bosnia and Herzegovina, UNDP has supported the COVID-19 crisis management and the response coordination in partnership and collaboration with other United Nations agencies, domestic authorities, the public and private sector, international organisations and other socioeconomic stakeholders.

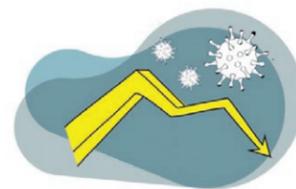
More specifically, UNDP offered support for more effective vertical and horizontal disaster response coordination throughout the country and in particular - to the Coordination Body of Bosnia and Herzegovina for Protection and Rescue and to the Ministry of Security of Bosnia and Herzegovina. In cooperation with the relevant government stakeholders, UNDP offered communication support and assisted coordination among various governmental and non-governmental organisations.

UNDP deployed tools that helped whole-of-system data collection and management as well as in sharing information on the crisis with the public, collected data and information on the priority needs in

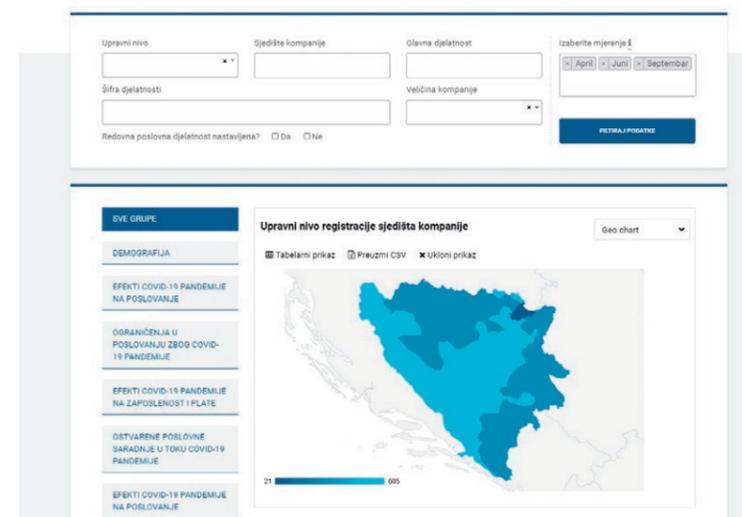
relation to medical equipment and supplies across various levels of government, gathered information on financing and donations from multiple stakeholders (bilateral and multi-lateral donors, government institutions, non-government organisations, private entities, etc.) and contributed to matching these resources with priority needs.

These efforts were streamlined through an online tool<sup>11</sup> accessible to United Nations agencies and donors that enabled up-to-date information on contributions and needs regarding medical equipment and supplies.

In cooperation with the Ministry of Security of Bosnia and Herzegovina, UNDP conducted



Puls ekonomije Bosne i Hercegovine



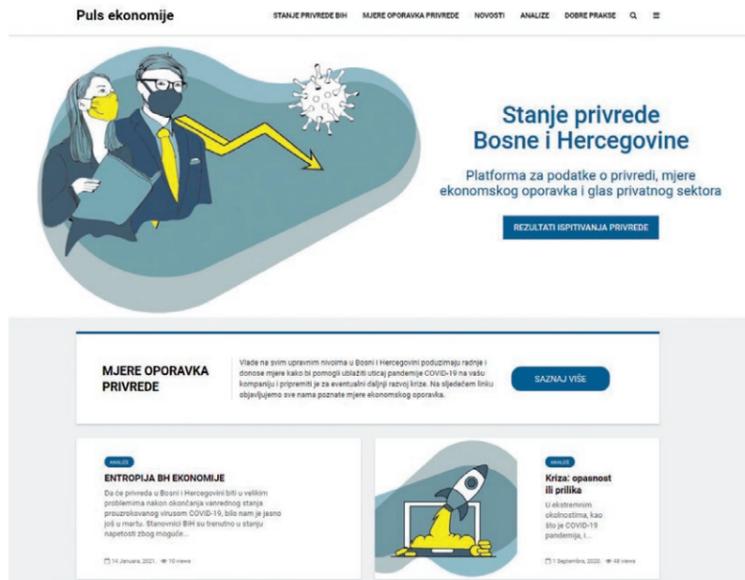
a rapid assessment of the impact that the COVID-19 pandemic had on the Civil Protection structures in the country. The assessment provided an overview of the human security and policing sectors in the country and the national and regional challenges and vulnerabilities as well as a general analysis of the security threats and proposals for prospective interventions in this field. The analysis mapped several priorities and provided recommendations for policy and operational support to the authorities in Bosnia and Herzegovina.

The COVID-19 website was

established in cooperation with the Ministry of Security of Bosnia and Herzegovina, the Ministry of Civil Affairs of Bosnia and Herzegovina and the Ministry of Foreign Affairs of Bosnia and Herzegovina with the technical and financial support of the UNDP. The website was structured to provide an interactive overview of the number of persons infected with COVID-19 and the numbers of those tested, recovered and deceased persons. It also provides information on border crossings, travel instructions, decisions made at all levels of government and current events related to COVID-19.

Capitalising on the ongoing 'Digital Platform in Canton Sarajevo Project' that aims to set in place the digital infrastructure and capacities that will enable the collection of fragmented data from ministries and public bodies and allow for modern data analytics as an information platform (including geo-spatial visualisation of the data), UNDP supported the setting in function of the public dashboard which monitors the COVID-19 situation in Canton Sarajevo. At present, UNDP supports the Ministry of Interior of Canton Sarajevo in its efforts to introduce a specialised digital solution that will enable vital new

<sup>11</sup> <https://undp.sharepoint.com/sites/UNBiH/DC>



functions and data sharing and provide the Ministry with access to real-time data from the cantonal health authorities, the cantonal inspection and the cantonal civil protection. This new system is in the final stage of testing and will be launched in February 2021.

UNDP supports the Government of the Federation of Bosnia and Herzegovina in designing and setting in function an information system on the sessions and work of the Government (e-Cabinet Office) in connection with the public citizens' portal and the information system of the Parliament of the Federation of Bosnia and Herzegovina. The system will enable the uninterrupted work of and decision-making by the Government even in crisis situations (such as the COVID-19 pandemic). The new system

is in the process of development and will be fully operational in April 2021. UNDP also supported the Ministry of Health of the Federation of Bosnia and Herzegovina in procuring a new telecommunication system that will enable uninterrupted coordination and modern communication among the entity and cantonal health institutions in the Federation of Bosnia and Herzegovina. The new telecommunication system is at the installation stage and will be operational in February 2021.

Through its Accelerator Lab, UNDP Bosnia and Herzegovina together with Bit Alliance, an association of IT companies in the country, with the support of 27 additional partners from the public, private and civil sectors, organised the online [ideathon](#) [covIDEJA2020](#) in

order to involve the general public in solving a wide range of problems caused by the pandemic. This first national digital ideathon generated 109 innovative ideas across different areas (health, vulnerable community members, the economy, digital and public services, etc.). The 6 winners were announced in May and some of the best ideas have been already developed and set to life - such as D-App [mental health application]. The application was launched at the beginning of December and by 31 December 2020 had 1,500 active users with over 250 realised requests for consultation between users and mental health experts through the platform/application.

The response to the COVID-19 pandemic has proven once more that coordination and information management, despite being identified as the weakest point through previous disasters, continue to be the main obstacle to effective management of disaster risks. The complex structure of governance and weak coordination hampered overall support to coordination and therefore it is evident that further support in building these capacities is of crucial importance.

## 03 Addressing the socioeconomic impact of COVID-19

Successful country responses not only require effective medical interventions but also inclusive and strengthened institutions across all sectors. This makes it possible to respond in a coordinated manner and build the resilience of the economies and the provision of essential public services to the people with longer-term benefits for the health sectors and economies. Through the Emergency Response to COVID-19 intervention and other ongoing projects, UNDP engaged in impact assessments of priority areas with focus on the economy, the private sector, the social protection and the labour market. It supported business continuity planning and the development of the workforce within the context of the pandemic. It assisted the governments in addressing urgent needs and gaps in the economy and worked on solutions and innovative approaches for reinventing business models for sustainable and green production and

economy and to safeguard and accelerate achievement of the SDGs in post pandemic period. UNDP has been designated as technical lead for socioeconomic recovery in the Global UN Framework for immediate response and recovery from COVID19. In this capacity, UNDP supported the UN Resident Coordinator to prepare the [United Nations COVID-19 Socioeconomic Response and Recovery Offer](#). In May 2020,

UNDP prepared the Economic Impact Assessment of COVID-19 in Bosnia and Herzegovina that presented an overview of the current state of the economy in Bosnia and Herzegovina. The emphasis was on assessing the economic situation of vulnerable social groups and the consequences of the COVID-19 pandemic for industry. In September 2020, UNDP Bosnia and Herzegovina finished the comprehensive assessment mapped in





the United Nations Bosnia and Herzegovina Socioeconomic Impact Assessment of the COVID-19 crisis in Bosnia and Herzegovina that aimed to inform the dialogue with the authorities of Bosnia and Herzegovina on response and recovery measures and to provide medium and longer-term policy recommendations as well as to help mobilise the resources required for recovery.

UNICEF and UNDP in Bosnia and Herzegovina supported

a first household survey on Social Impacts of COVID-19, presented in October 2020, in order to provide comprehensive evidence of how the crisis has affected the lives of people and to help inform future response. A second survey was run in December 2020, with results expected in February 2021.

Furthermore, with the support of the UNDP global Rapid Response Facility, the UNDP Accelerator Lab developed the Economic Pulse of Bosnia and

Herzegovina as an open data dashboard to show trends and insights related to the impact of COVID-19 on the private sector in the country during the crisis. UNDP supported the private sector in adjusting capacities for production of protective equipment and other priority goods necessary to address the COVID-19 crisis.

Based on the assessments' findings, UNDP adjusted its ongoing projects and initiatives to mitigate the

negative impacts of the COVID-19 pandemic. To that extent, actions planned within the European Union funded EU4AGRI and EU4Business projects were redesigned to mitigate the immediate impact of the COVID-19 on the economy. As a result, the modernisation of the agriculture and food sector was supported, and UNDP contributed through investments in innovative solutions and technology to the improvement of the rural economy. In May 2020, a support scheme was launched aimed at assisting market integrators and small-scale farmers in re-establishing commercial linkages, stabilising the supply networks and reopening the existing access to the market. A total of 29 projects were selected and 1,199 small-scale

farmers (204 women) received technical and financial support to alleviate the negative effects of COVID-19 on their businesses. The total amount of the investment was around EUR 2.8 million, of which EUR 1.9 million was invested by the EU4AGRI and EU4Business projects while the rest was co-financed by farmers.

In December 2020, the European Union approved two new contributions (EU4AGRI-Recovery and EU4BusinessRecovery) that specifically target the agriculture and food sector in order to alleviate the negative effects of the COVID-19 pandemic. EU4AGRI-Recovery, implemented by UNDP and the Czech Development Agency, amounts to EUR 5 million, while EU4BusinessRecovery, which

is implemented by GIZ, ILO and UNDP, amounts to EUR 13.7 million where the financing managed by UNDP amounts to EUR 3.75 million.

The European Union provided support (EUR 158.000) to marginalised groups by engaging civil society through the Regional Programme on Local Democracy in the Western Balkans (ReL0aD). ReL0aD engaged 21 grassroots civil society organisations (CSOs) in the design of fast track COVID-19 projects in 21 local communities in Bosnia and Herzegovina. The aim was to support the needs of marginalised citizens affected directly or indirectly by COVID-19. The projects were based on the specific needs in local communities: psychological support, livelihood projects (agriculture and greenhouse production), physical activities and support to the elderly, supply of PPE (mostly sanitation and cleaning solutions or disinfectants). The 21 CSO projects reached a total of 12,655 people (3,589 men, 4,225 women, 2,354 boys and 2,487 girls), including 5,081 socially excluded (among others, people with internal actual and physical disabilities, families living under the poverty line and Roma).

Through the UNDP Rapid Response Facility, UNDP supported five companies to pilot innovative business models in relation to the green





and circular economy. The pilot run from August to October 2020 and provided support to five companies selected through a public call to test circular economy approaches and assess the corresponding level of disruption to their existing business models. The companies also developed road maps to guide their efforts aimed at achieving the transition to circular economy.

The circular economy forerunners are:

- Biona&Beyond from Sarajevo with their proposal 'Zero Waste Food Production',
- Milinković from Banja Luka with their proposal 'Processing of secondary raw materials from the wood industry',
- Šumska tajna from Ribnik with their proposal 'Waste-water treatment and

biological waste composting in Agri production',

- Empress from Zenica with their proposal 'Circular solutions for greener business practices in the textile industry' and
- Energo Max Oil from Gradačac with their proposal 'Plastic bottle recycling at gas stations'.

All selected companies come from industries affected by the COVID-19 related economic downturn in Bosnia and Herzegovina.

This rapid exercise yielded important results:

- more than 80 tonnes of organic waste will be turned into a new product in the next 12 months,
- more than 20 tonnes of plastic waste will be reused or recycled over the next year,

- approximately 60 per cent of energy will be saved in the production processes,
- up to USD 30,000 will be saved in the next 12 months through waste disposal bills alone,
- almost 300,000 litres of water will be purified and returned clean to the environment annually.

The UNDP Accelerator Lab has also designed the Business Digital Performance Self-Assessment Tool, in partnership with the Chamber of Commerce of Luxembourg. This tool enables a comprehensive analysis of any company's digitalisation aptitude in six different areas. All of these achievements are informing the next generation of programmes in the areas of digital economy and e-government.

In consultation with the domestic authorities and international partners/donors, wherever possible, UNDP repurposed available and unspent funds and mobilised additional resources within the ongoing project portfolio in order to expedite the response to COVID-19.

With the support of the Kingdom of Norway (BAM 19,900) and through the Economic Governance of Growth Project, UNDP secured expert support to define the scope and help design the Sarajevo Canton Credit Guarantee Fund as one of the measures stemming from the Territorial Employment Pact. UNDP also

supported the canton Government in designing the Law on Mitigation of the Negative Economic Consequences of COVID-19 and Savings.

With the support of the Government of Switzerland and through the Municipal Economic and Environmental Governance Project (MEG), the City of Bihać and UNDP developed a voucher grant scheme for tourism amounting to a joint total of BAM 195,500 to support the tourism industry and hospitality service providers. This arrangement benefitted 1,036 citizens (47% women) and the voucher grant scheme for tourism ensured that 278 employees from 26

companies in Bihać benefited from job security and job protection.

The economic grant schemes implemented in response to the COVID-19 pandemic supported 65 companies in Doboj, Gradačac and Bihać and helped create 15 new jobs as of October 2020. The eCitizen web platform and a mobile application were implemented in 17 partner local governments in order to increase citizen communication and participation in local policy decision-making processes. UNDP supported the development of the 'Get to Know Gradiška' application in order to promote the potential for tourism in the City of Gradiška





and to mitigate the detrimental impact that COVID-19 had on the tourism sector. The 'Tourist Academy' e-learning platform was established in order to train tour guides and employees within the tourism sector. The support of the Government of Switzerland to addressing the socioeconomic impact of COVID-19 in partner local governments amounted to BAM 582,446.

With the support of the Government of Italy (USD 10,000), the 'Relax in Bosnia and Herzegovina' initiative was created and subsequently placed 15 integrated 'Via Dinarica' tourism packages on the market, involving 11 tourism service providers as beneficiaries.

With the support Sweden and

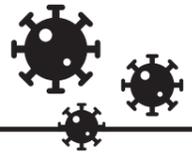
through the project 'Strengthening the Role of Local Communities/MZ', UNDP implemented the intervention 'COVID-19 Response to Community Needs'. The total budget of the project was USD 364,077.67, while the financial contribution of 6 local governments amounted to a total of USD 46,473.62 (Ilijaš 28,199.24, Rudo 4,586.58, Gračanica 3,825.52, Gradiška 4,434.67, Sanski Most 3,628.28 and Tešanj 1,799.34).

During May 2020, the project conducted three surveys in order to examine the impact of the coronavirus pandemic and to assess the urgent needs of all partner local governments (24), local communities/MZs (136) and CSOs (54). In response to the priority needs of the communities/MZs, the

project commenced procurement and delivery of medical and other urgently required goods and supplies:

- More than 53,150 protective masks, 200,000 protective gloves, around 7,000 disposable protective suits and several other forms of protective equipment and disinfectants were delivered to six local governments covering more than 84,219 citizens.
- A total of 580 disinfection and hygiene packages designed to meet the needs of local communities, community centres and other public institutions were provided to fifteen local governments.
- A total of 97 sets of IT equipment were provided to nine local governments in order to strengthen their capacity to provide better services to more than 156,600 citizens.
- Three local government spaces were equipped to act as possible isolation wards for approximately 2,400 inhabitants.
- Medical equipment (biochemical analyser, autoclave, reagents, oxygen bottles, transcutaneous bilirubin meters, pulse oximeters, thermometers and syringe pumps) was delivered to hospitals and health centres in eight local self-governments with over 95,888 inhabitants

## INTERVENTIONS IN RESPONSE TO THE COVID-19 PANDEMIC



### > SHORT-TERM AND EMERGENCY SUPPORT

\*LG = Local Government

**01** In **6 LGs** with over **84,219** citizens delivered:



**53,150**  
protective masks



**200,000**  
protective gloves



**7,000**  
disposable hazmat suits

+ other protective equipment and disinfectant

**02** In **15 LGs** delivered:



**580**  
disinfection-hygiene packages for public institutions

### > LONG-TERM SUPPORT

**03** In **9 LGs** for over **156,600** citizens procured and delivered:



**88**  
sets of IT equipment

**04** In **3 LGs** spaces equipped for possible isolatories for:



**2,400**  
citizens

**05** In **8 LGs** over **95,888** citizens provided with



**MEDICAL EQUIPMENT**  
for hospitals and health centers

**06** 2 Health centers procured with



**1**  
ambulance  
**1**  
off-road vehicle

### > SYSTEMIC CHANGES

**07** In **3 LGs** for **80,500** citizens upgraded:



**SOFTWARE SYSTEMS**  
for providing online services

### > SOCIAL INCLUSION

**08** For socially disadvantaged families provided:

**360**  
packages of food and hygiene supplies

**09** Diapers and baby gowns procured for

**200**  
newborns



- potentially benefitting from this intervention.
- Two health centres in two local self-government units were provided with 1 ambulance and 1 off-road vehicle.
- The municipalities of Laktaši and Gradiška upgraded the existing GIS system enabling the digitalisation of processes for the municipal administration and improved services to citizens. As part of the COVID-19 assistance, the Municipality of Ključ was able to install the program DOCUNOVA 3.0 in all of its municipal offices and in that way enable more efficient and better quality services to its citizens.
- With the support of Sweden and through the Women in Elections Project, UNDP facilitated events on female leadership and thematic meetings on the localisation of gender action plans in light of the priorities related to the COVID-19 pandemic and enabled CSOs to support communities through the affirmation of female leadership during the pandemic.
- In order to rapidly gain an accurate insight into the actual needs and priorities and to prepare an informed response, UNDP conducted a series of rapid thematic assessments through different projects:
- With the support of Sweden (USD 82,000) through the 'SDGs Roll-out Support and Private Sector Engagement' Project implemented by UNDP, five SMEs were supported in adjusting their original business models and optimizing businesses to the principles of sustainable development. In the context of COVID-19 response, the companies re-focused the production lines to produce personal protective equipment and increase quantities of fresh food production. More importantly, the methodology used has been tested and shared on open online platform for other SMEs, as part of the engagement package to implementation of Agenda 2030. The Regional Programme on Local Democracy in the Western Balkans (ReLOaD) conducted a rapid needs assessment to collect data related to the situation in the 53 local governments in WB6 (Albania, Bosnia and Herzegovina, Kosovo\*, Montenegro, North Macedonia and Serbia).
- The Municipal Economic and Environmental Governance Project conducted a gender analysis of COVID-19 situation in four partner local governments.
- The Biodiversity Project conducted a COVID-19 impact assessment in

- relation to protected areas of biodiversity in Bosnia and Herzegovina.
- A rapid COVID-19 impact assessment was undertaken in the area of low-carbon urban development.
- The Diaspora for Development Project assessed the impact of COVID-19 on the diaspora, emigrants and their contribution to the development of Bosnia and Herzegovina.
- The Strengthening the Role of Local communities in Bosnia and Herzegovina Project conducted a Rapid Response Assessment of community needs at the grass-roots level, with focus on the socially excluded groups.

Building on the lessons learned since March 2020, the next phase of the UNDP COVID-19 crisis response will build on UNDP's role of technical lead for socioeconomic recovery within the United Nations global framework and will focus on four specific areas of UNDP support. The design of the future UNDP response will help decision makers look beyond recovery and toward 2030, helping them to make choices and manage the complex and uncertain environment in four main areas: governance, social protection, the green economy, and digital disruption.

# Lessons learned



*The complex health system that operates through 13 different sub-systems at the entity, cantonal and Brčko District level has made consolidation of the country-wide needs a slow process and affected the speed of procurement and delivery of much-needed medical items and supplies. This had a negative effect on service provision and resulted in increased administrative and coordination costs.*

The procurement capacities of the health institutions need further strengthening and the data systems require modernisation in order to enable reliable real-time health information management. Significantly, the fragmentation of the crisis management and procurement systems has led to competition rather than cooperation between various jurisdictions, inflating local prices as prospective vendors knew that they could pit one buyer against another.

Despite its' identification through previous disasters as the weakest point, **crisis coordination and information management** continue to constitute the main obstacle to effective management of disaster risks. This indicates the need for much stronger multi-sector cooperation and integration across different

tiers of government and other structures. Future support to the civil protection institutions is necessary if they are to become more resilient to shocks, including public health crises. Their information systems and tools need to be digitalized and modernised to enable faster and more effective coordination among stakeholders and outreach to the people. Effective coordination and collaboration of the Civil Protection Administration with administrations in various sectors is necessary for strong management of different type of crises and multiple disasters hitting at the same time.

**Procurement and other capacities of the public health system:** The capacities of the health, civil protection, social protection and other sectors and stakehold-

ers in the country have been stretched to the limit since the onset of the pandemic and this had a negative impact on local procurement and supply chain management, including within the health sector. Disturbance to the supply chains and greatly increased global demand for medical supplies largely exceeding existing supply, has resulted in increased prices for medical and other equipment as well as unreliable offers. The equipment and supplies necessary for identifying and treating persons infected with COVID-19 were hard to obtain in the first months of the crisis, while the immediate public health response in Bosnia and Herzegovina to COVID-19 has struggled with quick repurposing medical facilities and mobilization and mobility of professionals within and across health facilities. Procurement plan-

ning tends to be an issue in the health sector even outside of an emergency setting and the pandemic merely exacerbated existing problems.

**UNDP specific procurement considerations:** UNDP operated in a supply-driven market that was unable to meet demand because of export

contracts, new suppliers that are unfamiliar with the United Nations and the increased risk of fraud.

**The current COVID-19-related order pipeline was frequently incapable of meeting demand in Bosnia and Herzegovina.** Everyone was experiencing a significant gap between the



restrictions placed on key manufacturing hubs and of the impact that flight restrictions had on the movement of cargo. The market environment was experiencing significant price increases, extremely short offer validity (as low as 24 to 48 hours), vendors cancelling their offers, requests for advance payment (to secure production capacity and raw materials) amounting to at least 50% of the cost and sometimes even advance payment in full, suppliers failing to deliver despite signed

forecasted demand, product procurement and expected deliveries (e.g., ventilators). **New suppliers required due diligence and technical reviews of new products.** A consequence of the market situation was the corporate requirement that all supply chain actors apply due diligence and that the relevant competent authorities verify any suspicions or doubts in this regard.

Corporately, UNDP undertakes quality assurance in the

shortest possible time, but sometimes suppliers cancel orders because of their short validity. **UNDP processes take time.** Solicitation, evaluation and approval processes take time and given the current market conditions that are constantly changing, sometimes goods are no longer available at the end of the procurement process. Under the circumstances and with the regulations in place in Bosnia and Herzegovina, the **UNDP response rate was fully dependent on the response rate of the end beneficiary.** The procurement process is lengthy and labour intensive and in the end the outcome does not depend on UNDP regardless of the amount of effort that UNDP may invest.

More responsibility should be placed on domestic institutions for critical decisions such as the need to include procurement and detailed needs identification within the process. **UNDP is small in comparison to governments. In the global marketplace for COVID-19 medical supplies and equipment,** UNDP is a small actor purchasing small quantities and this fact caused suppliers at the peak of the crisis to relegate UNDP to the end of the priority list. UNDP does not have the advantage of high-level political pressure that governments can exert. At the same time, **local suppliers had limited incentives and capacities,** were under-equipped and

faced unprecedented demand for their goods. As a result, the incentive to bid on UNDP tenders was limited to some extent, because supplies could sell directly to governments or other relevant institutions in the region.

**Increased cost of air cargo:** In 2020, at the peak of the crisis, there has been a significant increase in the price of air cargo, sometimes up 3 to 5 times. This has further increased the price of the necessary goods since road and sea transportation was either unavailable or too slow. **EU Restrictions:** Procuring PPE from the EU was virtually impossible for a period of time, because of the restrictions placed on exports. This limited the options in the procurement process, especially given the close links between Bosnia and Herzegovina and the EU market.

**Issues with customs and tax clearance in Bosnia and Herzegovina:** The different government institutions issued unclear and sometimes conflicting instructions on customs and tax clearance on COVID-19 related goods.

**Systemic solutions** for Bosnia and Herzegovina should aim to ensure better ownership of processes and activities by partner institutions. This should include i) facilitating communication with the relevant authorities and institutions, ii) maintaining records

and keeping data and iii) ensuring the sustainability of results and taking over from UNDP once the initial crisis response phase closes. In 2021, this would entail handing over all data and records collected through UNDP work and providing a set of guidelines on how to collect and act on the expressed material needs in a proactive and timely manner.

The COVID-19 crisis has **accelerated the digital transformation** in both the public and private sectors as well as in society as a whole. Further investment in technology and capacities is required if we are to capitalise on the momentum created by the crisis. **The crisis presents a unique opportunity to build forward better and greener.** The crisis has underlined the importance of proactive investment aimed at building resilient and inclusive systems that can respond quickly and effectively to shocks, with stronger focus on **innovation, digital solutions, social protection systems, gender equality** and green and sustainable economic recovery.

**UNDP offered a platform approach, connecting stakeholders, finding solutions and customising them to the country context in order to accelerate the response to the crisis.** Working as part of the United Nations Country Team and in direct coop-

eration with the World Health Organisation, UNDP utilised the extraordinary experience it gained when playing a similar role during the devastating floods of 2014 to support the authorities in Bosnia and Herzegovina in ensuring effective and multi-sectorial crisis coordination. With its strong field presence in more than 80 per cent of local governments and all ten cantons, UNDP supported the COVID-19 response by facilitating interaction and coordination among the various levels of government (including civil protection and rescue units, health system representatives, law enforcement agencies and economic, social and environmental institutions), the private sector, civil society, communities, academia and the international community. Traditional as well as new international and domestic partners recognised the capabilities UNDP applied to support the governments and the coordination efforts during the crisis caused by the pandemic. The added value of UNDP's platform way of working lies in the application of a systemic approach and the facilitation and transfer of knowledge and tested solutions from around the world by customising them to the specific country context and thereby avoiding single-point solutions.

**ANNEX 1**  
Procurement-  
institutional  
arrangements,  
rules and  
procedures



In line with the [Procurement Strategy](#) and the [UNDP Programme and Operations Policies and Procedures on Procurement](#), the procurement in UNDP applies for all aspects of development work. In its development efforts, UNDP globally is abiding to high transparency standards and adopts more sustainable production and consumption practices.

To expedite the response to COVID-19 and save lives, UNDP adopted corporate [COVID-19 Special Procurement Measures](#) that allowed for some flexibility to fast-track urgent actions, including delivery time as one of the criteria, thus ensuring that procurement tenders for some of the medical supplies and goods of high exigency were conducted in the shortest possible time. As per standard procedures, UNDP in Bosnia and Herzegovina has relied on a range of procurement modalities, depending on the type of services and goods required, their respective value, and the request's exigency. 76 various procurement processes were implemented, resulting in 150 procurements signed and 50 companies contracted

for medical supplies and other related services.

The following procurement modalities have been used:

- 1** Micro-Purchasing modality is used if the value of the goods, services or simple works to be procured is below USD 5,000.<sup>4</sup>
- 2** Request for Quotation (RFQ) is a formal invitation to submit a quotation, used for goods/services/civil works valued between USD 5,000 and USD 149,999.<sup>5</sup>
- 3** An Invitation to Bid (ITB) is a formal invitation to submit a bid, usually associated with requirements that are clearly and concisely defined, with an estimated procurement value of USD 150,000 or more.<sup>6</sup>
- 4** A Request for Proposal (RFP) is a formal request to submit a proposal usually associated with requirements for services, which cannot be clearly or concisely defined, with an estimated procurement value of USD 150,000 or more.<sup>7</sup>
- 5** Exceptionally and when it is deemed in the best

interest of UNDP, procurement staff may buy goods or services through Direct Contracting.

Procurement procedures are designed and implemented according to the principles of the best value for money, fairness, integrity, competitiveness, and transparency.

The names of selected bidders and the values of the contracts related to the COVID-19 procurement in 2020 in Bosnia and Herzegovina, including direct contracts, are publicly available at UNDP Transparency Portal (<https://open.undp.org/projects/00126570>).

In line with the corporate Programme and Operations Policies and Procedures on Procurement, UNDP in Bosnia and Herzegovina defined its internal Procurement and Delivery Standard Operating Procedures for COVID-19 Pandemic Response, further detailing protocols for needs identification, procurement and delivery of COVID-19 related supplies, approval of specifications, imports, internal controls related to delivery, epidemiological protection of field staff and visibility

requirements. Needs identification was based on requests received from governments at state, entity, cantonal and local levels.

### 1 Technical specification

Technical specification for the requisition of goods was provided by end beneficiaries (healthcare institutions, crisis management structures) and reviewed against WHO standards to confirm adherence. Alternatively, technical specification was prepared based on WHO Specification Instruction and then confirmed with medical expertise of end beneficiaries. For example, a procurement focal point in Canton Sarajevo was the chair of the Cantonal Crisis Management Team who sought medical expertise from relevant medical experts employed in hospitals of the Canton Sarajevo. As a general rule, technical documentation specified all relevant details of goods (such as physical attributes, materials), selection criteria and other standards defined by the [UNDP Procurement Procedures](#). In some cases, in preparation of goods specification, medical expertise was sought from an independent medical expert engaged only for that purpose, who was not part of a tendering process, procurement or engaged in a beneficiary institution. When needed, an additional expertise and support was also sought from the [UNDP Global Procurement](#)

[Unit \(GPU\) based in Copenhagen, Denmark](#), which provides a strategic risk management approach to the procurement of complex goods and services. When purchase value exceeds USD 250,000 technical specification of goods had to be approved by UNDP Headquarters.

### 2 Procurement

- **Sourcing of bids** is done following the standard [UNDP Procurement Procedures](#).
- **Evaluation of offers** is done according to the criteria set in the published solicitation documents (RfQs, ITBs and RFPs); In the extremely complex and changing market (experiencing restrictions, high demand, changing prices, changing availability), the value for money was sought through analysis based on ex-stock prices, seeking goods which were available immediately from a supplier's stock-holding and therefore with little or no lead time (other than delivery) from their home countries (majority in China) requiring additionally freight, insurance, export/import clearance, etc. and through comparison with the ones that are available locally through authorized representatives / dealers of requested products.
- **Procurement oversight and review.** To ensure procurement activities are

conducted in line with accepted professional purchasing practices and appropriate rules and regulations, UNDP requires an independent review of the procurement process prior to a contract award. The review confirms that offers received are the result of a fully compliant process, sufficient funding exists, and risks have been assessed and mitigated. Depending on the value and complexity of the purchase order, the procurement review in UNDP is undertaken at three different levels. For the purchase value exceeding USD 50,000 the procurement review is undertaken by the Contract Appraisal Panel of the Country Office in Bosnia and Herzegovina. For the purchase value exceeding USD 500,000, the procurement review is undertaken by the Regional Advisory Committee on Procurement and for the purchase value exceeding USD 2 million, the procurement review is undertaken by the Advisory Committee on Procurement of the UNDP Head Quarters in New York.

- In case there is a discrepancy between available and requested goods, this is communicated back to and agreed with the beneficiary and WHO before

<sup>4</sup> Micro-purchasing can normally be done in 1 or 2 days. Award is made to the lowest price available.

<sup>5</sup> Depending on the complexity of the requirement, vendors will be given 3 to 10 business days to respond to an RFQ. Prices, and other commercial terms and conditions are requested and award is made to the lowest priced technically acceptable offer.

<sup>6</sup> Where all qualification requirements and technical criteria are met, an award is made to the lowest bidder. Vendors will normally be given 10-15 business days or more to respond, depending on the complexity of the requirement.

<sup>7</sup> Price is only one of several factors comprising the evaluation criteria. Award is made to the qualified bidder whose bid substantially conforms to the requirement set forth on the solicitation documents and is evaluated to be the lowest cost to UNDP or to the highest rated proposal using the combined scoring method, which assigns a weight distribution between technical and financial proposals set out in RFP. Vendors are normally given 10-15 business days or more to respond to an RFP. In some cases, vendors may be required to pre-qualify. Exceptionally and when it is deemed in the best interest of UNDP, procurement staff may buy goods or services through Direct Contracting.

- continuing the procurement exercise.
- UNDP prepares a letter to beneficiary requesting confirmation of acceptance for the sourced goods.
  - In line with its procurement rules, UNDP notifies unsuccessful bidders on the outcome of a procurement action only if their offers were technically compliant (but they were underbid). Other companies can obtain access to information on the status of their offer upon request. In line with rules in place to protect the integrity of the bidding process, UNDP does not, however, provide this information to a third party. Individual companies are under no obligation from UNDP to withhold information on their bids, but standard business practice is not to reveal bidding information to competitors.

### 3 Import-related documents

- For medicinal products and medical devices which are not registered with the Agency for Medicinal Products and Medical Devices of Bosnia and Herzegovina, a signed and stamped Statement from the beneficiary (direct beneficiary: hospital, clinic, clinical centre, institute) was necessary.
- In cases where UNDP imports goods for several

beneficiaries, a statement from UNDP to supplier, listing all beneficiaries and quantities, is prepared.

### 4 Delivery of goods to beneficiaries

- Delivery of goods was carried out either by suppliers, carriers (authorized transport company) or UNDP. For all non-expendable items, a UNDP representative was present for delivery regardless of the value. For expendable items (i.e., single-use items and multiple-use items), a UNDP representative had to be present for delivery in case the value of goods was exceeding USD 10,000. If items from a single procurement were delivered to multiple locations, USD 5,000 threshold per location had to be applied. A signed delivery note had to be obtained from supplier or beneficiary.
- Internal control actions are undertaken to verify that delivered goods correspond to Purchase Order in quality and quantity; Delivery note is signed by both UNDP representative and the authorized beneficiary representative and a copy of the delivery note obtained.
- UNDP personnel attending deliveries has to wear personal protection gear

and abide by the relevant government epidemiological measures.

Anyone, including UNDP staff, contractors, partners and the general public, can submit allegations of misconduct directly to UNDP's Independent Office of Audit and Investigation, available at <https://www.undp.org/content/undp/en/home/accountability/audit/office-of-audit-and-investigation.html#report>. Every allegation is reviewed and, where appropriate, fully investigated.

# ANNEX 2

## Medical equipment and supplies purchased and delivered with contributions of international partners




**THE DELEGATION OF THE EUROPEAN UNION  
TO BOSNIA AND HERZEGOVINA**
**\* GRAND TOTAL BOSNIA AND HERZEGOVINA 3,667,518**
**TOTAL REPUBLIKA SRPSKA 1,346,847**
**BRČKO DISTRICT OF BIH 37,114**

Ventilator (for critical care)	1
Monitors (vital functions / invasive + noninvasive monitoring modalities)	1
Pulse oximeter	20
Face shield	300
Gloves (examination or surgical, forearm length, sterile, latex - pcs)	10,000
Gloves (examination, non-sterile, latex - pcs)	5,000
Gloves (examination, non-sterile, nitrile - pcs)	5,000
Gown (single use)	1,230
Mask (surgical)	10,000
Particulate respirator (N95 or higher - mask FFP2)	1,812
Single-use shoe covers (pcs)	3,000
Surgical hats (ordinary)	750

**BOSNIA-PODRINJE CANTON 25,562**

Ventilator (for critical care)	1
X-ray machine	1
Portable ultrasound scanner	1
Pulse oximeter	13
Face shield	100
Gloves (examination or surgical, forearm length, sterile, latex - pcs)	7,000
Gloves (examination, non-sterile, latex - pcs)	3,300
Gloves (examination, non-sterile, nitrile - pcs)	3,300
Gown (single use)	870
Mask (surgical)	6,600
Particulate respirator (N95 or higher - mask FFP2)	1,176
Single-use shoe covers (pcs)	2,700
Surgical hats (ordinary)	500

\*All numbers represent number of items delivered, not funds.

**CANTON 10**
**86,309**

Ventilator (for critical care)	2
Monitors (vital functions / invasive + noninvasive monitoring modalities)	1
Portable ultrasound scanner	1
Pulse oximeter	47
Face shield	250
Particulate respirator (N95 or higher - mask FFP2)	4,208
Gloves (examination or surgical, forearm length, sterile, latex - pcs)	23,000
Gloves (examination, non-sterile, latex - pcs)	11,700
Gloves (examination, non-sterile, nitrile - pcs)	11,700
Gown (single use)	3,050
Mask (surgical)	23,300
Single-use shoe covers (pcs)	7,300
Surgical hats (ordinary)	1,750

**HERZEGOVINA-NERETVA CANTON**
**231,136**

Ventilator (for critical care)	613
X-ray machine	1
Face shield	1,000
Gloves (examination or surgical, forearm length, sterile, latex - pcs)	62,000
Gloves (examination, non-sterile, latex - pcs)	30,700
Gloves (examination, non-sterile, nitrile - pcs)	30,700
Gown (single use)	7,870
Mask (surgical)	61,500
Monitors (vital functions / invasive + noninvasive monitoring modalities)	2
Particulate respirator (N95 or higher - mask FFP2)	11,132
PCR machine	1
Portable ultrasound scanner	1
X-ray machine	1
Pulse oximeter	123
RNA extraction kits	2,250
Single-use shoe covers (pcs)	18,100
Surgical hats (ordinary)	4,250
Tests for COVID19 Detection	1,500

SARAJEVO CANTON		427,238
	Container for triage	10
	Ventilator (for critical care)	9
	PCR machine	1
	Portable ultrasound scanner	2
	Monitors (vital functions / invasive + noninvasive monitoring modalities)	5
	Face shield	2,000
	Gloves (examination or surgical, forearm length, sterile, latex - pcs)	115,000
	Gloves (examination, non-sterile, latex - pcs)	57,300
	Gloves (examination, non-sterile, nitrile - pcs)	57,300
	Gown (single use)	14,560
	Mask (surgical)	114,600
	Particulate respirator (N95 or higher - mask FFP2)	20,722
	Pulse oximeter	229
	RNA extraction kits	1,500
	Single-use shoe covers (pcs)	34,500
	Surgical hats (ordinary)	8,000
	Tests for COVID19 detection	1,500

POSAVINA CANTON		43,899
	Ventilator (for critical care)	1
	Pulse oximeter	24
	Face shield	200
	Gloves (examination or surgical, forearm length, sterile, latex - pcs)	12,000
	Gloves (examination, non-sterile, latex - pcs)	6,000
	Gloves (examination, non-sterile, nitrile - pcs)	6,000
	Gown (single use)	1,490
	Mask (surgical)	12,050
	Particulate respirator (N95 or higher - mask FFP2)	2,184
	Single-use shoe covers (pcs)	3,200
	Surgical hats (ordinary)	750

CENTRAL BOSNIA CANTON		261,304
	Ventilator (for critical care)	4
	X-ray Machine	1
	Portable ultrasound scanner	1
	Monitors (vital functions / invasive + noninvasive monitoring modalities)	3
	Pulse oximeter	141
	Face shield	1,100
	Gloves (examination or surgical, forearm length, sterile, latex - pcs)	71,000
	Gloves (examination, non-sterile, latex - pcs)	35,300
	Gloves (examination, non-sterile, nitrile - pcs)	35,300
	Gown (single use)	8,970
	Mask (surgical)	70,600
	Particulate respirator (N95 or higher - mask FFP2)	12,784
	Single-use shoe covers (pcs)	21,100
	Surgical hats (ordinary)	5,000

TUZLA CANTON		458,694
	Ventilator (for critical care)	8
	X-ray machine	1
	RNA extractor	1
	PCR machine	2
	Portable ultrasound scanner	2
	Monitors (vital functions / invasive + noninvasive monitoring modalities)	5
	Face shield	1,950
	Gloves (examination or surgical, forearm length, sterile, latex - pcs)	122,000
	Gloves (examination, non-sterile, nitrile - pcs)	123,400
	Gown (single use)	15,660
	Mask (surgical)	123,300
	Particulate respirator (N95 or higher - mask FFP2)	22,318
	Pulse oximeter	247
	RNA Extraction Kits	2,250
	Single-use shoe covers (pcs)	37,300
	Surgical hats (ordinary)	8,750
	Tests for COVID19 Detection	1,500

UNA-SANA CANTON		280,112
	Ventilator (for critical care)	6
	X-ray Machine	1
	Portable ultrasound scanner	1
	Monitors (vital functions / invasive + noninvasive monitoring modalities)	3
	Face shield	1,200
	Gloves (examination or surgical, forearm length, sterile, latex - pcs)	76,000
	Gloves (examination, non-sterile, latex - pcs)	37,900
	Gloves (examination, non-sterile, nitrile - pcs)	37,900
	Gown (single use)	9,660
	Mask (surgical)	75,750
	Particulate respirator (N95 or higher - mask FFP2)	13,690
	Pulse oximeter	151
	Single-use shoe covers (pcs)	22,600
	Surgical hats (ordinary)	5,250

ZENICA-DOBOJ CANTON		372,976
	Ventilator (for critical care)	6
	PCR Machine	1
	Portable ultrasound scanner	2
	Monitors (vital functions / invasive + noninvasive monitoring modalities)	4
	X-ray Machine	1
	Face shield	1,600
	Gloves (examination or surgical, forearm length, sterile, latex - pcs)	101,000
	Gloves (examination, non-sterile, nitrile - pcs)	101,000
	Gown (single use)	12,740
	Mask (surgical)	101,000
	Particulate respirator (N95 or higher - mask FFP2)	18,320
	Pulse oximeter	202
	Single-use shoe covers (pcs)	30,100
	Surgical hats (ordinary)	7,000

WEST HERZEGOVINA CANTON		96,327
	Portable ultrasound scanner	1
	Monitors (vital functions / invasive + noninvasive monitoring modalities)	1
	Pulse oximeter	53
	Face shield	300
	Gloves (examination or surgical, forearm length, sterile, latex - pcs)	26,000
	Gloves (examination, non-sterile, latex - pcs)	13,100
	Gloves (examination, non-sterile, nitrile - pcs)	13,100
	Gown (single use)	3,330
	Mask (surgical)	26,300
	Particulate respirator (N95 or higher - mask FFP2)	4,792
	Single-use shoe covers (pcs)	7,600
	Surgical hats (ordinary)	1,750

TOTAL FEDERATION BIH		2,283,557
	Ventilator (for critical care)	26
	X-ray Machine	4
	RNA Extractor	1
	PCR Machine	1
	Portable ultrasound scanner	8
	Monitors (vital functions / invasive + noninvasive monitoring modalities)	15
	Face shield	5,000
	Gloves (examination or surgical, forearm length, sterile, latex - pcs)	375,000
	Gloves (examination, non-sterile, latex - pcs)	49,700
	Gloves (examination, non-sterile, nitrile - pcs)	283,560
	Gown (single use)	47,520
	Mask (surgical)	375,000
	Particulate respirator (N95 or higher - mask FFP2)	67,912
	Pulse oximeter	750
	RNA Extraction Kits	3,000
	Single-use shoe covers (pcs)	112,500
	Surgical hats (ordinary)	23,850
	Tests for COVID19 Detection	3,000


**THE KINGDOM OF NORWAY**

**\* GRAND TOTAL BOSNIA AND HERZEGOVINA 210,275**

**TOTAL REPUBLIKA SRPSKA 117,509**

**BRČKO DISTRICT OF BIH 1,001**

Portable ultrasound scanner 1  
Tests for COVID19 Detection 1,000

**SARAJEVO CANTON 20,872**

3D printer and printing material 7  
Automatic analyzer for serological diagnosis 1  
Chemicals for Sequencing Viral RNA [set] 1  
Container for Triage 1  
Defibrillator 1  
ECG machine 12  
Fuel card for NGO 'Dajte nam šansu' 2  
Monitors (vital functions / invasive + noninvasive monitoring modalities) 4  
RNA Extractor 1  
Ventilator (for critical care) 2  
X-ray Machine 1  
Patient bed 44  
Alcohol-based hand rub solution (l) 2,000  
Clips Titanium 9,600  
Face shield 500  
Gown (single use) 2,000  
Medical Covers 711  
Particulate respirator (N95 or higher - mask FFP2) 500  
RNA Extraction Kits 960  
Single-use shoe covers (pcs) 1,000  
Soap bar 500  
Suture (pcs) 3,024

\*All numbers represent number of items delivered, not funds.

**BOSNIA-PODRINJE CANTON 6,830**

Alcohol-based hand rub solution (l) 30  
Goggles (protective) 100  
Mask (surgical) 6,500  
Protective suit 200

**HERZEGOVINA-NERETVA CANTON 26,002**

Monitors (vital functions / invasive + noninvasive monitoring modalities) 2  
Mask (surgical) 20,000  
Particulate respirator (N95 or higher - mask FFP2) 5,000  
Protective suit 1,000

**POSAVINA CANTON 34,641**

Container for triage 1  
Portable ultrasound scanner 1  
Disinfectant (chlorine based - kg) 39  
Cotton mask 4,600  
Mask (surgical) 30,000

**TOTAL FEDERATION BIH 91,765**

ECG machine 5  
Monitors (vital functions / invasive + noninvasive monitoring modalities) 2  
Portable ultrasound scanner 2  
Mask (surgical) 110,000  
Particulate respirator (N95 or higher - mask FFP2) 5,000  
Universal Sterile Transport Medium for Viruses 2,500

TUZLA CANTON		3,420
	ECG machine	1
	Hemodialysis machines	5
	Oxygen bottle (10 l)	2
	Oxygen Flowmeter	6
	Pulse oximeter	3
	Thermometer (non-contact infrared - NCIT)	3
	Alcohol-based hand rub solution (l)	200
	Gloves (examination, non-sterile, latex - pcs)	500
	Goggles, protective	500
	Particulate respirator (N95 or higher - mask FFP2)	500
	Particulate respirator (N95 or higher - mask FFP3)	500
	Protective suit	200
	Single-use shoe covers (pcs)	500
	Surgical hats (ordinary)	500



## SWEDEN

**\* GRAND TOTAL BOSNIA AND HERZEGOVINA 321,909**

TOTAL REPUBLIKA SRPSKA		279,886
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BRČKO DISTRICT OF BIH		1
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	Medical waste shredding machine	1
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BOSNIA-PODRINJE CANTON		3,950
	Personal protective masks (medical/surgical mask)	1,500
	Particulate Respirator (FFP2 / N95)	300
	Single use Gloves	1,500
	Protective suit with hood for single use	225
	Shoe cover	225
	Protective gown (single use)	200

HERZEGOVINA-NERETVA CANTON		1,554
	Automatic vertical autoclave	2
	Personal protective masks (medical/surgical mask)	500
	Particulate Respirator (FFP2 / N95)	339
	Single use Gloves	500
	Protective gown (single use)	50
	Disinfectants (1l)	50
	Disinfectants (50 ml)	113

SARAJEVO CANTON		16,627
	Specialized vehicle for medical waste transport	1
	Personal protective masks (medical/surgical mask)	1,250
	Particulate Respirator (FFP2 / N95)	1,550
	Single use Gloves	12,000
	Protective suit with hood for single use	28
	Protective suit with hood for single use	503
	Personal protective goggles	15
	Disinfectants (50 ml)	350
	Orange or RED bags for sterilizer Sinton or equivalent	750
	Yellow bucket with pedal (17 l)	180

UNA-SANA CANTON		2,531
	Personal protective masks - medical/surgical mask	500
	Particulate Respirator (FFP2 / N95)	207
	Single use gloves	1,000
	Protective suit with hood for single use	103
	Disinfectants (1l)	50
	Disinfectants (50 ml)	69
	Red Clinical Waste Bags (medium duty 120L)	500
	Yellow transport container (120 l on wheels)	2
	Yellow bucket with pedal (17 l)	100

\*All numbers represent number of items delivered, not funds.

<b>TUZLA CANTON</b>		<b>6,614</b>
	Infective waste sterilizer	<b>1</b>
	Personal protective masks (medical/surgical mask)	<b>1,500</b>
	Particulate Respirator (FFP2 / N95)	<b>420</b>
	Single use Gloves	<b>2,500</b>
	Protective suit with hood for single use	<b>53</b>
	Personal protective goggles	<b>100</b>
	Protective gown (single use)	<b>100</b>
	Disinfectants (1l)	<b>50</b>
	Disinfectants (50 ml)	<b>140</b>
	Red Clinical Waste Bags (medium duty 40L)	<b>500</b>
	Red Clinical Waste Bags (medium duty 30L)	<b>500</b>
	Orange or RED bags for sterilizer Sintion or equivalent	<b>750</b>
<b>ZENICA - DOBOJ CANTON</b>		<b>6,760</b>
	Personal protective masks (medical/surgical mask)	<b>2,500</b>
	Particulate Respirator (FFP2 / N95 - size medium)	<b>120</b>
	Single use Gloves	<b>2,500</b>
	Protective suit with hood for single use	<b>50</b>
	Disinfectants (1l)	<b>50</b>
	Disinfectants (50 ml)	<b>40</b>
	Red Clinical Waste Bags (medium duty 120L)	<b>1,500</b>
<b>WEST-HERZEGOVINA CANTON</b>		<b>1,125</b>
	Personal protective masks (medical/surgical mask)	<b>500</b>
	Single use Gloves	<b>500</b>
	Protective suit with hood for single use	<b>25</b>
	Protective gown (single use)	<b>50</b>
	Disinfectants (1l)	<b>50</b>
<b>CENTRAL BOSNIA CANTON</b>		<b>156</b>
	Yellow transport container (120 l on wheels)	<b>2</b>
	Yellow bucket with pedal (17 l)	<b>154</b>

<b>CANTON 10</b>		<b>2,705</b>
	Red Clinical Waste Bags (medium duty 40L)	<b>2000</b>
	Red Clinical Waste Bags (medium duty 50L)	<b>600</b>
	Red Clinical Waste Bags (medium duty 120L)	<b>100</b>
	Yellow transport container (120 l on wheels)	<b>5</b>
<b>TOTAL FEDERATION BIH</b>		<b>42,022</b>
	Infective waste sterilizer	<b>1</b>
	Automatic vertical autoclave	<b>1</b>
	Specialized vehicle for medical waste transport	<b>2</b>
	Personal protective masks (medical/surgical mask)	<b>92,500</b>
	Particulate Respirator (FFP2 / N95)	<b>2,163</b>
	Single use Gloves	<b>92,000</b>
	Protective suit with hood for single use	<b>2,931</b>
	Personal protective goggles	<b>100</b>
	Face shield	<b>225</b>
	Shoe cover	<b>4,752</b>
	Non-woven Bouffant Cap	<b>1,750</b>
	Disinfectants (50 ml)	<b>346</b>
	Yellow Clinical Waste Bags (medium duty 30L)	<b>44,950</b>
	Yellow Clinical Waste Bags (medium duty 40L)	<b>7,000</b>
	Infectious waste bags (large - for steam treatment - Treatment Equipment)	<b>3,700</b>
	Yellow Clinical Waste Bags (medium duty 50L)	<b>14,200</b>
	Yellow Clinical Waste Bags (small duty 5 L)	<b>300</b>
	Gray bags for sterilizer Meteka or equivalent (110 l)	<b>1,000</b>
	Sharps disposal containers (plastic small 0,5 l)	<b>3,860</b>
	Sharps disposal containers (plastic large 2,3 l)	<b>6,780</b>
	Yellow transport container (120 l on wheels)	<b>106</b>
	Yellow transport container (240 l on wheels)	<b>99</b>
	Yellow bucket with pedal (17 l)	<b>559</b>
	Liquid medical waste bin yellow (10 l)	<b>550</b>
	Infectious waste bag holders	<b>11</b>

 <b>THE GOVERNMENT OF SWITZERLAND/SDC</b>	
<b>* GRAND TOTAL BOSNIA AND HERZEGOVINA</b>	<b>26,003</b>
<b>TOTAL REPUBLIKA SRPSKA</b>	<b>1</b>
<b>HERZEGOVINA-NERETVA CANTON</b>	<b>1</b>
 Ventilator (for critical care)	1
<b>CANTON SARAJEVO</b>	<b>26,001</b>
 Mask (surgical)	26,000
 X-ray machine	1
<b>TOTAL FEDERATION BIH</b>	<b>26,002</b>
 Ventilator (for critical care)	1

 <b>UNDP</b>	
<b>* GRAND TOTAL BOSNIA AND HERZEGOVINA</b>	<b>18,753</b>
<b>SARAJEVO CANTON</b>	<b>5,157.03</b>
 Desktop computer	3
 Oxygen concentrator	5
 Infusion pump/infusomat	10
 Thermometer (non-contact infrared - NCIT)	61
 Suction devices	15
 Hospital furniture	33
 Noninvasive ventilation mask	10
 Pressure relief mattresses	20
 Tests for COVID19 Detection	5,000

\*All numbers represent number of items delivered, not funds.

<b>HERZEGOVINA-NERETVA CANTON</b>		<b>6,805</b>
 Particulate respirator (N95 or higher - mask FFP3)		90
 Gloves (examination, non-sterile, latex - pcs)		4,000
 Gloves (examination, non-sterile, nitrile - pcs)		2,500
 Protective goggles		150
 Protective suit		25
 Thermometer (non-contact infrared - NCIT)		40
<b>BOSNIA-PODRINJE CANTON</b>		<b>3,645</b>
 Particulate respirator (N95 or higher - mask FFP3)		30
 Gloves (examination, non-sterile, latex - pcs)		2,000
 Gloves (examination, non-sterile, nitrile - pcs)		1,500
 Protective goggles		100
 Protective suit		15
<b>POSAVINA CANTON</b>		<b>3,146.00</b>
 Thermometer (non-contact infrared - NCIT)		6
 Gloves (examination, non-sterile, latex - pcs)		2,000
 Gloves (examination, non-sterile, nitrile - pcs)		1,000
 Protective goggles		100
 Particulate respirator (N95 or higher - mask FFP3)		30
 Protective suit		10

**UNDP also financed the IU Reconstruction in General Hospital Sarajevo with 3% of total cost.**

 <b>THE GOVERNMENT OF AUSTRIA/ADA</b>	
<b>* GRAND TOTAL BOSNIA AND HERZEGOVINA</b>	<b>2,801</b>

<b>UNA-SANA CANTON</b>	<b>2,801</b>
 Real-time PCR machine	1
 RT PCR tests	1,300
 Swabs	1,500

 <b>NOVARTIS PHARMA SERVICES INC.</b>	
<b>* GRAND TOTAL BOSNIA AND HERZEGOVINA</b>	<b>2</b>

<b>TOTAL REPUBLIKA SRPSKA</b>	<b>1</b>
<b>SARAJEVO CANTON</b>	<b>1</b>
 Ventilator (for critical care)	1
<b>TOTAL FEDERATION BIH</b>	<b>1</b>
 Ventilator (for critical care)	1

## ANNEX 3

# Medical equipment and supplies purchased and delivered with contributions of authorities of Bosnia and Herzegovina




**BOSNIA AND HERZEGOVINA**

\* All numbers represent number of items delivered, not funds.

INSTITUTE OF HEALTH INSURANCE OF SARAJEVO CANTON		3,597,771
	Ventilator (for critical care)	7
	Humidifier with heater	5
	Two-part oxygen dispenser	60
	Adrenaline (1 mg)	1,000
	Amoxicillin (clavulanic acid 1.000 mg + 200 mg)	6,000
	Atracurium (50 mg)	1,500
	Azithromycin (500 mg)	1,000
	Chlarithromycin (500mg)	600
	Cijanokobalamin inj.	500
	Ciprofloxacin (100 mg)	24,000
	Dexamethasone (4 mg)	5,000
	Diazepam (10 mg)	5,000
	Doxycycline (100 mg)	1,000
	Etamsilat (250 mg)	3,000
	Face shield	10,445
	Favirapiravir	2,000
	Fentanyl (500 mcg)	4,000
	Fluconazole (100 mg)	100
	Gloves (examination, non-sterile, latex - pcs)	1,400,000
	Glukagon inj.	50
	Glycerol trinitrate (0,4 mg/doza)	400
	Hydrocortisone (100 mg)	3,000
	Iloprost ot. za inf	200
	Kaptopril tabl.	100
	CT contrast dye (jopromid 370 - 50ml)	1,000
	Lincocin 300mg. inj.	500
	Lyophilized lactic acid bacteria caps (FORTE)	100

	Manitol (200 g/1.000 ml)	1,000
	Mask (surgical)	1,550,000
	Metamizole sodium (2.500 mg)	20,000
	Methylergomethrin (0,2 mg)	700
	Methylprednisolone (20 mg)	4,500
	Methylprednisolone (40 mg)	1,500
	Midazolam (15 mg)	4,000
	Noradrenaline (2 mg)	500
	One-piece oxygen dispenser	40
	Oxygen bottle (10l)	50
	Oxygen bottle (40l)	100
	Oxygen dispenser for large bottles (40l)	100
	Oxygen dispenser for small bottles (10l)	50
	Oxytocin 10 i.j.	3,000
	Particulate respirator (N95 or higher - mask FFP2)	58,050
	Particulate respirator (N95 or higher - mask FFP3)	5,000
	Pentoksiflin inj.	4,000
	Protective suit	500
	Rubber boots staff (different sizes - pcs)	600
	Surgical Hats (Ordinary Hats)	265,750
	Tests for COVID19 Detection	89,064
	Tiopental (1.000 mg)	700
	Tramadol (50 mg)	6,000
	Trospium (0,2 mg)	6,000
	Universal Sterile Transport Medium for Viruses	95,800
	Vankomycin (1.000 mg)	2,000
	Vitamin B-complex	5,000
	Vitamin K inj.	3,000

SARAJEVO CANTON		215,477
	Isolation Unit Reconstruction	1
	Thermometer (non-contact infrared - NCIT)	16
	Alcohol (l)	1,350
	Alcohol-based hand rub solution (l)	4,190
	Disinfectant wipes (antibacterial, alcohol-free wet wipes for hands and surfaces)	3,500
	Disinfectant (chlorine-based - l)	30
	Face shield	550
	Gauze (1 pack of 100m)	10
	Gloves (examination, non-sterile, latex - pcs)	76,000
	Gown (single use)	2,000
	Mask (surgical)	123,800
	Particulate respirator (N95 or higher - mask FFP2)	500
	Single-use shoe covers (pcs)	1,000
	Soap bar	500
	Sterile compresses (10x10 cm)	2,000
	Wall dispensers for liquid soap	30

**The IU Reconstruction in General Hospital Sarajevo was funded 97% by Sarajevo Canton and 3% by UNDP.**

REPUBLIKA SRPSKA PUBLIC HEALTH INSTITUTE		181,128
	Lab tests for COVID19	22,000
	RNA extraction kits	48,128
	Tests for COVID19 detection	67,000
	Universal sterile transport medium for viruses	44,000

CITY OF DOBOJ		33,050
	Alcohol-based hand rub solution (l)	300
	Face shield	250
	Mask (surgical)	30,000
	Universal sterile transport medium for viruses	2,500

CENTRAL-BOSNIA CANTON		125,522
	PCR Machine	1
	X-ray Machine	1
	Laboratory Devices (Various)	17
	Laboratory Supplies (Liquid, Various - l)	21
	Laboratory Supplies (Various)	47
	Adult diapers	15,000
	Albumin - human (dose)	190
	Gloves (examination, non-sterile, latex - pcs)	20,000
	Goggles (protective)	150
	Mask (surgical)	10,000
	Pancuronium ampoules	5,000
	Paracetamol (500 mg)	2,000
	Propofol (500mg/50ml)	1,000
	Protective suit	6,050
	Single-use shoe covers (pcs)	29,000
	Surgical Hats (Ordinary Hats)	20,000
	Suxamethonium ampoules	2,000
	Tests for COVID19 Detection	5,000
	Universal Sterile Transport Medium for Viruses	10,000
	Vecuronium ampoules	45

HERZEGOVINA-NERETVA CANTON		40,000
	Mask (surgical)	40,000

WEST HERZEGOVINA CANTON		35,300
	Alcohol-based hand rub solution (l)	150
	Protective goggles	50
	Mask (surgical)	35,000
	Protective suit	100

<b>ZENICA-DOBOJ CANTON</b>		<b>492,878</b>
	Alcohol-based hand rub solution (l)	240
	CT scanner	1
	X-ray Machine	1
	RNA Extractor	2
	Gloves (examination, non-sterile, nitrile - pcs)	150,000
	Protective goggles	650
	Mask (surgical)	300,000
	Multiplex RT-PCR kit	3,000
	Protective suit	4,500
	RNA extraction kits	9,984
	Tests for COVID19 detection	20,500
	Universal sterile transport medium for viruses	4,000

<b>POSAVINA CANTON</b>		<b>162,734</b>
	X-ray machine	1
	ECG machine	2
	Thermometer (non-contact infrared - NCIT)	20
	Alcohol (l)	2,000
	Alcohol-based hand rub solution (l)	100
	Disinfectant (chlorine based - kg)	111
	Gloves (examination, non-sterile, latex - pcs)	100,000
	Mask (surgical)	45,000
	Protective suit	2,500
	Surgical Hats (Ordinary Hats)	7,000
	Tests for COVID19 detection	6,000



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