

United Nations Development Programme

Country: Kyrgyzstan

Project Title: "Protect human health and the environment from unintentional releases of POPs and mercury from the unsound disposal of healthcare waste in Kyrgyzstan"
2018 Annual Work Plan



Empowered lives.
Resilient nations.

UNDAF/CP Outcome(s): Outcome 3: By 2022, communities and institutions are more resilient to climate and disaster risks and are engaged in sustainable and inclusive natural resource management and risk-informed development

Expected CPAP Output: Output 3.3. Innovative and smart solutions developed at national and sub-national levels for sustainable management of natural resources, ecosystem services, chemicals and waste, for better livelihoods and employment, with the focus on women and youth.

SDGs 3; 12

Implementing agency: United Nations Development Programme
Ministry of Health (MoH)

Responsible Parties: State Agency for Environment Protection and Forestry (SAEPF)

Brief Description:

The objective of the project is to implement and adopt Best Environmental Practices (BEP) and Best Available Technologies (BAT) in healthcare facilities in Bishkek to improve the management, treatment, and disposal of healthcare waste, as well as support a number of rural health posts (~ 100) in Chui and Issykul Oblast. The project will assist Kyrgyzstan in meeting its obligations under the Stockholm Convention on Persistent Organic Pollutants (POPs) by adopting environmentally friendly treatment options for healthcare waste, which will lead to a reducing in UPOPs emissions controlled under the Convention (currently unintentionally POPs (UPOPs) are produced when healthcare waste are incinerated or burned in the open).

Another project objective is to reduce mercury releases from the health sector (generally caused by the breakage of Mercury containing thermometers), by supporting the phase out of Mercury containing medical equipment and the introduction of Mercury-free alternatives. This activity will assist Kyrgyzstan in meeting its obligations to the Minamata Convention on Mercury once it enters into force.

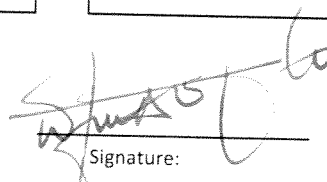
Besides reducing releases of UPOP and Mercury, the project has many socio-economic benefits. Improved management of healthcare wastes in and outside of hospitals, generally leads to a reduction in occupational exposure of healthcare staff to pathogens, reduces the occurrence of nosocomial infections (hospital acquired infections) which jeopardizes the health of patients and their visitors, and reduces exposure of waste handlers, recyclers, waste-pickers, etc. who face hazardous working conditions when in contact with infectious and toxic healthcare waste. Communities living close to waste disposal sites (municipal waste dumps and landfills) or incinerators will also benefit. Finally, most hospitals which have participated in similar projects have experiences that the HCWM model promoted under this project reduces operating costs and proves more sustainable.

Programme Period:	2013-2017
Key Result Area:	Environment and SD
Atlas Award ID:	00078201
Atlas Project ID:	00088593
Start Date:	July, 2014
End Date:	July, 2018
PAC Meeting Date:	April 18, 2014
Management arrangements	DIM

Total 2018 AWP Budget	274,219.79
Total resources required:	
Regular - TRAC	0.00
Other (GEF):	274,219.79
Government :	
Unfunded budget:	
In-kind Contributions:	

Approved by UNDP:

Ms. Aliona Niculita,
Deputy Resident Representative


Signature: _____ Date: 16/01/18

OZONNIA OJIELO
UN RESIDENT COORDINATOR
UNDP RESIDENT REPRESENTATIVE
IN THE KYRGYZ REPUBLIC

Annual Work Plan

United Nations Development Programme

Year - period:

Project ID:

Project title:

01 January – 31 July 2018

00078201

Protect human health and the environment from unintentional releases of POPs and mercury from the unsound disposal of healthcare waste in Kyrgyzstan

EXPECTED OUTPUTS	PLANNED ACTIVITIES	TIMEFRAME				RESPONSIBLE PARTY	PLANNED BUDGET			
		Q1	Q2	Q3	Q4		Funding Source	Budget Description	Amount (USD)	
<p>GENDER MARKER - 2</p> <p>Component 1. Strengthening of the national regulatory and policy framework for health care waste management</p> <p>Outcome 1.2 The regulatory framework for HCWM enhanced</p> <p>Baseline information:</p> <p>1.2.1 HCWM related legislation is merely functioning as a framework and reflects the general requirements to prevent adverse effects on health and the environment. However, most of these are guidelines do not have any legal status and as such are not enforceable.</p> <p>Indicators:</p> <p>1.2.1 Number of approved and adopted standards and degrees developed as part of the project.</p> <p>Target by the 2018:</p> <p>1.2.1 Two (2) standards: job descriptions for those responsible for HCWM practices, standards on monitoring of HCWM practices approved on ministerial level.</p> <p>Standard on technologies for the processing and final disposal of HCW approved on national level.</p> <p>Component 2. Implementation of best available technologies and best environmental practices for HCWM systems</p> <p>Outcome 2.3: UPOPs releases reduced as a result of improved HCWM systems in supported HCFs</p> <p>Baseline information:</p> <p>2.3.1 At the primary healthcare level, immunization waste is either burned in the open areas, or transported to a boiler house for low temperature incineration.</p> <p>2.3.2 HCF staff have a lack of capacity on plastics recycling.</p> <p>2.3.3 HCF staff have a lack of capacity on the best practices for HCWM.</p> <p>2.3.4 Immunization waste in Bishkek city and primary level is mixed with regular household waste ending up on the dumpsite or burned nearby.</p> <p>2.3.5 Some baseline information is available mainly from prior HCWM assessments as well as from the project's PPG phase.</p> <p>Indicators:</p> <p>2.3.1 Transportation of infectious and anatomical waste exclusively assumed by authorized vehicle;</p> <p>2.3.2 Number of HCFs that send their disinfected syringes to recyclers increased by xx%;</p> <p>2.3.3 Percentage of project HCFs that have introduced non-incineration</p>	<p>Component 1. Strengthening of the national regulatory and policy framework for health care waste management</p> <p>Activity Result 1.2. The regulatory framework for Health Care Waste Management enhanced</p> <p>Action 1.2.1: Two standards such as job descriptions for those responsible for HCWM practices and standards on monitoring of HCWM practices approved on ministerial level. Standard on technologies for the processing and final disposal of HCW refining with inclusion of gender expertise and promote till Government approval</p>									
		X	X			MoH, SAEPF	GEF	Training Workshop and Conference	1000	
								CS - Individuals	16683.92	
	Subtotal:									17683.92
	TOTAL COMPONENT 1:									17,683.92
	<p>Component 2. Implementation of best available technologies and best environmental practices for HCWM systems</p> <p>Activity result 2.2. Allocation of HCWM technologies, devices, supplies and technical assistance determined for each HCF</p> <p>Action 2.2.1: Identify pilot zones per category (hub, satellite, single source) in Bishkek with possibility for inclusion of the private HCFs for HCW treatment in 11 pilot HCFs. Negotiate with Antimonopoly Committee regarding the prices for treatment of HCW and transportation of waste for HCW treatment from hub to satellites</p>									
		X	X			MoH, SAEPF, MoE, Antimonopoly Committee	GEF	Suppliers	2500	
		X				MoH, SAEPF		Local Consultants	4877.58	
			X			MoH		CS - Individuals	6000	
	Subtotal:									13,377.58
<p>Activity result 2.3. UPOPs and Greenhouse gas emissions (GHG) reduced as a result of improved HCWM systems in support HCFs</p> <p>Action 2.3.1: Support of 6 HCFs in Bishkek for construction of composting practices</p>										
	X	X			MoH		Travel	7000		

technologies and composting practices xx%;

2.3.4 Number of project HCFs that have introduced non-incineration technologies;

2.3.5 Results of project summarized and exist strategy agreed among stakeholders.

Targets by the 2018:

2.3.1 Transportation of infectious and anatomical waste exclusively assumed by authorized vehicle;

2.3.2 Agreement with recycling companies for sending disinfection syringes reached for project HCFs in Bishkek as well as private HCFs in pilot zone;

2.3.3 Composting practices integrated in six (6) HCFs;

2.3.4 Non-incineration technologies and HCWM supplies procured and installed for 11 HCFs and 1 zone in Bishkek. The practice is widely disseminating and broadcasting on national and regional level.

2.3.5 Summary of project is presented on final conference.

Component 3. Implement mercury waste management and reduction activities for Bishkek

Outcome 3.1 Strengthened policy and regulatory framework to enable the phase-out/down of mercury containing products and encourage Hg-free or lower level Hg products

Baseline information:

3.1.1 The management of mercury containing products is not being addressed. Hg containing products are being discarded along with regular municipal wastes. NO special measures are taken to protect HCF staff, environment and people.

Indicator:

3.1.1 A regulatory framework pertaining to the management of Mercury containing products is developing and available.

Targets by the 2018:

3.1.1 National standards/guidelines on the management, storage and disposal of mercury containing refined according to state bodies comments in parallel with the obligatory law expertizes including the gender and approved by the Government.

Draft degree to transpose the EU ROHs directives for lighting products and mercury health-care products into national regulations refined and sent for the Government to approval.

Outcome 3.3 Intermediate and long-term storage options for Mercury containing wastes identified

Baseline information:

3.3.1 Currently such wastes end up at the Bishkek landfill site, which is not engineered and doesn't have any leachate control, allowing Mercury to seep into the leachate and end up polluting nearby soil and water resources.

Indicator:

3.3.1 Phased-out Mercury containing thermometers have been safely disposed of as possible within the limitations of the infrastructure present in Kyrgyzstan.

Target by the 2018:

3.3.1 The mercury phased out thermometers are disposed in Khaidarkan mercury mining company

Component 4. Monitoring, adaptive feedback, outreach and evaluation

Outcome 4.1: Project's results sustained and replicated

Baseline information:

4.1.1 No documents in baseline situation.

Indicators:

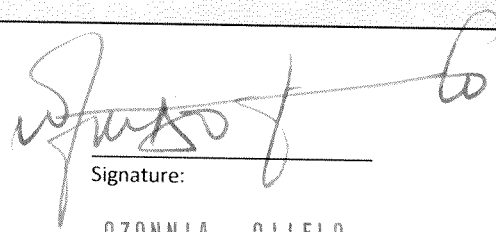
Action 2.3.2: Procurement of plastic containers for saving syringes to recycling companies and waste collection in HCFs of Bishkek and 100 FAPs	X	X				MoH	GEF	SC - Companies	50242.92
Action 2.3.3: Procurement of 100 kettles for 100 FAPs (where 98% women are working)	X					MoH		Equipment	10913
Action 2.3.4: Gender sensitive information campaign for decreasing the U-POPs and mercury	X	X				MoH		Local Consultants	10000
Action 2.3.5: Attraction of private HCFs for sending their medical waste for disinfection to 11 HCFs in Bishkek (1 zone)			X			MoH		Suppliers	22941.94
Action 2.3.6: Development recommendations for integrated HCWM system and project exist strategy			X			MoH		Audio, video print production cost	12500
Action 2.3.7: Procurement of autoclaves and suppliers for strengthening MWM system in Bishkek and FAPs (where 98% women are working)	X	X				MoH		Training Workshop and Conference	59798.4
Action 2.3.8: Summarizing all project results and present on final conference			X			MoH			
Subtotal:									
TOTAL COMPONENT 2:									186,773.84
Component 3. Implement mercury waste management and reduction activities for Bishkek									
Activity Result 3.1. Strengthened policy and regulatory framework to enable the phase-out/down mercury containing products and encourage Hg free or lower level Hg products									
Action 3.1.1: National standards/guidelines on the management, storage and disposal of mercury containing products refine with inclusion of gender expertise and sent for approval to the Government	X	X				MOH, SAEPP, MES and other	GEF	Local Consultants	8750
Action 3.1.2: Draft degree to transpose the EU ROHs directives for lighting products and mercury health-care products into national regulations refine with inclusion of gender expertise and sent for the Government to approval	X	X				MOH, SAEPP, MES and other		3000	
Subtotal:									11,750.00
Activity Result 3.3. Intermediate and long term storage options for mercury containing wastes identified									
Action 3.3.1: Hg mercury phased thermometers safely dispose based on Agreement between the Khaidarkan mercury plant and MoH	X					MOH, SAEPP, MES and other	GEF	Travel	
Subtotal:									2000
TOTAL COMPONENT 3:									2,000.00
									13,750.00

4.1.1. Number of high quality monitoring and evaluation documents prepared during project implementation.
 Target by the 2018:
 4.1.1. BTORs are downloaded in Atlas. Terminal evaluation submitted to UNDP and GEF

Component 4. Monitoring, adaptive feedback, outreach and evaluation									
Activity Result 4.1. Project's results sustained and replicated									
Action 4.1.1 TE submitted to UNDP, GEF and national partners. The TE evaluation will assess the extent to which the project was successfully mainstreamed with other UNDP priorities, including poverty alleviation, improved governance, the prevention and recovery from natural disasters, and gender	X	X				MOH, SAEPF, MES and other	GEF	International Experts	22,000.00
								Local Experts	1,000.00
Action 4.1.2: BTORs submitted to UNDP and national partners. Monitoring and evaluation of 100 FAPs of HCWM system sustainability								Travel	6,000.00
Subtotal:									29,000.00
TOTAL COMPONENT 4:									29,000.00
PROJECT MANAGEMENT									
Project Personal:									
Staff:									8,212.03
Pay roll charge 10.5%:									
Administrative costs:									
Contractual Services- Companies									6,800.00
Professional Services									1,000.00
Miscellaneous									3,000.00
Direct Project Cost									8,000.00
Subtotal:									27,012.03
TOTAL (w/o ISS & bank charges)									274,219.79

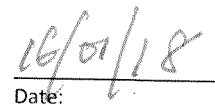
Approved by UNDP:

Ms. Aliona Niculita,
 Deputy Resident Representative



Signature:

OZONNIA OJJELE



Date:

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