

PILOT TESTING

1. The proposed knowledge and support technical assistance (TA) foresees a strengthening of regional health cooperation in the Central Asia Regional Economic Cooperation (CAREC) countries and the Caucasus. It will build capacity to jointly prepare, mitigate and respond to regional health threats such as the ongoing coronavirus disease (COVID-19) pandemic. Output 1 of the TA foresees to develop and pilot innovative solutions to respond to the COVID-19 pandemic with a view to strengthen health systems and improve preparation, mitigation and response to potential future disease outbreaks. The pilots hereunder will focus on leveraging digital technology such as telemedicine to better manage COVID-19 responses. The pilots may be either national or regional in scope. Pilot testing of impactful technologies will not exceed \$250,000 per pilot. The identification of suitable pilots will be conducted jointly with developing member countries (DMCs) in the region through policy dialogue and will be supported by a dedicated team of digital health specialists.
2. The pilots will be further defined and developed during TA implementation. Use cases to be explored will include:
 - (i) Early warning systems, disease surveillance, as well as case detection, monitoring and/or tracking and management tools with data visualization capability, to be used by a wide variety of users.
 - (ii) Solutions that provide digital advisory services on COVID-19 or psychosocial support services for citizens and/or health workers to seek advice on COVID-19 shall be explored as well. This could also include solutions to support health promotion or the promotion of healthy lifestyles.
 - (iii) Asset and logistics management information systems, that can track availability, distribution, validity and storage status and flow data of supplies or equipment.
 - (iv) Telemedicine solutions, to promote remote clinical care and treatment, including for intensive care unit (ICU) support.
 - (v) Solutions to enable eLearning and best practice exchange for frontline health workers and policy-makers.
3. The pilot activities are expected to directly support responding to the COVID-19 pandemic. At the same time, it is expected that the solutions to be piloted are sustainable and have use beyond the pandemic to strengthen health systems and/or prepare for potential future outbreaks. The pilots proposed under the TA should furthermore be replicable and scalable and fit into the countries health system and digital health landscape. Pilot activities will not result in any potential adverse environmental and/or social impacts.
4. The implementing agency for the pilot activity may be one or several (for regional pilots) government ministry or department, or a non-government organization. If the implementing agency is a nongovernment organization, integrity due diligence will be undertaken.¹ If deemed necessary for the successful implementation of the pilot, the Asian Development Bank (ADB) will engage consultants and carry out procurement of non-consulting services, equipment and materials, following the ADB Procurement Policy (2017, as amended from time to time) and its associated project administration and staff instructions. The proceeds of the TA will be disbursed in line with ADB's *Technical Assistance Disbursement Handbook* (2010, as amended from time to time). Due diligence will be conducted as required by ADB.

¹ ADB. 2019. *Staff Instruction on Business Processes for Knowledge and Support Technical Assistance*. Manila.

5. Concept notes for each pilot, outlining scope and outputs, implementation arrangements, timelines, cost estimate, procurement plan for each individual pilot activity will be prepared by the consulting firm in coordination with ADB project officers and relevant government counterparts and reflected in a signed memorandum of understanding or agreed aide-memoire with the DMC in which the pilot will be implemented. Potential collaborations with partners, including private sector, to implement the pilots may be explored.

6. It is expected that the partnering implementing agency will bear some of the costs for piloting activities such as for example tax exemptions, as well as in-kind contributions such as staff time, monitoring and reporting of progress of the pilot project to ADB and in-country transport coordination. It is further expected that the relevant implementing agency or agencies will bear subsequent costs such as software licenses after the defined piloting phase. Prior to procurement, each participating government will be consulted to agree on procurement of software and information technology (IT). Where necessary, government agencies will be required to sign procurement contracts jointly with ADB to ensure acceptance of procurement and transferability of the assets. Turn over arrangements will be agreed upon with recipient developing member countries before contract award.