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Introduction

The ongoing COVID-19 pandemic significantly disrupted global health supply chains, leading to a shortage of health commodities, an increase in environmentally unsustainable practices, as well as rising emissions from a number of sectors including health-related sectors. Many countries, especially those located in the global north, scaled up the vaccination of their populations while the pace had been much slower in the developing world where most of the project countries are located. Among the SHiPP countries, Moldova had vaccinated 37.5 percent (982,152) of its population, and Tanzania had vaccinated 2.3 percent (1,359,225) of its population. Ukraine’s vaccination rate stood at 34 percent (13,719,067), and South Africa’s at 27 percent (15,833,594). Meanwhile, Mainland China had vaccinated close to 2.8 billion of its citizens. In comparison, countries such as the United Kingdom had vaccinated 70 percent (47,434,251) of its people. This challenge of vaccinating national populations further demonstrated the importance of the Sustainable Health in Procurement Project (SHiPP) which is critical in helping the global health community to recover, become stronger and more resilient and to improve outcomes while moving forward with sustainability at the centre of its programming.

The COP26 UN Climate Change Conference held in Glasgow in late 2021 further proved that health is and must remain at the core of sustainable development. At this event (COP26), 52 countries committed to take concrete steps towards creating health systems that are resilient to growing climate impacts, while many others committed to transform their health care systems to become more sustainable and reduce carbon emissions. 14 countries have also set a target date to reach net zero carbon emissions in their health system before 2050. This will have a profound effect on SHiPP’s work in regions around the world as many countries are becoming more aware of the intricate relationship between climate change and health.

As 2021 marks the fourth year of SHiPP implementation key results have been solidified leading to fundamental changes at both macro and micro levels of programming. The project provided technical and financial resources towards the development of different policies, strategies, and tools. Chief among them is the completion of the Sustainable Procurement Index for Health (SPIH) which has been under development for the last three years. The SPIH is ready to support the shift towards sustainable procurement by many partners including the UN informal Interagency Task Team on Sustainable Procurement in the Health Sector (SPHS) partners and Global Green and Healthy Hospitals (GGHH) network members. Several guidance and fact sheets have equally been developed, launched, and supplied to health care institutions to support their transformation towards a climate-smart health care system. SHiPP launched the Chemicals of Concern for the Health Sector Report which is the first of its kind to consolidate environmental conventions and a use of chemicals’ policy into one tool that identifies hazardous chemicals in health products and their alternatives. Furthermore, Health Care Without Harm’s Global Road Map for Health Care Decarbonization: A navigational tool for achieving zero emissions with climate resilience and health equity was distributed for use by partners in a bid to cut the sector’s carbon footprint.

In support of the programme’s goals, the Fourth Saving Lives Sustainably: Sustainable Production in the Health Sector Global Forum 2021 took place on 17–18 November 2021 under the theme, “Strengthening Sustainability in the Health Sector Supply Chains in the midst of COVID-19.” The Forum was officially launched by Columbia’s Minister of Health and provided an opportunity for stakeholders to share best practices and experiences in sustainable manufacturing, distribution, and implementation of health care programs in health facilities.
Results at a glance

During 2021, SHiPP focused on advancing sustainability policies, developing strategies and tools, drafting sustainability reports, organizing conferences to continuously raise awareness of the gravity of climate change and health and how sustainable health procurement is a method to tackle the negative impacts of the health care sector on the lives of individuals and the planet.

<table>
<thead>
<tr>
<th>Policies, strategies, and Tools</th>
<th>Reports</th>
<th>Case Studies</th>
<th>Conferences and webinars</th>
<th>Social media impressions</th>
</tr>
</thead>
<tbody>
<tr>
<td>37</td>
<td>16</td>
<td>30</td>
<td>34</td>
<td>58,247</td>
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</table>

Summary of SHiPP’s 2021 Performance

<table>
<thead>
<tr>
<th>Action</th>
<th>Performance</th>
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</thead>
<tbody>
<tr>
<td>Action 1: Finalize the Sustainable Procurement Index for Health and draft implementation plan with SPHS and GGHH Members</td>
<td>Green</td>
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<tr>
<td>Action 2: Identify and establish criteria for interventions for less toxic, carbon intensive and high resource consuming technologies</td>
<td>Green</td>
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<tr>
<td>Action 3: Support the development of relevant laws or policies, policy briefs and/or strategies</td>
<td>Green</td>
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<tr>
<td>Action 4: Support SHiPP focus countries to incorporate sustainability in COVID-19 response (including adaptation of the corporate COVID-19 digital and COVID-19 vaccine waste management offers)</td>
<td>Green</td>
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<tr>
<td>Action 5: Provide coordination and secretarial services for the joint SHiPP/SPHS/One Planet Platforms.</td>
<td>Green</td>
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<tr>
<td>Action 6: Conduct capacity building for sustainable procurement in health care systems and ministries to adapt and implement a less toxic, carbon intensive and high resource consuming technologies</td>
<td>Green</td>
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<td>Action 7: Digitalization and communication for sustainable development (SPHS, One Planet initiative, country offices, Global Forum and Health Care Without Harm)</td>
<td>Green</td>
</tr>
<tr>
<td>Action 8: Develop and implement interventions to make alternative products accessible in project countries</td>
<td>Green</td>
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<td>Action 9: Convene the Global Forum 2021</td>
<td>Green</td>
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<tr>
<td>Action 10: Conduct capacity building of the private sector in sustainable production and supply of health commodities and medicines.</td>
<td>Green</td>
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<td>Action 11: Develop online Business2Business sustainable performance assessments</td>
<td>Green</td>
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<td>Action 12: Project Terminal Evaluation</td>
<td>Green</td>
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<tr>
<td>Action 13: Establish and implement a monitoring system based on the findings from a baseline assessment and support countries to adopt indicators</td>
<td>Green</td>
</tr>
<tr>
<td>Action 14: Maintenance and management of the SPHS online engagement platform “savinglivesustainably.org”</td>
<td>Green</td>
</tr>
<tr>
<td>Action 15: Consolidate the SHiPP outputs, including best practices, and lay the foundation for scale up and sustainability of SHiPP outcome and goals</td>
<td>Green</td>
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</tbody>
</table>

The table above indicates that the work plan was implemented as planned.
Output Level 1: Universally adaptable criteria and standards for sustainable manufacturing, distribution and content of products procured by the health sector are developed

Sustainable Procurement Index for the Health (SPIH): The development of the Sustainable Procurement Index for Health (SPIH) was completed in 2021 and launched during the Global Forum 2021 in November 2021. As shown in the table below, the new SPIH has four main thematic areas which demonstrate the broadened focus of the tool to ensure that many critical environmental and social sustainability dimensions are addressed. Within each theme, there are a series of subthemes which range from organisational aspects (governance) to product specific considerations, such as whether the product contains restricted substances. The index provides a consistent and transparent methodology to assess the key sustainability credentials of health commodities’ from the perspective of suppliers and manufacturers.

Table 1: Themes of the SPIH

<table>
<thead>
<tr>
<th>GHG emissions</th>
<th>Resource depletion</th>
<th>Chemicals and toxicity</th>
<th>Gender, human and labour rights</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governance</td>
<td>Governance</td>
<td>Management</td>
<td>Policy and governance</td>
</tr>
<tr>
<td>Measurement</td>
<td>Measurement</td>
<td>Restricted substances</td>
<td>Audits</td>
</tr>
<tr>
<td>Target setting</td>
<td>Supply chain issues</td>
<td>Disclosure</td>
<td>Equality issues</td>
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<tr>
<td>Supply chain issues</td>
<td></td>
<td></td>
<td>gender issues</td>
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</tbody>
</table>

The SPIH consists of a set of questions and a scoring methodology using four key themes which can be used when sourcing or managing suppliers. The four themes1 have been designed with the following additional features:

- **GHG emissions**: This relates to greenhouse gas emissions from the production and operationalization of health care commodities. For this thematic area, SPIH modules focus on organisational analysis and product manufacturing. Modules include criteria related to GHG emissions’ measurement and reporting, GHG setting and collecting supply chain data. Analysing this thematic area is important because the release of greenhouse gas emissions is recognised to be the leading cause of climate change.

- **Resource depletion**: This relates to the depletion of energy, water, and materials’ consumption during the manufacturing of health commodities. For this thematic area, SPIH modules relate to organisation, product development, and manufacturing. Modules include examining criteria related to governance systems, strategy, and resource use in manufacturing. Examining this thematic area is necessary as the depletion of resources is recognized to have in the past directly and indirectly harmed the health of individuals and the planet.

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1 GHG emissions, resource depletion, chemicals and toxic impact and social dimensions
Chemicals and toxicity: This thematic area relates to the chemical/toxic impact of the production and use of health care commodities. SPIH modules relate to organisation, product development and manufacturing. Modules include criteria related to industrial chemicals’ management policies, restricted substances, and disclosure. This is a significant theme because the use of toxic chemicals is recognised to harm both human health and the environment.

Gender, human and labour rights: This relates to the human, gender and labour rights associated with the production and transport of health care commodities. For this thematic area, modules in the SPIH relate to organisation and product development. Modules include criteria related to policy, supply chain information, auditing, and gender issues. This is an important theme because there are a range of issues, including child labour, forced labour and discrimination of women which currently persist as global supply chains extend to distant regions.

Recognizing the importance of the work carried out, UNOPS (United Nations Office for Project Services), the UN’s lead procurement agency, has drawn upon and referenced the SPIH within its newly developed criteria list for mandatory sustainability requirements in relation to specific categories of goods and services. This forms part of UNOPS’ Sustainable Procurement Framework which was recently revised to include medicines and medical devices. Integrating SPIH into the Sustainable Procurement Framework will facilitate a wider exposure and application of the Index dimensions by virtue of the wide volume of health care procurement that the agency manages. Additionally, Health Care Without Harm and the US’ Health Care Climate Council have integrated SPIH into the supply chain decarbonization plan and have committed to use it as they establish collective questions and targets for vendors. In Brazil, SHiPP’s partner Healthy Hospitals Project (Projeto Hospitais Saudáveis, PHS) developed a sustainable procurement challenge which incorporates the SPIH and forms the basis for implementing the SPIH in Brazil. To widen its application, UNDP collaborated with the Global Fund to Fight AIDS, Tuberculosis and Malaria in a webinar in which UNDP used the SPIH to help enhance the organisation’s new Responsible Purchasing Framework which features a further dimension focusing on economics. The focus moving forward is supporting governments in SHiPP countries, UN procurement entities, suppliers, and other stakeholders to apply the SPIH. This will involve several initiatives including targeted capacity building.

Policies and strategies

The development of innovative policies and strategies continued to be SHiPP’s hallmark in focus countries and beyond. SHiPP through Health Care Without Harm’s work in Europe continued its extensive policy advocacy work towards the European institutions with the objective of driving markets towards toxic-free products that conserve finite resources, minimize waste, and contribute to an ethical supply chain and circular economy. In doing so, the project responded to the European Commission’s public consultations on reducing packaging waste, promoting sustainable textiles, zero pollution action plan, revising the food contact material regulation, and introducing a sustainable corporate governance legislation. The scope of these policies extends mainly to the European Union, but their implementation can have an impact on the global supply chain, particularly the Sustainable Corporate Governance Framework, which aims to improve human rights and due diligence across the whole products’ supply chain. Similarly, the advocacy work on safer chemicals can boost the availability of safer alternatives in Europe and prove that safer technologies can be made available to hospitals.

As part of the 2021 Skoll World Forum, SHiPP, through Health Care Without Harm, launched the Global Road Map for Health Care Decarbonization: A navigational tool for achieving zero emissions with climate resilience and health equity. This tool charts a global path towards zero emissions in health care, aligning it with the Paris Agreement’s global framework to avoid dangerous climate change by limiting global warming to well below 2°C and pursuing efforts to limit it to 1.5°C. The road map models how the sector should decarbonize by taking seven high impact actions to

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2 This report was co-financed through Health Care Without Harm using its foundation’s funding
reduce the sector’s global emissions. It provides a set of recommendations for health sector leaders to respond rapidly to help prevent and prepare for the inextricably linked climate and health crises while also contributing to broad-based health equity. This tool used alongside the SPIH and the Climate Impact Check-up tool will allow health systems around the world to calculate and monitor their contribution to the Paris Agreement. The newly launched Climate Impact Check-up is a calculator that helps health care institutions anywhere in the world measure their GHG footprint. It provides a starting point to measure, manage, and support mitigation goals to measure and monitor their greenhouse gas emissions.

The SHiPP team worked together with the Health Care Without Harm climate team to integrate the carbon hot spots tool into the Climate Impact Check-up tool. The tool further provides health systems with an accurate measure of their scope 1 and 2 and partial measure of scope 3 emissions. The inclusion of the carbon hot spots calculator into the tool will provide a more detailed description of scope 3 supply chain emissions and will assist Global Green and Healthy Hospitals (GGHH) members who have joined the Race to Zero to meet their carbon reduction commitments. Arising from this involvement, Health Care Without Harm was designated as the health sector lead for non-State actor participation in the UN Framework Convention on Climate Change (UNFCCC) Race to Zero. To operationalize this movement, Health Care Without Harm launched Race to Zero for the health sector and announced nearly 40 health care institutions that became founding members. These institutions collectively represent over 3,000 health care facilities in 18 countries which have publicly committed to achieve net zero emissions by 2050, including SHiPP partner hospitals in Argentina, Brazil, Chile, Colombia, Costa Rica, India, the Philippines, and South Africa.

With the support of SHiPP, Tanzania managed to include sustainable production of pharmaceutical products in its National Five-Year Development Plan (FYDP III). This will not only prioritise the sector but will ensure that all producers and suppliers of health commodities adhere to sustainable standards. UNDP will follow up with targeted capacity building for the private sector using the Sustainable Health Procurement Guidance Note. In India, SHiPP supported the promulgation of amendments to the Montreal Protocol on Substances that Deplete the Ozone Layer to phase-out production and
consumption of several major Ozone Depleting Substances (ODS) by the Government of India. This is a significant event as India has nine of the 10 most polluted cities in the world. In Brazil, SHiPP partner, Projecto Hospitais Saudáveis, contributed to the implementation of a subnational policy with the collaboration of Sao Paulo’s State Health Secretariat. Through this partnership, 25 health care facilities were selected in 2021 to participate in the SES-SP in the State Health Plan (SHP) and to establish progressive compliance goals to the state network of health care facilities which represent about 100 medium to large hospitals, as well as additional specialized outpatient units and clinical laboratories. The State Health Plan incorporates elements of the Healthy Hospitals Project (Projeto Hospitais Saudáveis, PHS) which includes sustainable procurement. In Southeast Asia, SHiPP team conducted national health policy desk reviews on sustainable procurement in Indonesia and the Philippines. These activities are contributing to changing practices for these country’s health care systems at different levels.

In Viet Nam, the development of a list of alternative medical equipment for sustainable procurement was prioritized to support the country’s transformation agenda. The report has identified potential sources of plastic and harmful medical waste being used in the health sector. The study collected lists of all the medical equipment and materials used by hospitals at various levels under the Ministry of Health’s classification. It also proposes a list of devices that have the potential to release plastic waste during manufacturing, utilization, and disposal. Furthermore, market research on potential substitution of some of the above-mentioned devices was conducted. A policy decision has since been made by the Ministry of Health which decrees that the substitution exercise should focus on medical devices and machines while other changes for consumable materials such as syringes, transfusion tubes will be considered in later phases. The project further supported a market research and cost-effective analysis of alternative medical equipment to be introduced into health sustainable procurement lists. Based on the manufacturers’ configuration and specifications for medical equipment, the only available alternatives for replacement are for sterilizers, analog X-ray machine, CT Scanner and MRI. For sterilizers, plastic bags have been used to wrap up the medical instruments and devices for sterilization processes whereby sterilization containers are the only available alternatives to plastic bags. For X-ray machines, CT Scanners and MRIs, PACS technology is considered as a better alternative to reduce the use of physical screen/films. The report from Viet Nam unfortunately indicated that almost all types of medical equipment that released plastic waste have currently no available alternatives. At present, medical equipment recommended for replacement to reduce the released plastic waste include:

3 https://www.iqair.com/world-most-polluted-cities
Less toxic, carbon intensive and high resource consuming technologies

SHiPP focus countries and those in the emerging regions of Latin America and Southeast Asia intensified their work in the identification and substitution of their health care sector’s toxic chemicals and equipment. To promote the integration of the concept of sustainability when procuring health care products, three fact sheets were produced to promote the use of safer disinfectants focusing on hand hygiene, surface and instrument disinfection. These fact sheets were published and distributed in English, Spanish, Portuguese and French and their availability in several languages will increase their use in different parts of the world. It is hoped that these information sheets will go a long way in providing the much-needed technical information that practising medical staff require for the proper use of chemicals and disinfectants. This information is greatly needed as there has been significant overuse and abuse of unsustainable products since individuals have been trying to protect themselves from COVID-19. The English version of the Chemicals of Concern for the Health Sector Report was launched during this reporting period and has been providing additional reference materials for health care specialists, and for university students. This new document is based on the report Chemicals of Concern to Health and Environment, which was published in 2018 by Health Care Without Harm and UNDP. The new report is based on authoritative lists and environmental conventions and provides details for about 40 chemicals that are in use in global health care settings. In terms of a significant follow-up activity, UNOPS adopted the report as one of the reference guides for suppliers of health care commodities to the United Nations and governments around the world.

Through SHiPP’s work, additional case studies on chemical substitutions have also been developed during the reporting period. Seven case studies and good practice documents are now available and provide examples that demonstrate how hospitals have successfully substituted chemicals and chemicals in products with more sustainable technologies.
Representatives from Zambia Medical Association, Ministry of Health and UNDP attended the Pharmaceutical Waste Management workshop November 2021 in Kabwe, Central Province of Zambia. © UNDP

Alternatives. The studies focus on cases of mercury phase-out, non-burn medical waste treatment technologies, integrated pest management (IPM), substitution of PVC with safer alternatives, replacement of PVC anaesthesia masks with less toxic and reusable masks made from silicone, DEHP minimization in intravenous (IV) administration sets, as well as substitution of glutaraldehyde, formaldehyde, and ethylene oxide.

In Latin America, two existing technical resources were translated into Spanish and uploaded into the websites of Health Care Without Harm, Global Green and Healthy Hospitals (GGHH) and Connect [for GGHH members]. These are the Non Toxic Health Care: Alternatives to Hazardous Chemicals in Medical Devices: Phthalates and Bisphenol A (Second Edition, 2019), and the Polyvinyl Chloride in Health Care: A Rationale for Choosing Alternatives. These reports are critical resources that contribute to skills development, as well as to the capacity development of health care sector leaders. In China, REEI in collaboration with China Environmental Certification Corporation to support Peking University hospital establish a working manual on sustainable procurement of products and services related specifically to PVC replacement. This includes the development of a hospital level procurement guide, staff training on considering carbon emissions during the procurement process and the evaluation of sustainable procurement effectiveness.

With increased awareness about waste management, Zambia reviewed the draft guidelines on the safe disposal of pharmaceutical product waste in line with the standards of the International Organization for Standardization (ISO), the Occupational Safety and Health Administration (OSHA) and the World Health Organization (WHO) standards. This activity transformed the guidance according to new global trends as articulated in a number of protocols, such as the Stockholm Convention on Persistent Organic Pollutants, Basel Convention, and the Minamata Convention on Mercury, among others. Additionally, Zambia’s Medical Regulation Authority partnered with SHiPP to draft the list of chemicals of concern for the country’s essential drug list and aligned them with the WHO and other standards set by the international conventions mentioned above. This has further strengthened the country’s internal standards to promote the safe use of chemicals of concern in the health care sector.
Health Care Waste (HCW)

Health care waste management (HCWM) includes classification, collection, transportation, storage, and treatment of waste. During this reporting period, awareness-raising about the importance of HCWM continued in all SHiPP countries.

In Viet Nam, the project worked with the government to improve practices and standards for waste management. Currently, the colour scheme for medical waste packaging is specified as follows:

- **Yellow** for packages, tools, and equipment containing infectious waste
- **Black** for packages, tools, and equipment containing non-infectious hazardous waste
- **Green** for packaging, tools, and equipment for storing ordinary medical waste
- **White** for packaging, tools, and equipment for storing recycled wastes

In essence, the hospitals follow this colour code regulation as specified by law. Health care waste is collected and classified at source, and stored at the temporary storage of their departments, then transported to the central storage area of the hospitals. Most plastic waste released from medical materials are contaminated with patients’ blood, body fluids and chemicals during patient care activities and bio-specimen testing operations. Those types of plastic waste are classified as hazardous medical waste. To ensure proper and safe management of this type of waste, the hospitals have signed contracts with environmental companies to collect, transport and treat both household and medical waste. According to quotation from environmental company, the cost for this service is 20,000 Viet Nam Dong (excluding VAT) (about US$ 0.88) per kg. HCWM is a focus area that SHiPP will continue to engage in to help the health sector develop and implement proper protocols for managing waste.

In Tanzania, the Government was supported to finalise the Health Care Waste Management (HCWM) Guidelines and Standards and facilitated the incorporation of sustainable HCWM treatment methods and procedures into national policies. This has produced explicit rules which have been consolidated into a single document that provides relevant instructions regarding the sustainable management of the HCWM in health care facilities.

In China, the China Environmental Certification Corporation (CECC) a partner to REEI has developed guidelines with the Beijing Chest Hospital facilitating the hospital’s increased investment to ensure the proper separation and disposal of hospital waste, including high-temperature sterilization of biologically hazardous wastes. Based on this partnership, the hospital replaced disposable medical supplies with qualified reusable medical supplies to reduce medical waste. It also replaced chemical cleaning products harmful to human health and the environment with methods such as UV radiation. The partnership has equally allowed the hospital to alter its procurement protocols in terms of procurement of services to prioritize those that can be reused. New specific requirements were added when selecting third party waste disposal companies to comply with environmental safety requirements.

COVID-19 response

SHiPP provided support towards the development of pandemic waste management systems, including personal protective equipment (PPE), vaccines, and other health care waste. This support ranged from providing technical assistance to Ministries of Health in the sustainable procurement of COVID-19 health equipment and PPE management systems.
During pandemic response, the use of personal protective equipment (PPE) including gloves, masks and gowns increased significantly, especially with the global vaccination campaigns. In response, SHiPP continued advocating for appropriate use of PPE to minimise the generation of waste and pollution. During the reporting period, SHiPP published a series of information products under the title of Protection without Pollution: COVID-19 waste-reduction strategies. The knowledge products included Guidance for Immunization Waste Management, Guidance for Personal Protective Equipment for Immunizations Practices, as well as Guidance for Sustainable Global Purchasing. This unintended consequence was also identified as an opportunity to integrate chemical, climate, resources, and social aspects of sustainability into a guide for the procurement of medical gloves using the “heat mapping” process. The research identified the brands, suppliers, types, amounts, materials and uses of non-sterile exam and sterile surgical gloves that were in use in SHiPP partner hospitals. The report also provided the names of the main global glove suppliers to engage with, and to educate and to inform them about various criteria. Through this engagement mechanism, suppliers are required to report on the extent to which current product lines and product supply distribution chains meet the criteria.

To validate this tool, a survey for glove users and supply chain officials was developed, translated into Portuguese and Spanish and later disseminated to all SHiPP partners. To deepen knowledge around personal protective equipment (PPE), a SHiPP expert group was convened in March 2021 to draft the Fact Sheet entitled Good Practice in the use of Personal Protective Equipment for SARS-CoV-2/COVID-19 for Health Professionals who are Administering Vaccinations to Maintain Infection Prevention while Reducing Unnecessary Waste. This fact sheet is now more than ever essential due to the global demand for PPE which has resulted in overuse of PPE, thereby creating significant health and climate consequences. The document advocates for the appropriate use of personal protective equipment (PPE) while dramatically reducing waste and pollution. Additional "Quick Guides" were developed to focus on chemicals of concern, anaesthetics, pharmaceutical products (as buyer), pharmaceutical products (as manufacturer), plastics, PVC and phthalates, fixed dose inhalers, natural rubber latex, heavy metals, food, sustainable events, high level disinfectants and sterilization, surface disinfectants, gloves, mercury, waste in health establishments, sanitary infrastructure, administration, triclosan and other endocrine disruptors, and parabens and petroleum.
To complement the Quick Guides, a “Sustainable Public Procurement Guide in the Sanitary Sector of Argentina” was developed, which contains a regulatory analysis in use in the country’s 23 provinces and in the Autonomous city of Buenos Aires.

Vaccine equity is an additional area of interest that UNDP and other global partners are increasingly paying attention to. The goal of ensuring that all countries and their citizens have equitable access to vaccines is critical as it is the surest path forward to manage the global pandemic and to leave no one behind, especially the underserved, marginalized and hard to reach communities. COVID-19 vaccine inequity will have a lasting and profound impact on socio-economic recovery in low and lower middle-income countries if there is no urgent action to boost supply, share vaccines and ensure they are immediately accessible to everyone. The Global Dashboard for Vaccine Equity, a tracking tool has been developed by UNDP to work with partners to allow policy makers to reach those who are being left behind from global vaccine distribution operations. Building on the initial efforts carried out by the Global Environmental Facility (GEF) team, SHiPP partner Groundwork in South Africa has collaborated with the Western Cape Health Department’s George Hospital to develop and implement hygiene tender specifications which were published for South Africa’s government website. Key results of these efforts included:

- Reduction in packaging
- Use of non-bleached and recycled toilet paper
- Reduced use of all soaps (liquid and solid), no alkyl-phenols, introduction of organic dyes and colouring, substitution of formaldehyde and quats with organochlorines.

One Planet and SPHS Coordination Platform

As the secretariat for both UN Interagency on Sustainable Procurement in the Health Sector (SPHS) and the UN Environment Programme’s One Planet SPP Interest Group on Health, SHiPP provided coordination services including joint planning and review meetings. The first SPHS meeting that was held using Miro board resulted in the prioritisation of 2021 key goals are as follows:

- Development of an online information database which focuses on challenges that are being experienced in sustainable procurement and how organisations are overcoming them.
- Leveraging partnerships to formalize the Global Fund which is responsible for the procurement framework
- Development of a communications/advocacy plan for the different stakeholders to highlight potential and immediate gains by collaborating with the SPHS for sustainable procurement (including SPHS short webinars)
- Training on the new SPHS platform and Members’ Area which is open only to the SPHS Task Team, hère updates on the Sustainable Procurement Index for Health (SPIH), as well as piloting a preparing for the Global Forum 2021 which will be hosted by Latin America
  - Roll out of the SPP training on sustainable health procurement under the HLCM
  - Conducting a review of supply chains for COVID-19-related health care products

At the first quarter SPHS meeting, the Secretariat announced the change in the SPHS Task Team Chairmanship from the UNDP Procurement Support Office to the Global Fund to Fight AIDS, Tuberculosis and Malaria. This is the first time that the Global Fund has taken up this important role. The Global Fund is working towards aligning its institutional commitment to responsible and sustainable procurement. As the lead institution of the SPHS, the Global Fund organised several regular formal and informal Task Team discussions around key topical issues involving sustainability and the SPIH. To reinvigorate the global community’s interest in the One Planet SPP Interest Group on Health, UNDP and Health Care Without Harm developed an online feedback form to facilitate the participation of current and prospective members

4 UNDP Global Dashboard for Vaccine Equity
to share their vision of how to jointly move forward in 2021. The form also allows for feedback on the key added value of the multi-stakeholder Interest Group, and how members plan to contribute to its roll-out. Furthermore, UNDP and Health Care Without Harm, in collaboration with the UNEP One Planet Secretariat initiated a dialogue with several organisations from the One Planet SPP Multi-Stakeholder Advisory Committee (MAC) on the roll-out of the Sustainable Public Procurement Interest Group on Health. These organisations include:

- **KEITI (Korea Environmental Industry & Technology Institute):** Interest in monitoring in Asia to forge synergies with the Sustainable Procurement Index for Health (SPIH) development and implementation

- **Germany Ministry of the Environment** climate-friendly procurement with a link to the health sector’s chemicals of concern

- **The US Environmental Protection Agency:** Collaboration on ecolabelling for a low-carbon economy

- **ICLEI:** Collaboration on chemicals of concern in health care products. ICLEI has a 2021 project on CoC in electronics

- **OECD:** Collaboration with the Sustainable Procurement Index for Health (SPIH) on ethical procurement, chemicals, responsible business conduct

- **Municipality of Malmo, Sweden:** As chair of the European Procura+ network, establishment of a working relationship for collaboration

From the very beginning, the project has been galvanising partnerships involving sustainability in the health care sector by coordinating the work of a number of organisations, the majority of which are critical to the attainment of SDGs.
Output Level 2: Capacity for sustainable procurement in the health sector strengthened in project countries and beyond

Building the capacity of the different players in the health sector’s supply chain remained a hallmark feature of the SHiPP in 2021 and prior to this as well. Consequently, several platforms, events and programmes were designed to increase stakeholders’ capacity in focus countries and beyond. A key achievement was the development of the Sustainable Health Procurement online training platform which was completed. The platform has several features including self-paced instructions, videos, voice over presentations and the ability to award certification to candidates who successfully complete the programme. Moving to online activities is part of a project strategy to mitigate the challenges created by COVID-19 which prevented the ability of individuals to meet physically. It is expected that several procurement officers, suppliers, manufacturers, and other health cadres from the project countries and beyond will enrol in the course and gain improved capacity to implement several interventions which will contribute to reducing the health sector’s carbon footprint using procurement as an entry point. It is expected that more than 10,000 health care workers will undertake the course using the platform during 2022.

In partnership with organisations under the Kigali Project (ICS, Mitsidi and Sitawi Finanças do Bem) and the Healthy Hospitals Project (Projeto Hospitais Saudáveis, PHS), three fact sheets were developed and focused on heating, ventilation, and air conditioning (HVAC) products, which are critical to build the capacities of stakeholders to identify the best methods to manage both heating and cooling processes in health care facilities. The fact sheets contain purchasing and operating criteria for unit air conditioning, central air conditioning and refrigeration equipment for Healthy Hospitals Project (Projeto Hospitais Saudáveis, PHS) member organisations. This work will supplement the evidence generated through the partnership between SHiPP and the University of Dar es Salaam (Tanzania) in which a comprehensive assessment was carried out on the health sector’s equipment. Participation in the Kigali Network allows stakeholders to evaluate alternatives and propose actions regarding more energy efficient measures. It also advocates with government and technical authorities on energy efficiency issues and works for approval in Brazil to introduce the Kigali amendment to the Montreal Protocol on Ozone depleting substances. The Kigali Network is formed by six civil society organisations, namely, the Healthy Hospitals Project (Projeto Hospitais Saudáveis, PHS), Instituto Clima e Sociedade – ICSM, International Energy Initiative Brazil, Engaja Mundo, Clasp, and Mitsidi Projetos. Additionally, a strategy for sustainability “heat mapping” was developed to identify product categories for modelling integration of interventions that are less-toxic, low-carbon, and to reduce waste and improve the working conditions of manufacturing sector labourers, as well as increase safety for users. A heat map summary applied to medical gloves builds on and adapts the prioritization tool developed for health care planners in the Health Care Without Harm’s Sustainable Procurement Guide. The example of a heat map provides a colour-coded visual in support of prioritization of target products.

In China, the Rock Environment and Energy Institute (REEI), working with China Environmental Certification Corporation (CECC), developed guidelines resulting in Beijing’s Chest Hospital to replace traditional fluorescent lightbulbs with energy saving LED lightbulbs and shifting to purchasing greener office supplies, and replacing traditional cooling and heating systems with certified energy efficient alternatives. When engaging in procurement activities, the staff are now paying specific attention to the criteria of only acquiring low head consuming and low emitter equipment.
In **Viet Nam**, training materials were developed based on guidelines and tools provided by SHiPP to prepare for a large national training on sustainable production and procurement. The materials have since been incorporated into the national curriculum to support the country’s in-service trainings. It is expected that over 20,000 health care professionals will benefit from these materials as the country attaches great importance to in-service training.

In the **Ukraine**, SHiPP provided in 2021 technical assistance to the Public Health Centre (PHC) to develop and conduct a training on climate change and the development of a health agenda for medical and public health specialists. To pilot the new instruments, a preliminary training was conducted with 39 participants, of which 23 were women and 16 were men. Feedback was collected and videos for online trainings were produced. Furthermore, SHiPP Ukraine partnered with the government to support several initiatives aimed at combating air pollution. To ensure broad based stakeholder involvement, Ukraine organised a symposium to agree on the negative health effects (morbidity and mortality) and the social and economic burden the Ukrainian people carry because of air pollution. This symposium contributed technical knowledge for the National Report which evaluated the health impacts and social costs associated with the Ukraine’s high levels of air pollution in its larger urban areas. As a follow up to this symposium, the SHiPP in tandem with the government organised a forum during which the country agreed on a roadmap to implement the report. The roadmap has several interesting provisions including the national air pollution research agenda. This will allow stakeholders, especially universities, to investigate further and come up with key evidence and recommendations for the country and its region and will also serve as a model for other international partners.

In **South Africa**, SHiPP conducted three interventions to propose alternatives for hygiene products, lighting, and chemicals. In doing so, SHiPP partner GroundWork supported the development and dissemination of a hygiene tender with specifications for reduced packaging and non-bleach recycled toilet paper. In collaboration with a clean lighting coalition the partnership further developed specifications for the replacement of mercury-containing fluorescent lights with energy efficient, mercury-free LED lights. In the Free State Province, the project led by the Assistant Director, Performance and Risk Management, organised a meeting with three hospitals in the Free State to raise awareness on sustainable procurement and the phase out of mercury. These hospitals included: the National Hospital, the Tumelo Hospital, the Diamant Regional Hospital, and the Bongani Regional Hospital. Eight supply chain managers and environmental health officers participated. The Healthy Hospitals Project...
(Projeto Hospitais Saudáveis, PHS) Annual Seminar was held on October 26th–29th under the theme, Race to Zero—the health argument to face climate change. The event was convened under the thematic agendas of climate, energy, sustainable procurement and waste management. The focus of the first day was on reducing emissions, energy efficiency and cleaner sources of energy, and reducing the use of plastics, and introducing less impactful methods to treat waste and avoid incineration. In addition, there were discussions around sustainable procurement. The event, simultaneously translated in Portuguese and English, was open to the public and included 251 participants during the sustainable procurement session which benefited from online transmission via Zoom. There were also 350 views following a recording on YouTube. A diverse audience took part, of which 20 percent were professionals from purchasing and supply areas, 18 percent were administrators, 14 percent were sustainability professionals, 14 percent were environment professionals, 12 percent were health care professionals (including doctors and nurses), four percent were suppliers, and 18 were percent professionals from other fields. 

Alongside this event, the Healthy Hospitals Project (Projeto Hospitais Saudáveis, PHS) developed the Sustainable Procurement Challenge in Brazil, which incorporates the participation of three key dimensions: governance, products, and suppliers. In 2021, the annual award event attracted a total of 181 participants, 85 percent of which were women. An additional three symposia were held in Brazil with the managers from the São Paulo State Health Network which led to the establishment of a Technical Working Group focusing on addressing challenges related to sustainable procurement, climate, energy, and waste management in 70 percent of São Paulo State’s health units. In 2020, 10 hospitals participated in this initiative whereas this number increased to 25 in 2021. More new hospitals are expected join the challenge. 

In Argentina, Health Care Workers’ Association of Argentina (Asociación de Trabajadores de la Sanidad Argentina, ATSA) is responsible for managing environmental safeguards within the framework of external loans, credits, or donations and/or within the framework of technical cooperation agreements with international organisations. Since 2007, ATSA has been working in partnership with the ministries of health’s clinical care establishments and the provincial ministry of health’s environmental units to ensure compliance with set environmental safeguards when implementing donor funded projects. As a way of building the program’s capacity, ATSA organises a mandatory summer programme through which more than 1,000 subscribers exchanged information and promoted good environmental practices, as well as shared tools and technical documents to support field implementation. The programme is a hands-on mentorship program which utilizes different methodologies including audio-visuals. Through this platform, participants became aware of modern environmental health protection methodologies. With the SHiIPP’s support, the platform developed a virtual course during which ATSA features cohorts of the “Introductory Course on Waste Management in Health Establishments” and one cohort of the “Introductory Course on Hygiene and Safety in Health Establishments of the Republic Argentina”. This program has been very much appreciated by different stakeholders who regard it as a good strategy for raising awareness, helping with implementation, and introducing a federal approach to sustainable public procurement in the health sector. 

Additionally, Argentina held several training events for the health sector (buyers and producers) of different categories of laboratory commodities. In
Trainings, workshops, webinars

In the year under review, the GGHH Chemicals Guidance was launched during a joint Health Care Without Harm/GGHH webinar which celebrated the 10th Anniversary of the GGHH network on 27 October 2021. The document provides an overview of priority chemicals and materials in health care and includes an overview of six priority chemical and material product categories, as well as tools and resources to address those product categories. In addition to the GGHH launch, it was featured in two keynote presentations for SHiPP leaders including the Healthy Hospitals Project (Projeto Hospitais Saudáveis, PHS) Annual Seminar in Brazil and the Health Care Without Harm Latin America (Salud sin Daño) regional conferences. Aligned to this, SHiPP published a video on appropriate use of disinfectants with recommendations on safer cleaning and disinfection methods and products. The video script has been translated and produced with subtitles in Spanish and Portuguese.

In India, a virtual workshop was held to better understand the process of plastic waste generated by health care institutions. This looked at the identification, collection, separation, storage, transportation, treatment, and disposal of waste. The overall aim was to build a comprehensive approach to address the issue of plastic waste disposal while considering the limitations posed by the COVID-19 pandemic. A plastic waste audit was conducted at Bhagat Hospital in New Delhi, India and planned for 2022 for three other members of the Health and Environment Leadership Platform (HELP), which is the GGHH member in India.

Health Care Without Harm Europe organised a webinar on how to advance the circular economy model in health care through innovative procurement. The webinar which was attended by 175 professionals raised awareness about the waste hierarchy, the circular economy model and how to promote sustainable innovation through procurement.

In South Africa, a webinar focusing on Building Sustainable Teams was convened by George Hospital. This has resulted in improved adherence to hospital level policies on sustainability. An additional webinar was organised by South Africa as part of the Practical Public Procurement series. The main theme of this event was sustainable procurement to create an on-site alternative waste treatment facility. It was led by Michael Vonk, the George Hospital’s Chief Executive Director. The webinar attracted 22 participants who included procurement officials, medical doctors, environmental health practitioners, CEOs, and officials from the National Department of Health, and the Department of Environmental Affairs, as well as waste managers, and representatives of waste management companies. Both webinars were accredited by South Africa’s Health Professional Council and the South African Medical Association and allowed participants to accumulate professional points as part of an in-service training programme.
To increase awareness among stakeholders, a webinar with 150 stakeholders was held to promote launch of the Chemicals of Concern for the Health Sector publication (in English). This document lists 40 chemicals used in health care settings that are carcinogens, mutagens, endocrine disruptors, or reproductive hazards and/or bio-accumulative and persistent to the environment based on authoritative lists and environmental conventions. Since then, seven case studies and good practice examples demonstrating how hospitals have successfully substituted chemicals and chemicals in products with more sustainable alternatives have been produced. To continue building the capacity of the different stakeholders, SHiPP through the Health Care Without Harm team in Latin America and the Caribbean hosted a webinar on Non Toxic Health Care: Chemicals Substitution through Sustainable Procurement Practices which was attended by more than 600 participants from 23 countries. The webinar specifically focused on building capacity to use several alternatives for less toxic chemical as substitutes. The webinar also introduced the publication, Non Toxic Health Care: Chemicals Substitution through Sustainable Procurement Practices. During the online session, three Global Green and Healthy Hospitals (GGHH) member hospitals from Argentina and Colombia presented the results of their work on sustainable procurement of chemicals. In Argentina, the Hospital Regional Ushuaia reported that even during the pandemic response, all personal protective equipment (PPE) procurement was completed according to sustainable procurement criteria. There are indications that many institutions in project countries are adhering to the new sustainability demands that the project is championing. In China, REEI hosted an online webinar with representatives from the country’s Environmental Certification Corporation and three hospitals from the Beijing region. Participants discussed discussing their understanding of sustainable procurement and shared their experiences and procedures in relation to sustainable procurement within their individual institutions.

In its quest to have more champions for the SPIH, SHiPP organised a partner engagement webinar to understand and get feedback on the content of the index. This engagement event enabled the project team to provide additional information, and details about SPIH plans. More details were provided about the SPIH structure, stakeholder engagement activities, key theme areas, scoring criteria, as well as the piloting process. The webinar was attended by over 340 participants (live and via YouTube) and is available to watch on the SPHS YouTube channel. The event was extremely important to ensure the project was capturing and responding to the needs of the different stakeholders for whom it is intended. Another webinar entitled Energy Efficiency in Health Care Facilities, was organised by SHiPP in India as part of the Climate Smart Health Care Webinar Series. Dr. Sathish Kumar, the President and Executive Director of the Alliance for an Energy Efficient Economy (AEEE) spoke about the importance, opportunities and issues related to energy efficiency in India’s health care facilities. 39 participants attended the webinar which covered key components and included a discussion about opportunities to quickly achieve energy efficiency in health care facilities.
Output Level 3: Capacity for sustainable production, supply and disposal of health care products strengthened

The 4th Saving Lives Sustainably: Sustainable Production in the Health Sector Global Forum—2021 was held in Colombia from 17 to 18th November under the theme, “Strengthening Sustainability in the Health Sector Supply Chains in the midst of COVID-19.” The event which was officially opened by Dr. Fernando Ruiz Gómez, Columbia’s Minister of Health and Social Protection, attracted high-level speakers and participants from across the world. In total, over 600 delegates attended the two-day event, during which they exchanged views, shared lessons learnt and opportunities to scale up opportunities. All sessions are available on the SPHS YouTube channel. The event was convened around these themes:

- Sustainable procurement and response to the COVID-19 pandemic, including reducing GHG emissions, and increasing resource efficiency (energy, water)
- Health Systems and the Decarbonization Agenda
- Development and deployment of innovative integrated digital solutions
- Greening waste management practices
- Chemicals of concern and equipment/devices substitution
- Gender, women, and youth engagement, human and labour rights
- Business Integrity and anti-corruption
- Sustainable health sector infrastructure
- Equity and leaving no one behind

The conference provided renewed hope and reassurances through the commitment of different stakeholders including those who shape policies in government and different organisations. Columbia’s Minister of Health committed that his country would carry out certain actions and should consider the number of climate related incidents. He also highlighted that climate change is a
A health emergency that requires urgent measures to address the negative impacts that are being experienced across the planet. The Swedish Ambassador to Colombia, H.E. Ms. Helena Storm reminded delegates that human-induced climate change resulting from the manufacture and disposal of health products, and environmental degradation can push us past key thresholds related to the health of the planet (air, land, fresh water, and oceans) and the health and well-being of individuals. Dr. Mandeep Dhaliwal, Director of the UNDP HIV, Health and Development Team informed the meeting of UNDP’s Climate Promise initiative which is the world’s largest source of support to countries which are part of the nationally determined contribution (NDC) programme, which currently assists 118 countries in collaboration with 35 partners. In addition, the UNDP Resident Representative for Colombia, Sara Ferrer Olivella, highlighted strategies that the organisation is championing, such as the recently established energy hubs, and UNDP’s global plastic programme.

In his remarks, Gary Cohen, the President and Co-Founder of Health Care Without Harm called upon the health care sector to demonstrate leadership to solve the dual planetary health crises of climate change and the COVID-19 Pandemic by referring to the Hippocratic Oath to first “Do no harm.” Other speakers highlighted the need for both legal and policy provisions to support efforts aimed at making the health sector more sustainable.

The technical sessions highlighted key lessons coming out of different agencies that could easily be scaled up. The decarbonisation session recommended that political consensus will be required to increase the ambitions of NDCs and ensure that the health care sector is included. This will support countries to adopt concrete measures to cut health care sector emissions, which represent the equivalent of 4.4 percent of global net emissions and the equivalent of two gigatons of carbon dioxide. Furthermore, the session recommended the need to accelerate the decarbonization of the entire health care sector’s supply chain by identifying practical entry points for decarbonization. These could be during the manufacturing, distribution, or implementation stages of health services. The session on Sustainable Health Infrastructure, Equipment and Digital Solutions equally highlighted a number of strategies and policy level recommendations. Chief among them is the need for the health sector to ensure that the infrastructure currently under construction is already complaint to modern building standards. The session on creating opportunities for Women’s Participation and Leadership in Health Supply Chains highlighted the need to create practical spaces for women to meaningfully participate at different levels of the supply chain. The session advocated for the need to develop well established partnerships that facilitate comprehensive capacity building of women at all levels of the health care value chains. To do so, there is a need to develop policies and practices aimed at promoting economic inclusion of women in the selection of suppliers. Affirmative action is required if the anticipated change is to be achieved. To further highlight the need for more social dimensions in sustainability, the Business Integrity and Transparency for Ethical Supply Chains session was a key event during the conference. The session highlighted that corruption is a huge problem that needs to be tackled as it impedes the capacity of countries to achieve the Sustainable Development Goals (SDGs) and specifically SDG 3 which promotes good health and well-being. There is a need to develop policies that will help end this vice including the need to empower and work with oversight institutions.

Supply chain transformation

As part of the framework to support sustainable supply chain transformation, SHiPP initiated engagement with suppliers of medical gloves to build their skills and capacity for sustainable production. This engagement initiative for suppliers will raise awareness among glove manufacturers and distributors regarding sustainability issues and individual components and will also ascertain the extent to which suppliers can meet minimum standards. Furthermore, it will determine the market distribution for these products and seek broader adoption. As part of the pilot evaluation of the SPIH, private sector representatives
participated in the piloting of the SPIH. As a result of this exercise, suppliers are already making efforts to incorporate sustainability into their production services. In South Africa, three interventions were conducted to make alternatives to hygiene products, lighting, and chemicals available. SHiPP partner GroundWork supported the development and dissemination of a hygiene tender with specifications for reduced packaging and non-bleach recycled toilet paper. GroundWork collaborated with a clean lighting coalition to develop specifications for the replacement of mercury-containing fluorescent lights with energy efficient, mercury-free LED lights. In the Free State Province, the government organised a meeting with three hospitals in the Free State to raise awareness on sustainable procurement and mercury phase out. The hospitals included the National Hospital, the Tumelo Hospital, the Diamant Regional Hospital, and the Bongani Regional Hospital. Eight supply chain managers and environmental health officers participated.
Output Level 4: Increased understanding and adoption of appropriate indicators, lessons learned, good practices, monitoring, and evaluation

The Terminal Evaluation of SHiPP was finalized during Quarter 3 of 2021. The report highlights how the project has positively impacted many partners in the field including governments, the private sector, academic institutions, and civil society organisations. The report highlighted the impact of policies, strategies and tools and resources developed to contribute to the health sector’s efforts to cut its greenhouse gas emissions. A number of polices regarding plastic elimination, gloves, use of chemicals, waste management, energy and achieving resource efficiencies, management of laboratory supplies have been developed in project countries. The project has equally played a pivotal role in galvanizing action around Race to Zero which climaxed during the COP26 UN Climate Change Conference held in Glasgow. The evaluation cited several structures and coordination mechanisms set up by the project as being critical to promoting sustainability in project countries and beyond. Initiatives such as technical working groups have been incorporated into government structures and are working on other activities beyond the work funded by this project. The development of the SPIH is another key project milestone highlighted by the evaluator as strategic for the consolidation of the health sector’s effort to account for its carbon footprint. The SPIH has for the first time brought together four different sustainability themes into a consolidated tool that is available to all stakeholders.

With technical input from SHiPP, countries have promoted the capacity building of a wide range of stakeholders using the sustainable procurement guidelines developed by the project. The project was found to be relevant to the national context in which it was implemented as well as to stakeholders and beneficiaries. The evaluation report further indicates that the SHiPP has had a remarkable and sustainable effect on enhancing the capacity of relevant policy and institutional stakeholders to enable the sustainability of the health sector. It facilitated capacity development, public awareness, and measures to target and train government and health care staff at the local, regional, and national levels. The project is very much recognised and respected by the stakeholders. Key stakeholders and beneficiaries interviewed expressed the project’s added value and emphasized the need for another phase to follow up on the project’s main achievement and continue the work initiated.

30 case studies were developed including the Impact stories described in Output 5 to showcase best practices and lessons learned as well as the plastics and total cost of ownership case studies below.
During the third quarter of 2021, Health Care Without Harm Europe published a report on Measuring and Reducing Plastics in the Health Care Sector. This publication provides data on plastic use in the health care sector and successful case studies to reduce plastics. The toolkit contains over 13 inspirational examples, five of which, are more in-depth case studies. The toolkit also gives practical steps on how to measure data for health care facilities’ plastic consumption to support a compelling, evidence-based case for reducing the use of plastics in the health care sector.

Two case studies were developed, finalised, and published in 2020 to highlight the application of the Green Health Cost of Ownership Toolkit. The case studies included the total cost of owning extreme low-temperature freezers in the United States Mayo Clinic’s medical laboratories. An analysis of the implementation of reusable anaesthesia masks in Cali, Colombia was also provided. In both cases, the total cost of ownership analysis demonstrated that the cost over the life of a product was less for the more efficient or reusable product when comparing cost versus price. In addition, UNDP launched the COVID-19 vaccine tracking mechanism report which is complimentary to the SHIPP. This mechanism is important to track where commodities are procured and identify sustainability interventions that can be incorporated.

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Output Level 5: Programme Management and Support

Implementation of a Project Audit: Under the overall supervision of the UNDP HIV, Health and Development Headquarters, the SHiPP was part of a consolidated list of projects that were audited by KPMG during the first quarter of 2021. The financial audit’s objective was to review the project’s financial statements as indicated in the Combined Delivery Reports (CDR), the value of the project assets and its cash balance. The audit covered expenditures directly incurred by the project and concluded that there were no reportable findings with a medium or high rating, and no management letter was issued for the project.

Communication for Development

In 2021, SHiPP proactively communicated with stakeholders through online conferences, webinars, publications, newsletters, and social media channels. As a project that has prioritized strategic communications since its launch in 2018, SHiPP was successfully promoted on social media with world renowned medical institutions, practitioners and experts who provided guidance on how to further strengthen sustainability in the global health care supply chains. The project also received more than 58,000 social media impressions.

SHiPP Impact Stories that Inspire

The book SHiPP Impact Stories that Inspire was launched at the 4th Saving Lives Sustainably: Sustainable Production in the Health Sector Global Forum in November 2021. The Impact Stories demonstrate the project’s impact on people’s lives worldwide and the potential of how much more we can do together to strengthen sustainability in the health sector, in line with the 2030 Agenda for Sustainable Development. The stories amplify the voices of incredible and extraordinary women and men passionate about introducing health care sector sustainability practices that improve their working conditions, the lives of their communities and help protect the environment. You can explore the SHiPP Impact Stories that Inspire and read the report.
Conclusion

Adaptation and application of the Sustainable Procurement Index for Health (SPIH)

Capacitiy building and SHiPP II resource mobilization

5th Saving Lives Sustainably: Global Forum 2022

One Planet & SPHS Coordination

Market Transformation

SHiPP Impact Stories that Inspire Part II

Annex

1. UNDP Office of Audit and Investigations. Audit of Policy and Technical Support to addressing Dimensions of HIV and Health
2. SHiPP Evaluation Report
3. SHiPP Impact Story Handbook