

**Project Title**: Operational Support to the National SanitarySecurity Agency *(ANSS in French)*in Guinea.

**Submitting Agency**: United Nations Development Programme (UNDP)

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**Total budget amount**: USD 741 000

**Implementation Period**: 12 months (March 2017 to March 2018)

1. **Contextual Background**

The Ebola outbreakwhich hit Guinea between 2014 and 2016 heavily exposed the fragility and vulnerable state of the health system in Guinea. It also revealed the country’s limited capacity to prevent and respond to health emergencies.

The resurgence of Ebola in mid-March 2016 in Koropara, Nzerekore Region confirmed the imperfections in the country’s epidemiological surveillance and alert system. Despite the quick reaction by the national authorities with the assistance of partners, the intervention itself encountered two major obstacles. The tardiness in the detection and confirmation of the new cases revealed serious gaps in the surveillance system. Also, the community reticence which followed the announcement of the flare up significantly delayed the deployment of response teams to the ground and these two elements hampered the operations while favoring a rapid spread of the virus to four different locations and thus making the epidemiological monitoring very difficult. To address the above, there is a strong need for the country to put in place a robust epidemiological surveillance system which integrates the surveillance data management in its emergency response programming and operational capacities, while also taking all health logistics related aspects mainly a prepositioned stock into account.

Most national entities lack organizational capacities and clear operational procedures needed to fulfill their mission to preserve a safe and healthy society. Guinea is equally exposed to other types of risks such as socio-political and ethnic tensions, natural resources and environmental damages, pollution, and even possible terror threats given the trends in the region. Hence, it is imperative for the country to develop best governance practices within key institutions. This would help in the process of building up a more resilient system capable of reducing any potential risks be it health related or any other natural disaster.

Bearing the above in mind, the Government of Guinea has recently undertaken profound reforms as a part of the national post-Ebola recovery strategy. The recent establishment on the 4th of July 2016 of the National Sanitary Security Agency (ANSS)by Decree D/2016/205/PRG/SGG confirms that commitment by the Government to take the necessary steps towards addressing any health safety related risks in the future through among other aspects, the reinforcement of the multi-epidemiological surveillance. This comes in alignment with axis 5 of the National Post-Ebola Recovery strategy on health resilience and risk reduction, and resonates with the priorities set out by the Ministry of Health during the United Nations Country Team (UNCT) annual retreat 2015 in Sangaredi meant to improve the health governance at all levels. Coming also in response to the request from the Ministry of Territorial Administration, the UN Resident Coordinator deployed an international mission to evaluate the national capacities to prevent and manage possible risks from natural disasters. The inter-agency mission which was deployed across the country for an in-depth assessment concluded that all existing national structures needed urgent support in capacity-development in order to improve their emergency preparedness and response capabilities. The assessment above inspired the idea to put in place a comprehensive natural disaster risk reduction framework.

It is in that spirit that UNDP proposes this project meant to provide systemic operational capacities to the newly created National Sanitary Security Agency (ANSS). As a new entity, it is understood that it is facing shortage of resources and expertise needed to successfully implement the strategic orientations from its line Ministry of Health in areas of health safety and epidemiological surveillance. UNDP has in the past provided such strategic and operational support to other government entities such as the former National Ebola Response Cell during the Ebola crisis. The support included, but was not limited to providing funds for Ebola response workers, support in the field crisis coordination during the resurgence in Koropara (Nzerekore), resource mobilization and other strategic inter-agency consultations through high level meetings between UNCT another key technical and financial partners.

This project falls under UNDP’smandate and in alignment with the Government’s top priorities including the reinforcement of capacities for national entities in order to address the existing operational gaps for a better organizational management and delivery in future. While the project builds upon lessons learned during the Ebola crisis, it also aims to strengthen the role of the ANSS towards achieving the assigned objectives.

1. **ANSS Role and Challenges**

The agency was assigned nine main roles namely (i) the creation of an emergency response plan, (ii) capacity-building of staff in the surveillance and case management, (iii) creation of safe isolation (quarantine) spaces, (iv) development of national health risk monitoring strategy, (v) contribution to the creation of a national system for surveillance and response to the epidemics, (vi) emergencies and disasters, (vii) participation to the mapping exercise of all health risks, (viii) operationalization of the early detection and notification (alert) system, (ix) contribution to the efforts to stop any human, animal and environmental security threats.

The overall weakness of the health system in Guinea made it very difficult to timely detect and respond to the Ebola outbreak. This was repeated during the March 2016 resurgence in Koropara. Drawing lessons from this recent experience and in order to avoid the same shortcomings of the past, the Government made one critical step by creating the National Agency expected to have a swift and flexible approach to the surveillance of and response to any health threatening emergency situation. Thus, the next step for the ANSS will be to demonstrate its effectiveness on all technical aspects by demonstrating robust and transparent ways of operating at all levels. The ANSS has four main strategic partners: (1) The World Health Organization intervening in the epidemiological surveillance and case management, (2) The Center of Disease Control in research and case management, (3) UNICEF in community engagement and (4) UNDP that intervenes on all governance related aspects. It is critical that all the partners complete each other in order to ensure a coherent support to the ANSS in their respective areas of interventions. This project will only be implemented by UNDP while the three other partners are seeking funding from other sources.

Therefore, this project is meant to provide the ANSS with a reliable governance system by creating robust, secure and transparent management policies, systems and tools needed to make it an outstanding trustworthy entity. This will not only help the ANSS to successfully carry out its activities, but also in reaching out and gaining trust by other technical and financial partners who were still reluctant to collaborate with the Government in the health sector.

1. **The Role and Alignment of UNDP with the project activities**

Besides its traditional support to the Country’s development priorities, UNDP also joined the rest of the UN system and other humanitarian actors in the fight against Ebola disease. More than 20 projects were formulated and executed in connection with the response to Ebola disease. Furthermore, the UNDP Resident Representative/UN Resident Coordinator also fulfilled the role of Ebola Crisis Manager after the withdrawal of UNMEER from Guinea. In that capacity, UNDP and RCOffice increased their strategic and operational support to the National Ebola Response Cell with a focus on the strategic planning and coordination, operationalization of the Rapid Response Plan, resource mobilization mainly for the Ebola resurgence in Koropara which broke out on March 17, 2016. In reference to UNDAF 2013-2017, UNDP aligns with the Government most important priorities in areas of youth employment, good governance and other political reforms, and very recently also the disaster risk reduction whereas UNDP is currently facilitating the operationalization of the National Post-Ebola Trust Fund was added to the package. Efforts to setup a national disaster risk reduction framework are underway with the technical facilitation of UNDP and RCO. Thus, providing this systemic support to the ANSS lies within the UNDP’s regular areas of interventions with an emphasis on the reinforcement of national partners’ operational capacities in areas of good governance and resilience.

1. **Contribution to SDG Goals**

This project contributes to “ensure healthy lives and promote well-being for all at all ages” (Goal 3) which is essential to achieve a sustainable development (SDG). Despite the efforts made by the Government and the UN system to reduce some of the common killers associated with child and maternal mortality, health system is still weak in Guinea and needs to be strengthened to be able to cope with and eradicate a wide range of diseases posing an epidemiological threat such as polio, tuberculosis, or other emerging health issues. In depth, this program contributes first to substantially consolidate the recruitment, development, training and retention of the health workforce through the ANSS. Second, strengthen the national capacity for early warning, risk reduction and management of national and global health risks.

1. **Need Assessment and Justification**

In a recent joint assessment activity, ANSS and UNDP have identified the following as key priority areas that need to be strengthened in order to equip the newly established entity with required operational resources to carry out its mandate with a particular focus on good governance aspect and by availing appropriate management tools to boost up the administrative, finance, logistics and procurement departments of the agency. Given the significant contribution by the Japanese government during the outbreak (financial aid and medical equipment was distributed to affected countries while medical experts deployed within WHO and UNMEER), it would be very critical for this project to seek expertise in health logistics and surveillance data management and treatment in the implementation of this project. Japanese expertise may also be required in areas of research, data management and software development. To this end, it is proposed that the St. Luke’s International University, Japan, which is one of the leading research institutions, will collaborate in this project assisting ANSS in the surveillance data management, health logistics programming and technical training delivery. Other specific technical fields will be handled by relevant and capable partners while UNDP will ensure that its support is in complementarily with what is provided by other technical partners.

As a new entity in a country with limited resources and expertise, the ANSS will need, in the beginning, significant level of support in key areas and sustained accompaniment in order to put in place a very robust governance system capable of ensuring effective and efficient management and smooth delivery. It is also expected among others, the production of a five-year business plan with clear orientations and goals to be achieved by the ANSS during the first five years. The ANSS will need about 60 key staff in its five strategic departments: (i) The Emergency Operations with 14 staff needed, (ii) Integrated Surveillance and Response with 35 staff needed, (iii) Communication and Social Mobilization Unit needs 3 staff, (iv) Case Management Unit 3 staff and (v) Logistics Unit 16 staff. To this adds up the directorate personnel (7) and 20 additional maintenance contractors. This brings the total human resources count at 98 people. While it is expected that all essential staff will be paid by the government, it is also important to mention that additional support is needed in the following areas:

1. **Organizational and institutional evaluation** to assess in depth the organizational structure of the ANSS and which steps need to be taken in order to render it an entity capable of delivering its mandate and achieving its goals. A consultant will be hired to conduct this evaluation which will inform the development of a five-year strategic plan to be followed by the Agency.
2. Operational support to **strengthen the sectorial systemic management and emergency preparedness and responsiveness:**
3. Finance& Administration,
4. Human Resources (Recruitment process, salary scales for heads of key units and departments for 12 months, induction to the new managerial techniques and related software or tools),
5. Procurement system (existence and understanding of a procurement system),
6. Logistics (existence of a clear management system with appropriate tools, induction to the new techniques and tools),
7. Technical support in epidemiological surveillance management (Software and data tool kits),
8. Capacity development in surveillance data management with aim to strengthen interactive risk communication systems and data management capability from the downstream referral level,
9. Coordination of health security countermeasures logistics with emphasis on health logistics in the event of a rapid medical countermeasure deployment.
10. **Strategic support** to the Agency top coordination structure (Board) :

* Board Secretary (organization of high level board meetings)
* Resource Mobilization (development of tools and formulation of proposals)
* Donor reporting techniques/Monitoring
* Institutional Communication (with a clear internal and external communication and advocacy strategy.)
* Governing operational rules (SOPs)

1. **Project Objective, Outcomes and Outputs.**

***Project Objective***

This project aims to contribute to the reinforcement of institutional and operational capacities for the ANSS through the creation and implementation of a reliable governance and management system with robust, accountable and transparent management tools needed to make it a trustworthy, efficient and effective entity.

***Expected Outcomes***

**Outcome 1:** Consolidated institutional capacities enabling ANSS to become functional, trustworthy, efficient and effective and to cope with a wide range of diseases posing an epidemiological threat in Guinea.

**Outcome 2:**Strengthened operational capacities enabling the ANSS to effectively manage early warning, risk reduction and management of national and global health risks in Guinea.

***Expected Outputs***

**Outcome 1**

**Output 1.1:**One organizational and institutional evaluation to assess the organizational structure of the ANSS, in keeping with its mandate, define roles and Terms of Reference and to recommend adapted measures and other steps needed to making it an entity capable of achieving its goals has been conducted by a qualified consultant and the outcome of the evaluation informs the development of a five-year business plan to be followed by the Agency.

**Output 1.2:** A five-year strategic plan with a clear direction for the Agency is produced.

**Output 1.3:** A set of resource mobilization strategies is developed by the ANSS.

**Output 1.4:** Increased managerial performance through exchange of knowledge and experiences during evolving in similar contexts or advanced,

**Output 1.5:** The ANSS has a clear and functional communication/advocacy strategy to better communicate internally and externally on its strategies and achievements,

**Outcome 2**

**Output 2.1:** ANSS operational departments are strengthened with SOPs to achieve its objectives (logistics, &procurement, finance, epidemiological surveillance department, case management department, emergency operational center)

**Output 2.2:** ANSS is equipped with adequate equipment and operational tools (communication webpage, accountant and logistics software tools) by each department to fulfill its role and ensure adequate achievement of results,

**Output 2.3:** An interactive communication platform (work station/dashboard) to enable analytical data processing for strategic info sharing, outputs and control of the internal health administrative information on its security protocols is available for the ANSS.

**Output 2.4:** Key workers belonging to the ANSS Department will increase their operational capacities thanks to a comprehensive training programme aiming to ensure a more efficient managerial system. The content of the training sessions will be developed taking into account the results of the micro-assessment.

**Output 2.5:**A joint stress test is conducted in conjunction with other technical partners and enables to ascertain that the systems can function under stress during crises,

**Output 2.6:** Monitoring and evaluation activities will be run by UNDP and St. Luke’s Int. University to ensure adequate achievement of key results for the programme.

1. **Activity Plan and Timeframe**

The activities proposed aim to build institutional and operational capacities for the ANSS through a comprehensive assessment that will take into account *strengths*, *disadvantages*, *opportunities* and *main challenges* to be faced by the new agency into the coming years. This will allow the ANSS to come out with a set of tools allowing to play fully its role as the national entity in charge to fight against epidemiological diseases and mitigate epidemiological threats in Guinea. Technical expertise of one (1) international technical expert (for 3months) with a professional background in organizational management, finance and/or health program administration is required to do the micro-assessment and provide the ANSS with a set of tools *(five-year strategic plan, resources mobilization and communication plan)* whichwill allow the ANSS to have clear guidelines and improve practices in management of health safety governance.

Moreover, the project forecast the fellowship opportunities for two top managers of the Agency to countries with similar experience and a fully functional health safety or emergency preparedness system. Sharing experiences will be facilitated by the project (travel, accommodation, work agenda). The visit would allow first-hand experiences from countries which faced the same challenges in the past or in those advanced in health protection. The fellows may get opportunities to hold public lectures, hold fundraising events and even publish some academic articles to increase the awareness level of Guinea context.

Activities falling under the Outcome 2 are related to build operational capacities by each ANSS Department to allow the newly created agency to achieve fully its goals as Guinean entity in charge to carry out epidemiological surveillance and health emergency interventions on the field. The activities proposed are drawn from ANSS (ex- Ebola National Coordination Cell) field experiences and lessons learned during the Ebola outbreak (2014-2016) and, the latest resurgence in April – May 2016 in Koropara, Forested Guinea. The content of the activities will be defined in detail once the results and recommendations of the micro-assessment will be available. Specially the activities related to the set-up of a comprehensive training package for ANSS key staff. However, the activities designed will be carried out with a particular focus on:

1. increasing operational capacities by each ANSS Department to compel with narrative and financial reporting and audit requirements.
2. targeting managerial tools.
3. building technical capacities for ANSS staff.
4. supplying adequate equipment and software tools to better manage information.
5. finally testing operational capacities on the field through simulation exercises.

A pool of additional short term consultants will be recruited by UNDPto provide thematic induction training workshops and develop the required managerial tools *(logistics, & procurement, finance, epidemiological surveillance department, case management department,* emergency operational center (CUP)) is constituted and delivers on their respective roles.

Training will be completed with the support of the St. Luke’s Int. University (Japan) which will be responsible to participate actively into the development of a primary collection data base (Work Station)[[1]](#footnote-1) aiming to manage efficiently EVD and relevant emergency data-archives inside ANSS. This Work Station willbe much more than a simple “working place” using Personal Computers and other IT tools, as it will constitute an interactive communication platform to enable analytical data processing for strategic info sharing, outputs and control of the internal health administrative information on its security protocols. There, the designated officials will be able toaccess to the digital information archives and repositories as well as the analogue data files in the shelves that are to be systemically categorized and processed for various decision-making needs to provide evidence-based outputs.

On the other hand, a national epidemiological database managed by the Ministry of Health is going to be operational in the coming months countrywide. DIHS-2 surveillance data system has been retained by Health Ministry to manage health data (epidemiological data included). This system will collect relevant health statistical data coming out from prefectures on regular basis. The ANSS will get access to the data for epidemiological analysis and deployment in case of epidemiological threat.

However, preliminary issues have been identified by partners that will need to be addressed so as to make the platform perform according to the efficiency required for its pragmatic utilization. To this end, the St. Luke’s Int. University’s teamwill availnecessary technical support, assisting the discussion platform development. In this regard, installation of IT devices and its maintenance capacity/mechanism may also be critical for ANSS at locally affordable level. To date ANSSinternal analysis continues to be done using rudimentarytools such as simple Excel spreadsheets. In addition, a poor transfer of information between departments do not allowthe ANSSto be as reactive as required in case of emergency. Expertise held by technical departments of **St. Luke’s Int. University**might be an excellent contribution to help ANSS into the improvement of data management. Detailed activities will be planned based on the results and recommendations on the pre-capacity analysis.

In close consultation with the ANSS and in keeping with UNDP’s rules and regulations, a collaboration agreement will be signed between UNDP and St. Luke’s Int. University (Japan) establishing roles, implementing proceedings and a comprehensive work plan including financial and execution timeframe.

Finally, UNDP will consult with other technical partners on ways of conducting the mid-term Stress Test to evaluate the emergency response preparedness which will be co-organized with other relevant stakeholders such as Red Cross Movement, WHO, Expertise France and other relevant partners involved into emergency preparedness. The test will enable to ascertain that the systems can function under stress during crises and will come out with relevant recommendations to cope withfuture crisis.

**Roles and responsibilities of key partners**

Since November 2014; St. Luke’sInternational University, Japan, has been designated to administer a national project primarily focused on research and development of therapeutics diagnostics and preventive measures to aid in the control of Ebola Virus Disease in Africa. The designated project team coordinates the prioritized collaboration activities of experts at academic and corporate research institutes in Japan as well as those in other nations for contribution in product-development partnership approaches to global health security agenda.

St. Luke’s Int. University is thus well placed to play a key role in strengthening ANSS capacities to deal with future outbreaks by supporting ANSSorganizational system in Guinea. Its recognized and consolidated experience in the health security sector is an asset to ensure the achievement of the goals targeted by the project.

Milestones to be achieved by the St. Luke’s Int. University are:

1. Preliminary needs assessment and current status review at ANSS for substantial commitment to enhance organizational health information management capacity. (1 report)
2. Analysis of similar existing experiences of “health information management system” or “data management tools for integrative health decision-making” in Africa, focusing on the analytical data outputs/sharing for national entities playing the same role as ANSS in the Ministry of Health. (1 report)
3. Data consolidation and categorization for primary set-up of health data archive/repositories at ANSS for in-depth understanding of current status, in order to identify the important operational issues, prioritize the needs and indicators for conceptualization of an optimal interface/dashboard required. (1 report on operational data consolidation)
4. Elaboration of an analytical proposal for construction and installation of an optimal interfacewith the specifications, as a key tool (work station/dashboard) for set-up of an enhanced health information management mechanism at ANSS. (1 proposal document in collaboration with the subcontracted IT consultancy firm, including the list of primarily required hardware devices, training elements, with the key recommendations identified)

St. Luke’s Int. University will deploy 1 epidemiologist - for preparatory situation analysis to develop and propose an optimal health information management systems facilitated in ANSS, with close interactive collaboration with IT specialists.

UNDP Office in Guinea has a long experience working with ANSS, first in time of Ebola crisis through ensuring good governance of the UN system emergency response activities and second, once the end of the EVD outbreak was declared, strengthening health response mechanisms countrywide by supporting the ANSS to implement SACEINT strategy and case management into the CTPEIs.

UNDP Office in Guinea will be in charge to lead the following activities:

1. Assessment of the organizational structure of the ANSS in keeping withits mandate, define roles and Terms of Reference and other steps needed to making it an entity capable of achieving its goals is conducted by a qualified consultant and the outcome of the evaluation inspires in the development of a five-year business plan to be followed by the Agency (1 report)
2. A comprehensive five-year strategic plan with a clear institutional and operational guideline for the Agency is undertaken by the ANSS in collaboration with UNDP (1 strategic plan)
3. A set of resource mobilization strategies is developed by the ANSS. (1 strategic plan)
4. The ANSS has a clear and functional communication/advocacy strategy to better communicate internally and externally on its strategies and achievements. (1 strategic document)
5. Set up of activities leading to an increased managerial performance through exchange of knowledge and experiences during the study tours in countries with similar contexts or advanced.
6. ANSS operational departments are strengthened and equipped with effective management systems and efficient reporting tools and SOPs to achieve its objectives (logistics, &procurement, finance, epidemiological surveillance department, case management department, emergency operational centre)
7. According to the results of the assessment provided by the St. Luke’s Int. University, UNDP will facilitate the installation of an optimal interface with the specifications, as a key tool for set-up of an enhanced health information management mechanism at ANSS. This activity will be conducted by UNDP, eventually this activity could be externalized to the St. Luke’s Int. University depending on the scope of work to be carried outand the results of the IT team deployed by St. Luke’s Int, University.
8. A joint stress test (simulation exercise) is conducted in conjunction with other technical partners and enables to ascertain that the systems can function under stress during crises,

**Framework of Action**

Further details are provided in **Annex 2.**

**Timeframe**

An estimated timeframe has been elaborated in collaboration with the St. Luke’s Int. University. Further details are provided in **Annex 3.**

1. **Beneficiaries**

**Direct beneficiaries** include at least the 42ANSSstaff who will directly benefit from the capacity-development through this project.

**Indirect beneficiaries**

Ministry of Health key staff, humanitarian partners and first responders to epidemics.

Guinea’s population (13 478 502 people[[2]](#footnote-2)) benefiting from an efficient organization to prevent, early detect, respond and mitigate the effects of future outbreaks

1. **Project Management**

The whole project will be subjected to the same rigorous Result Based Management, Monitoring and Evaluation and Auditing systems and methods already in practice in the UN in particular at UNDP. Baseline data collection will be undertaken as a first exercise of the implementation process, relevant quantitative and qualitative indicators will be formulated and measurable and realistic targets set. Reporting will be regular and the Project will be thoroughly supervised by its Steering Committee in collaboration with the ANSS line Ministry of Health.

**Monitoring and Evaluation**

The project manager will work closely with the Steering Committee and ANSSmanagement and technical experts on a regular basis to ascertain that all project objectives are attained according to the objectives. UNDP guidelines for monitoring and evaluation in addition to all its financial regulations will be fully applied. Additionally, the Monitoring and Evaluation team will eventually conduct spot checks at the ANSSand other project sites to monitor the progress and will suggest any pertinent recommendation to the project management, Steering Committee and UNDP top management for follow up and action. The Government of Japan and the Government of Guinea will also conduct joint visits at ANSS as needed to enquire about the project progress. A final evaluation as well an independent audit will be conducted at the end of the project activities and key findings will be presented to all counterparts for validation.

**Communication Plan**

A Communication plan will be established by UNDP and St. Luke’s Int. University with the collaboration of the Japan’s Government to better communicate impacts and key achievements of the project. The plan will target two main objectives.

First, health care organizations, practitioners, development agencies and humanitarian organizations will have a good understanding of the role played by the Japanese Government to strengthen ANSS institutional & operational capacities allowing to tackle adequately epidemics in Guinea and which are the main tools developed for this purpose (e.g. five-year strategic plan).

The second objective consistsin disseminating among stakeholders and health practitioner all best practices and lessons learned coming out from the project.

To achieve the objectives, the project will adopt the following approach:

.- Organization of technical workshops to disseminate relevant information related to the implementing project.

.- Ensure adequate visibility of the Government of Japan, UNDP and St. Luke’s Int. University into the equipment supplied to the ANSS during the implementing period.

.- Elaboration of audio-visual support (documentary) and broadcasting into the mass media in Guinea.

.- Communication material distributed to key partners and stakeholders.

.- Develop webpage for the ANSS where the support of the UNDP, St.Luke’s Int. University and Government of Japan will be included.

**Evaluation**

An independent evaluation will be conducted at the end of the project and key findings will be presented and validated by national counterparts, beneficiaries and other stakeholders including the donor.

**Visibility**

Project signboards with Government of Guinea, UNDP and Japan logos will be placed at visible locations at project site and any project related information and communication campaigns will systematically bear Government of Guinea, UNDP and japan Logos. Brochures, reports, presentations, banners will display Government of Guinea, UNDP and Japan logos.

**Financial Reporting**

Financial reporting will be done in accordance with the contribution agreement signed with the Government of Japan for the amount received and in accordance with UNDP financial rules and regulations. The project will be subject to a final audit as per UNDP’s rules, regulations and procedures.

Where applicable, a financial audit will also be undertaken for Implementing Partners such as NGOs after all other activities have been concluded. In such case, the rules, regulations, policies and procedures of the Implementing Partner will be applicable.

An independent external audit is conducted and relevant recommendations formulated on how the performance level can improve.

**Quarterly Reporting**

In accordance with UNDP procedures, the project Manager will submit a quarterly progress report, lessons-learned log, risk log, issues log and a monitoring schedule plan. These reports will be shared with the Project Steering Committee, which will comprise high level representation of the donor, Government of Guinea and UNDP.

**Final Reporting**

Narrative progress and financial report will be shared with all parties in accordance with the MoU signed with the Government of Japan.

**Annual Review Report**

In the fourth quarter of the year, an Annual Review Report will be prepared by the Project Manager and shared with the Project Steering Committee, and others as advised. This report will include a summary of results achieved against the pre-defined project targets at the output level.

Project management and expenditures shall be governed by the rules, regulations, policies and procedures of UNDP and, in compliance with the official agreementformed by exchange of notes signed between the Government of Japanand the United Nations Development Programme (UNDP).

During the course of the project and prior to the project end date, the Government and UNDP shall consult with each other at the request of either of them, on any matter that may arise from or in connection with the agreed project, inter alia its scope, budget and implementation schedule.

Prior to project completion and in case remaining funds are expected after all commitments and liabilities have been satisfied, either parties may propose to extend the project end date so as to enable the implementation of additional relevant activities that are mutually agreed.

In case either party agreed not to extend the duration of the project beyond completion date, the Government of Japan may also request UNDP to refund any amount that remains unexpended after all commitments and liabilities have been satisfied.

1. **Budget breakdown**

See further details in document Annex 4

1. See Annexe 1 Health Info System Matrix (Source of information: St. Luke’s Int. University) [↑](#footnote-ref-1)
2. **Source of information:**<http://www.countrymeters.info/en/Guinea/>. (22/01/2017) [↑](#footnote-ref-2)