 UNITED NATIONS DEVELOPMENT PROGRAMME FIJI		Global Fund Project Field Monitoring Report	
Project Title: <i>Malaria Project</i>		Project ID: 00096174 Award ID: 00090380	
Member(s) of the Team Participated in the Visit: <i>Tasiana Ptashnik, GF PSM Consultant</i> <i>Elimi Tavake, GF Finance Associate</i>			
Monitoring Visit Start Date: 23 rd May, 2016 Monitoring Visit End Date: 27 th May, 2016		Place(s) Visited: <i>Egate Island, Port Vila: Vanuatu Ministry of Health</i>	
Approved Mission Itinerary: <i>Depart Suva 23/05/16 Arrive Vila 23/05/16</i> <i>Depart Vila 27/05/16 Arrive Nadi 27/05/16</i>		Counterparts Discussed-with/Met: (In each location) <i>Vanuatu Ministry of Health</i> <ul style="list-style-type: none"> ➢ <i>OIC Public Health, Jean Jacque Rory</i> ➢ <i>National Malaria Officer, Guy Emile</i> ➢ <i>Finance Officer, Robinson Charlie</i> ➢ <i>Acting Allied Health Services Manager VHC, Acting Principal Medical Laboratory Officer, George Junior Pakoa</i> ➢ <i>NTP Laboratory Officer, Raymond Seule</i> ➢ <i>Central Medical Stores Manager, Wilson Lilip</i> ➢ <i>Central Medical Stores Officer, Amanda Taleo Mahiti</i> ➢ <i>Vanuatu Health Resource Mechanism (VHRM) Procurement Manager and PFM Advisor, Nishi Vivekananthan</i> <i>Vanuatu Ministry of Finance</i> <ul style="list-style-type: none"> ➢ <i>Treasury Unit Officer, Ms. Lucy Simon</i> <i>WHO</i> <ul style="list-style-type: none"> ➢ <i>Matthew Scott Shortus, Technical Officer, MVP</i> <i>SPC</i> <ul style="list-style-type: none"> ➢ <i>KfW Project and Finance Coordinator, Cecile Depuille</i> <i>UNDP</i> <ul style="list-style-type: none"> ➢ <i>UNDP Programme Analyst, Donald Wouloseje</i> ➢ <i>Global Fund Programme Analyst, Russel Tamata</i> 	
Objectives of the Mission: <ul style="list-style-type: none"> ➢ <i>Participate, with other development partners, in the meeting to discuss and endorse 2016 LLIN distribution plan based on the results of the micro-planning exercise</i> ➢ <i>Assist in implementation of January 2016 Mission recommendations</i> ➢ <i>Monitor and support receiving of LLINs</i> ➢ <i>Planning of LLIN durability survey</i> ➢ <i>Review plan and budget for rehabilitation of the storage premises (George Pompidou)</i> ➢ <i>Follow up visits to CMS and laboratory</i> 			
Planned Activities/Interventions during the mission: <i>1. Participation in Malaria Distribution Planning Meeting at Vanuatu Ministry of Health</i>			

2. Meeting with MoH Finance, PFM Advisor Nish & MoF Officer to outline expectations and way forward for advances & acquittals; also to ensure that finance recommendations from January 2016 Mission are factored in 2016 LLIN distribution operations planning
3. Visiting Ifira Wharf and LLIN storage facilities
4. Review LLIN inventory records
5. Discuss and map implementation context to conduct LLIN durability survey
6. Meeting with MOH Malaria Team and MOH Assets Team to discuss in details proposed plan and budget for rehabilitation of the storage premises (George Pompidou)
7. Visit CMS and NTP lab for physical verification of the stocks and follow up on GeneXpert instrument transfer

Description of Mission Conduct/ Main Findings (vis-à-vis the objectives/activities above):

1. Russel Tamala (GF program Analyst, Vanuatu) requested for assistance from the GF PMU team in Suva to attend the Malaria LLIN Distribution Planning Meeting to be held on 26th May, 2016.
2. The team from the UNDP GF PMU in Suva would assist in the preparation and presentation for the LLIN Distribution Planning meeting to ensure that:
 - a) Recommendations from the January 2016 mission are in built into the distribution process (involvement in LLIN Distribution Planning process)
 - b) The disbursement of funds for the distribution exercise is reduced compared to the 2015 distribution exercise by ensuring that payments that may be paid directly to suppliers by MoH from Port Vila are disbursed accordingly
 - c) The Ministry is able to build a database of community groups and reliable suppliers by zones/provinces that may be used by the Ministry for future distribution or other Health services needed in provinces/zones
 - d) The Ministry is able to harness the advice, skills and network of stakeholders to improve the LLIN distribution process
 - e) Participation in the 2016 Malaria LLIN Distribution Planning Meeting
3. Meeting with MoH Finance staff (Robinson), PFM Advisor and MoF Officer (Lucy Simon) enabled clarification of some of the issues with acquittals of the advance provided to MoH so far.
4. A pre-meeting with GF Programme Analyst and National Malaria Officer was conducted to review planning tools, to preliminary discuss the results of the recent microplanning exercise and ways forward. 115,875 LLINs are required in 2016 distribution campaign as calculated based on the actual pop data collected by the Malaria programme. However, only 95,000 LLINs were procured for 2016 as per the National Malaria Strategic Plan 2015-2020. Therefore, a gap of 20,875 LLINs was identified. With additional quantity in 2016 distribution there will be also an implication of increased in-country distribution costs. It was proposed that 29,555 LLINs procured by SPC as a part of emergency response (post-cyclone Pam) in 2015 should be taken over by MOH/UNDP and put in 2016 distribution to cover the gap. The LLINs are in Port Vila since December 2015; still in the containers at IFIRA wharf because neither Vanuatu MOH nor SPC, nor KJW (the donor) had provided funding to cover costs at port of entry, i.e. wharf fees, bond fees, storage, unloading, etc. In the course of time the due fees accumulated to the significant amount.
5. The issue of 20,875 LLINs gap was presented and discussed during the planning meeting, as well as the suggestion to use SPC's supply to cover the gap. UNDP confirmed that additional funds to distribute additional 20,875 LLINs in 2016 would be provided through GF grant if MOH handles the outstanding payments due to IFIRA wharf. In turn, MOH confirmed that the negotiations with IFIRA wharf would be accelerated and resolved at the high level in the nearest time.
6. UNDP informed the meeting that UNDP officers will be engaged to monitor LLIN distribution in 2016 in all provinces. This decision was welcomed by MOH and WHO.
7. 95,000 LLINs procured by UNDP for 2016 distribution campaign received in Port Vila, customs clearance completed respecting import duty and tax exemption flexibilities; no outstanding payments to the wharf. Containers are waiting for pick-up, which, however, had to be postponed because the containers were blocked by the later arrived ones. No extra storage costs due to this.
8. LLINs are to be delivered to the premises of the central hospital in Port Vila, and stored in containers, within the guarded (24/7) compound until dispatch to the provincial warehouses. The proposed storage ground was visited and confirmed suitable.
9. Physical verification of LLINs stock, bales remaining from previous distributions and kept at George Pompidou premises, was conducted by UNDP staff. Verification Report, plus recommendations for disposal, QC and distribution, was shared with Malaria Officer.

10. Presentation 'Monitoring Durability of LLINs under Operational Conditions' was delivered and proposed LLIN Durability Monitoring Action Plan discussed with MOH and WHO. As agreed, the plan was further shared with WHO TO for formal feedback.
 11. Proposed budget to rehabilitate ground floor at George Pompidou and use it for storage of LLINs was reviewed and discussed. The proposed rehabilitation site was visited as well. It was understood that the proposed site does not suit the purpose, i.e. too big and initially designed as an office space, with division into many smaller rooms. Suggested rehabilitation budget, around VT40,000,000, to turn the hospital floor into a warehouse is not justified for investment within the framework of GF grant and is not compliant with initial recommendation of minor improvements in George Pompidou. Alternative solutions will be sought in coordination with MOH Assets Unit. In particular, procurement and installation of modular warehouse made of 3 sea containers within the premises of the Health Center in Mele, instead of destroyed (by cyclone Pam) provincial warehouse in the same site will be discussed.
 12. Follow up visit to the Central Medical Stores and meeting with CMS Manager to discuss improvements as per 2015 recommendations was conducted. It was noted that major recommendations were not followed. Up-to-date stock report post recent UNDP distribution was requested and successfully provided (generated by the inventory management system). It was noted that laboratory supplies are not recorded in CMS systems, which is understood as an area of concerns. Separation of inventories, and handling of lab inventory by untrained lab staff, creates space for stock issues, including stock-outs and expiries.
 13. NTP laboratory was visited to verify the location and maintenance state of recently transferred GeneXpert instrument. At the time of the visit the instrument and supporting UPS were tagged with UNDP/GF stickers.
 14. Transfer of Title to formalize the transfer of assets was signed by MOH.
 15. Laboratory was not able to share their inventory data at the time of the visit.
 16. Meeting with Vanuatu MOH TB Coordinator was conducted to discuss upcoming distribution of PPD as well as programme needs in light of the possibilities for re-programming requests.
 17. Procurement of boat to be operated by MOH in Torba was discussed.
 18. Introduction of mobile payments (MobilMoney) in Vanuatu was discussed with MOH PFM Advisor. Innovative approaches are highly welcome to increase efficiency and transparency of payments during LLIN distribution operations especially in remote areas.
 19. Meeting with KJW project manager to confirm the agreement to use LLINs for 2016 distribution conducted. Agreement is confirmed.

Specific Project Performance/Implementation Issues (including key challenges):

The Global Fund funded programs (Malaria & HIV/TB) in Vanuatu have the potential to make significant difference in the quality of lives of the Vanuatu peoples. The stakeholder meeting (with MOH & WHO) was a good starting point as it provided the PMU team with a bit of a background to the current challenges faced by the Malaria project. The very real and immediate issue faced by the project is that there are many programs that the MOH are running concurrently. This is the overriding factor that will determine the distribution of resources and is also the reason the LLIN distribution has been pushed back to October to December 2016.

A lot of time will need to be invested into building capacity within the MOH through coaching & mentoring staff and volunteers involved in the LLIN distribution process to ensure that the following key challenges are overcome:

- Non availability of documented information/reports on previous LLIN distribution campaigns
- Lack of documentation of Malaria LLIN distribution systems(SOPs)
- Lack of documentation of availability of resources (both Government & private) for LLIN distribution campaign
- Lack of compliance to Financial policies & controls
- Lack of structural set up for orderly & logical service delivery
- Delay in the provision of documentation for acquittal of funds

We also need to find a way to ensure that there are clear communication channels with the PMU team and information is clear. One of the main hindrances is that the PMU team is not fully informed of the circumstances surrounding the program; e.g. we were advised that approx. 115,000 bednets would be distributed, however only 95,000 LLIN were procured based on strategic plan.

As a result of the January 2016 Mission recommendations GF program analyst Vanuatu and the MoH Team have provided a tentative plan for the Malaria distribution and have revealed plans for a scaled down version of the LLIN distribution campaign on Efate to trial the following:

- provision of reduced cash advances to imprest holders
- the use of GIS technology
- reduced manning in teams (from teams of 5 to 3)
- the engagement of community groups for distribution

It was noticed that procurement of a boat worth over US\$5,000 was initiated without involvement of PMU PSM staff. It is a general requirement according to UNDP/GF Policies for SR management that procurement of capital assets may be conducted only by UNDP and in compliance with UNDP procurement regulations. It is important to ensure that no procurement of capital assets or any other commodities exceeding US\$5,000 total value is conducted without prior clearance by PMU PSM staff.



Transfer of assets to SR must be always formalized through transfer documents, countersigned by UNDP and SR, respective records to be made in the Assets List maintained by PMU. Assets tagged, location, proper use and adequate maintenance are regularly verified by PMU.

Recommendations/Follow-up Points and by whom:

No.	Recommendation	Timeframe	Responsibility
1	A Planning worksheet (segregated by zone & province) has been developed and provided to Russel. This worksheet outlines all resources needed by zone (refer attached sheet)	June-July	Russel/MoH Malaria team
2	Team to list all known reliable suppliers by zones (This will ensure that in future suppliers can also be consulted/booked in advance)	June-July	Russel/MoH Malaria team
3	A listing of reliable suppliers with vendor details to be provided to the Ministry of Finance for updating in MoF database	June-July	Russel/MoH Malaria team/MoF
4	MoH team and MoF team to discuss payment to community groups and at what point Government approval will be needed/sought	June-July	Russel/MoH Malaria team/MoF
5	MoH and SPC to be requested to provide any reports on Malaria bednet distribution, all historical information, measures, monitoring, Planning minutes, approved distribution plans, etc.	June	Russel/MoH Malaria team
6	MoH team to provide names of imprest holders for GF analyst & PMU team to tailor training and outline UNDP requirements for acquisition of advance	June	Russel/MoH Malaria team
7	MoH Finance team to provide fortnightly project ledger entries together with acquired documents to PMU unit for feedback	Ongoing	Robinson/Lucy
8	MoH HR unit to request MoF for TB staff to be transferred from SPC project code to UNDP Global Fund project code	Mid June	Robinson/Lucy
9	Elimi to check on bank fees with Westpac Fiji and advise team	Mid June	Elimi
10	Journal for reimbursement to DFAT to be processed and funds to be transferred to DFAT account from Global Fund project code	June (1 st week)	Robinson/Lucy
11	Forms for bednet distribution to be printed in books (triplicate/quadruplicate copies) and to also include details required by GF/UNDP PMU team (telephone numbers, signatures, etc.)	June	Russel/MoH Malaria Team
	The bednet forms may need to be amended to include spot for UNDP verification and records		
12	Acquital of expenditure to be printed in books (triplicate/quadruplicate copies) and to also include details required by GF/UNDP PMU team	June	Russel/MoH Malaria Team
13	Team to check with Printers in Vanuatu on possibility of printing books in Vanuatu and associated costs	June	Russel/MoH Malaria Team
14	Support MOH in process to release 29,555 LLNs supplied by SPC/KfW from IFIRA wharf / lifting storage fees	June	Tatsiana/Russel


15	Delivery of 95,000 LLINs to the premises of Vila Central Hospital; unloading; counting; showing certificates of receipts	June	MoH Malaria Team/Russel
16	Ensure that additional funding to cover distribution of extra 20,875 LLINs in 2016 are available	August	Elimi / Russel
17	Updated LLIN quantification for 2017 campaign based on actual pop data is available for placing purchase order	August	MoH Malaria Team
18	LLIN Durability monitoring plan reviewed and finalized	June	Taisiana/WHO/Russel
19	Strategic planning (Assets) for MOH shared and reviewed UNDP focusing on storage options	June	Taisiana/Nish/Russel
20	Lab stock report available	June	Russel/Taisiana
21	Tech support for GenExpert (3 module reported unavailable for testing)	June	NTP lab/ Imran/Taisiana
22	Receiving and transfer of the boat in compliance with UNDP policy	June	Russel/Taisiana/Elimi

Attachments/Annexes to this Report: -

Reported by: <i>Taisiana Prashnik</i>	Signature: 
Reported by: <i>Elimi Tawdke</i>	Signature: 

Endorsement by Supervisor /Head of the Unit

I have read this report (and its Appendices) and support its outcomes and conclusions including the action plan

Signature:.......... Date:.....

General Instructions:

1. The field monitoring report should be filled maximum one week following the mission
2. The filled field Monitoring Checklist is a mandatory attachment to every field monitoring report.
3. The PMU will archive both soft and hard copy versions of the final approved Field Monitoring Report.

