



UNITED NATIONS DEVELOPMENT  
PROGRAMME SUVA, FIJI

Global Fund Project Field Monitoring Report

Project Title: *Global Fund Project*

Project ID:  
Award ID:

**Member(s) of the Team Participated in the Visit:**

*Russel T TAMATA; Program Analyst (Vanuatu)*

**Monitoring Visit Start Date:** 17<sup>th</sup> March 2016

**Monitoring Visit End Date:** 12<sup>th</sup> April 2016

**Place(s) Visited:**

Torba Provincial Health office 17<sup>th</sup> March 2016 (planning only)  
Penama Provincial Health office 21<sup>st</sup> to 22<sup>nd</sup> March 2016 (Planning only)  
Sanma Provincial Health office 19<sup>th</sup> to 20<sup>th</sup> March 2016  
Malampa Provincial Health Office 31<sup>st</sup> March to 1<sup>st</sup> April 2016  
Tafea Provincial Health office 4<sup>th</sup> to 5<sup>th</sup> April 2016  
Shefa provincial Health office 11<sup>th</sup> to 12<sup>th</sup> April 2016

**Approved Mission Itinerary:**

The mission was approved by the Program Manager Ms. Maisoon E Ibrahim.

**Counterparts Discussed-with/Met :(In each location)**

John Sanga, Torba Malaria officer  
Ken Mera Penama Malaria Officer & Malaria team  
Yvonne Aru Malaria Lab technician Penama  
Bertrand Malwersets, Nursing Manager Norsup  
Kepue Andrew Pro Health Manager Malampa  
Kilion Nebeckrow Microscopies Malampa  
Artie Jeffery – Malaria Lab Technician Malampa  
Augustine Batick Malaria Microscopy Malampa  
Kalrong Kalwatjin Malaria supervisor Malampa  
Annie Taiset, HIV supervisor Malampa  
Annie Bong, Malaria Officer Malampa  
Rotha Mael, HR Malampa  
Simon Kokare, Provincial Health supervisor, Tafea province  
Harry Iata, Acting Malaria Supervisor  
Lui Naling, Nursing manager  
Jameson Amon, MIS Malaria

	Julian Morise, Pharmacist Dr. Robert Vocor, Doctor Silvie Tom, OE Aron Debi, HIS office Malao Kalo, Lab officer Serah Nalaus, TB Lab microscopies Janet Erick, Provincial Health supervisor, Shefa Province Joel August, TB Laboratory officer, Shefa Province Aida Simon, Malaria Officer Shefa Harison Mbwimbwi Executive office Shefa Prov. David Tevi, HIV officer Shefa Prov. Joe Firiam, EHO Shefa Iou Pusine, HPO Shefa Peter Malesi, Act Prov Health Manager/ Provincial Malaria supervisor Sanma Dr. Andi Ilo, Medical Doctor Sanma Lenny Warelei MIC Officer Sanma Morise Gabriel Malaria officer Sanma Fredy Mosis Malaria Microscopies' Sanma
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**Objectives of the Mission :**

- Conduct training workshops for Provincial Health Managers, Provincial Malaria, TB and HIV supervisors, TB and Malaria microscopists, other Provincial health supervisors who have been participating in the Malaria LLIN distribution, hospital managers and other program supervisors at the provincial level in order to improve their knowledge on the expectations and requirements of the new PR (UNDP).
- Participate in the micro-planning workshop of LLIN distribution in the six provinces.

**Planned Activities/Interventions during the mission:**

The induction workshop and the micro planning activities for Provincial Level were part of the way forward of improving LLIN distribution in the country. Therefore the same workshop was carry out in all provinces except one (Torba) and was deem to be very successful because of several reasons:

1. UNDP is new to many provincial staff. Most of the staff are familiar with other UN agencies such as WHO, UNICEF and UNFPA but not UNDP. All misconceptions of the organization was now proved to be null, they are now well acquainted of the potentials roles of UNDP globally and nationally.

2. The role and existence of UNDP, as an UN agency is not known to many officers at the Provincial level. This has raised a lot of questions, initially, of how the organization was able to become a PR since it has nothing to do with health? No one in fact, knows how long UNDP has been a PR for GF grant, how many countries it has exits, its performance rating and its partnership arrangements with the GF. These concerns have been resolved after the workshop. Staffs have come to realize how important UNDP is to establish back the MoH confident in Managing the GF grant according to its standards.



**Back left.** Kepue Andrew, PH Manager Malampa. Kilion Nebeckrow, Malaria Microscopies, Artie Jeffery, Malaria Lab Technician, Augustine Batick, Malaria Microscopies, Antione Telukiuk, TB officer, Guy Emaile, National Malaria officer, Johnny Nasiau, National Malaria M&E officer, Kalrong Kalwaljin, Malaria Supervisor. **Front right.** Ms. Annie Taiset, HIV officer, Annie Bong, Malaria officer, Rotha Mael, HR officer, Russel Tamata, UNDP, Bertrand Malwersets, Nursing Manager Norsup hospital - Malampa

The key messages in the induction trainings include:

1. The roles, requirements and expectations of UNDP as the new PR of the GF program in the country
2. The new PR will uphold government procedures and policies and also the UNDP guidelines to promote transparency and good governance in order to improve work performance and guarantee sustainability

3. UNDP is only an Interim PR and apart from making sure that program objectives/targets are met, the PR also focuses on building capacity to enable the MoH to become a PR as soon as possible.

The micro planning activity was the second activity to be carried out alongside the induction workshop. The planning has been completed in all Provinces but yet to be presented to the partners and the MoH for comments before finalization. The followings were major changes from the previous LLIN plans to improve LLIN distribution in the country;

- The number of government/contract staff was reduced from 5 to 3
- Volunteers will be replaced by existing community clubs nominated by the Provincial Malaria officers and approved by the community leader (Pastor/chief).
- The rates of how much to pay will follow existing rates of each communities (there is no flat rates)
- The distribution is phased into two phases
- Groups and leaders of group, clerks and impress holders have been nominated but the final listing of impress holders will be approved by the committee to exclude any staff previously implicated in impress misuse

The table below shows the summary of the outputs of the plan including the number of zones to be covered, estimated households and population, No of boarding schools, total operational days, total number of teams which will be needed to completed the operation this year and the estimated Budget. These has been tally even by provinces as shown below.

	No. zones to be covered	Est. household to be covered	Est. Pop. to be covered	No. of schools	No. operational days	No. of teams	Estimated operations Budget
Torba	5	3,381	9,379	0	24	11	525,000
Sanma	5	8,339	45,303	22	62	12	5,775,100
Penama	5	3,149	13,699	9	49	9	3,016,600
Malampa	5	5,139	23,900	10	69	8	4,123,200
Shefa	1	1,814	8,750	3	14	3	1,216,900
Tafea	3	7,251	35,362	8	31	14	6,229,400
<b>TOTAL</b>	<b>24</b>	<b>29,070</b>	<b>135,393</b>	<b>52</b>	<b>249</b>	<b>57</b>	<b>20,886,200</b>



Staff of shefa Provincial health office during the micro planning and induction workshop April 2016

### **General observation**

- General health system weakness is observed at the provincial level
- The General knowledge of UNDP is very minimal at all provinces, however, at the end of the induction, most provinces have expressed gratitude of what UNDP/GF is/will be doing in terms of its transparent process on how it will operate the GF, something that they do not see in a lot of partners.
- Leadership still remain a major need at the provincial level therefore partners including UNDP must be mindful to prepare for the unexpected Projects are likely to struggle at the initial phase since capacity is lacking at the provincial level, the need of a good knowledge of the existing government systems/policies, local context and culture and creating partnership with other development partners already on the ground and based in the provinces is important.



Torba Provincial health office in Tafea with a satellite disk supported by donors but now not functioning as the government cannot sustained its operation. his same disc is seen in all provinces,

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

- Different challenges were found in each provinces but the followings should be kept in mind for future activities;
  1. Unpredictable weather conditions preventing the activities to be completed and causing additional expenses has been experienced.
  2. The continuous change/cancellation of flight due to mechanical problems of the aircraft has created uncertainties and disruption of the planned meetings in the some province.



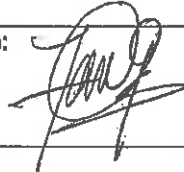
- Malampa Province is an ideal pilot site to implement new project since it has a well qualify provincial health manager and probably having the most efficient system so far.

**Attachments/Annexes to this Report:**

1. Annex 1. Draft work plan LLIN distribution 2016

Reported by: Russel T TAMATA

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.

3. Competing priorities at the provincial level preventing full participation of some of the key people who were supposed to be part of the workshop
4. Program officer of the three programs (TB, Malaria and HIV) need very close supervision from the national program managers as supervisory capacity at the provincial level is minimal.
5. Storage of LLIN will be an issue for Sanma, Malampa and Torba as the storage facilities were either blown away by TC Pam or in the case of Santo, the 40 Ft. container is now too old and need to be replaced. This issue have been noted in the last PR visit.

**Recommendations/Follow-up Points and by whom:**

- The orientation workshop (Induction) must be completed for the last Province of Torba, the PR will find appropriate time to do this when flight schedules are fully confirmed by the airline (Russel)
- Final LLIN distribution plan for 2016 to be presented to key partners before rolling it out, this include the MoH, WHO, Treasury, DFAT and the CCM (Guy/Russel)
- Finalized the new distribution Plan for 2016 LLIN distribution (Esau & Russel)
- Finalized the LLIN work plan for the LLIN 2016 (Guy & Russel)
- The PR to inform other developing partners on the areas of common interest found to be lacking or compromising at the provincial level so that all are contributing to strengthen the overall MoH system. (Russel)
- While the idea to bring the planning process close to the sites is good, to avoid delays and other situations as what we experience this year, it is recommended that future Micro planning be separated into two separate locations; one for the southern provinces and one for the northern provinces (Esau, Russel to discuss further on this)
- MoH must identify possible storage shed for Malampa, Sanma & Torba province as soon as possible (Guy)





