

Closure Stage Quality Assurance Report

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Form Status: Approved
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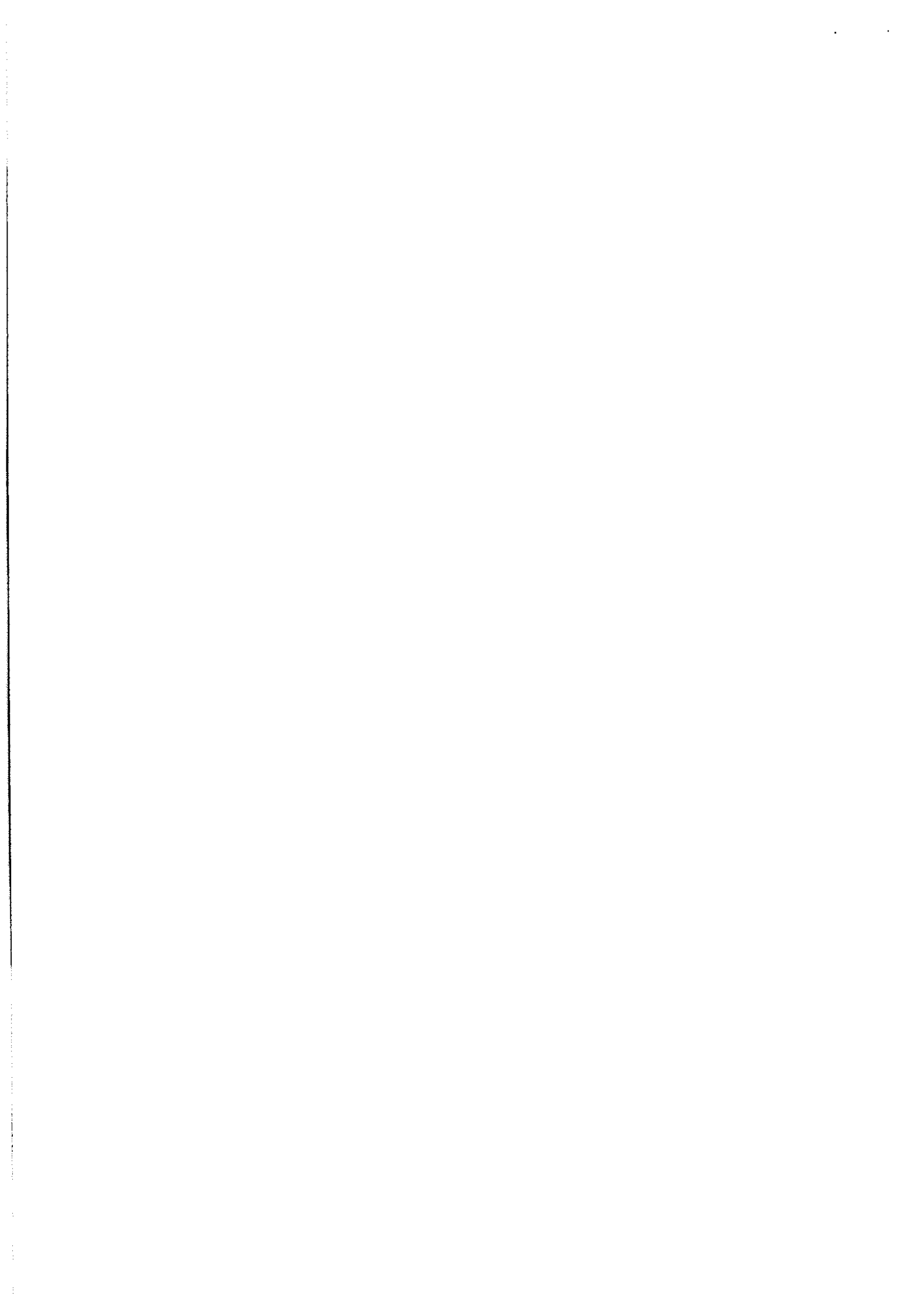
Overall Rating: Needs Improvement

Decision:

Portfolio/Project Number: 00103058

Portfolio/Project Title: Procurement of health products

Portfolio/Project Date: 2017-07-17 / 2021-12-31



Strategic

Quality Rating: Exemplary

1. Did the project pro-actively identified changes to the external environment and incorporated them into the project strategy?

- 3: *The project team identified relevant changes in the external environment that may present new opportunities or threats to the project's ability to achieve its objectives, assumptions were tested to determine if the project's strategy was valid. There is some evidence that the project board considered the implications, and documented the changes needed to the project in response. (all must be true)*
- 2: *The project team identified relevant changes in the external environment that may present new opportunities or threats to the project's ability to achieve its objectives. There is some evidence that the project board discussed this, but relevant changes did not fully integrate in the project. (both must be true)*
- 1: *The project team considered relevant changes in the external environment since implementation began, but there is no evidence that the project team considered these changes to the project as a result.*

Evidence:

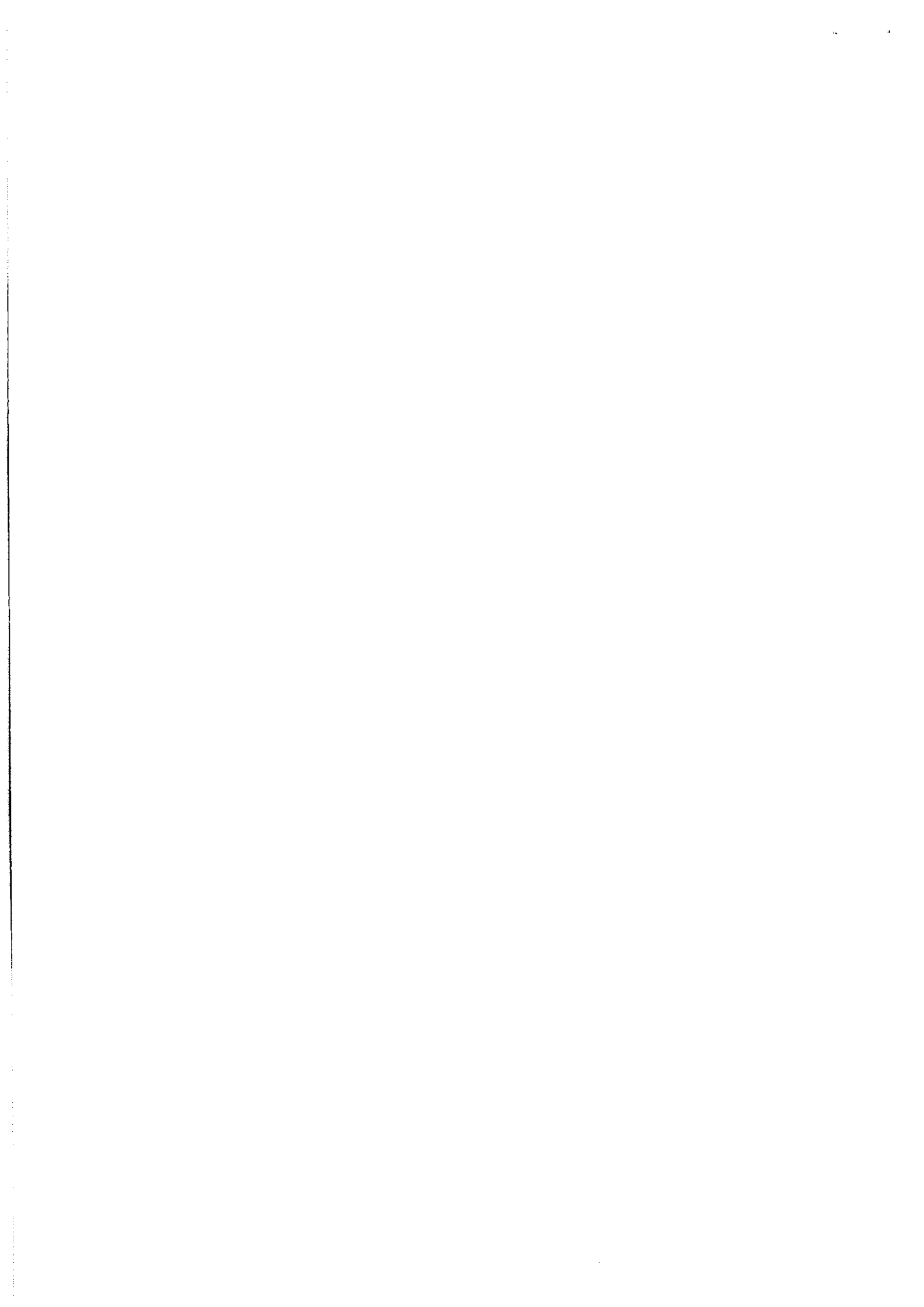
One example is from the procurement of 2nd line TB medicines for treatment of MDR-TB. In 2018 UNDP made PO for the supply of 2nd line TB medicines, divided into 2 deliveries: in July 2018 and in April 2019. The delivery of July 2018 medicines was done, and in Aug 2018 the WHO published a rapid communication about new recommendations for treatment of MDR-TB. This had affected the 2nd shipment due in April 2019 as some medicines were not recommended anymore, and some new medicines are to be added. First of all, UNDP had signed PO, and second, a restricted budget already allocated for this procurement. At the same time, it was a requirement to implement the new recommendations of the WHO. UNDP and National TB Programme specialists learned the new recommendations, arranged a skype call with the WHO, and agreed on the changes. Following this, UNDP informed its supplier - the Global Drug Facility (GDF) - on the need to amend the PO. Accordingly, the PO was changed, and the new order arrived in April 2019 with the new composition.

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No documents available.

2. Was the project aligned with the thematic focus of the Strategic Plan?



3: The project responded to at least one of the development settings as specified in the Strategic Plan (SP) and adopted at least one Signature Solution .The project's RRF included all the relevant SP output indicators. (all must be true)

2: The project responded to at least one of the developments settings1 as specified in the Strategic Plan. The project's RRF included at least one SP output indicator, if relevant. (both must be true)

1: While the project may have responded to a partner's identified need, this need falls outside of the UNDP Strategic Plan. Also select this option if none of the relevant SP indicators are included in the RRF.

Evidence:

1. The project responded to development are 2: Accelerate structural transformations for sustainable development.

2. The project RRF contributes to output 4.3 of the CPD and Outcome 1. SP Output 1.1.2: Marginalized groups, particularly the poor, women, and people with disabilities and displaced are empowered to gain universal access to basic services and financial and non-financial assets to build productive capacities and benefit from sustainable livelihoods and jobs.

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No documents available.

Relevant

Quality Rating: Satisfactory

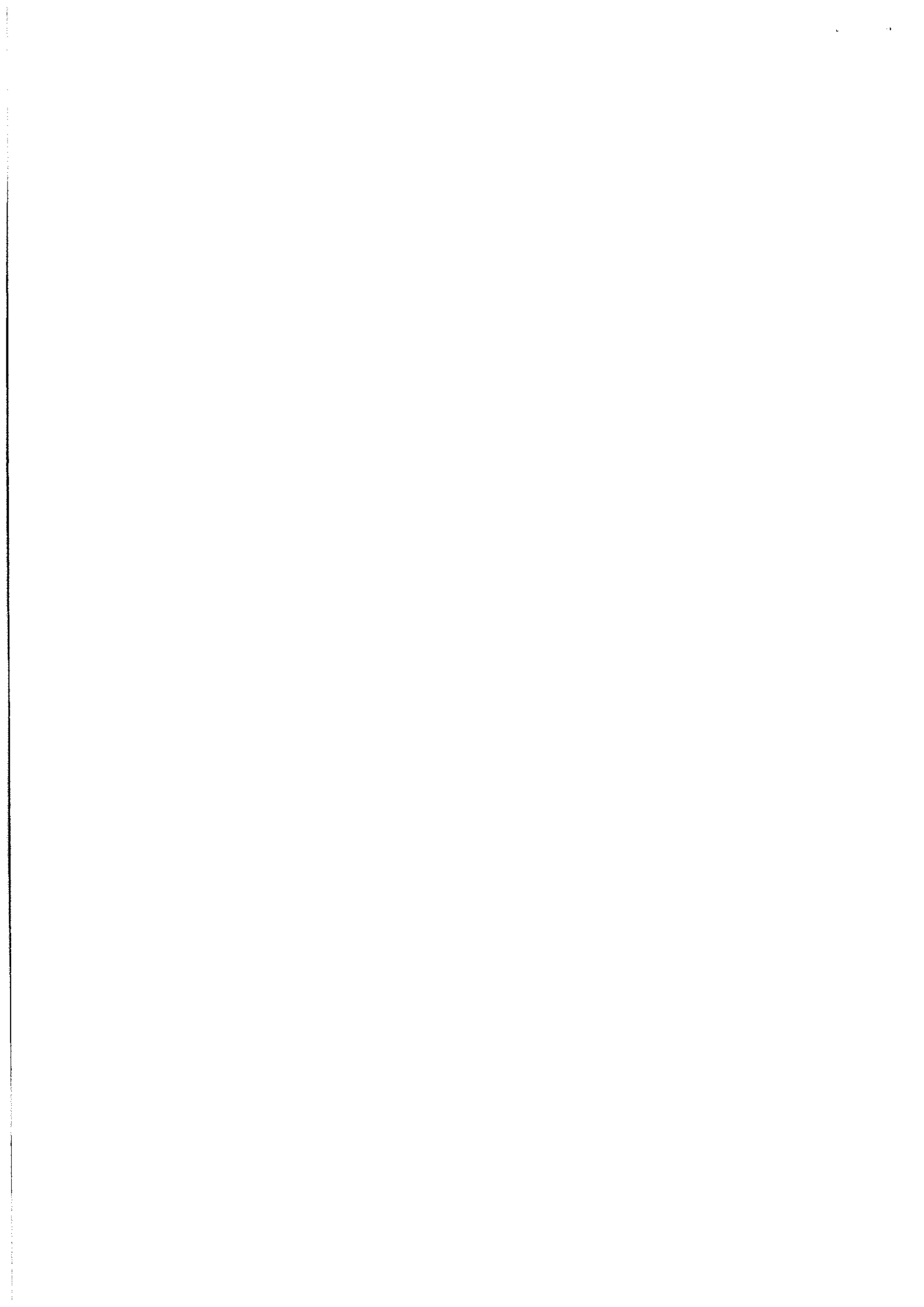
3. Were the project's targeted groups systematically identified and engaged, with a priority focus on the discriminated and marginalized, to ensure the project remained relevant for them?

3: Systematic and structured feedback was collected over the project duration from a representative sample of beneficiaries, with a priority focus on the discriminated and marginalized, as part of the project's monitoring system. Representatives from the targeted groups were active members of the project's governance mechanism (i.e., the project board or equivalent) and there is credible evidence that their feedback informs project decision making. (all must be true)

2: Targeted groups were engaged in implementation and monitoring, with a priority focus on the discriminated and marginalized. Beneficiary feedback, which may be anecdotal, was collected regularly to ensure the project addressed local priorities. This information was used to inform project decision making. (all must be true to select this option)

1: Some beneficiary feedback may have been collected, but this information did not inform project decision making. This option should also be selected if no beneficiary feedback was collected

Not Applicable



Evidence:

1. The project engaged people from the targeted groups, specifically - two ex-TB patients are members of the Project Board. The project board was informed and oversaw the project implementation.
2. The project staff and the staff of the partner - National Red Crescent Society - collected regular feedback from the TB patients during patient education sessions and home visits. This information was used to inform project decision making, for example, procurement of child dosage medicines was included based on the identified convenience of child formulations.

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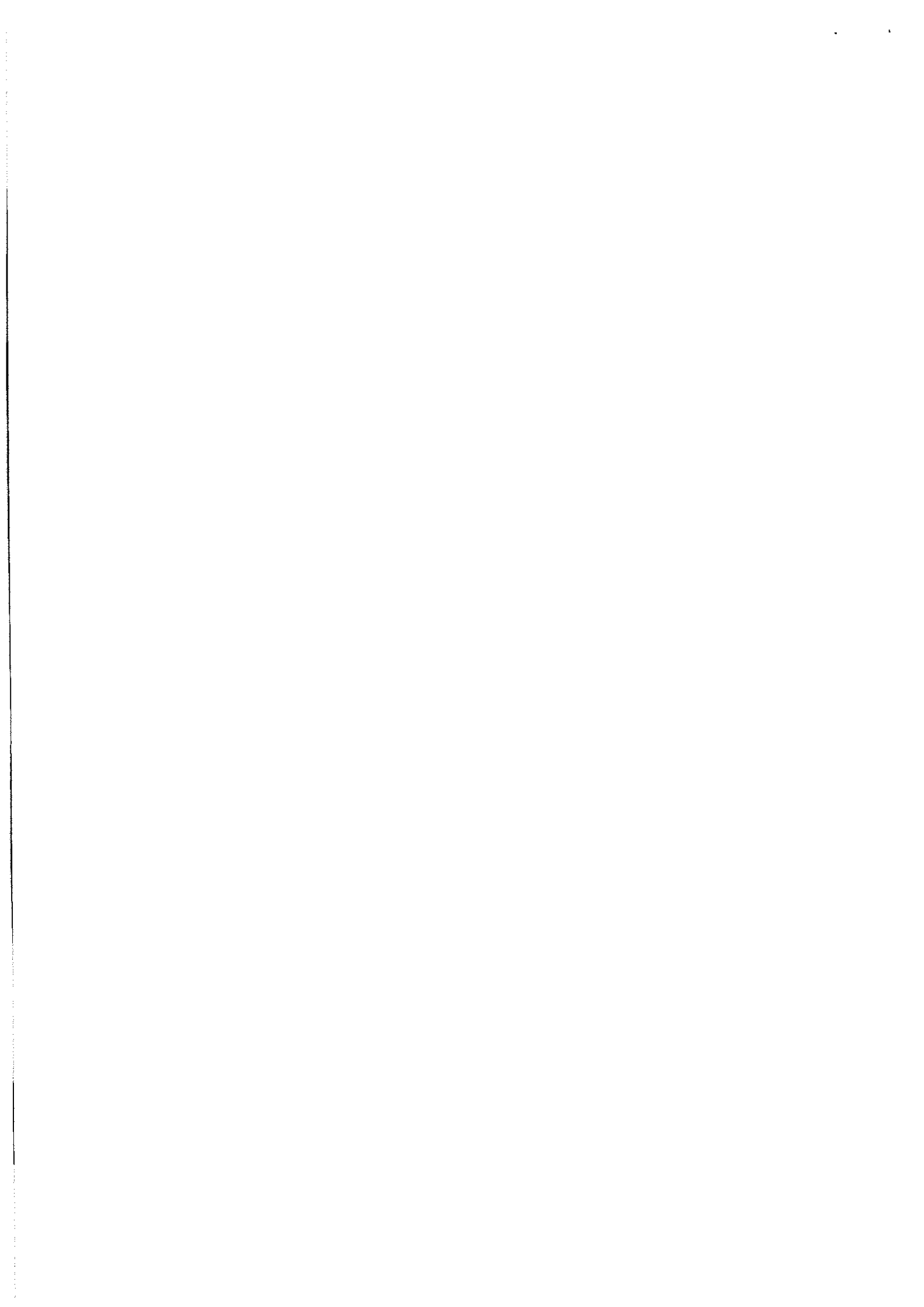
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4. Did the project generate knowledge, and lessons learned (i.e., what has worked and what has not) and has this knowledge informed management decisions to ensure the continued relevance of the project towards its stated objectives, the quality of its outputs and the management of risk?

3: Knowledge and lessons learned from internal or external sources (gained, for example, from Peer Assists, After Action Reviews or Lessons Learned Workshops) backed by credible evidence from evaluation, corporate policies/strategies, analysis and monitoring were discussed in project board meetings and reflected in the minutes. There is clear evidence that changes were made to the project to ensure its continued relevance. (both must be true)

2: Knowledge and lessons learned backed by relatively limited evidence, drawn mainly from within the project, were considered by the project team. There is some evidence that changes were made to the project as a result to ensure its continued relevance. (both must be true)

1: There is limited or no evidence that knowledge and lessons learned were collected by the project team. There is little or no evidence that this informed project decision making.



Evidence:

1. The project gained knowledge and lessons learned mainly from within the project or similar health procurement projects implemented by other country offices.
2. Example of changes made to the project as a result to ensure its continued relevance: please see the answer to Q1 about changes in the treatment regimens; another example is learning of new testing technology for HIV and for hepatitis C by Cepheid company. The project arranged on-line learning session for the project staff and national specialists, and then used savings in the project and procured a sample of new tests for piloting as this is a more accurate and faster test.

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5. Was the project sufficiently at scale, or is there potential to scale up in the future, to meaningfully contribute to development change?

3: There was credible evidence that the project reached sufficient number of beneficiaries (either directly through significant coverage of target groups, or indirectly, through policy change) to meaningfully contribute to development change.

2: *While the project was not considered at scale, there are explicit plans in place to scale up the project in the future (e.g. by extending its coverage or using project results to advocate for policy change).*

1: The project was not at scale, and there are no plans to scale up the project in the future.

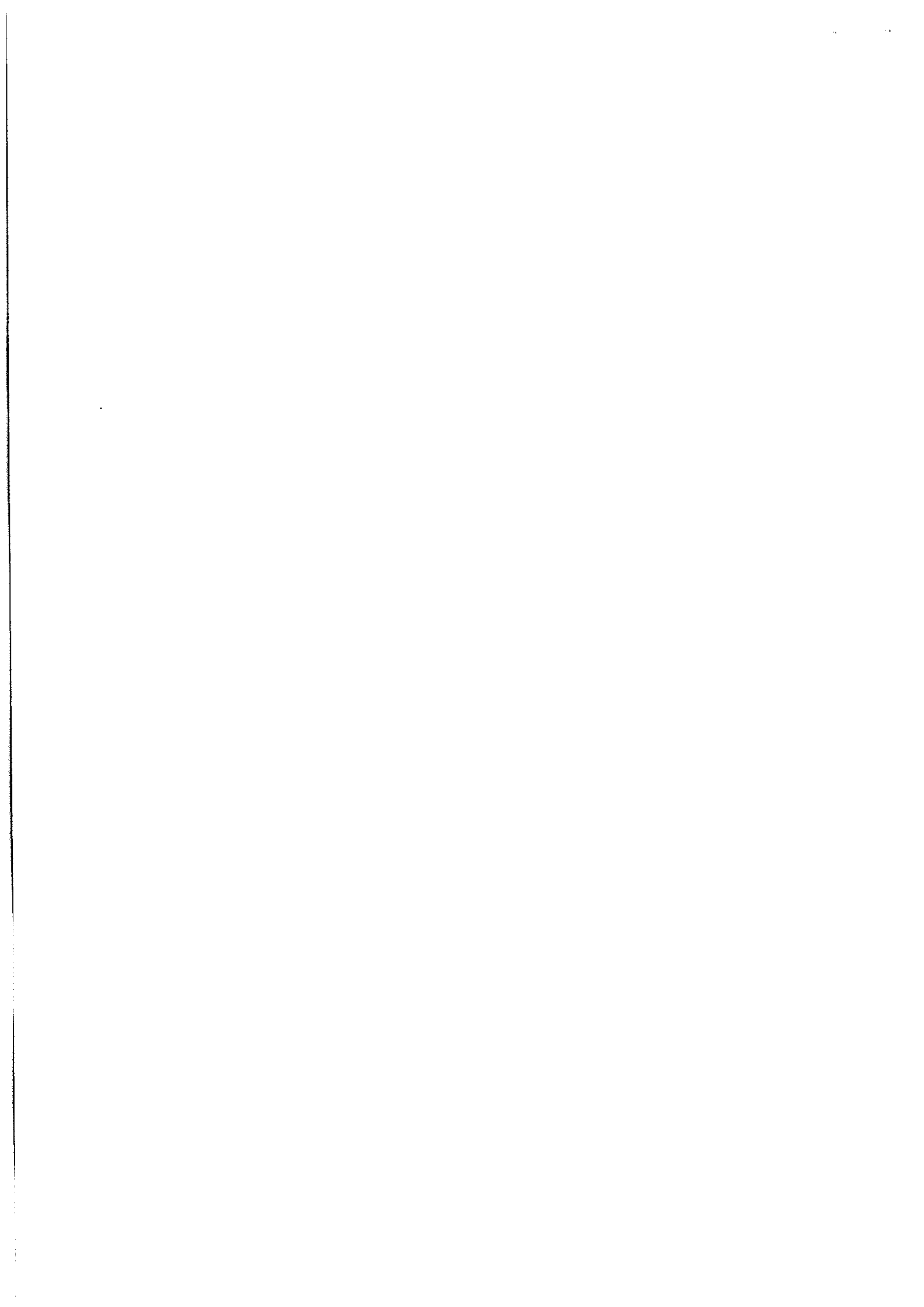
Evidence:

The project was fairly at scale, and was followed by a similar project for the following years 2019-2020 with the budget nearly three times higher than the current project, and the scope was also expanded both in terms of numbers of beneficiaries and new areas (viral hepatitis C).

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No documents available.



Principled

Quality Rating: Needs Improvement

6. Were the project's measures (through outputs, activities, indicators) to address gender inequalities and empower women relevant and produced the intended effect? If not, evidence-based adjustments and changes were made.

3: The project team gathered data and evidence through project monitoring on the relevance of the measures to address gender inequalities and empower women. Analysis of data and evidence were used to inform adjustments and changes, as appropriate. (both must be true)

2: The project team had some data and evidence on the relevance of the measures to address gender inequalities and empower women. There is evidence that at least some adjustments were made, as appropriate. (both must be true)

1: *The project team had limited or no evidence on the relevance of measures to address gender inequalities and empowering women. No evidence of adjustments and/or changes made. This option should also be selected if the project has no measures to address gender inequalities and empower women relevant to the project results and activities.*

Evidence:

The project is Gen1 - limited contribution to gender equality.

Management Response:

The project is limited to procurement services and does not allow collection of sensitive data. To the extent possible, UNDP uses the data and evidence collected through the Global Fund project. It needs to be noted that due to the same sensitivity issue, most documents are not uploaded into the QA system.

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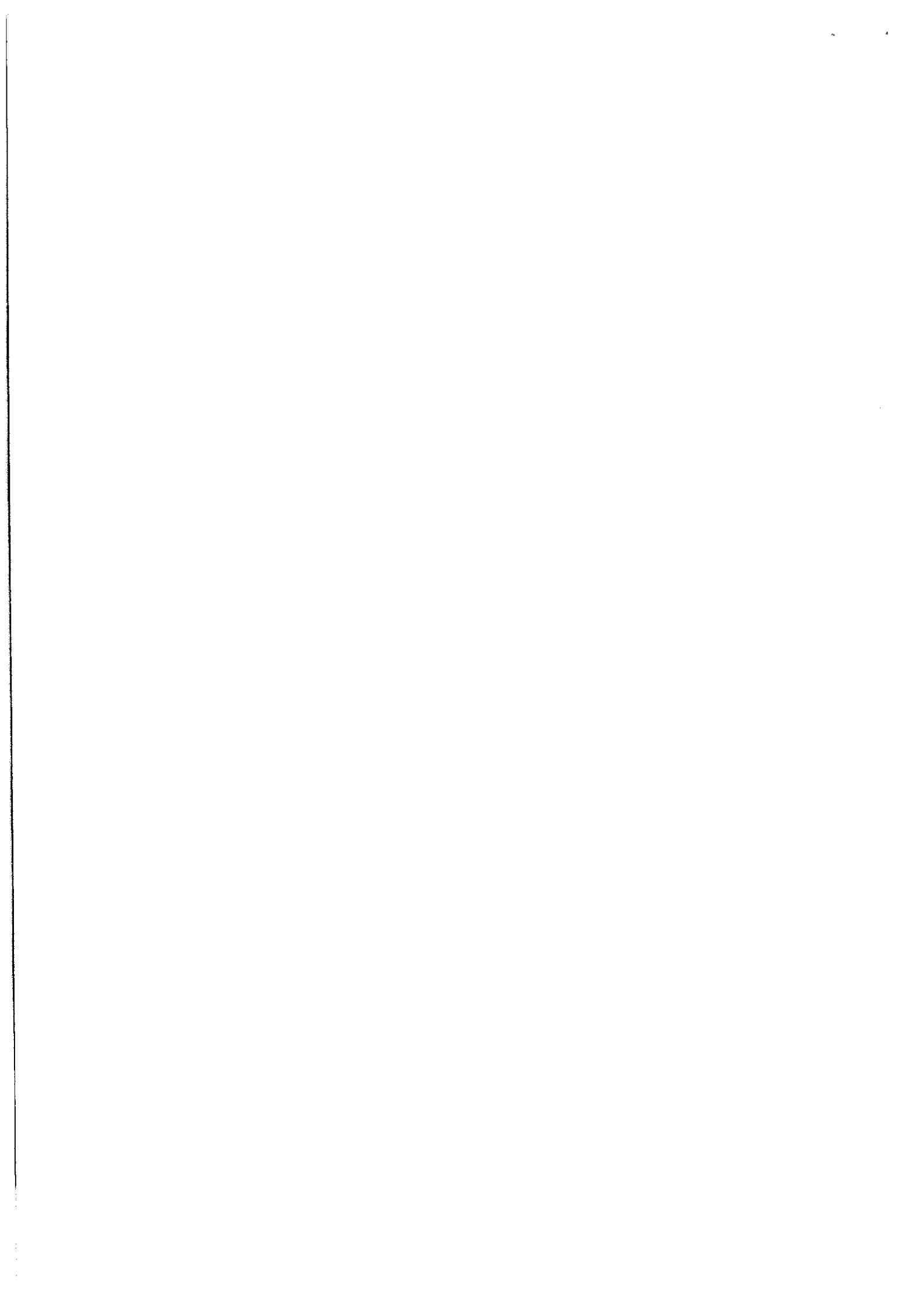
No documents available.

7. Were social and environmental impacts and risks successfully managed and monitored?

3: Social and environmental risks were tracked in the risk log. Appropriate assessments conducted where required (i.e., Environmental and Social Impact Assessment (ESIA) for High risk projects and some level of social and environmental assessment for Moderate risk projects as identified through SESP). Relevant management plan(s) developed for identified risks through consultative process and implemented, resourced, and monitored. Risks effectively managed or mitigated. If there is a substantive change to the project or change in context that affects risk levels, the SESP was updated to reflect these changes. (all must be true)

2: *Social and environmental risks were tracked in the risk log. Appropriate assessments conducted where required (i.e., Environmental and Social Impact Assessment (ESIA) for High risk projects and some level of social and environmental assessment for Moderate risk projects as identified through SESP). Relevant management plan(s) developed, implemented and monitored for identified risks. OR project was categorized as Low risk through the SESP.*

1: Social and environmental risks were tracked in the risk log. For projects categorized as High or Moderate Risk, there was no evidence that social and environmental assessments completed and/or management plans or measures development, implemented or monitored. There are substantive changes to the project or changes in the context but SESP was not updated. (any may be true)



Evidence:

The project was categorized as Low risk through the SESP.

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#	File Name	Modified By	Modified On
1	SESP_00104076_4039_007 (https://intranet.undp.org/apps/ProjectQA/Forms/Document.s:SESP_00104076_4039_007.docx)	lale.chopanova@undp.org	2/21/2020 11:08:00 AM

8. Were grievance mechanisms available to project-affected people and were grievances (if any) addressed to ensure any perceived harm was effectively mitigated?

3: Project-affected people actively informed of UNDP's Corporate Accountability Mechanism (SRM/SECU) and how to access it. If the project was categorized as High or Moderate Risk through the SESP, a project -level grievance mechanism was in place and project affected people informed. If grievances were received, they were effectively addressed in accordance with SRM Guidance. (all must be true)

2: Project-affected people informed of UNDP's Corporate Accountability Mechanism and how to access it. If the project was categorized as High Risk through the SESP, a project -level grievance mechanism was in place and project affected people informed. If grievances were received, they were responded to but faced challenges in arriving at a resolution.

1: *Project-affected people was not informed of UNDP's Corporate Accountability Mechanism. If grievances were received, they were not responded to. (any may be true)*

Evidence:

This is not applicabe.

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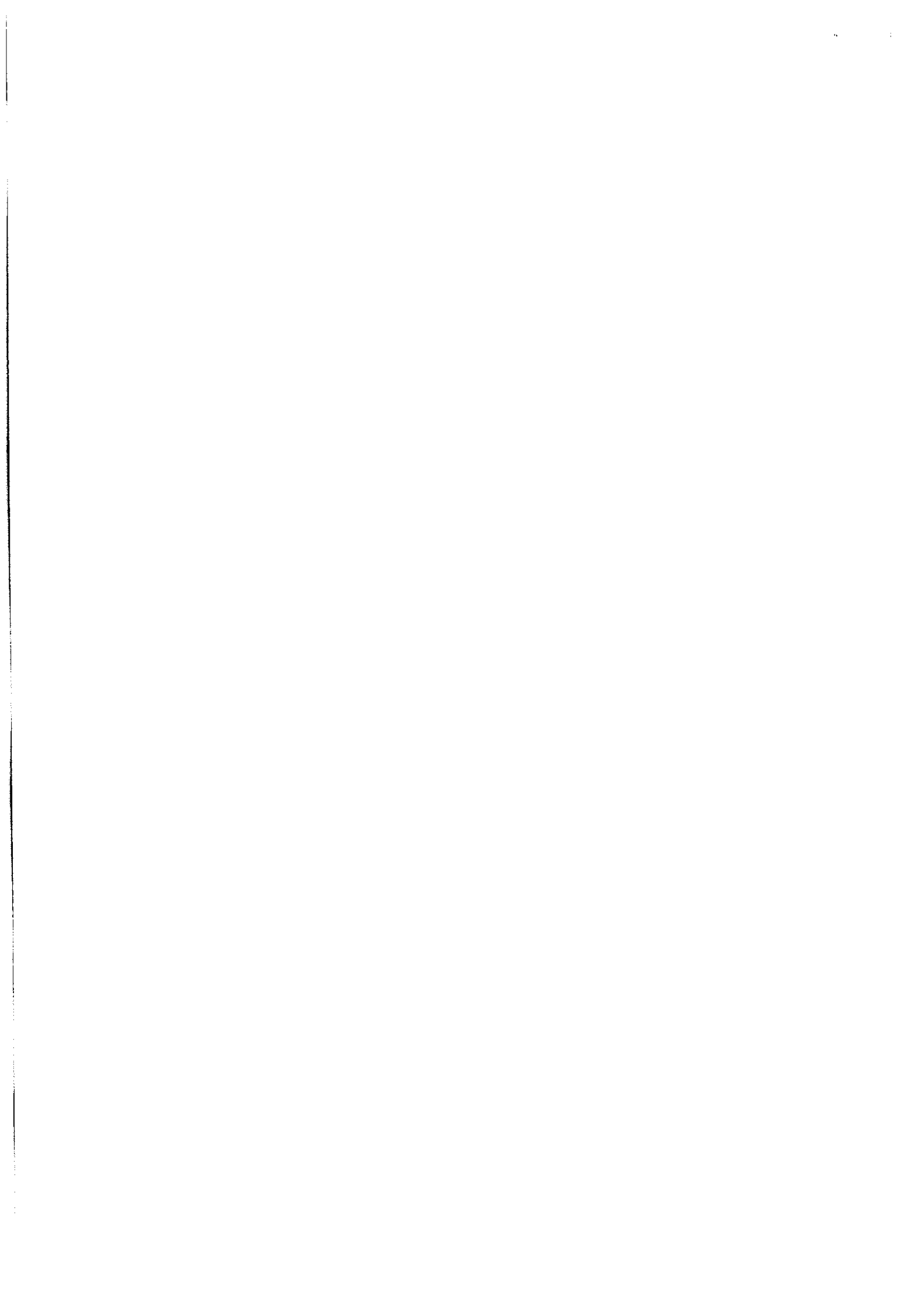
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No documents available.

Management & Monitoring

Quality Rating: Exemplary

9. Was the project's M&E Plan adequately implemented?



3: The project had a comprehensive and costed M&E plan. Baselines, targets and milestones were fully populated. Progress data against indicators in the project's RRF was reported regularly using credible data sources and collected according to the frequency stated in the Plan, including sex disaggregated data as relevant. Any evaluations conducted, if relevant, fully meet decentralized evaluation standards, including gender UNEG standards. Lessons learned, included during evaluations and/or After-Action Reviews, were used to take corrective actions when necessary. (all must be true)

2: The project costed M&E Plan, and most baselines and targets were populated. Progress data against indicators in the project's RRF was collected on a regular basis, although there was may be some slippage in following the frequency stated in the Plan and data sources was not always reliable. Any evaluations conducted, if relevant, met most decentralized evaluation standards. Lessons learned were captured but were used to take corrective actions. (all must be true)

1: The project had M&E Plan, but costs were not clearly planned and budgeted for, or were unrealistic. Progress data was not regularly collected against the indicators in the project's RRF. Evaluations did not meet decentralized evaluation standards. Lessons learned were rarely captured and used. Select this option also if the project did not have an M&E plan.

Evidence:

The project used the Global Fund's M&E Plan and M &E approach. The baselines, targets and milestones were populated, progress on the targets monitored, including sex-disaggregated data for TB. The NTP review (evaluation analogue) was conducted by the WHO in accordance with the WHO guidelines in decentralized manner, including analysis of gender-related barriers to access health services. Lessons learned were used when developing other similar projects.

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No documents available.

10. Was the project's governance mechanism (i.e., the project board or equivalent) function as intended?

3: The project's governance mechanism operated well, and was a model for other projects. It met in the agreed frequency stated in the project document and the minutes of the meetings were all on file. There was regular (at least annual) progress reporting to the project board or equivalent on results, risks and opportunities. It is clear that the project board explicitly reviewed and used evidence, including progress data, knowledge, lessons and evaluations, as the basis for informing management decisions (e.g., change in strategy, approach, work plan.) (all must be true to select this option)

2: The project's governance mechanism met in the agreed frequency and minutes of the meeting are on file. A project progress report was submitted to the project board or equivalent at least once per year, covering results, risks and opportunities. (both must be true to select this option)

1: The project's governance mechanism did not meet in the frequency stated in the project document over the past year and/or the project board or equivalent was not functioning as a decision-making body for the project as intended.



Evidence:

The project board met once in 2017, twice in 2018 and once in 2019. The project results were presented to the project board. Besides, a working group of national specialists met more frequently for the on-going issues, results, lessons learned, required re-programming. Examples of changes in the work plan were provided above.

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No documents available.

11. Were risks to the project adequately monitored and managed?

3: The project monitored risks every quarter and consulted with the key stakeholders, security advisors, to identify continuing and emerging risks to assess if the main assumptions remained valid. There is clear evidence that relevant management plans and mitigating measures were fully implemented to address each key project risk and were updated to reflect the latest risk assessment. (all must be true)

2: The project monitored risks every year, as evidenced by an updated risk log. Some updates were made to management plans and mitigation measures.

1: The risk log was not updated as required. There was may be some evidence that the project monitored risks that may affected the project's achievement of results, but there is no explicit evidence that management actions were taken to mitigate risks.

Evidence:

The project monitored risks every quarter and consulted with the key stakeholders regarding the fluctuations in Euro/USD exchange rate as the main risk for a budget deficiency, also changes in the product delivery terms, specifications, etc.

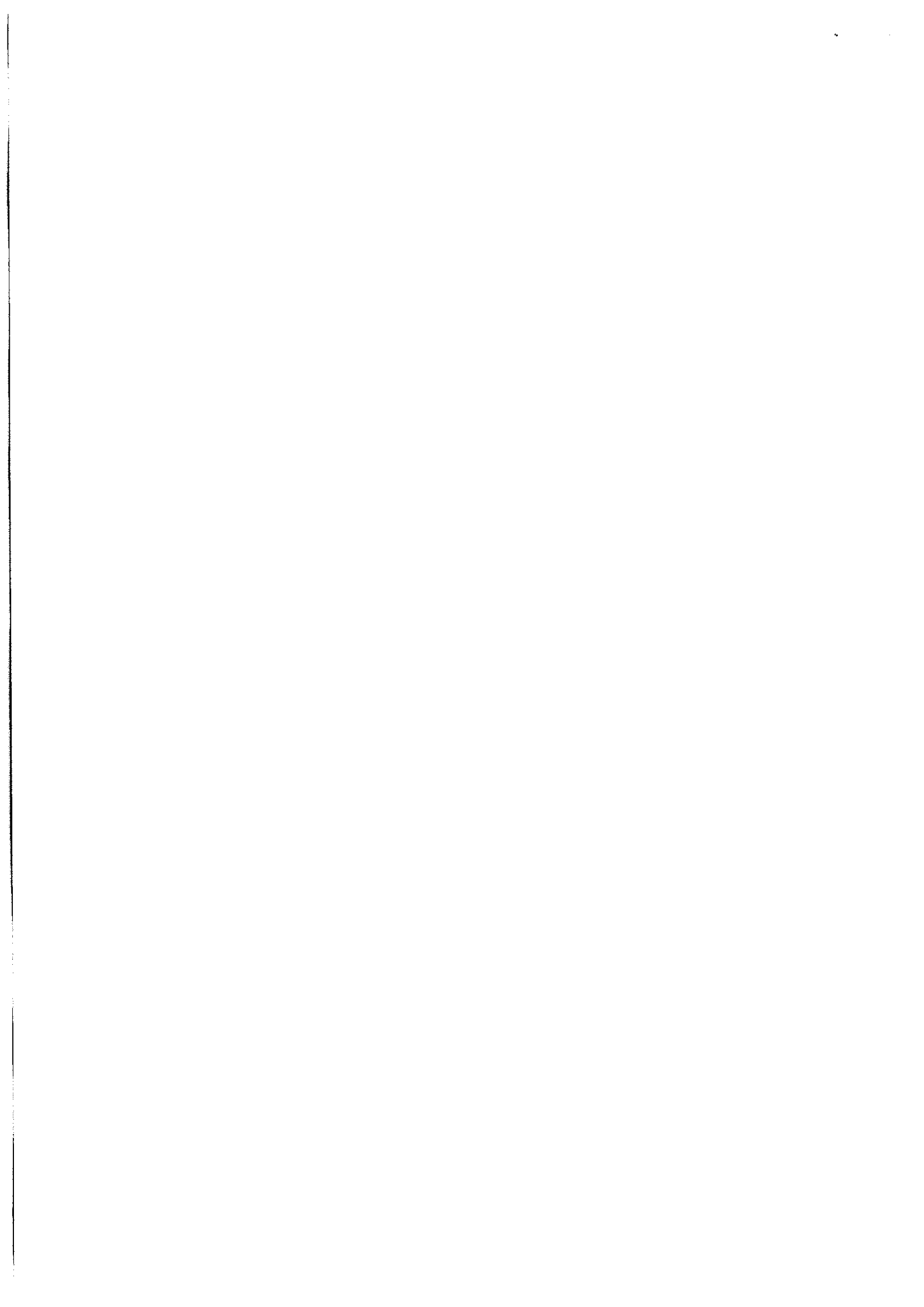
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No documents available.

Efficient

Quality Rating: Exemplary



12. Adequate resources were mobilized to achieve intended results. If not, management decisions were taken to adjust expected results in the project's results framework.

Yes

No

Evidence:

The project budget was sufficient, and UNDP even supplied more medical products than initially planned, due to cost-efficiency savings.

List of Uploaded Documents

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No documents available

13. Were project inputs procured and delivered on time to efficiently contribute to results?

3: *The project had a procurement plan and kept it updated. The project quarterly reviewed operational bottlenecks to procuring inputs in a timely manner and addressed them through appropriate management actions. (all must be true)*

2: The project had updated procurement plan. The project annually reviewed operational bottlenecks to procuring inputs in a timely manner and addressed them through appropriate management actions. (all must be true)

1: The project did not have an updated procurement plan. The project team may or may not have reviewed operational bottlenecks to procuring inputs regularly, however management actions were not taken to address them.

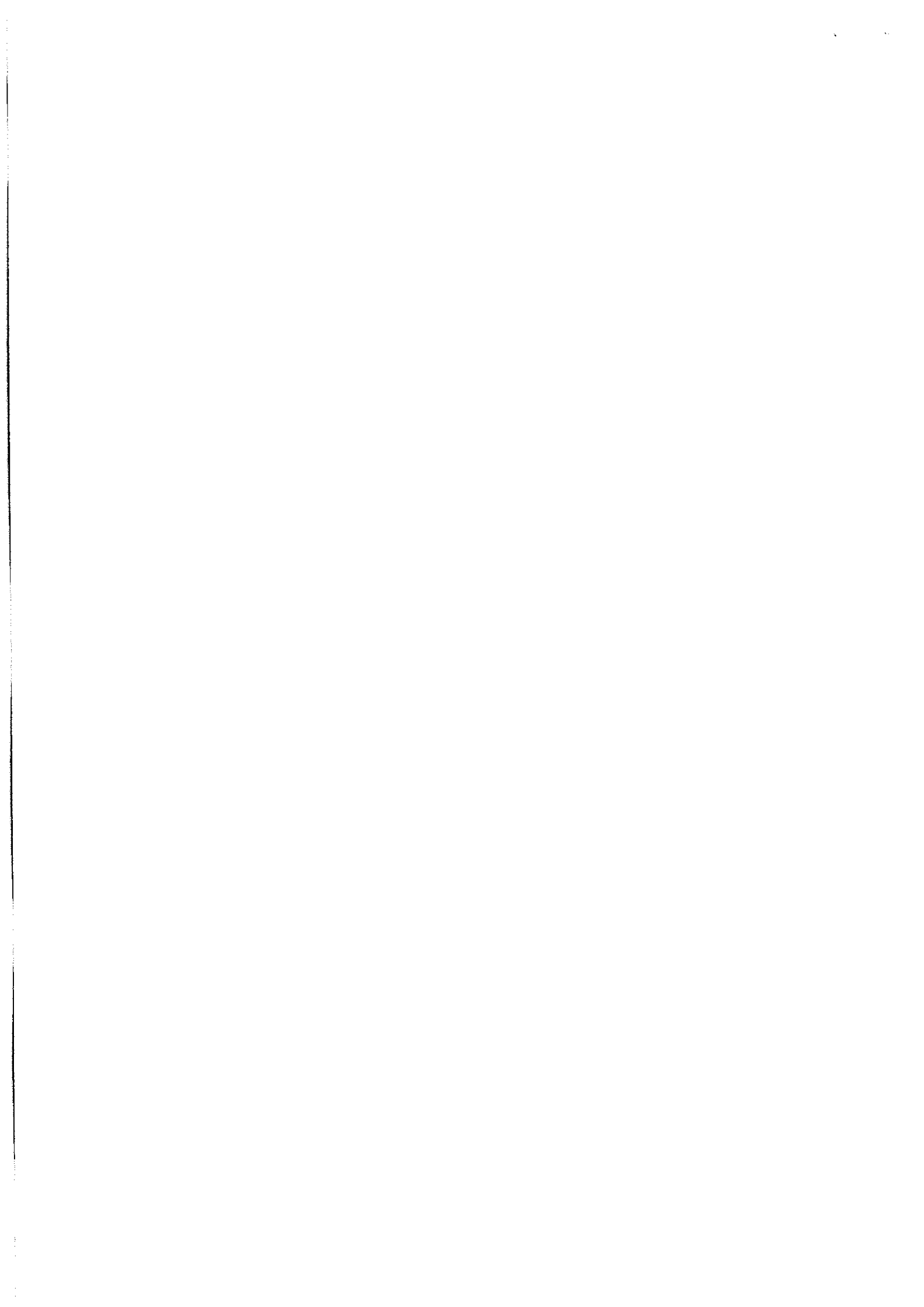
Evidence:

The project has procurement plans submitted both for the CO and Health Implementation Support Team (HIST), updated regularly. The project daily reviewed them based on emerging issues, and address through management actions, such as postponement of advancement of shipments, revision of specifications, etc.

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No documents available.



14. Was there regular monitoring and recording of cost efficiencies, taking into account the expected quality of results?

3: There is evidence that the project regularly reviewed costs against relevant comparators (e.g., other projects or country offices) or industry benchmarks to ensure the project maximized results delivered with given resources. The project actively coordinated with other relevant ongoing projects and initiatives (UNDP or other) to ensure complementarity and sought efficiencies wherever possible (e.g. joint activities.) (both must be true)

2: The project monitored its own costs and gave anecdotal examples of cost efficiencies (e.g., spending less to get the same result,) but there was no systematic analysis of costs and no link to the expected quality of results delivered. The project coordinated activities with other projects to achieve cost efficiency gains.

1: There is little or no evidence that the project monitored its own costs and considered ways to save money beyond following standard procurement rules.

Evidence:

The project reviewed the costs nearly daily, as the Global Procurement Unit (GPU) through which most of the procurement cases are implemented, immediately informed about any changes, such as increased freight costs, or reduction of prices. Similarly, the Global Drug Facility (GDF) - the supplier of TB medicines - informed about changes in the cost of TB medicines (for example, if a cheaper quality-assured medicine became available) and advised on required changes. The project also coordinated with the complementary Global Fund grant and made efficiency savings.

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No documents available.

Effective

Quality Rating: Exemplary

15. Was the project on track and delivered its expected outputs?

Yes

No



Evidence:

The project delivered all planned procurement items, and even more due to efficiency savings. The expected results were also achieved, e.g. the number of MDR-TB patients to be enrolled on treatment.

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No documents available.

16. Were there regular reviews of the work plan to ensure that the project was on track to achieve the desired results, and to inform course corrections if needed?

- 3: Quarterly progress data informed regular reviews of the project work plan to ensure that the activities implemented were most likely to achieve the desired results. There is evidence that data and lessons learned (including from evaluations for After-Action Reviews) were used to inform course corrections, as needed. Any necessary budget revisions were made. (both must be true)
- 2: There was at least one review of the work plan per year with a view to assessing if project activities were on track to achieving the desired development results (i.e., outputs.) There may or may not be evidence that data or lessons learned were used to inform the review(s). Any necessary budget revisions have been made.
- 1: While the project team may have reviewed the work plan at least once over the past year to ensure outputs were delivered on time, no link was made to the delivery of desired development results. Select this option also if no review of the work plan by management took place.

Evidence:

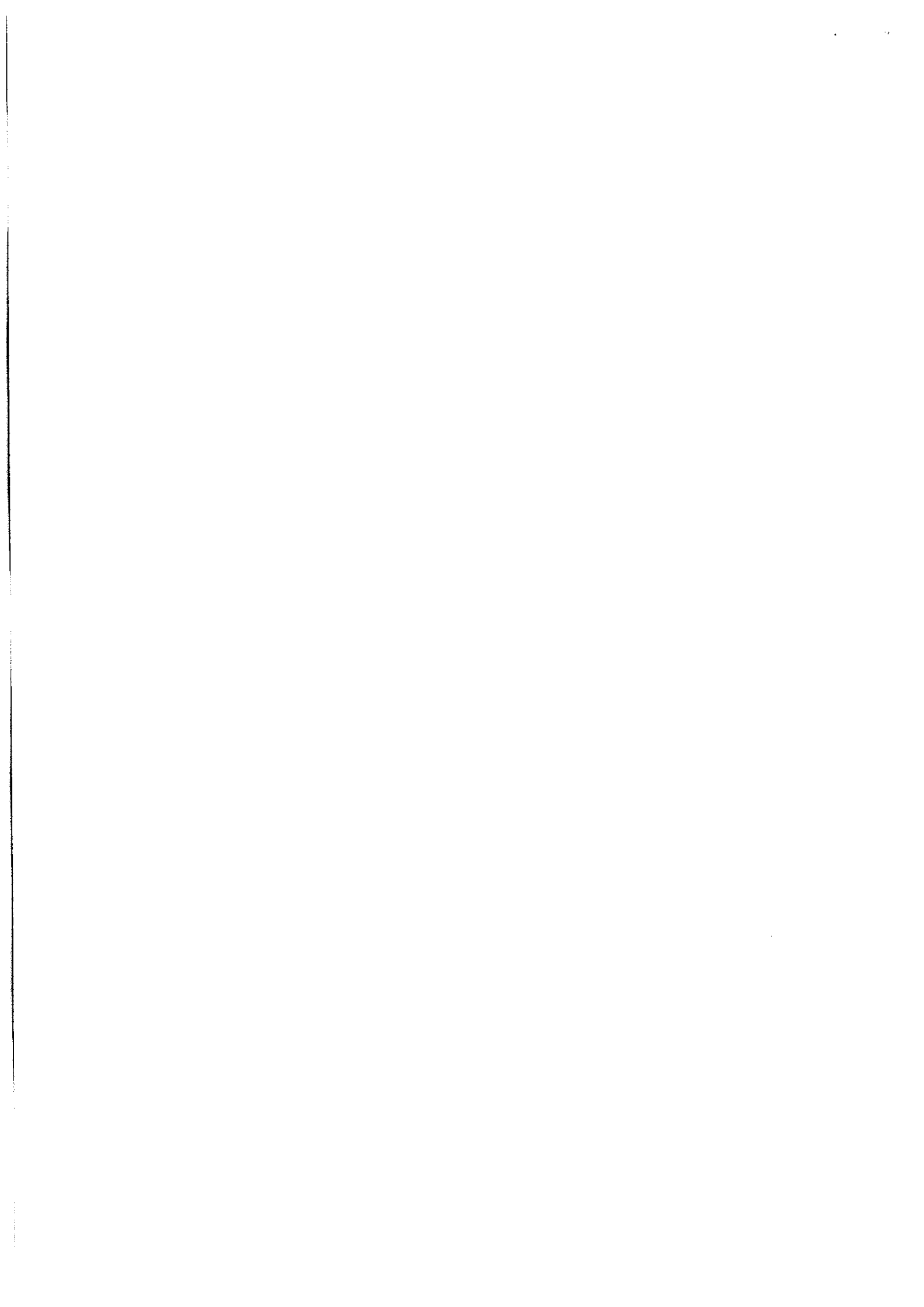
The project was reviewed quite often based on day-to-day information from the suppliers. The corrections and budget revisions were made accordingly.

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No documents available.

17. Were the targeted groups systematically identified and engaged, prioritizing the marginalized and excluded, to ensure results were achieved as expected?



- 3: *The project targeted specific groups and/or geographic areas, identified by using credible data sources on their capacity needs, deprivation and/or exclusion from development opportunities relevant to the project's area of work. There is clear evidence that the targeted groups were reached as intended. The project engaged regularly with targeted groups over the past year to assess whether they benefited as expected and adjustments were made if necessary, to refine targeting. (all must be true)*
 - 2: *The project targeted specific groups and/or geographic areas, based on some evidence of their capacity needs, deprivation and/or exclusion from development opportunities relevant to the project's area of work. Some evidence is provided to confirm that project beneficiaries are members of the targeted groups. There was some engagement with beneficiaries in the past year to assess whether they were benefiting as expected. (all must be true)*
 - 1: *The project did not report on specific targeted groups. There is no evidence to confirm that project beneficiaries are populations have capacity needs or are deprived and/or excluded from development opportunities relevant to the project area of work. There is some engagement with beneficiaries to assess whether they benefited as expected, but it was limited or did not occurred in the past year.*
- Not Applicable

Evidence:

The project procured specialized medical supplies (lab reagents, medicines) designed for specific infectious diseases, and therefore the supplies were used as intended. The project staff participated in the distribution of medicines and reagents, the distribution lists are signed by the Deputy Minister of Health.

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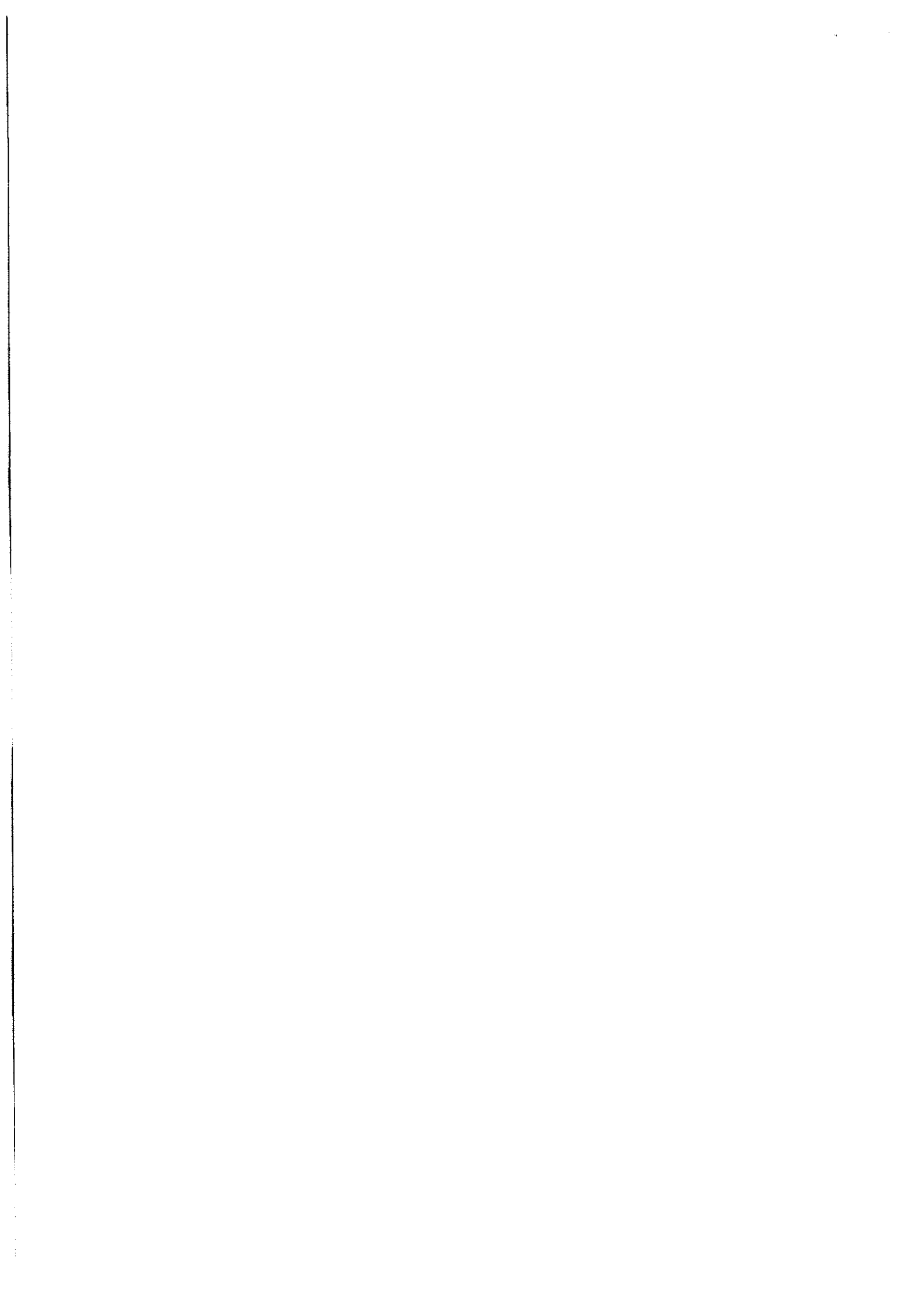
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Sustainability & National Ownership

Quality Rating: Satisfactory

18. Were stakeholders and national partners fully engaged in the decision-making, implementation and monitoring of the project?

- 3: *Only national systems (i.e., procurement, monitoring, evaluation, etc.) were used to fully implement and monitor the project. All relevant stakeholders and partners were fully and actively engaged in the process, playing a lead role in project decision-making, implementation and monitoring. (both must be true)*
 - 2: *National systems (i.e., procurement, monitoring, evaluation, etc.) were used to implement and monitor the project (such as country office support or project systems) were also used, if necessary. All relevant stakeholders and partners were actively engaged in the process, playing an active role in project decision-making, implementation and monitoring. (both must be true)*
 - 1: *There was relatively limited or no engagement with national stakeholders and partners in the decision-making, implementation and/or monitoring of the project.*
- Not Applicable



Evidence:

National systems for customs clearance, registration of medicines, distribution and storage were used. The UNDP systems for procurement were used as more effective, cost-efficient and transparent. The stakeholders were actively engaged in the design, implementation and monitoring; the national specialists prepared initial quantification for products, revised them if needed, advised on the requested delivery dates.

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19. Were there regular monitoring of changes in capacities and performance of institutions and systems relevant to the project, as needed, and were the implementation arrangements adjusted according to changes in partner capacities?

3: Changes in capacities and performance of national institutions and systems were assessed/monitored using clear indicators, rigorous methods of data collection and credible data sources including relevant HACT assurance activities. Implementation arrangements were formally reviewed and adjusted, if needed, in agreement with partners according to changes in partner capacities. (all must be true)

2: Aspects of changes in capacities and performance of relevant national institutions and systems were monitored by the project using indicators and reasonably credible data sources including relevant HACT assurance activities. Some adjustment was made to implementation arrangements if needed to reflect changes in partner capacities. (all must be true)

1: *Some aspects of changes in capacities and performance of relevant national institutions and systems may have been monitored by the project, however changes to implementation arrangements have not been considered. Also select this option if changes in capacities and performance of relevant national institutions and systems have not been monitored by the project.*

Not Applicable

Evidence:

The project monitored national capacities in procurement and supply of health products. Progress is obvious in quantification skills, in storage and distribution. However, changes in the implementation modalities would be premature as require more systemic changes in legal framework for public procurement.

Management Response:

UNDP plans to work on strengthening national procurement and supply chain capacities through 1) Global Fund's grant and 2) Govt funded project on non-communicable diseases. Both projects plan technical assistance, but specific actions will be based on the assessment conducted in Q4 of 2019 (the report is being finalized).



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No documents available.

20. Were the transition and phase-out arrangements were reviewed and adjusted according to progress (including financial commitment and capacity).

3: *The project's governance mechanism regularly reviewed the project's sustainability plan, including arrangements for transition and phase-out, to ensure the project remained on track in meeting the requirements set out by the plan. The plan was implemented as planned by the end of the project, taking into account any adjustments made during implementation. (both must be true)*

2: There was a review of the project's sustainability plan, including arrangements for transition and phase-out, to ensure the project remained on track in meeting the requirements set out by the plan.

1: The project may have had a sustainability plan but there was no review of this strategy after it was developed. Also select this option if the project did not have a sustainability strategy.

Evidence:

This project was developed as a step in phase-out from the Global Fund support by 2021, and in accordance with the Plan for Sustainability and Transition of the National TB Programme approved by the Government in 2017.

Procurement through UNDP is considered as an intermediate step of exiting from the Global Fund support. Further transition from the UNDP procurement services to national procurement mechanisms should be carefully planned within at least 3 years, as there is a need to change legal framework for public procurement, implement anti-corruption measures, to ensure the same quality and cost of medical products.

List of Uploaded Documents

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No documents available.

QA Summary/Final Project Board Comments

