



**UN EBOLA RESPONSE MPTF  
PROJECT MONTHLY PROGRESS REPORT - VERSION 1  
Period (Month-Year): September 2015**

<b>Project Number and Title:</b> 00092736	<b>PROJECT START DATE<sup>1</sup>:</b> 1-12-2014	<b>AMOUNT ALLOCATED by MPTF</b>  US\$ 2,245,832	<b>RECIPIENT ORGANIZATION</b>  UNDP Liberia
<b>Project ID:</b> 0000000 (Gateway ID)			
<b>Project Focal Point:</b> Name: Alain Koffi E-mail:alain.koffi@undp.org	<b>EXTENSION DATE:</b> 09-09-2015	<b>FINANCIAL COMMITMENTS</b>  US\$ 2,245,832	
<b>Strategic Objective (STEPP)</b> SO3 – Ensure Essential Services	<b>PROJECTED END DATE:</b>  31-12-2015	<b>EXPENDITURES as of Sep. 10, 2015</b>  US\$1,899,279.39 <sup>2</sup>	<b>IMPLEMENTING PARTNER(S):</b>  <ul style="list-style-type: none"> <li>• UNDP</li> <li>• Ministry of Health</li> </ul>
<b>Mission Critical Action</b> MCA7 – Cash Incentives for Workers			
<b>Location:</b> Country or Regional: Liberia	<b>Sub-National Coverage Areas:</b> Full list of countries and/or districts		

**MONTHLY PROGRESS REPORT RESULTS MATRIX**

**OUTPUT INDICATORS**

Indicator <sup>3</sup>	Geographic Area	Projected Target (as per results matrix)	Quantitative results for the (one month) reporting period	Cumulative results since project commencement (quantitative)	Delivery Rate (cumulative % of projected total)  as of date
<i>Description of the quantifiable indicator as set out in the approved project proposal</i>					
% of Ebola Response Workers registered on the information management system (100%) <sup>4</sup>	Liberia	100%	100%	%100 of ERWs employed by the government	100%

<sup>1</sup> The date project funds were first transferred.

<sup>2</sup> The expenses as at 30 Sept 2015 are lower than the one from the August report due to reversed charges.

<sup>3</sup> The Indicators should be disaggregated by gender, age and region as and where applicable

<sup>4</sup> Through the USAID-funded Rehabilitation of Basic Health Services (RBHS) program, the MOH has an information management system in place with 11,000 names entered. WHO estimates approximately 8,000 are current. However, the MOH is currently using Excel spreadsheets and hard copy ledgers to track healthcare workers and ERWs. While all ERWs are not registered in the IMS, iHRIS, they are in Excel sheets with the central MOHSW.



**UN EBOLA RESPONSE MPTF  
PROJECT MONTHLY PROGRESS REPORT - VERSION 1  
Period (Month-Year): September 2015**

<i>% paying organizations reporting to the information management system<sup>5</sup></i>	Liberia	65% estimated		(100%) Government only	100%
<i># of Ebola response workers reported by media as striking</i>	Liberia	0	0	0	100%

**EFFECT INDICATORS (if available for the reporting period)**

--	--	--	--	--	--

**MCA [7 ]**

**I. Information Management**

**RESULTS / OUTCOMES EXPECTED AT END OF MONTH 8: ACHIEVED (FOR GOVERNMENT EMPLOYED WORKERS)**

*% paying organizations reporting to the information management system*

The leadership of the inter-operability of the MOH HR management system and the financial management software at the MOFDP (IFMIS) and the Civil Service Agency (CMS) has been transferred to USAID Collaborative Support for Health (CSH). They will be instrumental in the creation of the steering Committee and the management team in order to drive the project.

<sup>5</sup> The reporting organizations have provided information regarding their ERWs to the MOH, and while this information is on file with the MOH, it is not entered into the IMS.



**UN EBOLA RESPONSE MPTF**  
**PROJECT MONTHLY PROGRESS REPORT - VERSION 1**  
**Period (Month-Year): September 2015**

The MOH and UNDP agreed to split the cost of the E-Billboard's repairs. The repair team is expected on 21 October 2015.

## **II. Strengthen existing payment mechanism**

### *# of Ebola response workers reported by media as striking*

The last hazard pay payment for April-May 2015 to ERWs and RHWs took place from the 18 to 24 September 2015 to all the counties except for Grand Gedeh because of the road conditions. The MOH paid 9230 RHWs, among them 7983 were banked (58.8% were men and 41.9% were women) and 1337 unbanked (65.5% were men and 34.5% were women). The ERWs were 1478, among them 1000 were banked (76.1% were men and 23.9% were women), 478 were unbanked (75.9% were men and 24.1% were women). The payment for Grand Gedeh will happen in October and will only concern 35 unbanked individuals.

A press conference was held by GOL on 24 September 2015 at the Information Ministry. During this press conference, GOL praised health workers for their role in the successful fight against the EVD, but they also announced that the last payment for April and May Hazard pay was imminent and there will be no more payment after that. This announcement dashed ETU's workers hope that the GOL would make a final "appreciation" payment to them via a lump sum that was under negotiation. In response to this, 75 to 100 former ETU workers immediately protested at the MOH on the 25, 28 and 29 September 2015.

For the month of September 2015 no complaints have been recorded in so far as the national UNVs have finished their mission and have been pulled back from the counties and the call center has ceased its activities. Nonetheless the complaints that were elevated to the MOH for resolution and ultimately payment of hazard, have not yet been processed by MOH. The MOH HR office is currently centralizing the complaints and will make the payments to the ERWs based on the merits of the case. In this context, the development partners including UNDP is always trying to facilitate a process for the ERWs to voice their concerns and present their case.

### *The consulting firm for the in-depth diagnostic feasibility study has been selected*

A new RFP has been advertised for the 2 month diagnostic and feasibility study for the mobile payment and banking system in Liberia, the consulting firm has been selected and we are in the final stage of the procurement process before the selected firm can start work tentatively by 15 October, 2015.

### *Recommendations made to Government and financial sector to bolster resilience*

To increase the ability of the MOH to pay its workers in remote areas, the MOH has decided to offer the possibility to be paid by mobile money. They are actively considering a pilot with the help of USAID and the TA of UNDP/UNCDF.

### *Monitoring system fully functional and reporting incidents of potential failure according UNDP activity to resolve*

Following the press conference of GOL regarding the end of hazard pay and the payment of any other additional compensations that health workers may believe are entitled prompted protests at the MOH from 75 to 100 of the former ETU workers on the 25, 28 and 29 September 2015. They called UNDP, and our position was that as long as they were given to present their case, there was nothing else that we could do.

## **III Establish an operational contingency plan**

### *# payments made through operational testing and proof of concept/stress testing*

None.

*# people paid through UNDP contingency plan (note goal is 0 since ideally the strengthening and monitoring in output II obviates the need for this contingency to be utilized)*



**UN EBOLA RESPONSE MPTF  
PROJECT MONTHLY PROGRESS REPORT - VERSION 1  
Period (Month-Year): September 2015**

None.

*% local districts with adequate cash out points for forecasted volumes*

NSTR

**Delays or Deviations** *(if any, briefly describe the delays or changes in focus, approach or targets, and provide a short justification for the change (1-2 paragraphs))*

The MOH made the last round of hazard payments (April/May) to ERWs and RHWs on the 18 thru the 25 September 2015 in 13 counties. Due to the inclement weather and bad road conditions the MOH could not make payment to 35 unbanked RHWs in Grand Gedeh. The payment will be made in October and air assets will be used if needed to cope with the bad road conditions that prevented MOH to make the payment in that county.

**Gender and Environmental Markers** *(Please provide disaggregated data, if applicable)*

No. of Beneficiaries		Environmental Markers	
Women	4,161	<i>e.g. Medical and Bio Hazard Waste</i>	
Girls		<i>e.g. Chemical Pollution</i>	
Men	6,637		
Boys			
<b>Total</b>	<b>10,798</b>		

*Please explain what strategies are being used to reach out to the most vulnerable sections of the population (women, children etc.. ) and how it is making a difference.*

As this is a project to support the government in ensuring ERWs are paid the hazard pay they are entitled to, there are no specific strategies for reaching out to women and children specifically, but all ERWs indiscriminately. However, UNDP is tracking the number of female ERWs and RHWs, as well as the number of female ERWs and RHWs who are banked and the percentage of complainants who are female in order to determine whether female healthcare workers seem to be disproportionately affected by non-payment.

We noticed the trend that there were fewer unbanked women among ERWs (24.1%) and RHWs (34.5%) than men ERWs (75.9%) and RHW (65.5%).

**Additional Information** *(Optional)*