

Other Contributions (donors)
(if applicable)

TOTAL:

Programme Assessment/Review/Mid-Term Eval.

A Mid-Term Review Report of the UN Programme of Cooperation with the Government of Albania was completed in 2014, and an external Evaluation of the Programme of Cooperation – in 2015.

Programme in its(their) system?

Expected Financial Closure date⁸:

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⁸ Financial Closure requires the return of unspent balances and submission of the Certified Final Financial Statement and Report.

FINAL PROGRAMME REPORT FORMAT

EXECUTIVE SUMMARY

UN support to the national development agenda during the implementation of the Programme of Cooperation 2012-2016, inclusive of the contribution of all UN agencies—specialised and non-specialised, resident and non-resident—was aligned with national priorities. The UN supported Government efforts to pursue national priorities by building capacities at all levels and strengthening national ownership. In doing so, it helped Albania work towards its ambitions to join the European Union, achieve the Sustainable Development Goals and meet its international commitments.

Key 2012-2016 results of this active partnership under Outcome 4.3 Health are laid out below:

- ✓ Basic Package of Primary Health Care Services revised and adopted with DCM No. 101, 04.02.2015. New prevention packages included in basic package of PHC service delivery, such as child screening for vision and hearing and support for screening of 40–65 year-olds. No. of consultations in basic health care services increased by > 8% and doctor visits/day by 10%.
- ✓ Development of sectoral strategies: National Health Strategy 2016–2020; National Reproductive Health Strategy; Strategy on Prevention and Control of HIV–AIDS 2015–2019 and Action Plan; National Non communicable Diseases Strategy and Action Plan 2016-2020; National Strategic Document on Sexual and Reproductive Health and Rights 2017 -2021; National Action Plan on Contraceptive Security 2017 – 2021; National Action Plan on Health Promotion 2017 – 2021; Antimicrobial Resistance National Action Plan; Revisions of law 8528 on Protection and Promotion of Breastfeeding; National Guidelines on Sexually Transmitted Infections Surveillance; National Guidelines, protocols and standards for provision of Youth Friendly Services in PHC; National Clinical Guidelines “Hypertension in pregnancy: management of hypertensive disorders during the pregnancy” and “Resuscitation of new-born baby”; National Guidelines and protocols for PHC provision of cervical cancer screening services
- ✓ Development of new standards and protocols for MCH care services and costing tool. Use of selected child nutrition indicators on a regular basis by all health institutions, as stated by Minister of Health Order No. 242 dated 14.06.2016. Introduction of new child growth monitoring charts: 80% of health care specialists at regional level used them in 2016, compared to 52% in 2010.
- ✓ Development of comprehensive manual to guide collection of national core health indicators in Albania. Introduction of European Core Health Indicators in Albania and upgrading to new standard of International Classification of Disease indicators ICD10.
- ✓ Preparation and publication of *The Health Status of the Albanian Population*, the 2014 National Health Report of Albania
- ✓ Establishment of a national cancer registry in cooperation with Mother Teresa Hospital. Strengthened national response to prevention and control programmes on cervical cancer at every level of health care provision: 51% of cases diagnosed and treated per year for cancer and cardiovascular diseases through quality care services. > 1000 women benefited from the new cervical cancer screening service integrated into the level of PHC.
- ✓ Integration of the Minimum Initial Service Package into MoH Platform on Disasters and Risk Management
- ✓ Skills upgrade for 700 health care providers in child growth monitoring and nutrition. More than 500 health personnel were trained in child nutrition surveillance, maternal and child health, cervical cancer, and reproductive health. 81 health education teams became active, 923 community-based activities were organised—58% in rural areas, reaching 16,000 community members.
- ✓ Capacity enhancement for 1,600 health care professionals of health statistics departments - over 85% national level eligible personnel
- ✓ 80% of eligible health personnel capable to plan and deliver holistic MCH services
- ✓ 565 home visits - reaching over 455 Roma/other vulnerable children under 5 years
- ✓ Parliament ratification of grant by Global Fund to Fight AIDS, Tuberculosis and Malaria

I. Purpose

The focus of this outcome is to assist the Albanian Government to achieve universal health insurance and make quality gender sensitive public health services available to all Albanians, regardless of their age and including at-risk population such as children, young people, elderly and HIV positive individuals. Efforts are made to improve management of health care services, develop guidelines to enhance the quality of care, establish protocols and a health information system framework, and promote access to health care.

II. Assessment of Programme Results

The following is a comprehensive assessment of the latest progress attained under Outcome 4.3 Health.

Albania has undergone large generally positive political, economic and social changes over the past 25 years and has reached an upper middle-income country status. Despite the progress achieved, the country still faces many challenges to fulfil its aspiration of EU accession. New reforms have been undertaken to improve local government functions and service delivery. Confidence in health services has increased to 50 percent, according to 2016 polls⁹, and out-of-pocket expenditures for health have fallen below 50 percent of total health care expenditures. Spending on health care is about 2.9 percent of GDP and ten percent of the national budget. Disparities and inequalities persist among some groups of the population in Albania, notably between urban and rural, and different population groups (particularly with Roma and Egyptians). Escalation of health reforms in Albania necessitates financial sustainability for the health system, including an increase in the current low level of public financing for health. The demographic profile of Albania is changing, following an ageing population with rapidly changing health needs, and will need to be met by a wider range of capacities and competencies of health care providers. The health system also faces challenges to address the disparity in the health workforce availability and skills. The UN is supporting Albania in building a comprehensive health system that delivers equity, efficiency, access and affordability for all.

The UN's continued focus on increasing equity in health and access to health care resulted in development of a national framework for a more resilient, responsive and transformative health system. WHO supported the drafting of a National Health Strategy for Albania, outlining the steps for materialising the Universal Health Coverage vision in the course of the next 5–10 years. UNICEF's advocacy and technical advice led to revisions¹⁰ of Law No. 8528 'On Protection and Promotion of Breastfeeding', adopted by Parliament in May, development of a package of by-laws, including a Prime Minister's Order, on labelling requirements for breast milk substitutes, and guidelines and inspection tools for monitoring law compliance. As a result of UNFPA advocacy efforts, a number of national policies and strategic documents were approved, endorsed and disseminated widely. Key examples include the development of guidelines, protocols and standards for the provision of youth-friendly services at the level of PHC, a National Strategic Document on Sexual and Reproductive Health and Rights 2017–2021, National Action Plan on Contraceptive Security 2017–2021, National Action Plan on Health Promotion 2017–2021, National Guidelines on Sexually Transmitted Infections Surveillance, a guideline on piloting selected health indicators, in accordance with the newly developed and approved Manual of Core Health Indicators (based on European Core Health Indicators), and guidelines and protocols for Primary Health Care provision of cervical cancer screening services. Regarding the last of these, a small-scale pilot programme was launched in the regions of Tirana and Fier, resulting in skills development for 92 PHC professionals on issues such as informing women, taking and handling samples, and referring positive cases and counselling. Additionally, three primary health centres, in Libofshe Commune (Fier), Fier Municipality, and Farke Commune (Tirana), were supported to provide cervical cancer screening services for more than 1,000 women. However, for prevention services such as this one to be scaled-up sustainably, public funding of health care will have to increase.

⁹ 2016 Opinion Poll Opinion Poll "Trust in Governance 2016" <http://www.al.undp.org/content/albania/en/home/presscenter/pressreleases/2017/02/09/-findings-of-the-opinion-poll-trust-in-governance-2016-presented-in-tirana.html>

¹⁰ The changes aimed to (i) expand the range of products covered under the scope of this law, (ii) clarify and strengthen labelling requirements, and (iii) strengthen administrative measures for law violations.

Major milestones were achieved in the prevention and control of non-communicable diseases (NCD). WHO supported finalisation and approval of a National NCD Strategy and Action Plan 2016–2020¹¹ and development and approval of the Guidelines on Infection Control in Communities and Health Care Institutions.¹² National efforts in combating antimicrobial resistance (AMR) in the country were supported by WHO through the drafting of an AMR National Action Plan, preparation of a survey on the knowledge, practices and attitudes of health providers on AMR, as well as raising awareness on the prudent use of antibiotics. Building on the progress made by Albania in enforcement of tobacco control legislation, WHO provided expert opinion¹³ to the State Health Inspectorate on issues related to effective implementation of the Law ‘On the Protection of Health from Tobacco Products’.

A policy dialogue to prevent child maltreatment in Albania, held in November with the support of WHO and the participation of 30 stakeholders representing key sectors, resulted in the issuance of seven recommendations¹⁴ for inclusion in the National Action Plan (Agenda) for Children, 2016–2020. Supported with UNICEF’s advocacy and data, Order of the Minister of Health No. 242, issued on 14.06.2016, created an administrative basis for the scaling up of child nutrition surveillance. Six new child nutrition indicators were introduced for nationwide monitoring in all primary and secondary health care facilities. Appropriate monitoring capacity was established for around 1,600 health care professionals and specialists of health statistics departments, accounting for more than 85 percent of eligible personnel at the national level.

More than 80 percent of eligible health personnel were provided with tools to plan and deliver holistic Maternal and Child Health services focusing on the most vulnerable, benefiting from UNICEF’s training ‘Building on past achievements, enforcement mechanisms for the new MCH regulatory framework’, held in Durres as a target region identified jointly with the Ministry of Health (MoH). Supportive supervision tools were developed in collaboration with MoH and the Institute of Public Health and used in monitoring the quality of service delivery. A collaboration framework between the regional health authorities and local government was developed and institutionalized through a Memorandum of Understanding (MOU) signed between the Regional Department of Health and Durres Municipality, emphasizing cross-sectoral collaboration and the new role of local government in health, in the frame of Albania’s decentralization reform. Equally important, the framework includes dedicated structures within local government to deal with mother and child health and public health issues, as well as modalities for regular information exchange. To ensure adequate resource allocation for maternal and child health, UNICEF assisted MoH and the Health Insurance Fund to design a tool to calculate the present and future costs. Plans to operationalize the use of the costing tool are under way for 2017.

For several consecutive years, UNFPA, in partnership with MoH, has supported initiatives¹⁵ to improve perinatal care by incorporating higher standards of care into the regional maternity hospitals through the introduction of evidence-based best practices. Five regional maternity hospitals, in Durres, Kukes, Shkoder, Vlore and Fier, have benefited from quality improvement initiatives that have addressed capacities in effective perinatal care and introduction of Beyond the Numbers¹⁶. National clinical guidelines for ‘Hypertension in pregnancy: management of hypertensive disorders during pregnancy’ and ‘Resuscitation of the newborn baby’ were also developed this year, with UNFPA support. Additionally, UNFPA engaged in supporting key elements of quality improvement and demand generation for family planning: (i) development and endorsement of guidelines and protocols; (ii) strengthening the capacity development

¹¹ The drafting was technically supported by WHO EURO and WHO Country Office. It was approved by Ministerial Order No. 419, date 30.09.2016 ‘On the approval of the document of the National Programme and Action Plan for the prevention and control of non-communicable diseases (NCD) in Albania, 2016–2020’.

¹² Pursuant to the requirements of Law No. 15/2016 ‘On the Prevention and Fighting of Infections and Infectious Diseases in the Republic of Albania’. The Guidelines were launched by the Ministry of Health of Albania during the World Antibiotic Awareness Week 2016 and were officially approved in 21 November 2016.

¹³ The technical assistance to the State Health Inspectorate was provided through meetings with Health Inspectorate officials, joint inspections in bars and restaurants, monitoring of the compliance with the law and a one-day workshop with 35 lawyers of the State Health Inspectorate.

¹⁴ Positive parenting training for parents and carers; social marketing to change norms regarding the use of violent discipline; capacity building for health and other professionals to detect and provide services for child victims; home visits to support parents, particularly in at-risk families; school-based training of children to recognise and resist sexual abuse; monitoring and evaluation; and violence-free schools.

¹⁵ The objectives of these important initiatives are in accordance with the long-term strategy of MoH and the objectives of the National Centre for Quality Safety and Accreditation, achieving harmonisation with European standards for health care.

¹⁶ Beyond the Numbers’ is a tool adopted by the World Health Organization as part of its campaign ‘Making Pregnancy Safer’, supported by UNFPA and UNICEF at regional level in a number of countries in Eastern Europe and Central Asia, used to guide professionals in reviewing maternal deaths and complications and create a surveillance system for such incidents. The package and its tools are designed to provide valuable recommendations for systemic improvements that strengthen maternal care at country level. See more at: <http://eeca.unfpa.org/events/beyond-numbers-workshop-south-eastern-europe#sthash.x4clD2ns.dpuf>

process through, among others, the establishment of a virtual learning platform accompanied by the first cohort of accredited trainees from the National Centre for Continuous Medical Education; and (iii) development and delivery of a training-of-trainers (ToT) package to a team of 30 health care professionals representing different regions of the country. Improved information and education on HIV and sexually transmitted infections, with focus on young key populations and increased coverage of comprehensive HIV services in prison settings, are some other key results, enabled with UNFPA support.

Recognising the importance of home visits and the key role the health sector plays in identifying and addressing vulnerabilities in the early years, UNICEF ensured that the new home visiting methodology prioritises the most vulnerable, fosters inter-sectoral collaboration and increases emphasis on monitoring child development. Using the universal progressive home-visiting model, 565 home visits were conducted by trained health personnel based on standard protocols for mother and childcare in target areas, Fier and Vlore, using standard checklists based on national protocols and the UNICEF regional home-visiting package. UNICEF supported the training of health personnel, based on standard training modules, to plan and conduct home visits to most at risk children and families, reaching some 455 Roma and other vulnerable children under five years of age. The content of the visits, in addition to health issues, focused on other vulnerabilities that influence poor health outcomes.

A Hospital Index Safety Training,¹⁷ supported by WHO, took place in Tirana in October with national and regional participation, representing significant progress towards improving the safety of health facilities in the event of emergencies and disasters. Additionally, UNFPA supported integration of a Minimum Initial Service Package (MISP) into the MoH's Platform on Disasters and Risk Management, accompanied by an Order of the Minister of Health approving its integration and assigning roles and responsibilities among public health structures for its implementation. Strengthening capacities of health care providers for the provision of reproductive health services in crisis or humanitarian settings was considered a key achievement of the year and a fulfilment of an MoH priority, in light of the regional context and migrations flows in the Mediterranean and the Western Balkans. Sixty health care professionals from Korca, Gjirokaster and Saranda counties received training in MISP in 2016.

Support for national leadership and increased participation of national stakeholders in decision making was supported by UNAIDS for enhanced collaboration among MoH, Institute for Public Health and representatives of civil society in the Global Fund's Country Coordinating Mechanism and beyond. Advocacy efforts of UNAIDS in partnership with the regional departments of health resulted in an increased number of community events¹⁸ organised by social workers and doctors of Voluntary Counselling and Testing in the regions of Elbasan, Shkoder, Vlora and Berat, reaching 2,722 women and men who are empowered to provide peer and community awareness.

Technical assistance from UNAIDS accompanied MoH as the Primary Recipient of the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) New Funding Model Proposal through all the steps of the grant application process and resulted in ratification of a grant by Parliament in June 2016. UN, as a member of the Country Coordinating Mechanism in partnership with the GFATM Secretariat, contributed to the development of framework documents and procedures for establishment of the Project Implementation Unit.

WHO also worked on linkages between health and water supply. A workshop in September, with WHO support, aimed to advance Albania's work under the Protocol on Water and Health, introducing the objectives and provisions of the Protocol and positioning it as a practical instrument to achieve the aspirations of the 2030 Agenda.

¹⁷ National experts were trained in how to apply the tool in hospital settings. The assessment consists of three essential elements: structural hospital safety, non-structural safety, and functional safety, including emergency and disaster management. The trainees were split into two groups for conducting an assessment in two hospitals: University Hospital, Tirana and the Regional Hospital, Durres.

¹⁸ 130 sessions in total for each region with an average participation rate of 15 persons per session

ii) Indicator Based Performance Assessment:

The goal of the 2012–2016 Programme of Cooperation was to promote sustainable and equitable development, social inclusion and adherence to international norms and fulfilment of international obligations, in support of the integration of Albania into the EU. The following are examples of UN Albania's contribution, under the Programme, to the achievement of the country's priorities.

Indicator based performance information is available at UN Albania Annual Progress Reports 2012-2016, accessible at:

http://www.un.org.al/publications?field_publication_type_value=Reports

<http://mptf.undp.org/factsheet/fund/AL100>

iii) Evaluation, Best Practices and Lessons Learned

The UN is supporting Albania to build a comprehensive health system that delivers equity, efficiency, access and affordability for all. However, several challenges were observed in the sector, including:

- i) a lack of implementation tools for all policies and concrete models for effective inter-sectoral collaboration;
- ii) a need for supervision and follow up on capacity development interventions to ensure institutional change and sustainability;
- iii) weak government capacities to deal with financial management, implementation, monitoring and evaluation of policies and strategies, as well as adequate budget allocations for the marginalized;
- iv) the enforcement of the regulatory and legislative frameworks in this area requires well established enforcement mechanisms and regular monitoring

Note: The certification on operational closure reflect the figures after the refund by PUNOs.

CERTIFICATION ON OPERATIONAL CLOSURE OF THE PROJECT 82444 - OUTCOME 4.3

MPTF Project ID	Project Description	Country	Fund	Theme	Organization	Period	Budget
00082444	Outcome 4.3: Health insurance is universal and quality, gender sensitive and age appropriate public health services available to all including at-risk populations.	Albania	Albania One UN Coherence Fund	ALB 2012 P4 Inclusive Social Policy	IAEA	01.01.2012 - 31.12.2016	79,098.00
00082444		Albania	Albania One UN Coherence Fund	ALB 2012 P4 Inclusive Social Policy	UNAIDS	01.01.2012 - 31.12.2016	10,000.00
00082444		Albania	Albania One UN Coherence Fund	ALB 2012 P4 Inclusive Social Policy	UNFPA	01.01.2012 - 31.12.2016	32,896.00
00082444		Albania	Albania One UN Coherence Fund	ALB 2012 P4 Inclusive Social Policy	UNICEF	01.01.2012 - 31.12.2016	151,245.50
00082444		Albania	Albania One UN Coherence Fund	ALB 2012 P4 Inclusive Social Policy	WHO	01.01.2012 - 31.12.2016	216,586.18
TOTAL							489,825.68

By signing, Participating UN Organization certify that the project 82444 - Outcome 4.3, has been operationally completed.


IAEA

Mr. Martin Krause
Director, Division for Europe

Signature: 
Date: 27.11.17


UNAIDS

Ms. Bujana Hoti
UNAIDS Focal Point

Signature: 
Date: 27.10.2017

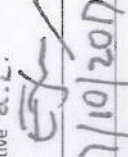
UNFPA

Ms. Manuela Bello
Assistant Resident Representative

Signature: 
Date: 27.10.2017

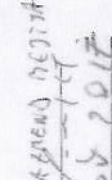
UNICEF

Mr. Ezio Gianni Murzi
Representative a.i.

Signature: 
Date: 27/10/2017

WHO

Ms. Nazira Artykova
Representative

Signature: 
Date: 21 Nov 2017