

UN EBOLA RESPONSE MPTF FINAL PROGRAMME¹ NARRATIVE REPORT - VERSION 1 DATE: 20 JUNE 2016

Project Number(s) and Title(s)	Recipient Organization(s) RUNO(s)		
Title: Payment Programme for Ebola Response Workers (PPERW (Gateway ID): 00092736	Project Focal Point: Deputy Country Director/Program Name: Cleophas Torori E-mail: cleophas.torori@undp.org		
Strategic Objective & Mission Critical Action(s)	Implementing Partner(s):		
SO 3 – Ensure Essential Services	Ministry of Health (MOH) Ministry of Finance and Development Planning (MOFDP)		
MCA7 – Cash Incentives for Workers			
Location: National - Monrovia and Counties	Sub-National Coverage Area: Counties		
Country or Regional: Liberia	Full list of Countries and/or districts ² :		
Programme/Project Cost (US\$)	Programme Duration		
Total approved budget as per project proposal document: US\$ US\$, 2,245,832 MPTF³: • by Agency (N/A) Agency Contribution • by Agency (N/A) Government Contribution (if applicable): N/A Other Contributions (donors) (if applicable): N/A TOTAL: 2,245,832 Expenditure: 2,149,798.15	Overall Duration (months) Project Start Date ⁴ DATE ⁵ :1-12-2014 Originally Projected End Date ⁶ (dd.mm.yyyy) 31-09-2015 ⁷ Actual End date ⁸ 31March 2016 Agency(ies) have operationally closed the programme in its(their) system Expected Financial Closure date ⁹ : 31 March 2017		
Programme Assessment/Review/Mid-Term Eval.	Report Submitted By		
Evaluation Completed ■ Yes No Date: 31, March 2016 Evaluation Report - Attached ■ Yes No Date: 31 March, 2016	 Name: Cleophas Torori Title: Deputy Country Director/Programme Date of Submission: 30th June, 2016 Participating Organization (Lead): UNDP Email address: cleophas.torori@undp.org Signature: 		

¹ Refers to programmes, joint programmes and projects.

² Montserado, Nimba, Bong, R.Gee, R. Cess, GCM; Lofa, G. Gedeh, Lofa, Bopolu, Maryland, G.Kru, Sinoe, G. assa, Margibi

³ The amount transferred to the Participating UN Organizations – see MPTF Office GATEWAY

⁴ The date of the first transfer of funds from the MPTF Office as Administrative Agent. The transfer date is available on the online MPTF Office GATEWAY.

⁵ The date project funds were first transferred.

⁶ As per approval of the original project document by the Advisory Committee.

⁷ Two extensions were given, initially to 31st December 2015, and later to March 31st 2016

⁸ If there has been an extension, then the revised, approved end date should be reflected here. If there has been no extension approved, then the current end date is the same as the originally projected end date. The end date is the same as the operational closure date, which is the date when all activities for which a Participating Organization is responsible under an approved project have been completed. As per the MOU, agencies are to notify the MPTF Office when a programme completes its operational activities. Please see MPTF Office Closure Guidelines.

⁹ Financial Closure requires the return of unspent funds and the submission of the <u>Certified Final Financial Statement and Report.</u>

Project Proposal Title: Payment Programme for Ebola Response Workers (PPERW) Strategic Objective to which the project contributed This project was to ensure payment of Ebola response workers by establishing an information management of those paying Ebola worker, strengthen existing payment systems, and set up a payment mechanism that would be ready as a contingency plan for sectorial or geographic failures in existing payment systems. Geographical Area Baseline¹⁰ Responsable Means of (where the project **Effect Indicators** In the exact area of **Target Final Achievements** verification Organization(s) operation directly operated) % of Ebola Response Workers linked to a 100% 100% 95% Project Report UNDP/MoHSW Libreria payment mechanism % registered Ebola workers fully paid on time 80% 10% Project Report UNDP/MoHSW Liberia 100% Throughout the programme, only ERWs from Montserrado County totaling an average of 1000 workers have been paid

¹⁰ If data is not available, please explain how it will be collected.

teams

on time. The remaining ERWs posted in the Counties experience an average of 8 to 12-week delay due to the lack of identification and poor coordination with the central office and the county health

Output Indicators	Geographical Area (where the project directly operated)	Baseline In the exact area of operation	Target	Final Achèvements	Means of Verification	Responsable Organization(s)
I. Information Management % of Ebola Response Workers registered on the information management system	Liberia	100%	100%	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 ERW as currently enrolled. 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 MOH	Project Reports	UNDP/MoHSW
% of paying organizations reporting to the information management system	Liberia	100%	100%	65% 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.	Project Reports	UNDP/MoHSW

II. Strengthen Existing Payment mechanism # of Ebola Response Workers reported by media as striking	Liberia	-	-	0% There was no ERWs reported by media as striking but there were quite a few demonstrations requesting salary increase	Project Reports	UNDP/MoHSW
Diagnostic study completed	Liberia	-	1 (100%)	Study completed. It was for the interoperability of MOH HR system with the Civil Service and Ministry of Finance HR systems to ensure efficient payroll management and expedite payments of health workers in the Counties	Project Reports	UNDP/MoHSW
Recommendations made to Government and financial sector to bolster resilience	Liberia			Recommendations made.	Project Reports	UNDP/MoHSW
Monitoring system fully functional and reporting incidents of potential failure with according UNDP activity to resolve	Liberia	-	1	Monitoring system set up and functional	Project Reports	UNDP/MoHSW
# Payments made through operational testing and proof of concept/stress testing	Liberia	100%		449 Contact Tracers paid	Project Reports	UNDP/MoHSW
# 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)	Liberia	-	-	Payment was made to all 822 IMS workers through PPERW contingency plan	Project Reports	UNDP/MoHSW
% local districts with adequate cash out points for forecasted volumes	Liberia	100%		NSTR	Project Reports	UNDP/MoHSW

FINAL PROGRAMME REPORT FORMAT

EXECUTIVE SUMMARY

• In ½ to 1 page, summarise the key achievements of programme.

Background and Situational Evolution (please provide a brief introduction to the project and the related outcomes in relation to implementation of the project (1-2 paragraphs)

On 25th of May 2014, the Ministry received an investigation report of what became the index case of the second wave of EVD epidemic (probable case with no sample collected) from Lofa County. Both episodes of the epidemic were cross border importation with the first wave of the epidemic imported from Guinea. The Ebola Virus Disease (EVD) have dealt a devastating blow to Liberia, considering its impact on lives, families and economy of the country. The country bore the heaviest brunt of the EVD epidemic in 2014, and in October that same year, over 50% of the cases and deaths in the region were ascribed to Liberia. The epidemic expanded to all the 15 Counties in the country, within a short time period. Through Government and partners' interventions including this project, cases dropped significantly in Liberia, and on 9th May, 2015 the country was declared Ebola-Free. Subsequently, three relapses and containments have occurred, and the country is currently Ebola-free after WHO declaration on 14th January 2016.

The Payment Programme for Ebola Response Workers (PPERW) was established in December 2014 to ensure that all workers receive payments due to them for performing their essential duties. It aimed at ensuring that payment of Ebola Response Workers, establishing information management of those paying Ebola Workers, strengthening existing payment systems, and setting up a payment mechanism that would be ready as a contingency plan for sectorial or geographic failures in existing payment systems. Thus the three components of the project were: (i) Information Management; (ii) Strengthening existing payment mechanisms; and (iii) Establish an operational contingency plan to ensure payments can be made in case of partial failures. In order to achieve the above, 17 UNVs were engaged on the project – three in Montserrado County and one in each of the remaining fourteen Counties. Delays in the payment of the ERWs and associated demonstrations and threat to boycott provision essential health services needed at that critical period, necessitated the project.

Through the programme, UNDP worked to ensure that all workers received payments due to them and that the payment lists were cleaned and verified. It was to ensure that the Government in the three Countries were provided with the technical assistance and strengthened capacity needed to ensure timely delivery of incentives to ERWs. Specifically, the PPERW had three main objectives: (i) strengthening health sector human resource planning through information management systems; (ii) strengthening existing payment platforms and digitizing incentive pay; and (iii) establishing an UN-run contingency payment platform in Guinea and Liberia. Several considerations influenced the structure of the PPERW in relation to the objectives. Main considerations included Government Ebola response structures and policies; the degree of financial sector development and its partnership structure; and sector and donor coordination structures and processes. Government structures and policies were most deterministic. The payments were led by the Ministry of Finance and Development Planning with all payments managed by the Project Financial Management Unit (PFMU), working with banking institutions and the Ministry of Health. The World Bank provided grants to support Liberia, Sierra Leone and Guinea, supplementing the efforts of governments and other partners to motivate and reward health workers in the affected Countries to work on the EVD emergency response and provide other essential health services. This was then followed by contributions from the African Development Bank through the World Health Organization for Hazard Pay to responders (ETUs, Routine Health Workers and Response teams) and Death Benefits for families of deceased health workers.

Narrative Section:

Key Achievements:

By the end of December 2015, UNDP had supported the government to pay an average of 10,000 Ebola Response Workers (ERWs) per payment cycle (for a total of 5 payment cycles), ensuring that more than 95% of them were registered and linked to a payment mechanism.

By the end of the project, UNDP had supported the Government to pay all 822 IMS workers through PPERW contingency plan. Throughout the programme, only ERWs from Montserrado County totaling an average of 1000 workers have been paid on time, the remaining ERWs posted in the Counties experience an average of 8 to 12-week delay due to the lack of identification and poor coordination with the central office and the county health teams. 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 MOH. 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.

There was no ERWs reported by media as striking but there were quite a few demonstrations requesting salary increase, however, 17 UNV were deployed in the field and a call center was established to voice, sort and verify any complaints of EWRs and link them to MOH for their resolution.

The PPERW financed a study for the interoperability of MOH HR system with the Civil Service and Ministry of Finance HR systems in order to manage the payroll more efficiently and make faster payments of salaries to health workers located in the Counties.

By August 2015, a total of 578 complaints had been reported by UNDP's 17 UNVs deployed across the country with 414 of the complaints addressed by the County Health Teams while 164 were elevated to the MOH central office and resolved. Among the 164 complaints that were elevated to the central MOH, 57.9% of them were made by men and 42.1% of them were women.

To increase communication and transparency regarding payments, UNDP in collaboration with the MOH, installed an electronic billboard at the Ministry to provide payment information publicly to workers. One main challenge in Liberia is a lack of payment mechanisms through which to pay people. To increase the ability of the MOHSW to pay workers in remote areas and strengthen payment mechanisms in Liberia, UNDP forged partnership with USAID to reduce the risk, via a public-private partnership, for a digital payments aggregator, Splash Cash, to enter the Liberian market. The digital payments aggregator would actively manage agent networks and liquidity in the Counties to extend the reach of the financial system and enable last mile delivery. At the end of the project, an in-depth financial diagnostic of the digital payment sector in Liberia was also completed and findings are expected to feed into discussions on the introduction of a 3rd party cash aggregator in Liberia, in strengthening the existing payment mechanisms, and in the development of digital financial services in Liberia, especially improved mobile payment efficiency for G2P and D2P payments.

A terminal evaluation of the project conducted in April 2016 concluded that the PPERW Programme had contributed significantly to the payment of Ebola response workers resulting in ending the epidemic in Liberia. The Allowances paid to ERWs have been used as source of income and help their families to face basics needs in a very difficult situation. It also concluded that the programme helped to strengthen the capacity of MoH to manage payrolls of Health Workers, with systems and process put in place to manage the cash transfer payments in similar crisis situations.

• **Delays or Deviations** – (*Please provide short justification for any delays or deviations*)

PPERW was designed in December 2014 to ensure that all workers receive payments due to them for performing their essential duties. However, issues with the actual payments systems, both policy and practice, have highlighted challenges in coverage, registration, and resilience of existing systems, particularly for non-pay-rolled workers. The issues have, in some cases, created tensions over non-payment, and bringing into question the sustainability of the current system, for example due to questions of harmonization of incentives and mainstreaming. A main challenge discovered in the first 12 months of its implementation was the weakness of the payment distribution system and the challenges of managing liquidity and moving cash outside of Monrovia, problematic for even the larger banks in the country. Because of these challenges, the project which was originally meant to close by September was extended twice, in September 2015 for three months to December 2015 and again to March 2016.

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

No. of Beneficiaries		
Women	4,161	
Girls		
Men	6,637	
Boys		
Total	10,798	

Environmental Markers
e.g. Medical and Bio Hazard Waste
N/A
N/A
N/A
N/A

Best Practice and Summary Evaluation (one paragraph)

The PPERW collaborated closely with the Ministry of Health to ensure that, through smart deployment of existing technologies and private sector partnerships, ERWs had control over their pay that the right workers got paid the correct amount as defined by the national policy, and that, within constraints of national systems, payments were delivered on time. With coordination mechanisms in place, UNDP worked with the MOH to establish and consolidate county level lists of ERWs, and led coordination on key policy issues related to the categories, incentives and identification of ERWs. At the end of the project in Liberia, where approximately 80 percent of health workers employed prior to Ebola were banked and already receiving regular payments, the PPERW tracked World Bank-funded incentive pay to ERWs as well as to newly hired response teams.

Lessons learned

UNDP implemented a highly innovative programme that combined inclusive finance, public health, and governance expertise. The PPERW demonstrated the ability to adapt to very different country contexts, where different governance arrangements and private sector capacities determined the available payment solutions. The PPERW also served as proof of concept – the viability of, mainstream financial sectors to deliver cash as part of a crisis response operation – in other words, to use technology to expand the digital ecosystem and increase coverage to those beyond the reach of the traditional banking sector. Another key lesson learnt relates to the unique mandate of the UN to both act and convene in response to epidemics. Planning scenarios in the early stages of the international response assumed that at least partial system breakdown was likely in relation to ERW payments. The unknown was where, when and with what consequence system failure would occur.

Another key lessons learnt is the need to have a clear exit strategy for the programme – to ensure that the institutional memory (on solutions, mechanisms, challenges, lessons learnt) is handed over to national authorities, who may undertake this function in future health crises. In addition, a clear communication strategy between donors and Responders is key to avoid mis-understanding and strikes as was experienced under the programme. Putting in strong mechanisms in place to avoid delays in payments of allowances for responders is also key as is maintaining a flexible and inclusive approach and regulate the

risk allowance policies depending on the outbreak dynamics. Establish a shared information payment platform between donors for more transparency and efficiency

All in all, the programme strengthened the capacity of MoH Staff to manage payrolls of Health Workers. Systems and process have been put in place to manage the cash transfer payments in similar crisis situations. In partnership with UNCDF, The programme has also supported the Digital Financial Services diagnostic which will help the country transitioning from post-crisis and reconstruction to more robust and resilient inclusive financial sector.

Story on the Ground

Celebrating the work of Volunteers in supporting the Payments programme

Seventeen (17) National United Nations Volunteers (NUNVs) under a UNDP Programme for Payments of Ebola Response Workers (PERWs) contributed immensely in the fight against ebola. They were identified and deployed throughout Liberia's fifteen Counties as Verification Officers and worked with the Government and partners in helping to support payments of Ebola response workers in the country. The UNDP PERWs programme is supported through the Multi-Partner Trust Fund (MPTF).

The UNV Verification Officers played an active role in following up on claims and reports of non-payment of salaries, allowances and/or hazard pay which may mean spending several days in remote field locations where accommodation options are limited, and other everyday conveniences are in scarce supply. They made recommendations for corrective actions when needed, based on the 'investigation' of the non- or late payment claim report, acted as contact persons for agencies just in case an EVD response worker had not been paid, as well as followed up on the lifecycle of each payment grievance from inception to conclusion, among others.

By the end of the project, a total of 578 complaints were reported by UNDP's 15 UNVs deployed across the country with 414 of the complaints addressed by the County Health Teams while 164 were elevated to the MOH central office and resolved. Among the 164 complaints that were elevated to the central MOH, 57.9% of them were made by men and 42.1% of them were women.

Today, the young UNVs are among those being celebrated in terms of their courage and dedication in successfully containing ebola and in helping to build public confidence in the Liberian healthcare system. They have helped restore a sense of national pride, accomplishment and unity amongst their compatriots. Their work highlights the resilience and strength of the Liberian people, helping to reduce stigma associated with recovered Ebola patients and their families in Liberia. This and other human stories relating to the programme can be found in the link below:

https://www.flickr.com/photos/unitednationsdevelopmentprogramme/sets/72157650768008355/

Report reviewed by (MPTF M&E Officer to review and sign the final programme report)

O Name: Ellora Guhathakurta

o Title: Planning, Monitoring and Evaluation Officer

o Date of Submission: 30/8/2016

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Signature: Ellora Guhathakurta