

UN EBOLA RESPONSE MPTF FINAL PROGRAMME NARRATIVE REPORT DATE: _30^{TH.} DECEMBER, 2018_

Project Number(s) and Title(s)	Recipient Organization(s)
#17- Title: Strengthening Logistics Capacity of	United Nations Development Organization (UNDP), Sierra
Directorate of Drugs and Medical Supplies	Leone
(Gateway ID) 00107937	Project Focal Point:
	Name: Samuel Doe
	E-mail: samuel.doe@undp.org
Strategic Objective & Mission Critical Action(s)	Implementing Partner(s)
SO 5 – Prevent Outbreaks	National counterparts: Directorate of Drugs and Medical
MCA 13: Multi-Faceted preparedness	Supplies of Ministry of Health and Sanitation, Government
WCA 13. Wulti-Paceted preparedness	of Sierra Leone.
Location:	Sub-National Coverage Area:
Sierra Leone (National)	All 14 Districts of Sierra Leone
Programme/Project Cost (US\$)	Programme Duration
Total approved budget as per project proposal document: MPTF ¹ :	Overall Duration (12 months) Project Start Date ² 29-11-2017 Originally Projected End Date ³ 30-06 2018
TOTAL: \$ 733,298.58	Actual End date ⁴ 30 09-2018 Agency(ies) have operationally closed Yes
	the programme in its(their) system
	Expected Financial Closure date ⁵ : 31 ⁻ 01-2019
Programme Assessment/Review/Mid-Term Eval.	Report Submitted By
Evaluation Completed	Name: Tanzila Sankoh
☐ No Date: No formal Evaluation was conducted	o Title: Acting Team Leader, Inclusive Growth and
	Sustainable Environment (IGSE).
Evaluation Report - Attached	o Date of Submission: 30 TH . December, 2018
\square Yes \square No Date: N/A	o Participating Organization (Lead): UNDP
	o Email address: samuel.doe@undp.org

¹ The amount transferred to the Participating UN Organizations – see MPTF Office GATEWAY

² 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.

³ As per approval of the original project document by the Advisory Committee.

⁴ 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.

⁵ Financial Closure requires the return of unspent funds and the submission of the Certified Final Financial Statement and Report.

Signature:	
Report Cleared By	
 Name: (Head of Agency) Samuel Doe Date of Submission 30th. December, 2018 Participating Organization (Lead): UNDP Email address: samuel.doe@undp.org 	
Signature:	

PROJECT/PROPOSALRESULT MATRIX

Project Proposal Title: St	rengthening logistic (Capacity of the Directorate of D	rugs and Medical Sup	plies		
Strategic Objective to						
which the project contributed	MCA 13: Multi-faceted preparedness					
Output Indicators	Geographical Area	Target ⁶	Budget	Final Achèvements	Means of verification	Responsable Organization(s).
# of scheduled delivery of drugs and medical supplies in 14 districts of the country	All 14 Districts in Sierra Leone	14 Delivery scheduled of medical supplies maintained	\$ 596,525	14	http://ayvnewspaper.com/inde x.php/news/item/5969-10- truckloads-free-health-care- drugs-off-to-bombali ⁷	Ministry of Health and Sanitation
Interaction with National drug supply maintained to ensure dispatch and delivery of drugs and medical Supplies	All 14 Districts in Sierra Leone	Each of the 14 District complete at least 1 delivery of drugs and medical supplies	\$ 13,852.89	14	http://ayvnewspaper.com/inde x.php/news/item/5969-10- truckloads-free-health-care- drugs-off-to-bombali ⁸	Ministry of Health and Sanitation
MCA[]						
Effect Indicators	Geographical Area (where the project directly operated)	Baseline ⁹ In the exact area of operation	Target	Final Achievements	Means of verification	Responsable Organization(s)
% availability of unexpired drugs and medical supplies in the PHUs	All 14 Districts in Sierra Leone	Number of vehicles available for distribution of Medical supplies to PHUs = 0	80% of PHUs in the country receive drugs and medical supplies on time	75%10	End of project evaluation was not done. This was not budgeted for in the project document.	Ministry of Health and Sanitation
% of PHUs facilities with improved stock of essential drugs and medical supplies	All 14 Districts in Sierra Leone	Number of vehicles available for distribution of Medical supplies to PHUs = 0	80% of PHUs, stock of medical supplies	70%11	End of project evaluation was not done. This was not budgeted for in the project document.	Ministry of Health and Sanitation

⁶ Assuming a ZERO Baseline

⁷ Regular engagement and dialogue facilitated the involvement of government ministers the distribution of drugs to the respective Districts

⁸ Regular engagement and dialogue facilitated the involvement of government ministers the distribution of drugs to the respective Districts

⁹ This was indicate in project document.

¹⁰ This data could not depict the national picture because only 70 PHUs were contacted for this information out of over 1350 PHUs across the country.

¹¹ The respective DHMTs are still faced the challenge of push system of distribution, some drugs are over or under supplied.

FINAL PROGRAMME REPORT FORMAT

EXECUTIVE SUMMARY

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)):

Due to bad road network in Sierra Leone and weak transportation capability of the Directorate of Drugs and Medical Supplies (DDMS), distribution of critical medically required health care commodities to the last mile Peripheral Health Units (PHUs) and Mother and Child Health Care Centers (MCHCs) had been extremely challenging, especially during the raining session. Because of this reason, over 75% of health care facilities in the country remain without drugs and medical supplies for several months during the year while on the other hand, the central facilities remain overstock with drugs which are not redistributed because of transportation limitations. The above situation often lead to expiration of drugs which also occupies the limited storage facilities in most of the district medical stores.

The strengthening logistics Capacity of the Directorate of Drugs and Medical Supplies project aimed at strengthening the transportation capability of the DDMS, by providing of road 4WD mini-trucks one per each district. There vehicles are to be used by the District Health Management Teams (DHMTs) to distribute drugs to remote or hard to reach health care facilities Likewise, the logistics team of the DHMTs will be enabled to conduct routine supervision, monitoring and provide supportive guidance and feedback to remote health care facilities across the country.

Narrative section:

• Key Achievements:

- Procurement of 15 vehicles completed and delivered to the Ministry of Health and Sanitation with temporal licensing provided.
- Completed assessment of drugs and medical supplies in 14 District Health Management Team offices in four (4) regions of the Country. A total of 79 Peripheral Health Units were assessed on the availability of drugs and medical supplies and information shared with the Ministry of Health and Sanitation, through the Directorate of drugs and medical supplies. The data provided, helped the ministry to re- arrange the distribution process and made provision for emergency stock out in the respective PHUs across the country. Drugs and medical supplies distributions have improved as compared to the previous years that experienced limited or no engagements and involvement of key community stoke holders and government functionaries in the distribution process. 75% of PHUs now receive drugs and medical supplies on time. At management level, the Minister of Health and Sanitation and the permanent Secretary where engaged and now have demonstrated firm commitment and involvement in the distribution process.
- To enhance inter agency collaboration, UNICEF had been one of the key supporting agency in the distribution of free health care commodities and were also engaged to ensure that the gaps identified such as provision of fuel and regular maintenance cost (which was not included in this project) can be addressed going forward. In this regard, the Ministry have ensured that the 15 vehicles are registered by the Ministry's general fleet and the local councils in the districts will be providing fuel and regular maintenance to ensure sustainability.
- As a result of regular the technical support provided to the central medical stores (CMS), an internal review of fleet management was carried out, which subsequently led to improved fleet management mechanisms put in place, for distribution purposes. A logbook for vehicle movement and a global positioning system (GPS) has also been enforced, for effective tracking and monitoring.
- An effective supply chain of drugs and medical supplies have been so far achieved, through UNDP's technical support. This was accomplished through regular meetings with the health working group and platforms comprising government agencies, NGOs and Civil society organizations involved in health care service delivery.

- **Delays or Deviations** (*Please provide short justification for any delays or deviations*)
- The strengthening logistics capacity project was proposed to end on the 30th. June 2018. However, based on delays experienced because of the electioneering process, the UNDP requested a non-cost extension of the project to September 30th. 2018. This was because of a lot of changes in government functionaries in the Ministry of Health who had prior knowledge of the project. Clearing of the vehicles form the ports, and Licensing also experienced protracted delays also as a result of the above-mentioned reasons.
- Procurement process for the vehicles delayed in the first quarter of 2018, due to administrative hiccups at the Ministry of Health and Sanitation. The administrative hiccups were however resolved when both the project team and MOHS officials mutually agreed on the specifications for drugs and other medical supplies to be procured.
- While the project intended to support the central medical stores on effective fleet management systems, through training and mentorship, it only managed to provide mentorship. This was as a result of resource constraints.
- Gender and Environmental Markers (Please provide disaggregated data, if applicable)

No. of Beneficiaries			
Direct Beneficiaries: Peripheral 1,235			
Health Units (PHUs)			
Indirect Beneficiaries	5,044,476		
Women			
	2,741420		
Men	2,303056		
Total	5,044,476		

Environmental Markers	
e.g. Medical and Bio Hazard Waste	
e.g. Chemical Pollution	

- Best Practice and Summary Evaluation (one paragraph)
- The project did follow all procurement best practices and procedures and also took into consideration negative environmental impact that may occur. The Ministry of Health have put in place fleet management plan including regular maintenance of all 15 vehicles to avoid excessive pollution.
- The project conducted a Project Quality Assurance and monitored progress to ensure that implementation is in line with UN strategic plan, government national priorities, social and environment standards are followed.

• Lessons learned:

- Involvement of the government in all aspect of the project created high level of acceptance and ownership.
- The project timeline was very short, considering international procurement timelines and the process involved in delivery, clearing, and licensing of vehicles.