

Joint SDG Fund
PORTOFLIO ON INTEGRATED POLICY AND LNOB

Joint Programme 2021 Annual Progress Report

Cover page

Country: Albania

Joint Programme title: Improving Municipal Social Protection Service Delivery

Short title: Municipal Social Protection

Start date: January 2020

End date: June 2022

RC: Ms. Fiona McCluney

Government Joint Programme Focal Point: Merita Xhafaj, Ministry of Health and Social Protection

Representative of Lead PUNO: Mrs. Monica Merino, UNDP Resident Representative

List of PUNOs: UNDP, UNICEF, WHO, UN Women

RCO Main JP Focal Point: Mrs. Azeta Collaku, Data Management and Results Monitoring/Reporting

E-mail: azeta.collaku@un.org

Lead Agency Main JP Focal Point: Entela Lako, Programme Specialist **E-mail:** entela.lako@undp.org

Contact person for Joint Communications: Mr. Guri Daco, Programme Communications and Advocacy Officer **E-mail:** guri.daco@un.org

Budget (Joint SDG Fund contribution): USD \$1,500,000

Overall budget (with co-funding): USD \$ 2,000,000

Total estimated expenditure (in USD, for the whole JP by 31 Dec 2021): **1,133,640.85 USD (75.58%)**

Total estimated commitments (in USD, for the whole JP by 31 Dec 2021): **1,356,451.47 USD (90.43%)**

Short description of the Joint Programme (max 1 paragraph):

UN JP “Improving Municipal Social Protection Service Delivery” SDG Funded focuses on catalyzing a step-change in the quantity and quality of delivery at local (municipal) level of integrated social care, as part of an effective integrated social protection system. It builds upon the vast experience of the UN in addressing social inclusion, protection and the needs of the most vulnerable groups including Roma, refugees and migrants, persons with disabilities, vulnerable children, elderly, rural women, and women at risk of Gender Based Violence. The programme supports the implementation of the newly shaped vision of the social sector in Albania, in line with Sustainable Development Goals (SDGs) and the country’s aspirations towards European Union (EU) integration. The programme avails of technical expertise and know-how of UN agencies aiming at allowing for greater impact and outreach by focusing on the municipal level and its linkage to the national level.

Executive summary

UN Joint Programme “Improving Municipal Social Protection Service Delivery” SDG funded contributed to **improving the quantity and quality of delivery at local (municipal) level of integrated social care**, as part of an effective integrated social protection system. The programme supported Ministry of Health and Social Protection (MHSP) move forward the implementation of the newly shaped vision of the social sector, in line with Sustainable Development Goals (SDGs) and the country’s aspirations towards European Union (EU) integration, so that vulnerable groups have access to integrated, quality social care services. To address inequity, exclusion and deprivation, six targeted municipalities plus eight additional ones are supported to identify and build key roadblocks that prevent progress across vulnerable local population segments and SDGs. IMSPSD UN Joint Programme was very successful at strengthening institutional capacities of the targeted municipalities (Puka, Devoll, Rogozhina, Skrapar, Polican, Fushe-Arrez, Kamza, Tirana through training and mentoring for the development of social care plans (4 trainings per each municipality, more than 60 municipality staff trained), **accessing the Social Fund** and to **use Management Information System (MIS) on social care services** (85 staff trained, 55% women). Municipal teams of the eight (8) above mentioned municipalities have been supported and capacitated to develop gender sensitive needs assessment, to analyse local budgets and map the existing services. All local social care plans are already adopted by municipal councils. Support also ensured **mainstreaming gender in the municipal social protection services and engendering their social care plans**. The improvement of management of integrated social services at local level is supported by the development of human resources and of organizations, including their processes, as well as by the **divulging, across Albania, good and innovative practices for providing social services and promoting social protection**. The programme supported the 6 municipalities in setting up social fund and modeling and delivering innovative and integrated health and social care services in implementation of social care plans.

The **Governance of the Integration of Social and Health Services at the local level was setup** through: the development of the relevant components of the National Health Strategy 2021-2030, the establishment of a Primary Health Care (PHC) Transformation team, with experts and representatives from key institution and development of a **FRAMEWORK AND MODEL OF INTEGRATED SOCIAL AND HEALTH SERVICES** has been developed. In order to create an **enabling local environment for the delivery of integrated social and health services**, initiatives to adjust the regulatory framework were taken: 6 municipalities (Tirana, Kamza, Rogozhina, Puka, Pogradec and Devoll) supported to design guidance note, workflows, protocols and effective mechanisms to implement improved integrated social and health care services; six (6) Orders were adopted by municipalities on the local administration of integrated social and health care services; Revision of the standards of the accreditation of Primary Health Care institutions; Development of the administrative and technical guidance for implementing and monitoring the revised standards of care; Development of the regulations, protocols and pathways for delivering integrated health and social services at the community level. In order to enable the access of people with disabilities and with other special needs to assistive medical devices, the methodology for the preparation of the list of reimbursed medical devices for outpatients was developed. **Models of delivery of integrated health and social care for marginalized groups of population were developed and piloted**, along with capacity building, such as: coordination/integration of TB services within Primary Health Care (Kamez, Tirana), care for elderly, care for persons with disabilities, care for remote communities, home visits, etc. **A grant scheme was developed with MoHSP and the 6 targeted municipalities to model and deliver integrated health and social care services.**

The programme **addressed the multidimensional impact of COVID-19**, in line with the original focus of the action and supported local government institutions protect the needs and rights of people living under the duress of the pandemic through: (i) 6 Small-grants projects in partnership with local NGOs; (ii) Social mobilization campaign to mark Int'l Romani Day and to attract society's attention on the additional challenges faced by the minority during the COVID-19 pandemic. (iii) Emergency food assistance and hygienic items to 4900 individuals (2842 F/ 2058 M) from vulnerable and disadvantaged groups. (iv) Humanitarian Cash Transfers (HCT) piloted in 3 municipalities (Korce, Durres, Shkoder) supporting with multipurpose basic needs cash about 570 households with no income (v) support to three municipalities (Durres, Lezha and Berat) to provide information on cash assistance and social protection entitlements to vulnerable families and children.

With the aim to upgrade community social services facilities for providing new inclusive social and health care services with the focus on vulnerable groups, **a new multifunctional community center is being built** in Devoll municipality while municipality of Kamza is being supported to adapt a current center and furnish it.

IMSPSD has successfully contributed to the **empowerment of vulnerable groups and persons to actively participate in decision making and make institutions accountable** through a range of measures linked to advocacy and awareness raising, capacity building of civil society organizations, local networks and consultative structures to promote participatory social policy planning and monitoring process, as well as facilitated access to integrated health and social protection services for final-users/beneficiaries at the local level. The Joint Programme through municipal and NGO run services provided improved social protection services in total to 10533 beneficiaries (5791 F/4477 M / 265 LGBTI) 3858 Roma and Egyptians, 1493 persons with disabilities, 654 elderly, 1732 children and others.

Result 1: Improved quantity and quality of delivery at local (municipal) level of integrated social care with focus on the most vulnerable groups as part of an effective integrated social protection system.

Estimated rate of completion as of 31 Dec 2021: **85%**

Result 2: By 2022, 6 municipalities will provide integrated social care improving the wellbeing of 85% of people in need and additional 27 municipalities will increase capacities to serve vulnerable groups with access to basic services (through adopted and financed local social care plans).

Estimated rate of completion as of 31 Dec 2021: **85%**

I. Overall progress and priority, cross-cutting issues

I.1 Context and the overall approach

Ensuring an adaptive and strategic JP

The Government of Albania has continued to implement the National Strategy for Social Protection 2021-2023. Overall, and despite the challenges posed by the COVID-19 pandemic, the Ministry of Health and Social Protection and the 61 municipalities continued to show their commitment to social sector reforms and delivered tangible and sustainable results in integrated social care services. Social protection budgets at the central level have steadily increased in nominal terms but have decreased in relative terms. The pace of growth of general government expenditures has been faster than the increase in social protection expenditures during the recent years (23.542 mill ALL in 2019; 23.987 mill ALL in 2020). Local government expenditure on social care services has steadily increased (2.10% in 2019; 2.30% in 2020). UN JP “Improving Municipal Social Protection Service Delivery” contributed to increase investment in the development of new social care services (1- Mobile services; 2- Integrated health and social care services; 3- Specialized services) and widen geographical coverage in terms of municipal intervention (6 municipalities) and in terms of expanding existing services to new rural and distant areas/ neighborhoods. Also, the UN JP IMSPSD during the last two years brought improvement of the outreach and coverage of social care services. The theory of change and expected results of the joint programme remained strategic and valid during 2020-2021. The Joint programme supported Municipalities to be able to provide integrated social care services and social protection to all girls, boys, men and women that are most at risk of being left behind. Intervention happened at multiple levels including: (i) assisting with institutional arrangements and coordination mechanisms with clear roles; (ii) strengthening institutional capacities through training and mentoring for the development of social care plans and , budgeting the plans and resourcing the Social Fund with funds from local revenues and central social protection budget; (iii) piloting innovative models of integrated social care services, including identifying local linkages between health and social protection services. (iv) empowering vulnerable groups to request services from authorities, hold them accountable and establish a culture of mutual decision-making (v) assisting with a cost analysis of social protection needs.

Link with UNDAF/ UNSD Cooperation Framework

The place holder in the Albanian UNDAF framework for this joint programme is the Outcome 2 Social Cohesion – Output 2.3 Social Inclusion and Protection. In line with the UNDAF architecture, the implementation of this joint programme was carried out by the involved UN Organizations following the Delivering as One approach - ensuring a cohesive coordinated UN approach, through internal coordination (Joint Work Plans) and operational mechanisms, in targeting six different municipalities and rolling out the best practices at the national level. The results of this joint programme contributed to strengthening and making more evident the results attained in the Outcome 2/ Output 2.1 of the Albania UNDAF, credited also to the alignment of JP Results Framework with the UNDAF output 2.1 framework (UNDAF JWP Outcome 2). Results are included in the UN Annual Progress Report, disseminated to all partners, published in UN Albania website and communicated widely through UN Albania social media channels. The results attained serve to increase visibility of UN’s work in Social areas, public administration and local governance in the country, strengthen further the UN’s dominant comparative advantage and strategic positioning of the UN agencies development work vis-à-vis other development agents in these areas, as well as increase the importance of UN Albania as a key ally and partner to the government. By merging the comparative advantages of different UN organizations in these areas, the UN in Albania can provide tailor-made support in addressing the needs of the most vulnerable, disadvantaged or those who are at risk of social exclusion in the country. Challenges identified by this joint programme feed into (strengthen) UNCT advocacy and action (national and local level) to promote sustainable development and SDG attainment in the country, conducted regularly with government and all partners under the UNDAF framework. The role of this joint programme is important for promoting SDG progress within Albania’s policy processes and dialogue. Both results and challenges from this joint programme feed into (strengthen discussion and evidence) the higher-level coordination forums, such as the Integrated Planning and Management Group on Employment and Social Sector facilitated by Ministry of Health and Social Protection and/or other thematic/sectorial foras, as well as to the preparation of the new Cooperation Framework (i.e. these areas will continue to have UN focus during 2022-2026 as well).

COVID-19 impact

In Albania, the pandemic has affected important aspects of the economy, society and way of living and is expected to have prolonged effects over the well-being of citizens and healthcare and social protection systems adequacy. The impacts of the pandemic disproportionately impacted the most vulnerable, especially women in the informal economy. The UN JP commissioned an assessment report which found out that increased poverty and inequality are matched by increased isolation, social exclusion, new forms of vulnerability and a

considerable increase in psycho-social stress factors at the same time as community-based services, already inadequate pre-COVID, face massive constraints in terms of their operation. This assessment indicated that the main groups in need, are similar across municipalities and do not present major departures from the pre-pandemic period, ranging from families in the social assistance scheme, to families with members with different disabilities and elderly people living alone. However, the number of individuals and households in need increased dramatically in all municipalities, while new challenges emerged in particular with regard to access to education for children and youth; additional challenges for members of ethnic minorities and informal workers as a result of disrupted livelihoods, as well as the need for stress management and psychological support for many other members of the communities. The COVID-19 pandemic exposed the systemic weaknesses of the health and social care systems. The access to care for conditions other than COVID-19 was problematic for most of the people, and to a higher degree for the marginalized ones, at different stages of the pandemic. Despite the negative consequences of the crisis, public institutions, civil society and local communities mobilised and engaged to help with the adapted service provision and recovery. The government marshalled social protection programmes and labour market crisis response and stimulus packages to protect people’s health, jobs and incomes, and to ensure social stability. However, recovery trends in Albania are deeply uneven, spurred by the fiscal capacity and ability of the government to respond, supply chain failures, a growing digital divide, and the threat of a looming debt crisis.

Pursuant to the consultation and feedback received by steering committee members, the technical committee of the joint programme amended the workplan for the year 2020 due to COVID-19 with no-cost extension; with slight adaptation of some of the existing activities reflecting the COVID-19 additional barriers and challenges to be addressed; with small changes between budget lines, below the 20% limit within output level budget planned. IMSPSD repurposed activities provide a concerted, collaborative and all-inclusive effort to address the multidimensional impacts of the COVID-19, and to protect the needs and rights of people living under the duress of the pandemic, with focus on the most vulnerable groups, and people who risk being left behind. All the repurposed activities are already completed including an assessment on the extent to which COVID 19 has challenged and impacted the rights of families and children to social inclusion and social protection. “Lessons learnt”, “good practices” and “building back better” cycles have been supported during the COVID-19 response, specifically regarding the integrated care for the most vulnerable families.

The programme addressed the multidimensional impact of COVID-19, in line with the original focus of the action and supported local government institutions protect the needs and rights of people living under the duress of the pandemic through: (i) 6 Small-grants projects in partnership with local NGOs; (ii) Social mobilization campaign to mark Int’l Romani Day and to attract society’s attention on the additional challenges faced by the minority during the COVID-19 pandemic. (iii) Emergency food assistance and hygienic items to 4900 individuals (2842 F/ 2058 M) from vulnerable and disadvantaged groups. (iv) Humanitarian Cash Transfers (HCT) piloted in 3 municipalities (Korce, Durres, Shkoder) supporting with multipurpose basic needs cash about 1700 households with no income. The SDG funding contributed mainly for 570 families in Korca, which have not benefitted from any financial support established by the government.

Beneficiaries of emergency food assistance and hygienic items:

Total # HH supported	R&E Families	%	Families of children with disabilities targeted	%	Other vulnerable groups	%	Women head of HH	%
980	537	55%	182	19%	261	26%	392	40%

I.2 Update on priority cross-cutting issues

UN Development System reform - UN coherence at the country level

Implementation of the programme is undertaken by the UN agencies in close cooperation and dialogue with partner organisations and stakeholders on the Albanian-side: central and local government, social service providers, and CSOs. The approach of the programme implementation builds on local ownership and developing the capacities of municipalities to develop appropriate technical outputs/ solutions, and to utilise and absorb

the programme results. The results of this joint programme contributed to strengthening and making more evident the results attained under the new cooperation agreement with the Government of Albania, Outcome 1 "Human Capital Development"; output 1.1. Social Protection in the framework of the Albania-UN Sustainable Development Cooperation Framework 2022-2026.

Going beyond "business as usual" to produce catalytic results at scale

The joint programme has gained the political will to allocate the necessary financial resources to ensure no-one in need of social protection is left behind; Vertical dialogue between Central and Local Government has already been recognised for the establishment of a system of integrated social care services at the local level.

The central government revised draft medium-term budget 2020-2022 to provide enough coverage to fund the Social Fund. Actions supported through the SDG funding informed national policies and systems. The Integrated Planning System (IPS) introduced by Government of Albania in the last few years is the main system to set the tools and mechanisms for integrated public policy planning by providing an effective allocation of financial resources. The government has committed to revitalize the Integrated Policy Management Groups (IPMGs), including the thematic group for Inclusion and Social Protection. The purpose of the thematic groups is to steer cross sectoral cooperation at technical level and with development partners, within the specific sectors of the respective priority area.

As the Albanian authorities are moving from the strategy and legislation development phase to the implementation process, with the support of the joint programme a number of challenges are addressed. These include: 1. Lack of political interest in social care services. 2. Weak civic engagement and participation. 3. The need to consolidate financial mechanisms at the local level. 4. Gaps in availability of detailed operational procedures describing the action of state institutions in charge of planning, administering and monitoring social care services. 5. The decentralisation process and the amalgamation of municipalities is not accompanied by capacity building strategies. 6. Weak governance systems at the local level to respond to new and broader responsibilities as the result of decentralisation and social care reforms. 7. Weak capacities, financial and technical, of Central Government and LGUs to sustain the models of social services over time. 8. Low level of intersectoral and cross-sectoral cooperation between central and local governments and intra-governmental cooperation.

SDG acceleration

As both results and challenges from this joint programme contributed to strengthen discussion and evidence the country's higher-level coordination forums and/or thematic/sectorial foras, the programme plays an important role to promoting SDG progress within Albania's policy processes and dialogue. Moreover, it has contributed to providing an increased leverage to the UN in pushing SDG dialogue forward. Through implementation of this joint project, the UN is seen as a key ally for promoting SDG progress at local level: strengthen local ownership of the SDGs - "reading" SDGs in the local language and narrative, as well as supporting local "SDG transformers", such as civil society and the private sector, among others. This joint project reinforces the UN being viewed as the primary entity in charge of following up on SDG nationalization and localization processes in Albania. With regard to the global policy framework for international development, the "2030 Agenda for Sustainable Development", the IMSPSD programme identifies linkages for its contribution to supporting Albania's progress in achieving the SDGs 1, 3, 5, 10, 16 (no poverty, good health, gender equality, reduced inequalities, peace, justice, and accountable institutions). The UN Joint Programme "Improving Municipal Social Protection Service Delivery" has catalyzed the integration of the SDGs at subnational levels. LGU have been supported in starting policy dialogues around these issues and in scaling-up efforts to ensure that the most vulnerable groups in the populations have access to quality health and social protection services.

Driven by the Agenda 2030, the UN JP IMSPSD supported integrated social care service delivery approach, drawing on mutually reinforcing "levers" to examine, empower and enact change, to ensure "no one will be left behind" and to "endeavor to reach the furthest behind first", To address inequity, exclusion and deprivation; the six programme targeted municipalities were supported to identify and build key roadblocks that prevent progress across vulnerable local population segments and SDGs. The programme is housed under Output 2.1, with linkages to other UNDAF outputs addressing gender equality, human rights, prevention of violence against women, child protection and support for refugees and migrants. Its interventions followed directly one of the three accelerators identified by the Albania MAPS report 2018: "the biggest weaknesses in Albania's social protection system may lie not its social assistance or insurance programmes, but in its social care components."

In the framework of the UN Joint Programme “Improving Municipal Social Protection Service Delivery”, during 2021 was measured for the first time in Albania the SDG indicator 1.3.1. “Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, newborns, work injury victims and the poor and the vulnerable”. Based on the findings of this exercise, the proportion of persons effectively covered by a social protection system, including social protection floors is 54%, while the proportion of the total population receiving cash benefits under at least one of the contingencies (contributory or non-contributory benefits) or actively contributing to at least one social security scheme is 70%.

Policy integration and systems change

The improvement of management of integrated social services at local level by the joint programme is supported by the development of local human resources and of organizations, including their processes, as well as by the divulging, across Albania, good and innovative practices for providing social services and promoting social protection. The programme efforts to bring together policies across social protection and health care sectors and institutions served to “break down the silos” and produce coherent systemic change. IMSPSD Joint programme has adopted innovative approaches towards learning and sharing with the aim of expanding the new knowledge and instruments. The implemented capacity building activities served to advance: Knowledge and skills acquisition; Networking; Sharing experiences and peer to peer collaboration; Learning about practical actions and best practices; Practical policy integration and coherence.

Output 3 of the UNJP supports the development of innovative models of integrated social care services piloted, including establishing local linkages between health and social protection services. Six pilot projects have been established in Tirana, Kamza, Puka, Rogozhina, Pogradec and Devoll. The six pilot municipalities have developed detailed local plans for the development of integrated social care services which will be supported under the UNJP. The six municipalities have proposed a range of different approaches and address a number of different target groups including people with physical disabilities, children with disabilities and families, and older people. The projects, however, all reflect a common approach (the Integrated Care Development Model (ICDM) model) and share a number of key features in the development of integrated services which are in line with learning developed in other European countries.

These include among other:

A multidisciplinary approach – A key element of the provision of integrated services is a multidisciplinary approach with services being provided by teams of service providers from a range of different professional backgrounds. For example, the Pogradec pilot (which focuses on services for pre and tetraplegic persons) is establishing teams involving a physiotherapist, nurse and social worker. Similarly, the Kamza and Puka pilots (which focus on children with disabilities) provide integrated services through teams including a nurse, speech therapist, physiotherapist, psychologist and social worker.

An intersectoral approach – Equally in order to ensure a fully integrated approach (and to support a multidisciplinary approach) it is important that the key agencies should work together in a structured manner. For example, the Rogozhina pilot has developed a cooperation agreement between the Municipality and the Directorate of Public Health for the integration and coordination of social and health services to optimize the care of the elderly.

Health in All Policies approach – A distinctive feature of the project implementation has been the Promotion and advocacy for a Health in All Policies approach and establishment of a legal framework for the approach to guarantee collaboration and coordination among the different sectors and institutions on health and well-being issues and to implement the approach effectively.

Capacity building – Given that the provision of social care services in Albania is in the process of development and that the provisions of integrated services is also at an early stage, it is essential to provide capacity building (on an ongoing basis) to all those involved in the provision of services. All of the pilot projects are providing capacity building both in relation to the provision of services (e.g. training in how to provide specialised services) and also in relation to how best to adopt an integrated and multidisciplinary approach including case management.

Contribution to improvement of the situation of vulnerable groups

Key beneficiaries of the joint programme, as identified jointly with Municipalities, include Roma and (European) Egyptian populations; persons with disabilities; vulnerable children; women at risk/victims of violence; isolated/poor rural women; elderly; refugees and migrants. These target groups are reached via municipalities’ social services departments and CSOs providing integrated social services and representing the interest of the marginalised and vulnerable. More broadly, the final beneficiaries of IMSPSD are all citizens/ residents in

Albania whom indirectly benefit via the improved and innovative integrated social services. The Joint Programme provided integrated services to 10533 beneficiaries (5791 F/4477 M / 265 LGBTI) 3858 Roma and Egyptians, 1493 persons with disabilities, 654 elderly, 1732 children and others. Over 700 women from vulnerable communities were reached out through participatory budgeting initiatives (54% from rural areas, 10.9% from Roma Community, 2,7% with disabilities, 60% of all participants were unemployed). Approximately 300 vulnerable women and young girls have benefited from training and awareness events, with a clear understanding of GRB and have defined a list of selected gender-responsive priorities in each of the areas for voicing their needs in the participatory planning and budgeting processes. Approx. 20% of concerns raised and voiced by vulnerable women were discussed with Municipalities to become priorities in the future budget of municipalities.

Vulnerable communities and their organizations, one in each target municipality (Tirana, Puka, Rogozhina, Devoll, Pogradec and Kamza) are supported with competitive grants to uphold their rights and hold local institutions accountable for delivering social services. These initiatives have been also serving to support the development of social service provision at the local level benefiting PWDs and R&E. 539 individuals of whom: 312 females (58%), 226 males (42%), 95 Roma and Egyptians, 57 persons with disabilities, 249 elderly, 30 persons with chronic disease, and 48 others. A new model of cash plus has been piloted in three municipalities (Durrës, Lezha and Berat). More than 600 families with children that receive cash assistance have been supported with information and referral to other support services which do address their multiple material deprivations. The families have received information about how to access additional subsidies and top-ups to cash assistance, so as how to access important care services which are available and prioritised for families under cash assistance.

- Estimated number of individuals that were reached through JP efforts in 2020-2021:

Total number 10533

Percentage of women and girls: 55%

Mainstreaming Gender equality and women empowerment

The Project's overall Gender Marker Score is 2. Since the inception of this project the context analysis took into consideration gender analysis and in a major part underlying causes of gender inequality and discrimination in line with SDG priorities including SDG 5. Although the programme does not contain any gender-targeted output, outputs per se contain specific targeted interventions where the principal purpose was to advance gender equality and the empowerment of women, with a clear link to the SDGs gender indicators, including SDG 5. Reference can be made to interventions related to work with all 6 target municipalities to ensure that their plans and budgets respond to the needs of vulnerable women and girls. Awareness raising activities were conducted by the project with the sole beneficiaries vulnerable women and girls and with target their access to social care systems. Approximately 700 vulnerable women and young girls have benefited from training and awareness events of the project and overall women constituted 55% of individuals that were reached through the JP. PUNOs have constantly and repeatedly cooperated with governmental agencies that foster gender equality, respectively Ministry of Health and Social Protection that leads Gender Equality work in the country, and Ministry of Finance and Economy that leads work on Gender responsive Budgeting in the country. Additionally, the program has expanded exchange and cooperation with the parliamentary Sub-Commission of Gender Equality and Prevention of Violence Against Women on expenditure monitoring through gender lenses and engaged repetitively with the National Women's Machinery in receiving recommendations on women inclusion in social care services at local level and respective funding mechanisms. The programme has contributed to substantively strengthen local government participation and engagement in gender related SDGs localization by supporting municipalities and MoHSP to track gender budget allocation (SDG5c1). The Joint Programme through municipal and NGO run services provided improved social protection services in total to 10533 beneficiaries (5791 women and 265 LGBTI). A strong cooperation has been developed with women municipal councillors in the 6 target municipalities to review budgets with gender lenses and propose specific recommendations in the local budgets for addressing challenges encountered by vulnerable women and girls living in their communities. Finally the program has engaged in a series of interventions with women rights CSOs, but also raised their capacities to act as watchdogs of municipal budgets dedicated to women and girls social needs. So, we can conclude the programme has contributed substantively to strengthen GEWE CSO participation and engagement in gender equality and women empowerment

Estimated % of overall disbursed funds spent on Gender equality and Women empowerment by the end of 2021: OVER 50%

Human rights

The implementation of the programme benefited from high level support – Minister of MoHSP – periodic reviews (through meetings of the Joint Steering Committee) and cooperation and coordination with all partners to ensure sustainability in meeting human rights obligations. Evidence and findings from JP implementation substantially facilitated the reporting process - both Albanian’s reports are submitted to monitoring bodies and when findings and recommendations of such bodies are dealt with. The JP attributed to building capacities of municipal level staff to institutionalize social and health services which meet human rights standards, put the last first and empower excluded groups to claim their rights. Programme actions followed recommendations coming from human rights treaties, including those recently reviewed such CEDAW, GREVIO; or UPR, CRPD and CRC.

Partnerships

The programme is working closely with central government entities, municipalities, the vulnerable groups and the civil society organisations to further advance the protection at the local level in Albania. The Government of Albania is supported by the UN Programme of Cooperation for Sustainable Development (PoCSD) 2017-2021, guided by a rights-based and inclusive approach and fully aligned to country strategic priorities. One of the four outcomes (Outcome 2) focuses on social cohesion: Health, education, social protection, child protection, and gender-based Violence. Other donors, such as the EU, WB, GIZ, Italian Cooperation, Austrian Cooperation, USAID and Swiss Development Cooperation (SDC) are consulted regularly by the joint programme.

Mobilizing additional funding and/or financing

- Following the innovation and programmatic approach tested by IMSPSD joint programme, UNDP leveraged additional funding for a similar action on post earthquake social protection response in Albania.
- Gender responsive participatory budgeting initiatives conducted in the six target municipalities have led to number of issues raised by women to be considered and adopted by municipalities, with a rate of 39% matching between number and type of proposals by women with the adopted priorities at local level.
- 6 LGUS have been coached on mainstreaming gender in their MTBPs to ensure budget allocations consider needs of women and men in their communities, with specific focus on social protection and care services. During the first year of the project, LGUs were supported on gender mainstreaming in local public finances through the application of GRB as a tool. In the next phase the programme further supported LGUs to engender their MTBPs, leverage additional allocations for advancing gender equality and include gender key performance indicators to monitor progress. For instance Municipality of Rrogozhine has substantially improved coordination and information sharing between the structures of social services and budget and finance departments with the purpose to budget missing social services for women and girls. Puka Municipality approved the new social housing plan and introduced specific criteria for the social housing program in order to be more inclusive of vulnerable women, women head of households and women victims of domestic violence.

Strategic meetings

Type of event	Yes	No	Description/Comments
Annual JP development partners'/donors' event*	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The UN Joint Programme "Improving municipal social protection service delivery" organized a partners' meeting on 2 April 2021 to involve partnership and open the dialogue on Advancing social protection in Albania (in the context of COVID-19).
Other strategic events	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The Joint SDG Fund Secretariat convened the fifth Peer Review Session for Joint Programmes (JPs). Participants included JPs that maintain a core focus on social care services, as well as UN agencies playing a key role in the field. The session contributed to the learning community, as Albania had a particular intervention on integrated service delivery at the municipal level, with a particular focus on integrated social care and health care services' linkages. The objective was to address the context-specific challenges in Albania, while reinforcing lessons that could be more universal.

Innovation, learning and sharing

The sustainability of the Programme's investments and effects and the scaling-up of successful practices and innovations are a constant concern of the Joint Programme. Several approaches and methods are applied to contribute to innovation and the durability of the Programme's interventions: Full alignment of actions on national policies and strategies; Investments in actors, processes and persons through coaching and training; and Promotion of community based social services bringing innovation. The Programme is increasing capacities of the existing state structures and civil society organizations to implement strategies and to provide services by calling their attention on innovation. Also, implementation of several actions, e.g. trainings and coaching is being done differently, online now due to Covid-19 situation.

II. Annual Results

Overall progress

- On track (expected annual results achieved)
- Satisfactory (majority of expected annual results achieved)
- Not-satisfactory (majority of expected annual results not yet achieved)

Please, explain briefly:

The Joint UN Programme "Improving Municipal Social Protection Service Delivery" (IMSPSD) SDG funded continued to consolidate results during 2020 - 2021. Initiatives and partnerships were leveraged, institutional capacities of municipalities strengthened while implementing models of integrated social services strengthened with [10533 direct beneficiaries (5791 F/4477 M / 265 LGBTI) 3858 Roma and Egyptians, 1493 persons with disabilities, 654 elderly, 1732 children and others] enjoying improved integrated services.

Contribution to Fund's global results

- ⇒ **Contribution to Joint SDG Fund Outcome 1 (as per annual targets set by the JP)**
 - Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

The joint programme has established cross sectoral approaches on integrated social and health care services, which were not present before, to address gaps in national social protection systems while leveraging the comparative advantages of Participating United Nations Organizations. Through support to policy formation and capacity development, the joint programme has directly and indirectly contributed to expanding social protection coverage to an additional 10533 people, reaching those otherwise left behind - especially women, persons with disabilities, Roma and Egyptians, children and other groups.

The Joint Programme supported 6 municipalities (Tirana, Kamza, Rogozhina, Puka, Pogradec and Devoll) to design Local Social Care Plans, guidance note, workflows, protocols and effective mechanisms to implement improved integrated social care services. Technical assistance has been provided on a set of organizational, managerial and technical knowledge, skills and competences for planning, budgeting and monitoring social care services. A FRAMEWORK AND MODEL OF INTEGRATED SOCIAL AND HEALTH SERVICES has been developed. Through tailored training and coaching, the framework provided knowledge and skills to municipal officials on definitions on integrated care, adequate processes, workflows, protocols and effective mechanisms to ensure administration of integrated social care services; it provided revised and updated terms of reference, job descriptions and responsibilities of the teams and officials for social care services planning and management. The framework also outlines steps to support professionals who work to meet people's health and care needs, by proposing innovative ways of working together and explores joined-up policy and practical responses to support target populations (e.g. elderly, persons with disabilities, Roma and Egyptians etc.). The joint programme developed training and coaching materials for staff of LGUs and local teams on the implementation of new regulations. A two-day long training took place during May-June 2021 in each of the municipalities (90 participants in total/ 82% Female and 18% Male) and coaching materials for staff of LGUs and local teams on the implementation of new regulations were provided. Following this process, municipalities of Kamza, Pogradec and Puka developed guidance notes (3 guidance notes) on the administration of integrated social care services. While six (6) Orders were adopted by municipalities on the local administration of integrated social and health care services. Through Budget Brief designed by each municipality, the programme supported the capacities of national, regional and local government relevant units into better planning and managing Social Fund for social care services as part of the overall budget planning and monitoring processes. MHSP recently doubled the cash assistance for families with 3 children and more and tripled the cash assistance amount for specific categories: women victims of trafficking, victims of DV and orphans.

While there is not due to any specific activity under the programme, UN has strongly advocated to maintain social spending. UNICEF and UNDP following the assessment of social protection measures during COVID19 made a clear recommendation in the national workshop that the doubling of the cash assistance was useful and necessary and one of the clear and loud recommendations was to maintain the same amount of spending.

The budget for social protection has increased by 8% in nominal terms, although as % of GDP has decreased. 10.10 % of GDP was for social protection in 2020 as opposed to 9.90 % of GDP in 2021. This is because of the slowed growth during 2020.

⇒ **Contribution to Joint SDG Fund Output 3 (as per annual targets set by the JP)**

- Integrated policy solutions for accelerating SDG progress implemented

The cross-sectoral local policy solutions are leading towards progress in multiple SDGs (1,3,5,10,16) and additional resource commitments, especially related to COVID-19 recovery.

The followings include social protection schemes/programmes introduced/adapted in 2020-2021 that lead towards progress in multiple SDGs (1,3,5,10,16) because of IMSPSD Joint Programme implementation:

1. Puka municipality: Providing mobile Integrated Social and Health Services for children with disabilities in rural areas
2. Pogradec municipality: Integrated health and social service for individuals with mobility problems
3. Kamez municipality: Integrated health and social service for children with disabilities in Municipality of Kamez
4. Devoll municipality: Devoll Ability Recovery (D.A.R) model
5. Tirana municipality: Mobile and Community Mobile Family Service in Rural Areas
6. Rrogozhina municipality: Cares for the Elderly

JP Outputs and Outcomes

Output 1. Integrated social care services institutional arrangements and coordination mechanisms functional with clear roles and responsibilities at local level in 6 municipalities.

Through tailored training and coaching, the programme provided knowledge and skills to municipal officials (Tirana, Kamza, Rrogozhina, Puka, Pogradec and Devoll) on definitions of integrated care, adequate processes, workflows, protocols and effective mechanisms to ensure administration of integrated social care services; it provided revised and updated terms of reference, job descriptions and responsibilities of the teams and officials for social care services planning and management. A two-day long training took place during May-June 2021 in each of the municipalities (90 participants in total/ 82% Female and 18% Male) and coaching materials for staff of LGUs and local teams on the implementation of new regulations were provided. Following this process, municipalities of Kamza, Pogradec and Puka developed guidance notes (3 guidance notes) on the administration of integrated social care services. While six (6) Orders were adopted by municipalities on the local administration of integrated social and health care services. Through Budget Brief designed by each municipality, the programme supported the capacities of national, regional and local government relevant units into better planning and managing Social Fund for social care services as part of the overall budget planning and monitoring processes. During 2021 the programme supported the six targeted municipalities to establish and make functional Covid 19-related local intersectoral coordination groups on integrated social care services with representation of related public and private local institutions. The programme addressed the multidimensional impact of COVID-19, in line with the original focus of the action and supported local government institutions protect the needs and rights of people living under the duress of the pandemic through: (i) 6 Small-grants projects in partnership with local NGOs; (ii) Social mobilization campaign to mark Int'l Romani Day and to attract society's attention on the additional challenges faced by the minority during the COVID-19 pandemic. (iii) Emergency food assistance and hygienic items to 4900 individuals (2842 F/ 2058 M) from vulnerable and disadvantaged groups. (iv) Humanitarian Cash Transfers (HCT) piloted in 3 municipalities (Korce, Durres, Shkoder) supporting with multipurpose basic needs cash about 1700 households with no income. The SDG funding contributed mainly for 570 families in Korca, which have not benefitted from any financial support established by the government. About 80 social welfare staff (63 women and 17 men) in three other municipalities (Durres, Lezha and Berat) have been trained on a new methodology and model in support of families receiving cash assistance enabling them to provide information and support to both cash and care. This is a new model that has been piloted and is being documented for further application. The model supported by UN JP IMSPSD could be a great example of how municipalities can better address the holistic needs of poor and vulnerable families and ultimately play their role into providing integrated social protection.

Output 2. Institutional capacities strengthened through training and mentoring for the development of social care plans and accessing the Social Fund.

The capacities of social care service providers have been enhanced via a number of practical training actions for development of social care plans and accessing the social fund, while support is being provided to review or update university curricula on social work (pre-service and in-service skills and qualifications). To address inequity, exclusion and deprivation, the six targeted municipalities plus eight additional ones are supported to identify and build key roadblocks that prevent progress across vulnerable local population segments and SDGs. IMSPSD UN Joint Programme was very successful at strengthening institutional capacities of the targeted municipalities (Puka, Devoll, Rogozhina, Skrapar, Polican, Fushe-Arrez, Kamza, Tirana through training and mentoring for the development of social care plans (4 trainings per each municipality, more than 60 municipality staff trained), accessing the Social Fund and to use Management Information System (MIS) on social care services (85 staff trained, 55% women). Municipal teams of the eight (8) above mentioned municipalities have been supported and capacitated to develop the needs assessment, to analyse local budgets and map the existing services. All local social care plans of municipalities are already adopted by municipal councils. To date, of the 61 municipalities in Albania, 51 now have an approved local social care plan, while the rest are in the process of drafting. Work for engendering social care plans has been crucial, focusing on desk review and data collection on social protection services to identify entry points for mainstreaming gender in the existing or new social care plans. MoHSP is supported to make functional MIS on social care services as part Social Protection System. The programme supported the government to identify and validate with national stakeholders the set of indicators that will be collected, inputted, and processed in the system according to the existing legislation on case management practices and social care services delivery. Following selection of indicators, training materials will be developed and capacity building is provided to staff of municipalities.

6 LGUs were supported to mainstream gender in the municipal social protection services and engender their social care plans. Assessment of the local social plans was conducted with the aim to identify the extent to which they reflect social vulnerabilities of women and girls, but also their alignment with National strategic priorities for advancing gender equality and social protection. Based on series of consultations and training exercises with relevant local administration, specific recommendations and guidance was provide for engendering of the newly developed or existing social care plans in the six municipalities, expecting their final integration in the next phase of the project. Following the spread of COVID-19 pandemic a Gender Rapid Assessment for COVID-19 was conducted to assess the impact of coronavirus pandemic on main challenges faced by women and men and how the changing situation is affecting women and men economic situation and livelihood. The programme continued its support at the local level in using GRB as a tool to advance gender equality and ensure that women's needs are incorporated in local social protection policies and related budgets. The ultimate aim was that the targeted municipalities, Skrapar, Polican, Rogozhine, Pogradec, Fushe-Arrez and Puka, plan and implement budgets and programs that take into account the needs of men and women, girls and boys and various groups including those most vulnerable. In this frame UN Women supported the 6 target Municipalities in improving the delivery on national legal and policy commitments related to gender equality by applying GRB and to effectively address the needs of women and girls, with specific focus on socially excluded groups. There were 118 (96 Female and 23 Male) municipal staff that trained.

Trainings delivered to municipal councils- The trainings with the Municipality Councils were conducted online during October 2021. The municipal councils were grouped in reflection to the main findings of the analyses of the MTB of the municipalities. There were 27 Municipal Council members (21 Females and 6 Males) that were trained. The councilors were from different commissions and representative of Women Councilors Alliance, as Although participation was limited especially due to technical issues the representatives of Municipality Councils from Pogradec, Skrapar, Poliçan, Puka, Fushe Arrez and Rogozhina expressed their interest on the topic and requested follow up in person technical trainings, specifically targeted to the context of each Municipality.

During 2021 was measured for the first time in Albania the SDG indicator 1.3.1. "Proportion of population covered by social protection floors/systems, by sex, distinguishing children, unemployed persons, older persons, persons with disabilities, pregnant women, new-borns, work injury victims and the poor and the vulnerable". Based on the findings of this exercise, the proportion of persons effectively covered by a social protection system, including social protection floors is 54%, while the proportion of the total population receiving cash benefits under at least one of the contingencies (contributory or non-contributory benefits) or actively contributing to at least one social security scheme is 70%. Also, a "Methodology for monitoring and evaluation of local social care plan implementation" has been developed and tested with the six targeted

municipalities in close coordination with Ministry of Health and Social Protection in the framework of the United Nations Joint Program "Improving the Delivery of Local Social Protection Services" funded by the SDG Fund.

Output 3. Innovative models of integrated social care services piloted, including established local linkages between health and social protection services.

The improvement of management of social services at local level is supported by the development of human resources and of organizations, including undated terms of references, as well as by the divulging, across Albania, good and innovative practices for providing social services and promoting social protection. A framework and model of integrated health and social care services is developed. A grant scheme financed 6 targeted municipalities to model and deliver integrated health and social care services; interventions are ongoing. Each municipality has developed and is administering its own localized integrated models of services. With the aim to upgrade community social services facilities for providing new inclusive social and health care services with the focus on vulnerable groups, two pilot municipalities are being supported, respectively Devoll and Kamza. Civil works are ongoing. New standards and work protocols for Needs Assessment and Referral Units have been developed to be used by municipalities in the context of COVID19. The standards have been endorsed by municipalities and MHSP. Link to the document is added to the respective section below. Development of the package of the regulatory framework for enabling the provision of integrated health and social services at the community level: Guidance for Delivering Integrated Health and Social Care Services at Primary Health Care Level – for PHC providers, managers and social care professionals; Amendments of the Law no. 121/2016 "On social care services in the Republic of Albania"; Amendments of the Law no. 10 107, date 30.3.2009, "On health care in the Republic of Albania"; Revision of the Quality Standards for the Accreditation of Primary Health Care Institutions; Revision of the Basic Package of Primary Health Care services; Amendment of the Contract of Health Insurance Fund with Primary Health Care Centers; Revision of the Statute of Primary Health Care centers; Revision of the Regulation on the Referral System and the Public Health Service fees"; Revision of the Regulation on the Organization and Functioning of the Health Care Services Operator; Amendments to the DCM on the Financing of Public Health Services of Primary Health Care from the Compulsory Health Care Insurance Scheme"

Analysis of the progress of Albania in the development, implementation and enforcement of medical devices regulations (feeding to the development of the methodology for the preparation of the list of reimbursed medical devices for outpatients, specifically for people with disabilities). With focus on integrated health and social care for older persons, process is ongoing to develop the home care services through municipal support and related social fund. Also, work is under progress to create the Social Operator profession in partnership with Tirana Municipality. The platform for Social Protection and Services in Albania www.sociale.al is a virtual space which was created for academics, decision-makers and practitioners in the field of social care services to share information and good practices. This platform will increase the capacities of social workers that work in the social care field by improving the university curricula and providing in-job trainings. The platform was launched in February 2021 with participation of more than 150 participants.

Output 4. Vulnerable communities (disaggregated by gender, ethnicity, disability etc.) are empowered to actively participate in decision making and make institutions accountable.

The programme has contributed to the improvement of a constructive dialogue and culture of participatory decision-making between municipal structures and target groups, the capacity of service providers and beneficiaries to interact effectively and efficiently and establishing a culture of mutual dialogue and decision-making. Vulnerable communities and their organizations in Tirana, Puka, Rrogozhina, Devoll, Pogradec and Kamza are supported with six small projects to uphold their rights and hold local institutions accountable for delivering social services. thousands of citizens have benefited from integrated health and social services during 2020- 2021 [10533 beneficiaries (5791 F/4477 M / 265 LGBTI), 3858 Roma and Egyptians, 1493 persons with disabilities, 654 elderly, 1732 children and others]. To promote intergenerational solidarity, older persons in Kashar, Kombinat and Paskuqan were engaged in activities organized by young people in these administrative units. Part of activities was the development of a healthy lifestyles booklet with information on health and psycho-social support available for older persons.

A call for proposals was issued to support CSOs in 6 target municipalities on integrated social care services, expenditure monitoring and accountability for gender equality through watchdog monitoring reports. In total, 12 organizations expressed their interest in representing the municipalities of Skrapar, Polican, Fushe-Arrez, Vlora, Elbasan, and Durres in being part of this program. A database of CSOs in six target municipalities was established as the output of the process to better coordinate the work and identify the areas in which the applicant organizations operate. The project team will deliver training and provide additional mentoring and support to the selected CSOs on the practical implementation of GRB and policy advocacy, in close collaboration and with the support of UN Women and National Consultant. To this end a needs assessment questionnaire was distributed to the selected CSOs and one 3-day training will be delivered online. The programme supported 10 civil society organizations to sustain their proactive watchdog role regarding gender equality in local public policies with the end objective to strengthen democratic governance and advancing women's rights through increased accountability of local stakeholders for gender equality. 10 CSOs in Skrapar, Polican, Fushë-Arrëz, Vlorë, Elbasan, and Durrës were trained, mentored and supported to produce 6 watchdog reports on gender integrated social care services, expenditure monitoring and accountability. Results of the reports were shared with public stakeholders and their recommendations will be followed by municipalities in ensuring social services for vulnerable women and girls are adequately costed and budgeted. (attached reports)

Output 5. Financing options for extending social protection coverage and benefits developed and assessed at the national and municipality levels.

The joint programme continued its support at the local level in using GRB as a tool to advance gender equality and ensure that women's needs are incorporated in local social protection policies and related budgets. The ultimate aim was that the new targeted municipalities of Skrapar, Polican, Fushe-Arrez and current municipalities of Puka, Rogozhina, Pogradec plan and implement budgets and programs that take into account the needs of men and women, girls and boys and various groups including those most vulnerable. In this frame UN Women supported the Municipalities in improving the delivery on national legal and policy commitments related to gender equality by applying GRB and to effectively address the needs of women and girls, with specific focus on socially excluded groups. Five trainings with Budget Management Teams of Social Services Departments (including Finance and Budget Departments, Social Services Departments, GEO, CPU) from the Municipalities of Skrapar, Polican, Rogozhina, Puke and Pogradec were conducted. The trainings were held in person and resulted very effective in explaining: The role, duties and responsibilities of the Municipalities in providing for social services that target women from disadvantaged groups as well as link with Good Governance concepts and rules; - Gender Responsive Budgeting main concepts and benefits in using to provide targeted social services; Best practices in national and international context. There were 33 Municipal (23 Females and 10 Males) staff that were trained. The staff was from specific departments, with the aim to deliver the training to the municipal staff responsible in planning and providing targeted social services. The trainees from each municipality were representatives of: Budget and Finance Departments, Social Services, GEOCPU. The Study on Expenditures and Fiscal Space Analysis Including Gender and Child Sensitive Budgeting in Albania was finalized. This is a qualitative study completed using the data from labour force surveys, published reports and COVID-19 assessment report, other equivalent survey reports, administrative information, and household survey data, and in close collaboration with the Ministry of Finance and Economy and the INSTAT. The report covers a wide array of subjects and provides comprehensive information on the socioeconomic status vis-à-vis public expenditure of Albania. This analysis builds a profile of the status of gender centered poverty and vulnerability in Albania based on their unpaid care and builds a profile of the status of gender centered poverty and vulnerability. The analysis discusses income and non-income dimensions of well-being in Albania. While the focus is to understand the situation of the least well-off sections of the population (gender based and children), the analysis provides valuable information on the overall level of wealth and wellbeing for the whole of Albania. The analysis presents poverty and inequality figures at the national level because of the unpaid care work. The Tripartite validation meeting of the two reports (1) "The Review of the Social Protection System in Albania" and (2) "Fiscal Space for Social Protection in Albania", was held on line, on April 27, 2021. The programme is also looking at financing a gender and child sensitive social protection, budgeting for women, girls and boys and will make conclusions and recommendations for identification of fiscal space. The report will set the foundations and will help to take steps towards supporting the country defining nationally the social protection floor. Consultants have started to work with key national stakeholders.

Output 6. Project managed.

To ensure a coordinated approach in the implementation of IMSPSD, the Programme Technical Committee (TCh) met at least 4 times on annual basis. The Technical Committee discussed on the practical implementation of the Programme and ensured that results are delivered timely and efficiently. TCh discussed also on the project non-cost amendment. The programme Steering Committee met two times. A global peer review session on integrated social services, took part during quarter Q2 2021 under the leadership of Albania. The programme is regularly communicating its results.

⇒ **Monitoring and data collection:**

The sustainability of the joint programme's investments and effects and the scaling-up of successful practices and innovations are a constant matter of the joint programme. The joint programme's implementation is the responsibility of the four UN agencies UNDP, UNICEF, UN Women, WHO with the support of UNFPA and ILO, who cooperated with state actors from central and local level, with civil society organizations and directly with target groups. The strategic steering of the endeavour was assured by a Steering Committee in which participate the Ministry of Health and Social Protection, representatives of the implementing UN organizations, Representative of the two selected donors and civil society. One of the tasks of the Steering Committee, is the monitoring and assessment of risks – regarding the joint programme's achievements, its strategic and fiduciary dimensions as well as the reputation of actors involved – their prevention and the joint programme's adequate reaction to them. The purpose of the joint programme's monitoring and evaluation include the provision of evidence for the joint programme's steering, quality assurance, learning and accountability, including reporting. Semi-annual joint programme reports summarized the monitoring data on behalf of the Steering Committee. An external evaluation will be realized by the end of the joint programme (March-June 2022).

Lessons learned and sustainability of results

The sustainability of the Programme's investments and effects and the scaling-up of successful practices and innovations are guiding each programme step and intervention. Several approaches and methods are applied to contribute to the durability of the Programme's interventions: Full alignment on national policies and strategies; Investments in actors, processes and persons; Support for increasing funding of social services; Promotion of community based social services. The concern for sustainability is also reflected in the fact that no parallel systems are introduced. The Programme capacitated existing state structures and civil society organizations to implement strategies and to provide services. It supported the improvement of the interface between state and civil society actors, since both types of actors participate in service delivery, e.g. by facilitating contacts between them, showcasing good practices, proposing forms of cooperation and supporting such cooperation in view of improved service delivery.

Recognizing that the IMSPSD programme is primarily provided via technical expertise and support, and that the corresponding technical solutions and results are then made effective by the partner organizations and beneficiaries- knowledge management, learning and sharing is essential to building the longer-term sustainability and the potential for scaling up of the results. The programme design and approach provides an experimental 'lab-approach' to the pilot-testing of a range of integrated interventions, models and mechanisms at the local level, so as to generate experience and knowledge as to lessons learned (positive and negative), prior to the potential fine-tuning of the models and their wider dissemination and scaling up, in other LGUs and/or nationally.

III. Plan for the final phase of implementation

Towards the end of JP implementation

Output 1: Institutional arrangements and coordination mechanisms to ensure quality social care services functional with clear roles.

- Support LGs to administer revised and updated terms of reference, job descriptions and responsibilities of the teams and officials for social care services planning and management. (UNICEF, UNDP)

Output 2: Institutional capacities strengthened through training and mentoring for the development of social care plans and accessing the Social Fund.

- Identify and disseminate best practices and exchange experiences about the development and implementation of social care plan. (UNDP, UNICEF)

Output 3: Innovative models of integrated social care services designed and piloted, including established local linkages between health and social protection services.

- Strengthen the supervisory and monitoring capacities in central institutions and municipalities on the revised standards and protocols for the integrated social and health care services; Pilot digital tools for each component of care including home visit, first encounter with social or health services, referral, social diagnosis, integrated service records (WHO, UNICEF); Support the approval and implementation of the regulatory framework to enable the implementation of integrated health and social service models in pilot municipalities (WHO, UNICEF, UNFPA).
- Build the capacities of the primary health care and social care personnel to focus on the most vulnerable and prepare individual plan for holistic care using a family centered approach and post training supervision and coaching (WHO, UNICEF, UNFPA);
- Upgrade community social services facility (1) for providing new inclusive social and health care services with the focus on vulnerable groups. (UNDP, UNICEF)

Output 4: Vulnerable communities (disaggregated by gender, ethnicity, disability etc.) are empowered to actively participate in decision making and make institutions accountable.

- Provide capacity building for activists and CSOs in the 6 target municipalities on integrated social care services, expenditure monitoring and accountability for gender equality through watchdog monitoring reports (UNDP, UN Women, ILO);

Output 5. Financing options for extending social protection coverage and benefits developed and assessed at the national and municipality levels.

- Contribute to National dialogue with key stakeholders on establishment of the social protection floor in Albania. Conduct analysis of equity in health utilization and expenditure with focus on MCH services in Albania. (WHO, UNICEF)
- National dialogue with all stakeholders to discuss and agree on establishment of the social protection floor in Albania (ILO, UNICEF, UN Women); Conduct tripartite policy dialogue to present the key findings and recommendations of the fiscal space report and agree on the areas of priority action to reform the social security system, including provision of training to local authorities on self-conducting the fiscal space analysis (ILO).

Risks and mitigation measures

Risk 1:

- Covid-19 Lockdown, social distancing, and involvement of health professionals in the emergency will impact the implementation of the joint programme plans that are linked to the design and piloting of integrated health and social protection services.
- Impact (1-3)
3
- Type of risk (e.g. operational or systemic):
- Contextual risks

Risk 2:

- Low priority given to issues of social protection and lack of focus on vulnerable populations by central and local government.
- Impact (1-3)
2
- Type of risk (e.g. operational or systemic):
- Institutional risk

Risk 3:

- Scaling-up of successfully introduced innovations introduced may be at risk due to low commitment by government.
- Impact (1-3)
3
- Type of risk (e.g. operational or systemic):
- Programmatic risk

Annex 1: Consolidated Annual Results

1. JP contribution to global Fund's programmatic results

- Provide data for the Joint SDG Fund global results (as per targets defined in the JP document).

Global Impact: Progress towards SDGs

Select up to 3 SDG *indicators* that your Joint Programme primarily contributed to (in relation to SDG targets listed in your JP ProDoc)

SDG:1

SDG:5

SDG:10

Global Outcome 1: Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

Outcome indicators	Expected 2021 target	2021 result	Reasons for variance from planned target (if any)	Expected final target
1.1: Number of integrated multi-sectoral policies that accelerated SDG progress in terms of scope ¹	2	13	Increased	13
<p><i>List the policies:</i></p> <ul style="list-style-type: none"> • Framework for integrated health and social care services • 6 municipalities adopted local social care plans • Revision of the standards of the accreditation of Primary Health Care institutions for providing integrated social and health services • Development of the administrative and technical guidance for implementing and monitoring the revised standards for integrated social and health care services at Primary Health Care Level • Development of the regulations, protocols and pathways for delivering integrated health and social services at the community level • Proposal of amendments to Law no. 121/2016 "On social care services in the Republic of Albania"; Law No.10 107/2009 "On health care in the Republic of Albania" • Revised package of services in PHC, revised regulation of PHC centers, revised statute of PHC centers, revised contractual arrangements of PHC centers, revised job descriptions of the staff at PHC centers, revised protocols and pathways for delivering integrated health and social services at the community level • Development of the package of regulatory framework and roadmap for piloting of Social contracting at the municipality level, focusing on the effectiveness and sustainability of HIV and TB services (commitment of the Municipality of Tirana) 				
1.2: Number of integrated multi-sectoral policies that accelerated SDG progress in terms of scale ²	2	6	Increased	6
<p><i>List the policies:</i></p> <ul style="list-style-type: none"> • Order no 262 of municipality of Rrogozhina date 14.09.2021 on "Assignment of the head of social welfare and specialists of the social welfare sector for the implementation of socio-health projects according to the Framework and the related model" • Order no 269 of municipality of Devoll date 14.09.2021 on "For the approval of the working manual: "Framework and model of integrated Social and Health Services" • Order no 477 of municipality of Kamza date 21.09.2021 on "Appointment of the Directorate of Economic Assistance and Social Affairs for the implementation of social and health projects according to the framework and model of integrated social and health services, attached " 				

¹Scope=substantive expansion: additional thematic areas/components added or mechanisms/systems replicated.

²Scale=geographical expansion: local solutions adopted at the regional and national level or a national solution adopted in one or more countries.

- Order no 287 of municipality of Puka date 21.10.2021 on "Implementation of socio-health projects"
- Order no 687 of municipality of Pogradec date 29.09.2021 on "Implementation of social health projects"
- The municipality of Devoll issued Order no 192, date 01.06.2021 on "The approval of the working manual of employees for child protection".

Global Output 3: Integrated policy solutions for accelerating SDG progress implemented

Output indicators	Expected 2021 target	2021 result	Reasons for variance from planned target (if any)	Expected final target
3.1 Number of innovative solutions that were tested (disaggregated by % successful-unsuccessful)	2	6	Increased.	6
3.2: Number of integrated policy solutions that have been implemented with the national partners in lead	2	6	Increased	6

Did your Joint Programme contribute to strengthening of national capacities to implement integrated, cross-sectoral SDG accelerators in 2020-2021?

- Yes
 No

Explain briefly: Driven by the Agenda 2030, the UN JP IMSPSD supported integrated social care service delivery approach, drawing on mutually reinforcing "levers" to examine, empower and enact change, to ensure "no one will be left behind" and to "endeavour to reach the furthest behind first", To address inequity, exclusion and deprivation; the six programme targeted municipalities were supported to identify and build key roadblocks that prevent progress across vulnerable local population segments and SDGs. The programme is housed under Output 2.1, with linkages to other UNDAF outputs addressing gender equality, human rights, prevention of violence against women, child protection and support for refugees and migrants. Its interventions followed directly one of the three accelerators identified by the Albania MAPS report 2018: "the biggest weaknesses in Albania's social protection system may lie not its social assistance or insurance programmes, but in its social care components."

2. Results as per JP Programmatic Results Framework

Result / Indicators	Baseline	Expected 2021 target	2021 Result	Reasons for variance from planned target (if any)	Expected final target (if different from 2021)
Outcome: All women, men, girls and boys, especially those from marginalized and vulnerable groups, are exercising their entitlements to equitable quality services, in line with human rights; and more effective and efficient investments in human and financial resources are being made at central and local levels to ensure social inclusion and cohesion.					
Proportion of population covered by social protection floors/systems, by sex, gender, distinguishing children, unemployed persons, Roma and Egyptians, persons with disabilities, migrants, refugees, pregnant women, newborns, work-injury victims and the poor and the vulnerable.	No available data for this indicator. Baseline for 2019 at the national level to be calculated as number of various groups benefitting from different social protection schemes (first quarter of 2020) 0.2% is the percentage of population with access to social care services. ³	62% of vulnerable persons and groups in the six targeted municipalities benefit from improved delivery of social care services by local authorities.	70% ⁴ is the proportion of population covered by social protection floors/systems, by sex, gender, distinguishing children, unemployed persons, Roma and Egyptians, persons with disabilities, migrants, refugees, pregnant women, new-borns, work-injury victims and the poor and the vulnerable.		
Positive progress of the implementation of social care and protection national policies, strategies and related local action plans.	Level of implementation of R/E action plan is rate 3.66 for the year 2018.	Level of implementation of the National social Protection Strategy and Action Plan, National Action Plan on Roma/Egyptians (rate 3.8), PWD, Children and other vulnerable groups and of the local social care plans increased.	Level of implementation of R/E action plan is rate 3.68 for the last year.		

³ National Strategy for Social Protection, 2015-2020

⁴ [National Monitoring of the SDG Indicator 1.3.1 | UNDP in Albania](#)

<p>Proportion of domestically generated resources allocated by the government directly to poverty reduction programmes.</p>	<p>Overall social protection spending in Albania amounted to 9,3% of GDP in 2019.</p> <p>Social Care budget versus Total Social Protection in 2019 is 4.2%.⁵</p>	<p>Increased annually by at least 2% at the national level and 4% at the municipal level.</p>	<p>Overall social protection spending in Albania amounted to 9,2% of GDP in 2020.⁶</p> <p>Social protection budget transferred to municipalities is increased by 48% btw 2019 and 2020.⁷ (88,713,000/131,313,000)</p> <p>Social Care spending versus Total Social Protection in 2020 is 5 %⁸</p> <p>Annual increase of central government's budget for social care services between 2019 and 2020 is 2.1%.⁹</p>		
<p>Output 1. Integrated social care services institutional arrangements and coordination mechanisms functional with clear roles and responsibilities at local level in 6 municipalities.</p>					
<p>1.1 No of regulations and instructions designed and adopted by 6 Municipalities to establish workflows, protocols and mechanisms that enable access of vulnerable communities to quality</p>	<p>Regulations and instructions on integrated social care services have been designed in Tirana only.</p>	<p>Regulations and instructions on integrated social care services are available in all targeted municipalities.</p> <p>Cross sectorial and inter-ministerial regulations and instructions on integrated social care services are available.</p>	<p>Regulations and instructions on integrated social care services are available in all targeted municipalities (those with adopted local social care plan).</p>		

⁵ Data from the Ministry of Economy and Finance in Albania, <https://www.financa.gov.al/buxheti>, 2020

⁶ Accurate data can be calculated only in March 2021. Data from post-earthquake and covid-19 support are not calculated yet.

⁷ Ibid

⁸ Ibid

⁹ Ibid

integrated social care services.					
1.2 Six municipalities with improved capacities of at least 20% of service providers (50% women), on organization development and quality management, and effective planning, budgeting and financing.	0	At least 100 trained staff (municipal and direct service providers) apply the tools and knowledge of needs assessment, planning of services, standards implementation. budgeting and accessing Social Fund as per the new established integrated as per institutional arrangements established.	130 trained staff (municipal and direct service providers-over 55% women) apply the tools and knowledge of needs assessment, planning of services, standards implementation, budgeting and accessing Social Fund as per the new established integrated as per institutional arrangements established.		
Output 2. Institutional capacities strengthened through training and mentoring for the development of social care plans and accessing the Social Fund.					
2.1. Mapping of social vulnerabilities with gender lenses in 3 target municipalities with the purpose to map linkages between women's social vulnerabilities-identified needed social services and their reflection in the respective social care plans.	NA	NA	Rapid Gender Assessment of the Impact of COVID-19 in women's and men's lives and livelihoods in Albania;		
2.2 No of Social Care Plans developed, updated and adopted.	4 municipality social care plans developed/ improved and adopted	Rrogozhina develops social care plan. Other Social care plans improved and adopted when needed.	6 municipality social care plans developed/ improved and adopted (Puka, Devoll, Rrogozhina, Skrapar, Polican, Fushe-Arrez) 1 additional- Tirana under progress		
2.3 No of Municipalities where Management	0	Staff is trained in 6 municipalities how to use MIS.	Staff is trained in 6 municipalities how to use MIS.		

Information System (MIS) is operational.					
Output 3. Innovative models of integrated social care services piloted, including established local linkages between health and social protection services.					
3.1 Regulatory framework for the integrated health and social service models is implemented in pilot municipalities with focus on the health and wellbeing of vulnerable groups and children.	No regulatory framework for integrated health and social care services are available.	Standards and protocols for the models of integrated health and social care services are developed. 2 municipalities supported to implement the integrated health and social care services model.	Standards and protocols for the models of integrated health and social care services are developed. 6 municipalities supported to implement the integrated health and social care services model.		
3.2 Municipalities strengthened to take over and co-finance through social fund the proposed and integrated health and social care services.	At least 30 representatives (50% women) of all 6 targeted municipalities trained to make linkages btw health and social protection. A grant scheme is set up by IMSPSD for municipalities to introduce innovative models of integrated health and social care services.	At least 50 representatives (50% women) of all 6 targeted municipalities trained to make linkages btw health and social protection. Calls for submitting proposals are realized in a transparent manner. At least 10 proposals received. 6 municipalities supported with at least 1 innovative proposal in implementation of innovative models of health and social care services.	A grant scheme is set up by IMSPSD for municipalities to introduce innovative models of integrated health and social care services. The joint programme developed training and coaching materials for staff of LGUs and local teams on the implementation of new regulations. A two-day long training took place during May-June 2021 in each of the municipalities (90 participants in total/ 82% Female and 18% Male) and coaching materials for staff of LGUs and local teams on the implementation of new regulations were provided.		

			6 municipalities supported with at least 1 innovative proposal in implementation of innovative models of health and social care services.		
Output 4. Vulnerable communities (disaggregated by gender, ethnicity, disability etc.) are empowered to actively participate in decision making and make institutions accountable.					
4.1 Extent/level of participation of vulnerable population in the consultation process of planning and budgeting of integrated social care services at the municipality level (in 3 municipalities).	5-7% in selected municipalities.	Vulnerable population compose at least 20% of participants in annual planning and budgeting. At least 10% of issues/concerns addressed in annual planning and budgeting are raised by vulnerable populations.	6 CSO-led gender budget watch dog reports		
4.2 No of projects implemented by CSOs representing vulnerable groups, demanding rights and holding municipal service providers accountable for quality social care services.	0	At least 6 grant fund projects, a majority of them for Roma and persons with disabilities, are implemented every year. Vulnerable population compose at least 20% of participants in annual planning and budgeting.	6 grant fund projects, a majority of them for Roma and persons with disabilities, are implemented during 2020-2021. Approx. 20% of concerns raised and voiced by vulnerable women were		

		At least 10% of issues/concerns addressed in annual planning and budgeting are raised by vulnerable populations.	discussed with Municipalities to become priorities in the future budget of municipalities.		
Output 5. Financing options for extending social protection coverage and benefits developed and assessed at the national and municipality levels.					
5.1 No of municipalities supported to conduct Gender Responsive Budgeting and budget briefs for investments on children.	0	3 LGUs	6 municipalities (on progress, not finalized yet) 6 municipalities supported to conduct GRB		
5.2 Percentage of increased funds for social care services made available at local level also due to national consensus around social protection floor.	Social care service compose 6.4% of the total social protection budget. ¹⁰	Annual increase of central government's budget for social services by 2% and targeted LGUs by 4%. Social Protection Floor defined and discussed with national stakeholders.	Social protection budget transferred to municipalities is increased by 48% btw 2019 and 2020. ¹¹ (88,713,000/131,313,000) Social Care budget versus Total Social Protection in 2020 is 5.5%. ¹² Annual increase of central government's budget for social care services between 2019 and 2020 is 2.1%. ¹³ Rrogozhina municipality social services budget of the total municipality budget for 2020 is 0.16%. it is increased by 38% in comparison to 2019		

¹⁰ Ministry of Finance and Economy, 2018

¹¹ <https://www.financa.gov.al/buxheti>

¹² <https://www.financa.gov.al/buxheti>

¹³ Ibid

			<p>(558,000 ALL in 2019; 770,460 ALL in 2020)</p> <p>Devoll municipality social services budget for 2020 is doubled in comparison to 2019 (2,813,617 ALL in 2019; 4,861,160 ALL in 2020)</p> <p>Kamza municipality social services budget for 2020 is increased by 17% (457,110,000 in 2019; 535,237,000 in 2020)</p> <p>Pogradec municipality social services budget for 2020 is increased by 7.6% (786,562,398 in 2019; 847,021,890 in 2020)</p>		
<p>5.3 Data on equity in health utilization and expenditures in MCH and health insurance coverage for the most vulnerable families and children with disabilities is available to inform policy discussions and actions to extend social protection and health care coverage and benefits.</p>	<p>No recent data available in equity analysis and cost of health insurance coverage for the most vulnerable groups and children.</p>	<p>Equity analysis in health utilization and expenditure completed and shared with key stakeholders.</p> <p>Financial analysis for health insurance coverage for most vulnerable groups and children.</p>	<p>A National and International Consultant have worked to conduct expenditures and fiscal space analysis, including gender and child sensitive budgeting on establishing social protection floor in Albania (work under progress).</p>		
<p>Output 6. Joint Programme Management</p>					
<p>6.1 No of communication means and events.</p>		<p>1 donor event organized</p>	<p>1 donor event organized</p>		

6.2 Social media outreach		200,000 social media social media post reach Min 60,000 post engagement	Total programme social media outreach: 62,040 Posts engagement: 3,256 Twitter impressions: 52,683 Reach: (31,580 UNDP; 12.916 UNICEF; 17,544 UNW); Post's engagement (1320 UNDP; 500 UNICEF; UNW 1436 engagement on Facebook UNW 42,170; UNDP 10,513 impressions on Twitter)		
6.2 The programme is regularly monitored and documented.		Annual progress report. Final evaluation of the programme in place.	Annual progress report for 2020 and 2021 prepared.		

Annex 2: Strategic documents

2.1. Contribution to social protection strategies, policies and legal frameworks

Strategic documents developed or adapted by JP

Title of the document	Date when finalized (MM/YY)	Focus on extending social protection coverage (Yes/No)	Focus on improved comprehensiveness of social protection benefits (Yes/No)	Focus on enhancing adequacy of social protection benefits (Yes/No)	Focus on improving governance, administration and/or implementation of social protection system (Yes/No)	Focus on cross-sectoral integration with healthcare, childcare, education, employment, food security, etc. (Yes/No)	If published, provide the hyperlink

Local Social Care Plan of Rrogozhina Municipality	Oct 2020	No	Yes	No	Yes	Yes	
Local Social Care Plan of Polican Municipality	Nov 2020	No	Yes	No	Yes	Yes	https://www.polican.gov.al/pagesat-sociale/
Local Social Care Plan of Skrapar Municipality	Oct 2020	No	Yes	No	Yes	Yes	https://bashkiaskrapar.gov.al/wp-content/uploads/2018/12/Skrapar-Social-Ca
Local Social Care Plan of Fushe-Arrez Municipality	Sep 2020	No	Yes	No	Yes	Yes	https://www.bashkiafushearrez.gov.al/plani-social/
Local Social Care Plan of Devoll Municipality	Nov 2020	No	Yes	No	Yes	Yes	https://www.bashkiadevoll.gov.al/wp-content/uploads/2022/01/Plani-Social-i-2021-2024-1.pdf
Local Social Care Plan of Puka Municipality	Nov 2020	No	Yes	No	Yes	Yes	https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fbashkiaipuka.gov.al/wp-content/uploads/2021/07/PLANI-SOCIAL-BASHKIA-PUKE-FINAL.docx&wdOrigin=BROWSELINK
National Monitoring of SDG Indicator 1.3.1	Dec 2020	Yes	Yes	No	Yes	No	National Monitoring of the SDG Indicator 1.3.1 UNDP in Albania
Methodology for monitoring and evaluation of local social care plan implementation"	May 2021	yes	yes	No	Yes	No	Methodology for monitoring and evaluation of local social care plan implementation UNDP in Albania
Fiscal space for financing social protection in Albania	Dec 2020	no	no	no	yes	no	
Expenditures And Fiscal Space Analysis Including Gender and Child Sensitive Budgeting in Albania	December 2021	yes	yes	no	yes	No	

Summary of watchdog reports conducted in 6 municipalities	Dec 2021	no	no	yes	yes	yes	
THE IMPACT OF COVID-19 ON WOMEN'S AND MEN'S LIVES AND LIVELIHOODS IN ALBANIA Results of a Rapid Gender Assessment	Dec 2020	No	No	No	Yes	No	
Framework and Model of Integrated Social and Health Care	Sep 2021	Yes	Yes	Yes	Yes	Yes	The FRAMEWORK AND MODEL OF INTEGRATED SOCIAL AND HEALTH SERVICE
"The Review of the Social Protection System" in Albania Report, was prepared and published in English and Albanian.	Dec 2020	No	No	Yes	Yes	No	Review of social protection system in Albania (ilo.org)
The Report on "Fiscal Space for Social Protection in Albania" was prepared and published in Albanian Language.	June 2021	No	Yes	Yes	Yes	No	Fiscal space for financing social protection in Albania (ilo.org)
"Assessment of the Social Security Responses to COVID-19" – Lessons from	March 2021	No	Yes	Yes	Yes	No	Assessment of the Social Security Responses to COVID-19 (ilo.org)

the Western Balkans and Eastern Europe during the first stage of the pandemic, was translated and published in Albanian Language.							
Terre des Hommes, UNICEF (2021)-Guidelines for municipal social workers and service providers to support families in COVID19.	May 2021	Yes	No	No	Yes	Yes	https://adobe.ly/3gKLYkj
Socio-economic assessment of Covid-19 impact on access of Vulnerable Children, Families and Communities to Social Protection in Albania	May 2021	No	yes	yes	yes	yes	

Strategic documents for which JP provided contribution (but did not produce or lead in producing)

Title of the document	Date when finalized (MM/YY)	Focus on extending social protection coverage (Yes/No)	Focus on improved comprehensiveness of social protection benefits (Yes/No)	Focus on enhancing adequacy of social protection benefits (Yes/No)	Focus on improving governance, administration and/or implementation of social protection system (Yes/No)	Focus on cross-sectoral integration with healthcare, childcare, education, employment, food security, etc. (Yes/No)	If published, provide the hyperlink
Social Insurance for all. Translation into Albanian.	November 2020						

2.2. Focus on vulnerable populations

Strategic documents developed or adapted by JP

Title of the document	Date when finalized (MM/YY)	Focus on gender equality and women empowerment (Yes/No)	Focus on children (Yes/No)	Focus on youth (Yes/No)	Focus on older persons (Yes/No)	Focus on other group/s (List the group/s)	Focus on PwDs (Yes/No)	Included disaggregated data by disability – and whenever possible by age, gender and/or type of disability (Yes/No)

Strategic documents for which JP provided contribution (but did not produce or lead in producing)

Title of the document	Date when finalized (MM/YY)	Focus on gender equality and women empowerment (Yes/No)	Focus on children (Yes/No)	Focus on youth (Yes/No)	Focus on older persons (Yes/No)	Focus on other group/s (List the group/s)	Focus on PwDs (Yes/No)	Included disaggregated data by disability – and whenever possible by age, gender and/or type of disability (Yes/No)

Annex 3: Updated JP Risk Management Matrix

Risks	Risk Level: (Likelihood x Impact)	Likelihood: Certain - 5 Likely - 4 Possible - 3 Unlikely - 2 Rare - 1	Impact: Essential - 5 Major - 4 Moderate - 3 Minor - 2 Insignificant - 1	Mitigating measures	Responsible Org./Person
Contextual risks					
Covid-19 Lockdown, social distancing, and involvement of health professionals in the emergency will impact the implementation of the joint programme plans that are linked to the design and	High (16)	Likely (4)	Major (4)	Activities which require active involvement of the health and municipal professionals who for the moment are overstretched	PUNOs

<p>piloting of integrated health and social protection services.</p>				<p>are rescheduled for 2021-summer time. The activities during 2020 were carried in a challenging context caused by the COVID-19 pandemics, with restricted mobility and other preventive measures applied at country level. In this context, the modality of conducting capacity development and mentoring activities was mainly delivered through online platforms and the use of ICT for regular communication with partners and stakeholders, which was at the same time an opportunity to engage with a larger number of participants.</p>	
<p>Replacements and turnover happen in leadership, management and human resources of central government institutions and local authorities after elections posing a risk to continuity of committed initiatives and projects.</p>	<p>High (16)</p>	<p>Likely (4)</p>	<p>Major (4)</p>	<p>The programme staff established immediate contacts with the new leadership in line ministries right after the parliamentary elections - April 2021 to ensure understanding of the interventions and ensure commitment for their continuity and scale-up.</p>	<p>PUNOs</p>
<p>Programmatic risks</p>					
<p>Scaling-up of successfully introduced innovations introduced may be at risk due to low commitment by government.</p>	<p>Medium (12)</p>	<p>Possible (3)</p>	<p>Moderate (3)</p>	<p>Scaling-up is being realized with the support of central authorities who can contribute to the</p>	<p>PUNOs</p>

				<p>preparedness of municipalities to replicate good practices identified and tested elsewhere. Scaling-up of projects for specific target groups (Roma, Egyptians) and persons with disabilities) is to be facilitated by a careful selection of municipalities and the beneficiaries. A means to support preparedness of these actors consist in the demonstration of successes already achieved in the field of social inclusion.</p>	
<p>Potential beneficiaries do not see their interest in participating in innovating social services.</p>	<p>Medium (12)</p>	<p>Possible (3)</p>	<p>Moderate (3)</p>	<p>UNDP took a facilitator role in engaging different CSOs and representatives of vulnerable communities to plan, coordinate, and take action to the same discussion table in improving the situation. During 2020 Joint UN Programme "Improving Municipal Social Protection Service Delivery" (IMSPSD) addressed the multidimensional impacts of the COVID-19, in line with the original focus of the action and supported local government institutions (Tirana, Kamza, Puka, Rogozhine, Pogradec and Devoll) protect the needs and rights of people living</p>	<p>PUNOs</p>

				<p>under the duress of the pandemic, with focus on the most vulnerable groups, and people who risk being left behind. Six small-grants projects are being implemented in partnership with six (6) local NGOs focused on:</p> <ul style="list-style-type: none"> a) Integrated data collection and analysis in response to social problems arising from COVID-19; b) Awareness raising, strategic communications; c) Implementation of digital and telephone services for vulnerable communities; d) Establishing links between social protection services and health care; e) Promoting employment for the Roma and Egyptian communities through social care case management; f) Teletherapy for persons with disabilities and the elderly. The involvement of civil society organizations in the delivery of innovative social services increases the interest of final programme beneficiaries. 	
Institutional risks					
High polarization of political situation in the country might lead to demotivation of partners at the institutional level.	High (16)	Likely (4)	Major (4)	The programme works closely with partners and monitor them closely to ensure that project	PUNOs

				activities are not negatively impacted.	
Low priority given to issues of social protection and lack of focus on vulnerable populations by central and local government.	Medium (12)	Possible (3)	Moderate (3)	Programme stakeholders have established partnership with the government and have ensured their commitment in elevating social protection to the level of a preferred instrument of development.	PUNOs
Fiduciary risks					
The promotion of services for specific target groups may affect the Albanian population's perception of the support provided, especially the perception by groups of the population who are not beneficiaries but who consider to be in need of support they do not receive.	Medium (12)	Possible (3)	Moderate (3)	The project, especially when making visible interventions (e.g. by activities facilitated by the small grants fund) is to communicate well – not only with the target groups and the service providers, but also with the neighbourhoods. Persons and groups not directly targeted by the intervention are to be informed, if possible and suitable also included in the programme, e.g. by making a community centre accessible not only to those mainly targeted.	UNDP

Annex 4: Results questionnaire

- Complete portfolio questionnaire online at: <https://forms.office.com/r/H4eZakyx9H>