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UN Sri Lanka SDG Multi-Partner Trust Fund
MPTF OFFICE GENERIC ANNUAL PROGRAMME¹ NARRATIVE PROGRESS REPORT
REPORTING PERIOD: 1 JANUARY – 31 DECEMBER 2019

<p style="text-align: center;">Programme Title & Project Number</p> <ul style="list-style-type: none"> Programme Title: Support to Strengthen the Health System's Response to the COVID 19 Pandemic in Sri Lanka Programme Number (if applicable): 128194 MPTF Office Project Reference Number:³ 127952 	<p style="text-align: center;">Country, Locality(s), Priority Area(s) / Strategic Results²</p> <p>(if applicable) Country/Region: Sri Lanka</p> <p>Priority area/ strategic results:</p> <ul style="list-style-type: none"> - Strengthening and capacitating COVID Intermediate Treatment Centers at the sub-national level - The safe and efficient patient transfer of women, Persons with Disabilities, and those with comorbidities to treatment centers and hospitals
<p style="text-align: center;">Participating Organization(s)</p> <ul style="list-style-type: none"> Organizations that have received direct funding from the MPTF Office under this programme: UNDP 	<p style="text-align: center;">Implementing Partners</p> <ul style="list-style-type: none"> National counterparts (government, private, NGOs & others) and other International Organizations
<p style="text-align: center;">Programme/Project Cost (US\$)</p> <p>Total approved budget as per project document: MPTF /JP Contribution⁴:</p> <ul style="list-style-type: none"> by Agency (if applicable) Agency Contribution by Agency (if applicable) UNDP - 465,000 <p>Government Contribution (if applicable)</p> <p>Other Contributions (donors) (if applicable)</p> <p>TOTAL:</p>	<p style="text-align: center;">Programme Duration</p> <p>Overall Duration (months): 8 months</p> <p>Start Date⁵ (07.2021)</p> <p>Original End Date⁶ (02.2022)</p> <p>Current End date⁷(02.2022)</p>
<p style="text-align: center;">Programme Assessment/Review/Mid-Term Eval.</p>	<p style="text-align: center;">Report Submitted By</p>

¹ The term “programme” is used for programmes, joint programmes and projects.

² Strategic Results, as formulated in the Strategic UN Planning Framework (e.g. UNDAF) or project document;

³ The MPTF Office Project Reference Number is the same number as the one on the Notification message. It is also referred to as “Project ID” on the project’s factsheet page the [MPTF Office GATEWAY](#)

⁴ The MPTF or JP Contribution, refers to the amount transferred to the Participating UN Organizations, which is available on the [MPTF Office GATEWAY](#)

⁵ The start date is the date of the first transfer of the funds from the MPTF Office as Administrative Agent. Transfer date is available on the [MPTF Office GATEWAY](#)

⁶ As per approval of the original project document by the relevant decision-making body/Steering Committee.

⁷ If there has been an extension, then the revised, approved end date should be reflected here. If there has been no extension approved, then the current end date is the same as the original end date. The end date is the same as the operational closure date which is when all activities for which a Participating Organization is responsible under an approved MPTF / JP have been completed. As per the MOU, agencies are to notify the MPTF Office when a programme completes its operational activities.

Assessment/Review - if applicable *please attach*
 Yes No Date: *dd.mm.yyyy*
Mid-Term Evaluation Report – *if applicable please attach*
 Yes No Date: *dd.mm.yyyy*

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NARRATIVE REPORT FORMAT

EXECUTIVE SUMMARY

During the reporting period the most significant achievement of the programme was the identification of the specific requirements of COVID Emergency Treatment Centers in Jaffna and Mullaitivu Districts, and the delivery of the CRRT (Continues Renal Replacement Therapy) machine to the Mullaitivu District Hospital. The items currently being procured are listed in Annex 2 to this report.

Key challenges faced during the reporting period includes difficulty in procuring the items listed in Annex 2 of this report. Shortages in equipment and local suppliers, as well as unstable and fluctuating local currency rates also lead to price variations. Additionally, due to the pandemic there was an increase in the number of requests made to the Quality Assurance Department of Headquarters regarding similar procurements thereby delaying their clearance of the procurement.

I. Purpose

All interventions are in line with SDGs 3, 5, 10 and 16 in providing access to quality health care and ensuring equal access to lifesaving services for all, especially the most vulnerable populations. The outcome of this project is:

- Adequate and timely treatment for COVID-19 is made accessible to vulnerable communities in the Northern province.

It has the following key outputs:

Output 1: Two Intermediate Care Centers operationalized at the Sub-National level (Northern Province).

Output 2: Improved patient transfer mechanism ensures safe and efficient transfer of patients, especially women, PWDs and those with comorbidities to treatment centers and hospitals in the target locations.

II. Results

i) Narrative reporting on results:

Outcome: Adequate and timely treatment for COVID-19 is made accessible to vulnerable communities in the Northern province.

Output 1: Two Intermediate Care Centers operationalized at the Sub-National level (Northern Province).

This output contains the following two activities:

- **Activity 1.1** - Essential PPE, medical equipment, and other supplies for the 02 identified treatment centers procured, to support the protection of doctors and staff, and effective treatment of patients – This includes Five-function ICU beds (5 Nos.), Therapeutic high-end ventilator, Advanced multipara monitors (GE) (3 Nos.), Portable ultrasound (Xario 100), Portable X-ray and High-end CRRT 5-pump (Continues renal replacement therapy) machine.
- **Activity 1.2** - Support to the treatment centers to manage COVID related healthcare waste in accordance with environmental standards – this includes the procurement of 1 mobile HCWM unit, such as 1 incinerator and 3 ash pits, along with 6 months support for operations.

Despite the challenges faced in the procurement of items UNDP was successful in procuring 3 items, namely, 4 five function ICU beds, 1 high-end CRRT (Continues Renal Replacement Therapy), and 1 Medical Waste Incinerator (Capacity 100 Kg/h). The CRRT was delivered to the Mullaitivu hospital. The request for approval for 1 advanced multipara monitor for the ICU and 1 portable ultrasound machine was submitted to the Quality Assurance Department in Headquarters. However, such requests have been delayed due to the Department experiencing an overwhelming number of requests.

However, due to the procurement of specified equipment, the Project enabled the Hospital to effectively treat and manage emergency Covid 19 patients at the hospital. The District General Hospital of Mullaitivu did not have an Emergency Treatment Centre for Covid 19 patients. Covid 19 patients were instead transferred to Jaffna or Vavuniya. Similarly, the waste incinerator which is in the process of being procured will provide the opportunity to support Covid waste management at provincial peripheral hospitals, as currently only one peripheral hospital has this facility (namely Tellipalai).

Output 2: Improved patient transfer mechanism ensures safe and efficient transfer of patients, especially women, PWDs and those with comorbidities to treatment centres and hospitals in the target locations.

This output contains the following three activities:

Activity 2.1 Solutions to improve the efficiency of the 1990 Suwa Seriya, including strengthening the central coordination facility of the service developed using systemic design and human centred design approaches and required supplies and emergency medical equipment to enhance capacity of the pre-hospital ambulance care service procured.

Activity 2.2 Using design thinking tools such as user journey maps to identify the special adaptive facilities required by PWDs and implementing the requirements to the Ambulances.

Activity 2.3 On-call cadre trained to support the safe and efficient transfer of female and PWD patients following do no harm principles. To take this forward, linkages need to be formalized with the Disability Persons Front and other key organizations. Linkages with Mental Health Support, Family Health Bureau, women wellness centres and nursing teams need to be established to provide specialized services.

During discussions with Suwa Seriya, the need for the procurement of 12-lead ECG machines was identified as a key requirement to strengthen the capabilities of the Suwa Seriya Ambulances by improving the medical equipment to better respond to the increasing demands due to the ongoing Covid-19 pandemic. This procurement is currently underway as per the Headquarters' requirement to proceed with Global LTA holders for quality assurance. As noted under Output 1, due to the pandemic there were many similar requests for procurement support made to the Headquarters which led to the subsequent delay of this procurement.

To achieve this Output, the project team held discussions with the Suwa Seriya team to:

- Better understand current process and facilities available/required by Persons with Disabilities (PwD's) to strengthen their service delivery.
- Review current training processes and material to understand existing gaps and areas for improvement in training processes and materials

With regards to understanding the current processes and facilities available by PwDs, the team reached out to several PwDs for closer inspection of Suwa Seriya ambulances and services to determine existing user processes and develop a user journey map. However, this activity was delayed due to the Suwa Seriya team being overwhelmed due to number of cases of Covid-19.

A Terms of Reference (ToR) was finalized to introduce an online training platform for the staff of Suwa Seriya. The training modules will focus on the efficient transfer of female and PwD patients following the *do no harm* principles, while converting the current training material to online modules. With further input from Suwa Seriya colleagues, the ToR aims to be published during the second week of October and procurement process completed within 2 weeks. There was a significant delay in the ToR being approved by the Suwa Seriya management given they were in the process of reevaluating their training approaches and methods prior to the development of a new platform.

- **Describe any delays in implementation, challenges, lessons learned & best practices**

- (1) COVID 19 related challenges**

- Following the last reporting period, due to rapid spread of the Omicron variant restrictions were imposed on the public including those related to travel and congregation. As first responders, the Suwa Seriya staff and officials remained engaged in emergency response efforts, which resulted in delays in planned discussions.

- Despite existing challenges, the team was able draft the necessary ToRs and supporting documents with technical specifications to be shared for review and comments, with the information made available to them without disrupting staff schedules. Further, with regard to the user journey mapping, the team was successful in reaching out to several PwDs personally inspect the Suwa Seriya ambulances and services and closer inspect their user processes. However, this activity was also delayed due to the prevailing Covid-19 pandemic.

- (2) Procuring the equipment**

- There were many challenges faced regarding the procurement of medical equipment, due to the shortage of local equipment and suppliers. As there were no local suppliers on the prequalified UNDP list, the quality assurance process of procuring such equipment has taken longer than expected. Unstable and fluctuating currency rates also presented challenges in terms of price variations.

- Despite these challenges, the project team ensured that the procurement processes started as early as possible in order to ensure that necessary support was provided to those in need.

Risk analysis

The following are the risks that were identified at the project inception phase:

1. Import restrictions delayed the timely delivery of critical health care equipment to treatment centres.
2. Adequate human resources are not sustained at the treatment centres to operate the HCWM facilities.
3. Pilot solutions to improve patient transfer system not fully tested and rolled out before project closure.
4. Lack of buy-in to the Design Thinking/Human Centred Design process from partners, leading to limited rollout of solutions

During the reporting period, risk one, two and four did not materialize, whereas risk 3 materialized. No additional risks were identified.

- **Qualitative assessment:**

The overall achievements for the program have been slow due to the specific challenges, detailed in the report. However, during the reporting period, the team was successful in commencing the procurement process which involves the Quality Assurance Department, as well as deliver the CRRT Machine to the Mullaitivu Hospital as requested. As noted earlier in the report, this will help the hospital to effectively treat and manage emergency Covid 19 at hospital without having to transfer them to other hospitals.

The team was also able to strengthen contacts relevant hospital staff and strengthened existing relationships with district and local level government stakeholders. At national level, the team has established relationships with Suwa Seriya which is a key partner in Outcome 2.

ii) Indicator Based Performance Assessment:

	<u>Achieved</u> Indicator Targets	Reasons for Variance with Planned Target (if any)	Source of Verification
Outcome 1⁸ Indicator: Baseline: Planned Target:			
Output 1: Operationalization of two Intermediate Care Centers at the Sub-National level. Indicator: 1.1. Essential health care equipment and supplies procured for the treatment centers 1.2. % of medical waste disposed via HCWM unit Baseline: No. of ICU beds, ventilators and so forth available at the moment Planned Target: 5 ICU Beds 3 Advanced multipara monitors (GE) Portable ultrasound (Xario 100) Portable X-ray High-end CRRT (Continues Renal Replacement Therapy) Machine)	Procurement for the below equipment is underway: Five function ICU beds - 4 Nos. Advanced multipara monitor for ICU – 1No. Portable ultrasound Mobile X-ray High-end CRRT (Continues renal replacement therapy) - 5 Pumps 1 Medical Waste Incinerator Capacity 100 Kg/h The procurement is completed for 4 five function ICU Beds, 1 portable ultrasound machine and 1 High-end CRRT (Continues Renal Replacement Therapy Machine). The latter was delivered to the location. As detailed in the report, the procurement of the rest of the equipment is on-going. Tentatively, the ICU beds will be delivered in mid-April and mobile X-ray in 3rd week of May 2022. The medical waste incinerator could be delivered in 3rd week of May 2022.		

⁸ Note: Outcomes, outputs, indicators and targets should be **as outlined in the Project Document** so that you report on your **actual achievements against planned targets**. Add rows as required for Outcome 2, 3 etc.

<p>Output 2: Strengthen patient transfer mechanism through support to emergency ambulance services.</p> <p>Indicators:</p> <p>2.1 Number of new solutions to the Suwa Seriya system piloted and tested for scale up Baseline: 0</p> <p>2.2 Number of design thinking sessions conducted Baseline: 0</p> <p>2.3 Number of Suwa Seriya staff aware of safe and efficient patient transfer protocols Baseline: 0</p>	<p>Procurement of 12-lead ECG machines to strengthen the capabilities of the Suwa Seriya Ambulances is currently underway. This was identified as a key requirement as they respond to the ongoing Covid-19 pandemic, during the discussion with Suwa Seriya. Tentatively, these can be handed over by May 2022.</p> <p>Whilst no training for Suwa Seriya staff was conducted during the reporting period, the Terms of Reference for an online training platform for Suwa Seriya staff has also been finalized. This is focused on building the capacity of Suwa Seriya staff on safe and efficient patient transfer. Procurement of the services to develop the platform is ongoing. This will be completed by May 2022.</p>		
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iii) A Specific Story (Optional)

Dr. Vasuthevan, the District Medical Officer attached to the Mullaitivu District General Hospital noted that the Intensive Care Unit (ICU) in the hospital was set up and equipped in 2021. Continuous Renal Replacement Therapy is a 24-hour non-stop dialysis therapy used to support patients with renal (kidney) failure. CRRT gently filters and cleans patient's blood in the ICU. Prior to the procurement of the CRRT machine under the CDLG project, local patients, including patients who tested positive for COVID 19 had to be transferred to Vavuniya and Jaffna hospitals to receive treatment. For COVID 19 patients this was an additional risk which had to be borne by the hospital staff in order for patients requiring treatment for Covid-19 to also receive CRRT dialysis.

Due to the lack of a CRRT machine in the Mullaitivu Hospital, families of the patients had to also incur an additional cost in order to obtain such treatment elsewhere. If the patient succumbs to the illness whilst being treated in hospitals away from Mullaitivu, the transportation cost and other costs related to transferring the remains could amount to approximately 70,000 LKR, which could not be borne by an average family in the area. As a result of the procurement of the CRRT machine for the Mullaitivu Hospital, families in the region are now able to care for their loved ones whilst staying close to them.

Please see attached photos taken at the demonstration to hospital staff, explaining the functionalities of the CRRT machine.

Annex 1 – Abbreviations

CRRT	Continues renal replacement therapy
HCWM	Health Care Waste Management
ICU	Intensive Care Unit
PwDs	Persons with Disabilities
TOR	Terms of Reference

Annex 2 – The List of Items for Jaffna and Mullaitivu Emergency Treatment Centres

Requested item	Quantity	Status
Five function ICU beds	4	PO issued
Advanced multipara monitor for ICU	1	Pending QA approval
Portable ultrasound	1	Pending QA approval
Mobile X-ray	1	QA approved & the supplier has requested the PO in USD. The procurement team is attending to this.
High-end CRRT (Continues renal replacement therapy)	1 (5 Pumps)	PO issued & delivered.
Medical Waste Incinerator Capacity 100 Kg/h	1	PO issued. Jaffna hospital authorities are in the process of getting approval from environmental & local authorities for the location.

Requested item	Quantity
Five function ICU beds	4
Advanced multipara monitor for ICU	1
Portable ultrasound	1
Mobile X-ray	1
High-end CRRT (Continues renal replacement therapy)	5 Pumps
Medical Waste Incinerator Capacity 100 Kg/h	1