

**Implementation Status & Results**  
**Romania**  
**Health Sector Reform 2 Project (APL #2) (P078971)**

Operation Name: Health Sector Reform 2 Project (APL #2) (P078971)	Project Stage: Implementation	Seq.No: 17	Status: ARCHIVED	Archive Date: 28-Dec-2013
Country: Romania	Approval FY: 2005			
Product Line: IBRD/IDA	Region: EUROPE AND CENTRAL ASIA	Lending Instrument: Adaptable Program Loan		
Implementing Agency(ies):				

**Key Dates**

Board Approval Date	16-Dec-2004	Original Closing Date	31-Dec-2009	Planned Mid Term Review Date	26-Sep-2007	Last Archived ISR Date	29-May-2013
Effectiveness Date	27-Jun-2005	Revised Closing Date	31-Dec-2013	Actual Mid Term Review Date	26-Sep-2007		

**Project Development Objectives**

Project Development Objective (from Project Appraisal Document)

**The objective of the overall APL Program are as follows: (a) improve efficiency and equity in the planning and regulation of the health service delivery system; (b) reduce preventable deaths among emergency medical cases; (c) improve access and quality health care in poor and remote areas; and (d) help the Romanian health sector to better focus on priority public health problems, thereby reducing preventable illness and deaths. The specific objectives of Phase 2 are as follows: (i) Provide more accessible services, of increased quality and with improved health outcomes for those requiring maternity and newborn care and emergency medical care; and (ii) Provide support for the preparation of the primary health care strategy.**

Has the Project Development Objective been changed since Board Approval of the Project?

Yes     No

**Component(s)**

Component Name	Component Cost
MATERNITY AND NEONATAL CARE	104.87
EMERGENCY CARE SERVICES	47.23
NATIONAL HEALTH ACCOUNTS AND PLANNING	0.52
PROJECT MANAGEMENT	3.85
PRIMARY HEALTH CARE	3.00

**Overall Ratings**

	Previous Rating	Current Rating
Progress towards achievement of PDO	Satisfactory	Moderately Satisfactory
Overall Implementation Progress (IP)	Satisfactory	Moderately Satisfactory
Overall Risk Rating	Moderate	Moderate

**Implementation Status Overview**

A fifth extension of the closing date from March 15, 2013 to December 31, 2013, was granted to allow the completion of a financial impact assessment and enable the undertaking of some technical assistance activities in support of the preparation of a proposed newoperation in the health sector. The total level of disbursements under the project has reached US\$ 85 million (approx 107 % of the total loan funds - the over disbursement is generated by the evolution of the exchange rate over the entire project life.

Overall progress towards achieving the Project Development Objectives is Moderately Satisfactory. Though the targets for PDOs and most of the Intermediate Indicators have been exceeded in several areas, sole attribution to the Project should be read with caution since the civil works for the rehabilitation of maternities under the Project has been delayed. The great majority of these works (almost 90%) is being co-financed by the European Investment Bank (EIB). Besides the delays in the rehabilitation works caused by the revision of the architectural designs, their implementation is also hampered in 2013 by the lack of adequate counterpart funds affecting the disbursements of the EIB financed loan. The EIB loan has been extended until end of 2014.

With the support of the activities developed under Component 1 of the Project (Maternity and Neonatal Care), the Ministry of Health has developed maternal and neonatal referral system which ensures that women and newborns have access to appropriate levels of care complexity. Thus, with the support of the medical equipment purchased under the Project, the system now can provide an effective integrated modern prenatal, delivery and postpartum care, to both low and high risk pregnant women as well as high quality neonatal care. The implementation of the Integrated Emergency Health Care System supported by the Project became a best practice in the region, and several other countries are currently learning from this experience.

The second major PDO, namely the preparation of the strategy for the development and provision of primary health care services in under-served areas, has also been completed. The strategy is expected to be approved by the Government shortly, within the framework of the Health Sector Reform Strategy for next programing period of the European Union financing exercise for 2014-2020.

**Locations**

No Location data has been entered

**Results**

**Project Development Objective Indicators**

Indicator Name	Core	Unit of Measure		Baseline	Current	End Target
Maternal Mortality (MM) and Rate (MMR) (NEW)	<input type="checkbox"/>	Text	Value	MM: 52 MMR: 0.24/1000	MM: 14 MMR: 0.158/1000	20% decrease MMR: 0.19/1000
			Date	31-Dec-2004	15-Nov-2013	31-Dec-2013
			Comments		Data for 2013 available only for six months. Final data for 2013 will be available in March 2014. Although the value deteriorated, the end target was still exceeded. ICR will look into the causes.	Target exceeded during the project life.
Neonatal deaths and rate	<input type="checkbox"/>	Text	Value	Deaths: 2068 Rate: 9.6/1000	Deaths: 476 Rate: 5.4/1000	25% decrease from baseline Deaths: 1551 Rate: 7.2/1000
			Date	31-Dec-2004	15-Nov-2013	31-Dec-2013

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			Comments		Data for 2013 available only for six months. Final data for 2013 will be available in March 2014. Target exceeded.	The neonatal deaths decreased from 2004 to 2012 by 67,5%. Target exceeded during the project life.
Post-neonatal deaths and rate	<input type="checkbox"/>	Text	Value	Deaths: 1573 Rate: 7.3/1000	Deaths: 384 Rate: 4.3/1000	25% decrease from baseline Deaths: 1180 Rate: 5.5/1000
			Date	31-Dec-2004	15-Nov-2013	31-Dec-2013
			Comments		Data for 2013 available only for six months. Final data for 2013 will be available in March 2014. Target exceeded.	The post-neonatal deaths decreased from 2004 to 2012 by 60%. Target exceeded during the project life.
24-hour death rate among patients treated in the ER, then admitted to ICU in that hospital (NEW)	<input type="checkbox"/>	Text	Value	5.78% (for 6 ICUs)	5.85% (for 6 ICUs)	15% decrease 4.91% (for 6 ICUs).
			Date	30-Dec-2007	15-Nov-2013	31-Dec-2013
			Comments	ICU equipment was received by 6 of 63 hospitals which report on this indicator. Others will receive a small amount in late 2010. The series only report for 6 ICUs	Data for 2013 available only for six months. Performance deteriorated.Final data for 2013 will be available in March 2014. Usually the performance of the second half of the year is much better. ICR to analyze the causes once the final data will be available.	The 24-hour deaths rate reduced from 2007 to 2012 by 28%. Sample size too small for result to be significant. Target value is revised to comply with the Amendment dated December 15, 2011
Primary health care strategy approved	<input type="checkbox"/>	Yes/No	Value	No	No	Yes
			Date	15-Oct-2008	15-Nov-2013	31-Dec-2013
			Comments	In 2008, at the MidTermReview, there was no strategy for the PHC in place.	The strategy was elaborated and internally approved by the MoH. Its recommendations are being considered in the new MoH reform strategy for accession to EU Funds.	The strategy need to be formally approved by the MoH.

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**Intermediate Results Indicators**

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Indicator Name	Core	Unit of Measure		Baseline	Current	End Target
A1. Neonatal Mortality by level of MCH facilities (NEW)	<input type="checkbox"/>	Text	Value	Level 1: 1.14/1000 Level 2: 8.40/1000 Level 3: 10.60/1000	Level 1: 2.4/1000 Level 2: 2.85/1000 Level 3: 9.37/1000	Level 1: 10% decrease 3.7 Level 2: 10% decrease: 7.6 Level 3: 5% decrease: 9.6
			Date	31-Dec-2006	15-Nov-2013	31-Dec-2013
			Comments	Level 1 value revised to reflect MoH request for the Amendment no 5/December 15, 2011.	Data for 2013 available only for six months, covering 31 (out of 41) counties. Final data for 2013 will be available in March 2014. Usually the performance of the second half of the year is much better.	The neonatal mortality rate decreased of 32%, 40% and 36% by level of MCH facilities from 2006 to 2012. Target exceeded at the end of the project.
A2. Maternal Mortality by level of MCH facilities (NEW)	<input type="checkbox"/>	Text	Value	Level 1: 0.09/1000 Level 2: 0.07/1000 Level 3: 0.17/1000	Level 1: 0.09/1000 Level 2: 0.05/1000 Level 3: 0.14/1000	Level 1: 10% decrease Level 2: 10% decrease Level 3: 3.5% decrease
			Date	31-Dec-2006	15-Nov-2013	31-Dec-2013
			Comments		Data for 2013 available only for six months, covering 31 (out of 42) counties. Final data for 2013 will be available in March 2014. Usually the performance of the second half of the year is much better.	Target value is revised to comply with the Amendment dated December 15, 2011. The maternal mortality rate decreased by 33%, 28,5% and 70% by level of MCH facilities from 2006 to 2012. Target exceeded at the end of the project.
A3. Patient satisfaction with maternity/neonatal services	<input type="checkbox"/>	Text	Value	Level 1: 109/140 Level 2: 110/140 Level 3: 109/140	Level 1: __ /140 Level 2: __ / 140 Level 3: __ / 140	Level 1: 10% improvement Level 2: 10% improvement Level 3: 3.5% improvement
			Date	31-Dec-2008	15-Nov-2013	31-Dec-2013
			Comments	Survey completed and index computed	NA yet	Target value is revised to comply with the Amendment dated December 15, 2011. At the end of the project the patient satisfaction values have improved by 16,5%, 10% and 9,2% by each level of maternities.
B1. Response times for emergency services by urgency category and urban/rural areas (NEW)	<input type="checkbox"/>	Text	Value	Urban: R&Y-18min 25sec, Green-52min 33sec. Rural - R&Y: 24min 43sec Green - 36min 2sec	Urban: R&Y-14min 46sec, Green-53min 58sec. Rural - R&Y: 24min 31sec Green - 49min 20sec	Urban: R&Y - 15 min Green - 8% less than baseline Rural: R&Y -20 min; Green: 8% less than baseline
			Date	31-Dec-2007	15-Nov-2013	31-Dec-2013

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	<input type="checkbox"/>		Comments		Data for 2013 available only for six months. Final data for 2013 will be available in March 2014. Usually the performance of the second half of the year is much better.	Target not achieved. However, at the national level the average time response for all emergency services (including ambulances and integrated services SMURD) has been improved.
B2. Death Rate in Emergency Departments (dead patients/total alive presentations) (NEW)	<input type="checkbox"/>	Text	Value	0.079%	0.063 %	20% less than baseline: 0.064%
			Date	31-Dec-2007	15-Nov-2013	31-Dec-2013
			Comments		Data for 2013 available only for six months. Final data for 2013 will be available in March 2014. Usually the performance of the second half of the year is much better.	Target very closed to achieved.
B5. Fatality rate for patients treated in small ERs (NEW)	<input type="checkbox"/>	Text	Value	0.040%	0.048%	5% less than baseline
			Date	31-Dec-2008	15-Nov-2013	31-Dec-2011
			Comments		Data for 2013 available only for six months. Final data for 2013 will be available in March 2014. Usually the performance of the second half of the year is much better.	Revised target at restructuring.
B6. Fatality rate after 24 hours from admission of patients treated in hospital ICUs (NEW)	<input type="checkbox"/>	Text	Value	2.84%	3.87%	5% less than baseline
			Date	31-Dec-2007	15-Nov-2013	31-Dec-2013
			Comments	Revised as the Restructuring Amendment on December 2011.	Data for 2013 available only for six months. Performance deteriorated. Final data for 2013 will be available in March 2014. Usually the performance of the second half of the year is much better. Only reported for the 6 ICUs, which received equipment. ICR will look into the causes.	Target not achieved.
D1. (Health Accounts) Appropriate regulations issued with respect to main areas:(i) internationally comparable Romanian matrixes: (ii) institutional responsibilities and (iii) implementation schedule.	<input type="checkbox"/>	Text	Value	No	The report covering all the three agreed areas was completed, and accepted by the MOH.	3 of the 3 approved
			Date	31-Dec-2005	15-Nov-2013	31-Dec-2013

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			Comments		The enabling legal framework for the internalization of the detailed new NHA still not in place. Statistics Institute is still using the old template.	
D3. Average lag time implementing project activities beyond critical dates agreed in the MTR (NEW)	<input type="checkbox"/>	Text	Value	NA	ON time	Lag less that 3 months
			Date	31-Dec-2005	15-Nov-2013	31-Dec-2013
			Comments		Target achieved.	
D4. Timely submission of project progress reports	<input type="checkbox"/>	Text	Value	On time	On time.	On time (twice a year)
			Date	31-Dec-2005	15-Nov-2013	31-Dec-2013
			Comments		Target achieved.	

**Data on Financial Performance (as of 28-Jun-2013)**

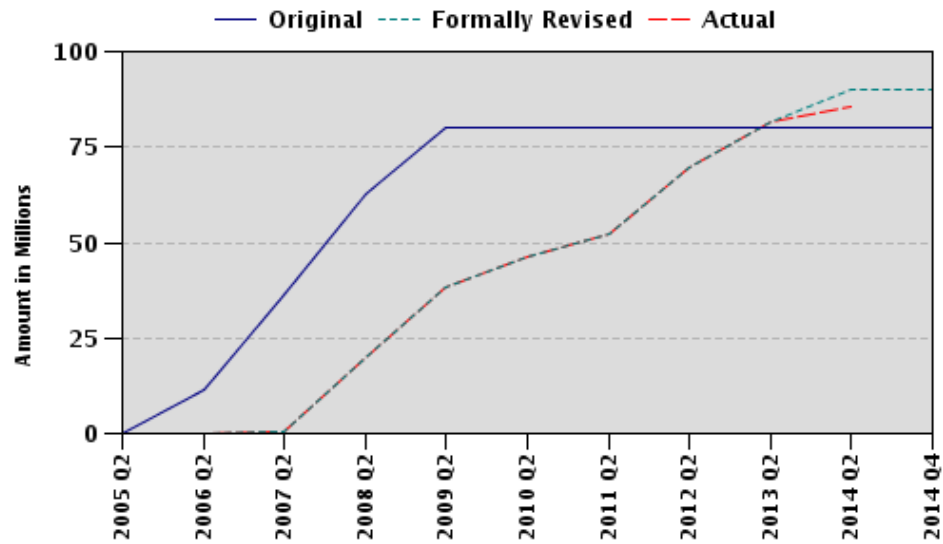
**Financial Agreement(s) Key Dates**

Project	Ln/Cr/Tf	Status	Approval Date	Signing Date	Effectiveness Date	Original Closing Date	Revised Closing Date
P078971	IBRD-47600	Effective	16-Dec-2004	28-Jan-2005	27-Jun-2005	31-Dec-2009	31-Dec-2013

**Disbursements (in Millions)**

Project	Ln/Cr/Tf	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	% Disbursed
P078971	IBRD-47600	Effective	USD	80.00	80.00	0.00	85.38	4.74	107.00

**Disbursement Graph**



**Key Decisions Regarding Implementation**

N/A

**Restructuring History**

Board Approved on 26-Nov-2008, CD Approved on 10-Nov-2009, Level two Approved on 17-Dec-2010, Level two Approved on 16-Feb-2011, Level two Approved on 14-Dec-2011, Level two Approved on 21-Nov-2012, Level two Approved on 14-Mar-2013

**Related Projects**

There are no related projects.