Health System Resiliency Strengthening (P150481)

MIDDLE EAST AND NORTH AFRICA | West Bank and Gaza | Health, Nutrition & Population Global Practice | Special Financing | Investment Project Financing | FY 2015 | Seq No: 2 | ARCHIVED on 10-Sep-2015 | ISR20357 |

Implementing Agencies: Ministry of Health

Key Dates

Key Project Dates

Board Approval date:21-Jan-2015
Planned Mid Term Review Date:15-May-2017
Original Closing Date:30-Jun-2020

Effectiveness Date:16-Feb-2015
Actual Mid-Term Review Date:-Revised Closing Date:30-Jun-2020

Project Development Objectives

Project Development Objective (from Project Appraisal Document)

The project PDO is to support the Palestinian Authority in securing continuity in healthcare service delivery and building its resilience to withstand future surge in demand for effective healthcare coverage.

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

Components

Name

Public Disclosure Authorized

Component 1: Emergency and Rapid Response Window:(Cost \$2.00 M)

Component 2: Rationalizing Outside Medical Referrals:(Cost \$3.50 M)

Component 3: Supporting health coverage to strengthen sector resilience:(Cost \$2.00 M)

Component 4: Project Management and Capacity Building: (Cost \$1.00 M)

Overall Ratings

Name	Previous Rating	Current Rating
Progress towards achievement of PDO	Satisfactory	Satisfactory
Overall Implementation Progress (IP)	Satisfactory	Satisfactory
Overall Risk Rating		High

Implementation Status and Key Decisions

Depsite the early age of the Project (6 months since launching), some good progress has already been achieved, specifically under Component 1: Emergency and Rapid Response Window and Component no. 2: Rationalizing Outside Medical Referrals. The first implementation support mission was conducted end May/Early June 2015, during which the Ministry re-iterated its commitment and support to the Project. The first meeting of the Steering Committee comprising the Minister of Health and Heads of Key departments at the Ministry of Health was held and action steps to move forward with the Project were agreed upon.

Regarding Component 2 (Rationalizing Outside Medical Referrals), a Referral Master Plan has been drafted. The Master Plan articulates a shared strategic vision to strengthen the medical referral system in the Palestinian territories. It summarizes the diagnostics and describes the recent trends in referral, including patient flows and expenditures. It also provides an analytical policy framework to assess the performance of the referral system and discusses the key challenges requiring comprehensive policy interventions. Furthermore, it proposes policy options for strengthening the referral system and outlines implementation arrangements to carry out the envisaged policy interventions with actions, areas of responsibility and a timeline of delivery.

The first round of consultations on the Master Plan has been completed during the May/June implementation support mission. A second round was launched in August 2015 and feedback is accordingly being compiled from development partners, Health Civil Socieity organziations, UNRWA and East Jerusalem hopsitals. Close coordination with all stakeholders involved is being closely observed in order to avoid any potential duplication in this area.

Based on the request from the Ministry, the Bank will be funding the purchasing of necessary equipment for two health facilities that would ultimately contribute towards reducing referrals. The bidding process for the first facility is almost complete and therefore the largely needed equipment should be made available in the coming period.

In addition to following up on Component 1 and 2, the next implementation support mission planned in October 2015 will address Component 3 (Supporting Health Coverage to Strengthen Sector Resilience) and will initiate the necessary consultations with all concerned stakeholders.

Risks

Systematic Operations Risk-rating Tool

Risk Category	Rating at Approval	Previous Rating	Current Rating
Political and Governance			• High
Macroeconomic			High
Sector Strategies and Policies			High
Technical Design of Project or Program			• High
Institutional Capacity for Implementation and Sustainability			• High
Fiduciary			• High
Environment and Social			High
Stakeholders			High
Other			
Overall			• High

Results

Project Development Objective Indicators

▶ The total cost of referral reduced by 15% (by end of the project) relative to baseline (Amount(USD), Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	144.00		0.00	120.00
Date	25-Jan-2015		02-Sep-2015	31-Dec-2019

► Gap in geographic equity for referral cost (between the West Bank and Gaza) reduced by 80 percent relative to baseline (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	1.7:1		0	1.15:1
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

▶ Utilization rates (out-patient, emergency and obstetrics) in the hospitals of Shifa and Rafedia do not deteriorate or improve up to 10% compared to a baseline end-September, 2014 (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Shifa occupancy: 89%, Rafedia occupancy: 85% Obstetrics Shifa: 76% Obsetrics Rafedia: 94% Outpatient Shifa: 578,646 Outpatient Rafedia: 163,262		Shifa occupancy: 89%, Rafedia occupancy: 85% Obstetrics Shifa: 76% Obsetrics Rafedia: 94% Outpatient Shifa: 578,646 Outpatient Rafedia: 163,262	Shifa occupancy: 89%, Rafedia occupancy: 85%Obstetrics Shifa: 76%Obsetrics Rafedia: 94%Outpatient Shifa: 578,646Outpati ent Rafedia: 163,262
Date	25-Jan-2015		02-Sep-2015	31-Dec-2019

Overall Comments

Intermediate Results Indicators

▶ A consolidated Health Information System (HIS) for referrals	, billing and health insurance in both West Bank and Gaza is fully
operational (Text, Custom)	

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Not operational		Not operational	A web-based system operational in all hospitals taking referrals
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

▶ HIS operational in selected hospitals (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00		0.00	10.00
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

▶ New referral contracts negotiated with all outside providers (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00		0.00	40.00
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

▶ Purchasing agency (either independent or part of the MOH) created, staffed and made operational (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0		0	Functional
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

31-Dec-2019

02-Sep-2015

25-Jan-2015

Date

▶ Direct project beneficiaries (Number, Core)					
	Baseline	Actual (Previous)	Actual (Current)	End Target	
Value	0.00		0.00		

26-Mar-2015

	Baseline	Actual (Previous)	Actual (Current)	End Target	
Value	0.00		0.00		

▶ Health facilities constructed, renovated, and/or equipped (number) (Number, Core)					
	Baseline	Actual (Previous)	Actual (Current)	End Target	
Value	0.00		0.00	5.00	
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019	

▶ Health personnel receiving training (number) (Number, Core)						
	Baseline	Actual (Previous)	Actual (Current)	End Target		
Value	0.00		0.00	500.00		
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019		

 Direct project beneficiaries 	(no) of which female	(%) (Text, Custom)
--	----------------------	--------------------

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Not available		0	50%
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

▶ External audit (medical and financial) (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Not available		Not available	Functional
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

▶ Grievance and Redress Mechanism (GRM) for OMRs and access to Health Care designed and fully operational by end of the project (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Not available		Not available	Fully functional
Date	25-Jan-2015		02-Sep-2015	31-Dec-2019

▶ Utilization rates (overall occupancy) in the hospitals of Shifa, Nasser Hospital and European Gaza hospital improve by up to 10% orretain the same ratio compared to a baseline end September 2014 (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	Shifa occupancy: 89% Nasser occupancy:74% European Gaza Hospital occupancy: 79%		Shifa occupancy: 89%Nasser occupancy:74%Europea n Gaza Hospital occupancy: 79%	Same ratio as baseline or above
Date	25-Jan-2015		02-Sep-2015	31-Dec-2019

▶ Communications strategy on UHC developed and consultation workshops with stakeholders conducted to promote the concept
of citizens'engagement (Text, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0		0	At least four workshops conducted
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

▶ People with access to a basic package of health, nutrition, or reproductive health services (number) (Number, Core)

	Baseline Actual (Previous) Actual (Currer		Actual (Current)	End Target	
Value			0.00		
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019	

▶ Referral protocols and procedures for the ten costliest conditions defined and rendered operational (Number, Custom)

	Baseline Actual (Previous)		Actual (Current)	End Target
Value			0.00	10.00
Date	25-Jan-2015	26-Mar-2015	02-Sep-2015	31-Dec-2019

Overall Comments

Data on Financial Performance

Disbursements (by loan)

Project	Loan/Credit/TF	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	Disbu	ırsed
P150481	TF-18986	Effective	USD	7.25	7.25	0.00	2.75	4.50		38%
Key Dates (by Ioan)										
Project	Loan/Credit/TF	Status	Approval Date	e Signir	ng Date E	Effectiveness [Date Orig.	Closing Date	Rev. Closing Date	Э
P150481	TF-18986	Effective	04-Feb-2015	04-Fe	b-2015 1	6-Feb-2015	30-Jur	n-2020	30-Jun-2020	

Cumulative Disbursements



Restructuring History

There has been no restructuring to date.

Related Project(s)

There are no related projects.