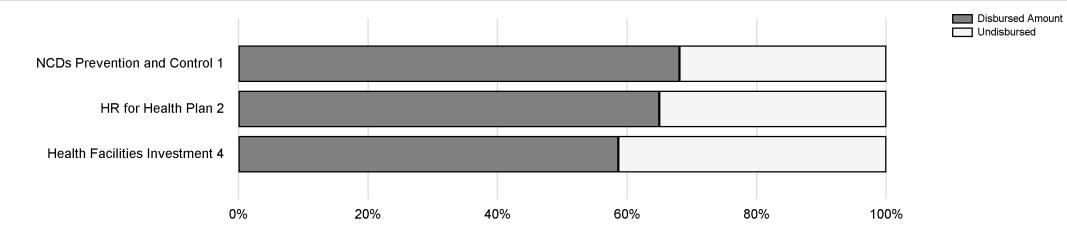
PMR Public Report

Operation Number	TT-L1039	Chief of Operations Validation Date	05/15/23
Year- PMR Cycle	Second period Jan-Dec 2022	Division Chief Validation Date	05/15/23
Last Update	05/15/23	Country Representative Validation Date	05/15/23
PMR Validation Stage	Validated by Representative		
Basic Data			
Operation Profile			
Operation Name	Health Services Support Program	Loan Number	3411/OC-TT
Executing Agency	MINISTRY OF HEALTH	Sector/Subsector	HEALTH-HEALTH SYSTEM STRENGTHENING
Feam Leader	HO-A-SHU, IAN	Overall Stage	Disbursing (From eligibility until all the Operations are closed)
Operation Type	Loan Operation	Country	Trinidad and Tobago
Lending Instrument	Investment Loan	Convergence related Operation(s)	
Borrower	TRINIDAD AND TOBAGO		
Environmental and Social	Safeguards		
mpacts Category	C	Was/Were the objective(s) of this operation reformulated?	NO
Safeguard Performance Rating		Date of approval	
Safeguard Performance Rating - Rationale			

			Total Cost and Source			Available Funds (US\$)				
Operations	Original IDB	Current IDB	Local Counterpart	Co-Financing / Country	Total Original Cost	Current IDB	Disb. Amount to Date	% Disbursed	Undisbursed Amount	
TT-L1039	110,000,000	48,400,000	0	0	110,000,000	48,400,000	40,478,587.22	83.63%	7,921,412.78	
Aggregated	110,000,000	48,400,000	0	0	110,000,000	48,400,000	40,478,587.22	83.63%	7,921,412.78	

Expense Categories by Loan Contract (cumulative values)



Please note that inactive indicators and outputs are not displayed; totals in the actual cost table may not match the sum of the cost of the outputs displayed, due to the cost of inactive outputs.

RESULTS MATRIX

General Development Objectives

General Development Objectives Nbr. 0: Lifestyle diseases management among adults improved

Observation:

					Year of Achievement		EOP 2023
communie	e mortality rate per 100,000 population for six non- cable diseases (ischemic heart disease, cerebrovascular hypertensive diseases, cancers, diabetes, chronic y illness)	adult male mortality rate per 100,000 population	740	2014	2021	P A	-

Details

Means of Verification: PAHO/WHO Country Profile on NCDs ; Annual Household Survey from Central Statistical Office

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator							
	Indicator				Unit o	f Measure	Baseline	Baseline Year	Expected Year of Achievement		EOP 2023
0.1	communicat	ole diseases (isch pertensive disease	r 100,000 populatio emic heart disease es, cancers, diabet	e, cerebrovascular	rebrovascular rate per 2		417	2014	2021	P A	375 -

Details

Means of Verification: PAHO/WHO Country Profile on NCDs ; Annual Household Survey from Central Statistical Office

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	

General Development Objectives Nbr. 1: Healthier weight status among primary school age children (5-13 years) achieved

Observation:

	Indicator	Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement		EOP 2023
1.0	Overweight/obese rate in primary school age children (5-13 years)	%	23	2014	2021	Р	21.85
						А	-

Details

Means of Verification: TT NCDs Risk Factor Survey (Pan American STEPS)

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	

RESULTS MATRIX

Specific Development Objectives

Specific Development Objectives Nbr. 0: Expanding obesity prevention programmes through physical activity and nutrition interventions.

Observation:

	Indicator	Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
0.0	Prevalence of physical inactivity among children in primary and secondary		75	2014	Р	75	72	70	68	68
	school				А	-	30	30	-	-

Details

Means of Verification: Pilot project evaluation survey

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator									
		1	1										
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
0.1				%	70	2014	Р	70	67	65	63	63	
Deteile	more high-	sugar beverage d	ally					A	-	70	65	-	-

Details

Means of Verification: Pilot project evaluation survey

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator						
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	2
0.2	Prevalence	of men consumir	ng less than five s	ervings of fruits and vegetables	%	92.8	2014	Р	92.8	9
								А	-	

Details

Means of Verification: TT NCDs Risk Factor Survey (Pan American STEPS) **Observations:**

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator						
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	20
0.3	Prevalence	of women consu	iming less than five	e servings of fruits and vegetabl	es %	89.3	2014	Р	89.3	8
								А	-	

Details

Means of Verification: TT NCDs Risk Factor Survey (Pan American STEPS) **Observations:**

Obscivations.

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	

Specific Development Objectives Nbr. 1: Improving management of Non-Communicable Diseases (NCD) risk factors through expanded screening and treatment of NCDs.

Observation:

92.3 91.5 90.8 90.8	19	2020	2021	EOP 2023
	.3	91.5	90.8	90.8
		-	-	-

2019	2020	2021	EOP 2023
38.8	88.2	87.3	87.3
-	-	-	-

	Indicator	Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
1.1	Number of Regional Health Authorities using chronic care model	#	0	2014	Р	-	1	4	-	5
					А	-	1	3	-	-
Details										

Means of Verification: RHA Statistical Reports

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator									
	1		1										
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
1.2	Number of	RHAs using new	clinical guidelines	for screening, prevention,	#	0	2014	Р	-	2	3	-	5
	2 Number of RHAs using new clinical guidelines for screening, prevention, diagnosis, and management of six non-communicable diseases (ischemic heart disease, cerebrovascular disease, hypertensive diseases, cancers, diabetes, chronic respiratory illness)							A	-	-	3	-	-
Details													

Means of Verification: RHA Statistical Reports

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator									
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
1.2	1.2 Proportion of men with diabetes having an annual foot exam to manage the				%	15	2014	Р	15	15.5	16	17	17
	diabetes							А	-	8	8	-	-
Details													

Means of Verification: TT NCDs Risk Factor Survey (Pan American STEPS)

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator									
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
1.3					%	23	2014	Р	23	23.5	24	25	25
	diabetes							А	-	5	5	-	-
Detaile													

Details

Means of Verification: TT NCDs Risk Factor Survey (Pan American STEPS)

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator									
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
1.4	Proportion	of pregnant wome	en being screened	for diabetes	%	10	2014	Р	10	15	18	20	20
								А	-	5	12	-	-
Details													

Means of Verification: TT NCDs Risk Factor Survey (Pan American STEPS); RHA Antenatal Clinics and Laboratories Statistical Reports

Observations:

Evaluation Methodology: -

No	Pro-Ethnicity	No	CRF indicator									
									-			
Indicator				Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
Proportion of	of men with untrea	ated or uncontroll	ed raised blood pressure	%	25	2014	Р	25	24.5	24	23	23
							А	-	10	10	-	-
	Indicator	Indicator	Indicator		Indicator Unit of Measure	Indicator Unit of Measure Baseline	Indicator Unit of Measure Baseline Baseline Year	Indicator Unit of Measure Baseline Year	Indicator Unit of Measure Baseline Baseline Year 2017 Proportion of men with untreated or uncontrolled raised blood pressure % 25 2014 P 25	Indicator Unit of Measure Baseline Baseline Year 2017 2019 Proportion of men with untreated or uncontrolled raised blood pressure % 25 2014 P 25 24.5	Indicator Unit of Measure Baseline Baseline Year 2017 2019 2020 Proportion of men with untreated or uncontrolled raised blood pressure % 25 2014 P 25 24.5 24	Indicator Unit of Measure Baseline Baseline Year 2017 2019 2020 2021 Proportion of men with untreated or uncontrolled raised blood pressure % 25 2014 P 25 24.5 24 23

Details

Means of Verification: TT NCDs Risk Factor Survey (Pan American STEPS) **Observations:**

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator						
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	20
1.6	Proportion of	of women with un	treated or uncontr	olled raised blood pressure	%	16	2014	Р	16	1:
								А	-	

Details

Means of Verification: TT NCDs Risk Factor Survey (Pan American STEPS)

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	

Specific Development Objectives Nbr. 2: Improving human resources for health management through enhanced Human Resources Leadership, Governance and Accountability

Observation:

	Indicator	Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
2.0	Percentage of e-HRHIS modules implemented at the RHAs	%	0	2017	Р	-	40	60	100	100
					А	-	-	-	-	-
Details										

Means of Verification: MoH/RHA reports

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator						
										-
	la l'actan					Describer			0017	
	Indicator				Unit of Measure	Baseline	Baseline Year		2017	2
2.1	Percentage	e of standardized	HR Policies implei	mented at the RHAs	%	0	2017	Р	-	
								А	-	

Details

Means of Verification: Regional Health Authority Annual Reports **Observations:**

Evaluation Methodology: -

2019	2020	2021	EOP 2023
15.5	15	14	14
8	8	-	-

2019	2020	2021	EOP 2023
40	60	100	100
-	-	-	-

Specific Development Objectives Nbr. 3: Improving service delivery through an electronic health records based Health Information Management Systems

Observation:

	Indicator	Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
3.0	Percentage of Health centers utilizing Electronic Medical Records	%	0	2017	Р	-	60	80	100	100
					А	-	10	30	-	-
Details										

Means of Verification: Regional Health Authority Annual Reports

Observations:

Evaluation Methodology: -

Specific Development Objectives Nbr. 4: Expanding service delivery through a modern Health Facilities Investment Management system.

Observation:

	Indicator	Unit of Measure	Baseline	Baseline Year		2017	2019	2020	2021	EOP 2023
4.0	Percentage of health facility investment decisions made utilizing the 'Health	%	0	2017	Р	-	40	60	100	100
	Facilities Network Analysis'				A	-	-	-	-	-
Detaile										

Details

Means of Verification: Project Management Unit (PMU) Reports **Observations:**

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	
		1	•		

OUTPUTS: ANNUAL PHYSICAL AND FINANCIAL PROGRESS

Component Nbr. 1 Implementation of NCD Prevention and Control Plan

				PHYSICAL PR	ROGRESS	FINANCIAL PROGRESS		
	Output	Unit of Measure		2022	EOP 2023	2022	EOP 2023	
	Policies developed and presented to Cabinet (1) Primary and Secondary school nutrition and physical	Policies	Р	-	6	-	90,00	
1.01	activity; 2) National food and nutrition policy with dietary guidelines; 3) physical activity; 4) harmful alcohol use 5) policy to provide routine screening and treatment for Non-communicable diseases within		P (a)	-	6	154,589	274,90	
	the primary care system and 6) national health promotion policy		A	-	6	8,010	110,32	
	Health care professionals trained in Clinical Guidelines for standardized screening, prevention, diagnosis,	Staff	Р	-	395	-	55,00	
1.02	and management of six non-communicable diseases and related risk factors (ischemic heart disease, cerebrovascular disease, hypertensive diseases, cancers, diabetes, chronic respiratory illness)		P (a)	-	481	-	110,21	
			А	-	481	-	110,21	
	Schools provided with exercise and BMI/Growth Monitoring equipment for the national roll out of the	Schools	Р	-	700	-	8,330,00	
1.03	'Healthy schools TT' project		P (a)	623	700	3,804,085	4,460,19	
			A	624	624	3,119,611	3,775,72	
	Schools' health promotion capacity strengthened with training and communication material packages for	Schools	Р	-	700	-	2,030,00	
1.04	the national roll out of the 'Healthy schools TT' project		P (a)	76	700	471,568	949,59	
			A	10	557	-	138,04	
	Healthy Youth Wellness TT Program implemented in youth facilities	Youth facilities	Р	-	12	-	600,00	
1.05			P (a)	-	13	479,518	1,053,72	
			A	-	13	3,861	376,17	
	Cancer Clinic equipped and staffed to deliver National Lung Cancer Early Detection and Management	Cancer clinics	Р	-	3	-	800,00	
1.06			P (a)	1	3	600,279	1,362,90	
			A	1	3	279,883	1,033,81	
	Smoking Cessation program guidelines designed and communicated to staff in primary care centers	Guidelines	Р	-	7	-	50,000	
1.07			P (a)	-	7	55,294	243,86	
			A	-	7	12,325	50,38	
	Comprehensive, life course, gender sensitive Behavior Change Communication (BCC) campaign to address	Campaigns	Р	-	1	-	5,742,00	
1.08	risk factors and Non-communicable diseases designed and implemented		P (a)	1	1	1,111,500	2,190,37	
			A	1	1	587,628	1,565,15	
	Baseline and End of project studies carried out on Combined STEPS/Salt/Trans-Fat Study	Studies	Р	-	2	-	1,200,00	
1.09			P (a)	1	2	253,677	689,69	
			A	-	-	-		
	Health care professionals trained in gender sensitivity to detect the gender based risks	Staff	Р	-	395	-	50,00	
1.10			P (a)	92	395	40,000	46,58	
			A	-	195	-	3,29	
	RHA health care professionals trained in new Chronic Care Model	Staff	Р	-	395	-	250,00	
1.11			P (a)	108	395	300,000	1,425,474.1	
			A	-	287	21,839	146,579	
	NCDs Surveillance Registries Surveillance business plans developed and established	Registries	Р	-	4	-	1,500,00	
1.12			P (a)	2	4	150,000	523,69	
			A	-	1	-		
	Patient self-management and education material booklets on NCDs and Risk Factors available at the RHA	Primary care centers	Р	-	97	-	200,00	
1.13	primary health centers		P (a)	-	293	11,161	69,15	
			A	135	293	25,017	69,158	
1.14	Cancer screening tests carried out	Screening tests	Р	_	60,510		1,770,000	

4.44	Cancer screening tests carried out	Screening tests	P (a)	-	118,647	498,358	4,118,744
1.14			А	-	118,647	217,326	4,118,744
	NCDs Unit staffed with Director and Medical Epidemiologist	Staff	Р	-	2	-	648,000
1.15			P (a)	3	3	150,578	27,354
			A	1	-	23,375	23,375
	NCDs Project Coordinator hired for Tobago	Staff	Р	-	1	-	230,000
1.16			P (a)	1	1	10,000	38,715
			A	1	1	-	22,500
	Women screened for gestational diabetes	# of beneficiaries	Р	-	36,000	-	1,350,000
1.17			P (a)	-	245,653	108,647	1,504,193
			А	-	90,653	-	1,504,193
	Gestational Diabetes Management Program implemented	program	Р	-	-	-	-
1.18			P (a)	1	1	2,351,343	2,369,235
			A	1	1	521,796	844,918
	Emergency Public Health Flood Relief Insecticides	drums	Р	-	-	-	-
1.19			P (a)	-	110	-	464,563
			A	-	110	-	464,563
	Chief Medical Physicist	Staff	Р	-	-	-	-
1.20			P (a)	1	4	65,000	455,279
			A	1	4	60,102	412,705
	Public Health Facilities outfitted with medical equipment and supplies for COVID-19 response	facilities	Р	-	-	-	-
1.21			P (a)	-	26	-	1,499,673
			A	6	26	-	1,499,673
	COVID-19 Quarantine Facilities equipped	facilities	Р	-	-	-	-
1.22			P (a)	-	2	-	-
			A	-	2	-	-
	BCC COVID-19 Campaign delivered	Campaign	Р	-	-	-	-
1.23			P (a)	-	7	661,873	1,244,519
			A	5	7	406,392	1,244,519
	Advance market commitment for COVID-19 vaccines	payment	Р	-	-	-	-
1.24			P (a)	-	1	-	1,477,344
			A	-	1	-	1,477,344
	Payment for COVID-19 vaccine (when available)	payment	Р	-	-	-	-
1.25			P (a)	-	1	169,967	292,648
			A	-	1	12,424	292,648

Component Nbr. 2 Execution of Human Resources for Health Plan

			PHYSICAL PR	OGRESS	FINANCIAL PR	OGRESS	
	Output	Unit of Measure		2022	EOP 2023	2022	EOP 2023
	New standardized HRH Policies with Change Management and Communication Plan implemented in RHAs	RHAs	Р	-	5	-	50,00
2.01			P (a)	-	49	26,885	172,51
			А	-	49	-	145,62
	HRH Unit strengthened	Unit	Р	-	5	-	50,00
2.02			P (a)	-	5	-	53,27
			А	-	5	-	19,91
	e-HRHIS designed and installed at each RHA	RHAs	Р	-	5	-	1,000,00
2.03			P (a)	5	5	644,880	791,57
			А	-	-	3,668	3,66
	Education programs offered by the following institutions updated to include a public health component to address NCDs and risk factors: UWI; COSTAATT; USC; UTT	Education programs	Р	-	25	-	40,00
2.04		-	P (a)	12	25	94,831	900,32
			А	5	13	-	792,21
	Directors of RHA Boards and executive management of RHAs trained on setting and achieving performance measures to address NCDs community health targets	Persons trained	Р	-	100	-	170,00
2.05			P (a)	22	100	102,000	141,18
			A	-	78	23,624	62,81
	Physicians have attained post graduate specialty training in either oncology or endocrinology	Physicians	Р	-	5	-	2,000,00
2.06			P (a)	5	5	350,000	450,00
			А	-	-	-	
	Nurses have attained continued education qualification in either nephrology or oncology	Nurses	Р	-	25	-	1,000,00
2.07			P (a)	-	25	350,000	363,26
			A	-	25	-	13,26
	NWRHA Staff participated in Caring for the Caregivers' Staff Wellness pilot for 12 months	Staff	Р	-	2,500	-	850,00
2.08			P (a)	2,000	1,150	144,796	150,00
			A	650	650	489	48
	Health care personnel recruited for the COVID-19 treatment centers	Health care personnel	Р	-	-	-	
2.09			P (a)	123	1,116	1,309,282	8,213,63
			A	108	1,116	1,869,417	8,213,63
	Health care personnel in COVID-19 treatment centers trained	Health care personnel	Р	-	-	-	
2.10			P (a)	-	1,358	91,063	195,00
			А	200	1,358	78,821	182,75

Component Nbr. 3 Implementation of an e-Health Information Management System

				PHYSICAL F	PROGRESS	FINANCIAL	PROGRESS
	Output	Unit of Measure		2022	EOP 2023	2022	EOP 2023
	Electronic Health Record (EHR) for the RHAs developed, tested and installed at pilot sites in the RHAs	Pilot sites	Р	-	1	_	1,500,000
3.01			P (a)	5	36	1,500,000	1,500,000
			А	8	26	_	-
	Software licenses for Electronic Health Record (EHR) purchased	Software Licenses	Р	-	7	-	500,000
3.02			P (a)	2	13	1,000,000	1,200,000
			А	3	9	-	-

Component Nbr. 4 Strengthening Health Facilities Investment Management

				PHYSICAL P	PROGRESS	FINANCIAL PR	OGRESS
	Output	Unit of Measure		2022	EOP 2023	2022	EOP 2023
	Health Facilities Network Analysis report completed	Reports	Р	-	1	-	800,00
4.01			P (a)	1	1	22,794	85,65
			А	-	-	-	12,13
	Pre-feasibility analysis report completed	Reports	Р	-	1	-	500,00
4.02			P (a)	-	1	-	
			А	-	-	-	
	PPP Model options study for health services delivery completed	Studies	Р	-	1	-	300,00
4.03			P (a)	-	1	-	82,60
			А	1	1	-	82,60
	Step by Step PPP implementation Guide, PPP Contract Teamplates and lease arrangements report	Reports	Р	-	-	-	
4.04	delivered.		P (a)	-	-	-	
			А	-	-	-	
	Facilities Asset Management System developed and installed	systems	Р	-	1	-	800,00
4.05			P (a)	1	1	377,912	517,91
			А	-	-	-	
	Guidelines for Standard Operating Procedures (SOPs) completed for: (i) planning (ii) design (iii)	Guidelines	Р	-	7	-	400,00
4.06	construction (iv) maintenance (v) commissioning (vi) decommissioning and (vii) the procurement, disposal and decommissioning of defective and/or "old" biomedical equipment		P (a)	-	19	-	
			А	2	19	-	
	Computerized Routine Maintenance Management System (RMMS) developed and installed at the Project	systems	Р	-	1	-	650,00
4.07	Management Unit (PMU)		P (a)	1	1	-	
			А	-	-	-	
	Procurement Procedures for the new Procurement Unit at the MOH developed.	Procurement Procedures	Р	-	3	-	50,00
4.08			P (a)	1	3	84,127	316,75
			А	-	-	-	156,85
	Professional Staff working in the Project Management Unit	Staff	Р	-	7	-	1,100,00
4.09			P (a)	1	7	128,450	489,38
			А	1	6	84,670	388,71
	PPP Study tours completed	Study Tours	Р	-	4	-	50,00
4.10			P (a)	2	4	31,900	50,00
			А	-	1	-	18,10
	Emergency Public Health Systems Developed	systems	Р	-	-	-	
4.11			P (a)	-	2	-	825,229.4
			А	-	2	-	825,229.4
	Command Center equipped for COVID-19 response	Command centre	Р	-	-	-	
4.12			P (a)	-	9	170,650	879,82
			А	-	9	248,687	842,77
	Public Health Laboratories equipped for COVID-19 response	Public Health Labatories	Р	-	-	-	
4.13			P (a)	-	3	9,895	65,00
			А	_	3	3,888	58,92

Other Cost				
	Project Coordinator	Р		240,000
		P (a)	133,088	327,763

Project Coordinator	А	2,619	97,294
Financial Specialist	Р		282,983.05
	P (a)	166,258	388,620
	А	67,970	151,644
Administrative Assistant	Р		79,661.02
	P (a)		33,681
	А	0	33,681
M & E Specialist	Р		210,000
	P (a)	99,829	261,160
	А	6,509	17,677
Procurement Specialist	Р		240,000
	P (a)	190,964	587,907
	А	116,432	270,626
Office Equipment	Р		41,000
	P (a)	158,210	480,123
	А	69,770	398,453
Auditing	Р		120,000
	P (a)	30,471	204,412
	A	73,650	123,684
Mid Term Evaluation	Р	, 	25,000
	P (a)	0	25,011
	Α	0	25,011
Monitoring Activities	Р		36,000
	P (a)	0	406
	A	0	406
Final Project Evaluation; Project Completion Report; Exit Workshop	P		30,000
	P (a)	0	34,780
	A	4,780	4,780
Technical Director	P	4,780	385,000
	-	0	216,536.79
	P (a)		
	A P	525	87,663.79
PROPEF (TT-L1035) Repayment			1,105,846.66
	P (a)	0	1,105,846.66
	A	0	1,105,846.66
Contingencies	Ρ		894,153.34
	P (a)	175,000	238,788
	A	0	31,894
Project Communication Consultant	Р		50,000
	P (a)	0	70,588
	A	0	0
Impact Evaluation of "Healthy Schools TT" pilot	Р		235,000
	P (a)	0	0
	А	0	0
Comprehensive, life course, gender sensitive behavior change and communication (BCC) campaign to address NCDs and risk factors evaluation	Р		185,355.93
	P (a)	6,000	70,000
	А	0	0

Total Cost				
	Total Cost	Р	0	51,900,000
		P (a)	18,846,722	48,400,000
		А	7,955,108	33,471,004.87

CHANGES TO THE MATRIX

Section	Name	Type of Change	Sub type	Modified By	Entered in System
put	Baseline and End of project studies carried out on Combined STEPS/Salt/Trans-Fat Study	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/15/2023
			Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	BCC COVID-19 Campaign delivered	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	ALEWIS	3/15/2023
			Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ALEWIS	3/15/2023
	Cancer Clinic equipped and staffed to deliver National Lung Cancer Early Detection and Management	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/10/2023
	Cancer screening tests carried out	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/15/2023
	Command Center equipped for COVID-19 response	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/5/2023
	Education programs offered by the following institutions updated to include a public health component to address NCDs and risk factors: UWI; COSTAATT; USC; UTT	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	Electronic Health Record (EHR) for the RHAs developed, tested and installed at pilot sites in the RHAs	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/10/2023
			Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	Gestational Diabetes Management Program implemented	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/10/2023
	Guidelines for Standard Operating Procedures (SOPs) completed for: (i) planning (ii) design (iii) construction (iv) maintenance (v) commissioning (vi) decommissioning and (vii) the procurement, disposal and decommissioning of defective and/or "old" biomedical equipment	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ALEWIS	3/15/2023
	Health care personnel in COVID-19 treatment centers trained	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ALEWIS	3/15/2023
	Health care personnel recruited for the COVID-19 treatment centers	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	ALEWIS	3/15/2023
			Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ALEWIS	3/15/2023
	Health care professionals trained in gender sensitivity to detect the gender based risks	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/5/2023
			Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	Healthy Youth Wellness TT Program implemented in youth facilities	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/10/2023
	NCDs Unit staffed with Director and Medical Epidemiologist	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	ALEWIS	3/15/2023
	NWRHA Staff participated in Caring for the Caregivers' Staff Wellness pilot for 12 months	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ALEWIS	3/15/2023
	Patient self-management and education material booklets on NCDs and Risk Factors available at the RHA primary	Modify OutputModify Financial EOP P(a) value - causeby a change in the Financial P(a).	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	ALEWIS	3/15/2023
	health centers		Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ALEWIS	3/15/2023
	Physicians have attained post graduate specialty training in either oncology or endocrinology	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/5/2023
	Policies developed and presented to Cabinet (1) Primary and Secondary school nutrition and physical activity; 2) National food and nutrition policy with dietary guidelines; 3) physical activity; 4) harmful alcohol use 5) policy to provide routine screening and treatment for Non- communicable diseases within the primary care system and 6) national health promotion policy	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/5/2023
	PPP Model options study for health services delivery completed	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ALEWIS	3/15/2023
	Pre-feasibility analysis report completed	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023

Output	Procurement Procedures for the new Procurement Unit at the MOH developed.	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	Professional Staff working in the Project Management Unit	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/5/2023
			Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	Public Health Facilities outfitted with medical equipment and supplies for COVID-19 response	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ALEWIS	3/15/2023
	RHA health care professionals trained in new Chronic Care Model	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/10/2023
	Schools' health promotion capacity strengthened with training and communication material packages for the national roll out of the 'Healthy schools TT' project	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	Schools provided with exercise and BMI/Growth Monitoring equipment for the national roll out of the 'Healthy schools TT' project	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	Software licenses for Electronic Health Record (EHR) purchased	Modify Output	Modify Financial EOP P(a) value - caused by a change in the Financial P(a).	DAFOONJONES	5/10/2023
			Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023
	Women screened for gestational diabetes	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	DAFOONJONES	5/5/2023

RISKS AND PLANNED RESPONSES

	NNED RESPONSES					
Risk ID		Risk Status	Risk Taxonomy			
		Active	Human Resources			
	Response Actions					
		Management Strategy	Status			
1	1.01	MITIGATE	ACTIVE			
		Management Strategy	Status			
	1.02	MITIGATE	ACTIVE			
Risk ID		Risk Status	Risk Taxonomy			
		Inactive	Legal Environment			
	Response Actions					
2		Management Strategy	Status			
	2					
Risk ID		Risk Status	Risk Taxonomy			
		Active	Internal Processes			
	Response Actions					
3		Management Strategy	Status			
	3.01	MITIGATE	INACTIVE			
Risk ID		Risk Status	Risk Taxonomy			
		Active	Internal Processes			
	Response Actions					
4		Management Strategy	Status			
	4.01	MITIGATE	INACTIVE			
Risk ID		Risk Status	Risk Taxonomy			
		Active	Human Resources			
	Pornonco Actions					
5	Response Actions	Management Strategy	Status			
5	5.01	MITIGATE	COMPLETE			
	5.01					

Lesson Learned - Categories
Project Management Capacity
Intra/Inter Coordination
Others - Fiduciary Dimensions