MID TERM REVIEW REPORT

NIP Update, Integration of POPs into National Planning and Promoting Sound Healthcare Waste Management in Kazakhstan

(GEF project ID 4612 / UNDP project ID 4442)

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- Objective CHEM-1: Phase out POPs and Reduce POPs Releases.
- Objective CHEM-3: Pilot Sound Chemicals Management and Mercury Reduction
- Objective CHEM-4: POPs Enabling activity

The project is being implemented by the United Nations Development Programme (UNDP). The project's Executing Agency/Implementing Partner is the Ministry of Energy (former Ministry of Environment Protection).

The evaluation mission team consisted of Ms. Ute Pieper (Team Leader) and Ms. Olga Klimanova (National Consultant), who were accompanied to meetings and field visits by the Project Manager (Ms. Nina Gor), the project Procurement Assistant (Ms. Madina Kassenova) or the Project Expert (Ms. Assel Shakhanova).

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Acronyms and Abbreviations

APR	Annual Project Report
AWP	Annual Work Plan
DDT	Dichlorodiphenyltrichloroethane
GEF	Global Environment Facility
НСН	Hexachlorocyclohexane
M&E	Monitoring & Evaluation
MEAs	Multi Environmental Agreements
MoE	Ministry of Energy
MoEP	Ministry of Environmental Protection
MTR	Mid Term Review
NGO	Non-Governmental Organization
NIP	National Implementation Plan
PIR	Project Implementation Review
POPs	Persistent Organic Pollutants
PPE	Personal Protection Equipment
PCDD/F	Polychlorinated dibenzodioxins/furans (Dioxin / Furan)
ProDoc	Project Document
RK	Republic of Kazakhstan
UNDP	United Nations Development Programme
UNEP	United Nations Environment Programme
U-POPs	Unintentional released POPs
USD	United States Dollar

1 Executive Summary

1.1 Project Description

In order to provide a first overview of the project, the table below is summarizing the facts of the project. Furthermore, the project background and content is described.

PROJECT TITLE: NIP UPDATE, INTEGRATION OF POPS INTO NATIONAL PLANNING AND PROMOTING SOUND HEALTHCARE WASTE MANAGEMENT IN KAZAKHSTAN

UNDP PROJECT ID	4442	PIF Approval Date	2011-11-21
GEF PROJECT ID (PMIS)	4612	CEO Endorsement Date	2013-08-06
ATLAS BUSINESS UNIT, AWARD PROJ. ID:	00071893	Project start	2013-10-22
COUNTRY	Kazakhstan	Date project manager hired	2014-04
REGION	Europe and Central Asia	Inception Workshop date	2014-04-29 2014-04-30
FOCAL AREA	POPs	Midterm Review completion date:	2016-09-30
GEF FOCAL AREA STRATEGIC OBJECTIVE:	Persistent Organic Pollutants, CHEM-1, 3,4	Planned closing date	2017-09-22
TRUST FUND	GEF Trust Fund	If revised, proposed closing date:	2017-10-22
EXECUTIVE AGENCY / IMPLEMENTING PARTNER	Ministry of Enviror	nment Protection of the Repub	lic of Kazakhstan
PROJECT FINANCING	At CE	O endorsement	At Midterm Review
PROJECT PREPARATION GRANT AMOUNT	1	25,000 USD	
GEF PROJECT GRANT	3,	400,000 USD	1,240,773 USD
GEF GRANT	3,	525,000 USD	
COFINANCING TOTAL	16	,011,000 USD	
PROJECT COST	19	,536,000 USD	
GEF AGENCY FEES	4	40,000 USD	
GEF PROJECT (CEO ENDO.)	3,	400,000 USD	
COFINANCING TOTAL (CEO ENDO.)	35	,012,758 USD	
PROJECT COST (CEO ENDO.)	38	,537,758 USD	
GEF AGENCY FEES (CEO ENDO.)	3	40,000 USD	

The United Nation Development Program (UNDP)-supported GEF-financed project «NIP update, integration of POPs into national planning and promoting sound healthcare waste management in Kazakhstan» has the target of reducing emission levels of unintentional released persistent organic pollutants (uPOPs) and other pollutants in the environment by promoting sound healthcare waste management in Kazakhstan; and to assist the country in implementing commitments in the framework of Stockholm convention.

The project is working in four main dimensions.

- 1. The first outcome is related to **updating national implementation plan** for the commitments under Stockholm convention in the part of new and unintentional persistent organic pollutants, increase POPs monitoring capability, and improve institutional coordination of INC on chemicals.
- 2. The second outcome is aimed at **assessment of mercury situation** in general, to prepare recommendations on accession to Minamata convention and draft preliminary plan on reduction of mercury use.
- 3. In the third outcome the plan is to conduct activities, aimed at taking measures **to minimize emissions of uPOPs** when decontaminating healthcare waste. And it is aimed at creation and demonstration of the safe healthcare waste management system in pilot territories. As pilots, the following have been selected: East-Kazakhstan, Kostanay regions and the city of Astana.
- 4. The fourth component is aimed at monitoring, education, adaptation and feedback.

The project document was signed in October 2013, and project implementation started in April 2014. The full project budget is 38.4 million USD, with contribution of GEF of 3.4 million USD.

1.2 Summary of Project Results

The project has made progress in each of the components and has implemented activities to receive the objective and outcomes satisfactory. The Objective to "to reduce the releases of unintentionally produced POPs and other globally harmful pollutants into the environment by promoting sound healthcare waste management in Kazakhstan, and to assist the country in implementing its relevant obligations under the Stockholm convention" is currently mainly tackled by the update of the NIP and the improving of the legal framework of the country and by phasing out of mercury containing devices.

The main positive result in the achievement of project objectives with regard to the legislative framework (Component 1) is the update of the NIP on new POPs, the introduction of amendments and additions to the Environmental Code in terms of destruction of POPs and by the assessment on institutional gaps and proving of recommendations to comply with the requirements of the three chemicals related conventions. However, the work on improvement of the legal framework continues. The project is actively working with the Ministry of Energy on amendments and additions to the Order regulating the handling of POPs. Despite the fact that the process to establish a POPs monitoring system in Kazakhstan is delayed. The work on the creation of a methodological framework for the analysis of POPs in the environment and biological materials is carried out; together with the hydrometeorological service works on air monitoring in the five regions are carried out, the capacity assessed and capacity strengthened.

The project achieved the mid-term targets on mercury management (Component 2). In cooperation with the state bodies the work on preparing the country for signing of the Minamata Convention has carried out. The ratification of the Minamata Convention has been included into long-term plan to enter into international treaties of the Republic of Kazakhstan for 2017-2019. The work on the accession to the Convention will be continued under support of the project. An agreement to refuse the use of mercury thermometers in the healthcare system has been signed with the health authorities in the pilot regions.

To accomplish the targets of Component 3 of the project, in terms of creation of a pilot system of infectious healthcare waste treatment methods alternative to incineration, the locationand buildings of

such centers have been identified and the purchase process of autoclaves and transport vehicles is almost finalized. Based on the delayed start of the project and long procurement process these activities are currently behind the work plan and are envisaged to be finalized in February 2017. The project phased-out mercury containing thermometers from the pilot project areas and it is likely that that the end-of the project target will be reached. The mercury waste is currently kept in an interim storage facility.

Capacity building activities have been conducted by the implementation of a complex package of awareness raising, trainings and workshops on POPs, healthcare waste management and mercury managementin the three pilot regions. In the reporting period, about 967 people participated at theses capacity building activities.

MTR Ratings & Achievement

In the following the ratings of the project's results and brief descriptions of the associated achievements are summarized. The ratings are following a 4 to 6 points scheme: Likely (L), Moderately Likely (ML), Moderately Unlikely (MU), Unlikely (U) and Highly Unlikely (HU).

Measure	MTR Achievement Rating ¹	Achievement Description
Project Strategy	N/A	The project was designed to reduce the releases of unintentionally produced POPs and other globally harmful pollutants into the environment by promoting sound healthcare waste management in Kazakhstan, and to assist the country in implementing its relevant obligations under the Stockholm Convention. The overall objective is accordance to International Conventions and the Sustainable Goals of UNDP. The phasing out of mercury and the discussion of the project team with the Government is an important step towards the access of the country to the Minamata Convention.
Progress Towards Results	Component 1: Stockholm Convention NIP update and improved institutional coordination on chemical MEAs Satisfactory	The NIP is updated on new POPs – the update on uPOPs is initiated. A comprehensive assessment of the legal framework is available and recommendations provided. A significant achievement in the reporting period is introduction of amendments to the Environmental Code with regard to establishing standard emissions of dioxins and furans. The coordination on chemical MEAs is handed over to ZhylDmur which is par to the Ministry of Energy. Due to the intersectoral approach of the MEAs ZhylDmur needs further comprehensive legal competencies to fulfill the duties on intersectoral level.
	Component 2: Overall mercury situation assessed and initial mercury reduction and containment plan formulated Satisfactory	The work on total mercury assessment, that has been carried out in accordance with the methodology, prepared by UNEP, aimed at achieving the goal of adopting a decision on signing the Minamata Convention by the country. An agreement to refuse the use of mercury thermometers in the healthcare system has been signed with the health authorities in the pilot regions. Nevertheless, currently there is no proper disposal system for mercury waste available.

¹ Rating scales can be found in the annex.

	Component 3: Minimization of unintentional POPs and mercury releases in selected hospitals through demonstration of sound Health-care Waste Management approaches Satisfactory	15 000 mercury thermometers have been replaced for electronic ones in healthcare facilities of the pilot regions, aimed at reducing emissions of mercury. The reduction of POPs by the usage of non-burn technology is behind schedule but initiated and the start is planned for February 2017.
	Component 4	See Project Implementation and Adaptive Management
Project Implementation & Adaptive Management	Satisfactory (5)	In general, the project activities are carried out in accordance with the approved work plans, project documents, procedures and UNDP standards. Risks are regularly updated in the Atlas system but need to be reviewed more frequently. Quarterly and annual reports are submitted in a timely manner. Financial management is conducted strictly with the project document and in accordance with the procedures and standards of UNDP. Disbursement of the grant is currently at 36% - further review and acceleration of activities need to be conducted. In order to evaluate the pilot projects with sufficient time an extension of the project time might be needed. Monitoring and Evaluation (M&E) of the project, both at project design phase and during implementation are in line with UNDP rules and procedures of GEF projects.
Sustainability	Likely Sustainability is likely to be achieved (4)	Sustainability factors seem likely to be in place before the project has completed, need for more focus on a strategy on reduce risks of project dependence on UNDP GEF technical support.

 Table 2
 Template: MTR Rating and Achievement Summary

Concise summary of conclusions

Beside finalization of the activities towards the mid-term targets like summarized in chapter 5.2.1 the following table summarizes the recommendations of the MTR.

REC	Recommendation
Α	Project Strategy
1	Exit Strategy: A clear exit strategy needs to be developed so that the mechanisms and structures are created during the project implementation to guarantee the end of funding sustainability.
2	Accelerate Project Implementation: In order to meet a 100% execution mark by the end of the project in September of 2017, the measures should be taken to accelerate the project activities, as for now about 36% of budget has been utilized.
3	Project extension: Based on the remaining budget commitments for 2016 - 2017, it is recommended that the project would be extended until December 2017 to have sufficient time frame for substantive testing of pilot centers and for communication of the results and lessons.
В	Project activities towards results
4	Support Laboratory Accreditation : The project should further support the process of laboratory accreditation and ensure that laboratories are accredited to provide for Inventory needs.
5	Capacity building: Initiate training for medical staff and logistic staff from pilots after installation and operation of the autoclaves, Insert training concept into the institutional training of medical staff.
6	Asset Management: Develop a systematic process for the central treatment centers of deploying, operating, maintaining and upgrading their assets like waste equipment, infrastructure and transport vehicles.
С	Project Implementation & Adaptive Management
7	Improve access to project documents: The evaluators recommend to reorganize the webpage to provide an easier access to project information and to upload useful project materials, such as training materials, specifications of equipment and infrastructure and regional and facility based healthcare waste management plans.
8	Financial monitoring. The reported contribution from NGOs is based on co-financing letters. An evident based monitoring system need to be established. It is recommended that UNDP and Steering Committee should take notice of this issue. Also the project team should update and monitor the project disbursement in accordance to the AWP and ProDoc in order to react timely and adequate on discrepancies and to initiate mitigation measures.
D	Sustainability
9	Prepare a project video: The establishment of centralized treatment facilities using non-burn technology including the complete segregation, storage, transport, treatment and disposal system should be shown and market. It would embed confidence in project partners and healthcare waste managers and handlers, to visually showcase the entire healthcare waste logistic from segregation up to disposal. A project video would also allow for a good project keepsake that could easily be used share experiences with other countries.
10	Lessons learnt: Capture lessons-learned and project results in a more systemic manner. The project has achieved many results that would be highly beneficial not only for the replication of this project's results within the country, but also for other countries in the Central Asia Region.
11	Project proposals: Develop at least one new project proposal which is based on the results of the project and further requests and needs identified during the project implementation.

Table 3 Recommendation Summary

In chapter 5.3 the MTR team outlined the lessons learned and challenges faced during the project implementation.

2 Introduction

As the UNDP-GEF project "NIP update, integration of POPs into national planning and promoting sound healthcare waste management in Kazakhstan" (PIMS#4612) is a full-sized project, it requires a Mid Term Review (MTR). The project is to be undertaken in 2013-2017 and is implemented through the Ministry of Energy of the Republic of Kazakhstan (former the Ministry of Environment Protection). This MTR process is following the guidance outlined in the document "Guidance for Conducting Midterm Reviews of UNDP-Supported, GEF-Financed Projects."

The objective of the mission, as proposed in the TOR, is to provide the project partners (GEF, UNDP) and the Government of Kazakhstan with an independent MTR of the project. The MTR is intended to:

- Identify potential project design problems,
- Assess progress towards the achievement of objective,
- Identify and document lessons learned (including lessons that might improve design and implementation of other UNDP/GEF projects),
- Recommend specific actions that might be taken to improve the project.

Aims of evaluation are as follows:

- i. To evaluate the project effectiveness and cost-efficiency;
- ii. To analyze the arrangements of project management and implementation;
- iii. To evaluate the progress attained so far in relation to the project outcomes;
- iv. To investigate the strategies and plans intended for the timely achievement of the overall project goal;
- v. To document and analyze lessons learned in respect of the project design, its implementation and management;
- vi. To assess the sustainability of project interventions;
- vii. To assess the relevance in relation to the national priorities;
- viii. To provide the recommendations for the future project activities.

The project effectiveness is measured based on the indicators of the project's logical framework. Indicators, related to project implementation will be applied in the assessment.

The MTR followed a collaborative and participatory approach in order to ensure close commitment with the Project Team, government counterparts (the GEF Operational Focal Point), the UNDP Country Office(s), UNDP-GEF Regional Technical Advisers, and other key stakeholders. The MTR provide evidence based credible and reliable information and will be conducted and the findings will be structured around the UNDP/GEF five (5) main evaluation criteria:

Mainly three sources of primary data and information has been examined:

- 1. A wide variety of documents covering project design, implementation progress, monitoring, amongst others:
 - a. Project documentation
 - b. Project reports

- c. Annual report on GEF project
- d. Minutes
- e. Other relevant materials: Awareness raising materials, outputs of the project.

The MTR will also review the baseline GEF focal area Tracking Tool submitted to the GEF at CEO endorsement, and the midterm GEF focal area Tracking Tool that has been completed during the MTR.

The summary of reviewed documents can be found in the annex.

- 2. Face-to-face consultations with relevant of stakeholders like the Ministry of energy of RK, RSE "Kazgidromet" and its subdivisions in pilot regions, local executive bodies of pilot regions, UNDP and the Project steering committee. For the interviews a "semi-structured interviews" with a key set of questions in a conversational format will be used. The questions asked will aim to provide answers to the points described in the following section. Triangulation of results, i.e. comparing information from different sources, such as documentation and interviews, or interviews on the same subject with different stakeholders, will be used to corroborate or check the reliability of evidence.
- 3. Direct observations of project results and activities at the following three field sites:
 - a. Astana,
 - b. East-Kazakhstan region,
 - c. Kostanay region.

The following stakeholders have been interviewed:

- UNDP DRR
- Project team
- Project National Director
- Committee for the Protection of Consumer Rights
- RSE "Kazgidromet"
- JSC ZhasylDamu
- Local executive bodies of the 3 regions: Public Health Department, Department of Natural Resources
- Training / Workshop participants
- Private and public operators of the central waste treatment facilities

The summary of interviewed persons can be found in the annex.

The following limitations of the MTR were identified:

- Based on the limited time not all pilot sites of the project could be visited. Although all three
 pilot sites which have been identified for the centralized treatment of infectious and sharp
 waste could be seen, the pilot sites in the rural areas could not be visited due to the limited time
 of the mission.
- 2. The International and National Consultant were accompanied by a member of the project team for the majority of the meetings. Although their presence in most cases facilitated visits and detailed understanding of the project (in particular in understanding the role of a particular

partner as part of the larger scheme/objective of the project), in certain cases certain stakeholders might have withheld sharing information with the MTR team.

The **structure of the MTR** follows the "Guidance for conducting Midterm Reviews of UNDP-supported GEF-financed projects." It reviews the project findings (Chapter 4) considering in detail the Project Strategy, Progress towards results, Project Implementation and Adoption and the Sustainability of the project. Furthermore, it provides conclusions and recommendations (Chapter 5) of the actual project results and further steps.

3 Project Description and Background Context

3.1 Project Development and Scope

From 2003 to 2006, the Government of Kazakhstan implemented its first POPs project entitled "Assistance to Kazakhstan in Fulfilling its Commitments Under the Stockholm Convention of Persistent Organic Pollutants" with the financial support of the GEF and technical support provided by UNDP. As part of this project an action plan formulated and Kazakhstan's first National Implementation Plan (NIP) prepared. In 2009 Kazakhstan submitted its National Implementation Plan (NIP) to the Secretariat for the Stockholm Convention on POPs, in which the new POPs and the unintended produced POPs were not considered.

To address this, the Government of Kazakhstan and UNDP formulated a project proposal entitled "NIP Update, Integration of POPs into National Planning and Promoting Sound Healthcare Waste Management in Kazakhstan". The project was approved in February 2012 with a planned duration of four (4) years (September 2013 – September 2017).

The project's Executing Agency/Implementing Partner role was initially assumed by the Ministry of Environmental Protection (MEP), which later on became the Ministry of Environment and Water Recourses and finally became the Ministry of Energy (MoE).

3.2 Problems that the project sought to address

Before the project was implemented the following problems on POPs, Mercury waste and healthcare waste management have been identified and outlined in the ProDoc:

POPs and Healthcare Waste Management: In the framework of the NIP preparation an inventory was conducted on availability POPs pesticides. It revealed that more than 1,500 tons of pesticides and pesticide mixtures are stored at warehouses and storages, often in the absence of protective measures for preventing their release into environment. On the basis of information reported in NIP, approximately 10% of them are pesticides with POPs properties. However, the inventory of pesticides with POPs properties covered only 20% of the country due geographical, information availability and financial limitations. Soils were commonly found to be polluted with POPs-pesticide wastes.

Concerning the new POPs listed in the Stockholm Convention, there are very limited data concerning their use and production in Kazakhstan, with the exception for limited information on the presence of pesticide stocks. Currently, there is no indication concerning the use of new POPs of industrial relevance in the country's industry due to lack of requirements for data collection and reporting. The uPOPs inventory reported in the NIP did not include important sources of dioxin releases such as incineration of industrial and medical waste, open burning, and the use of coal/wood for cooking, which, in many countries, is reported a substantial source of uPOPs emissions. Information on the monitoring of uPOPs in the environmental media is also missing; therefore, it would be important to transfer, with the support of the project, know-how knowledge accumulated in developed countries related to the monitoring of PCDD/F in soil, water, atmosphere, and biota.

As a direct result of NIP formulation, the following priorities were identified by the group of POPs:

- For PCBs oils/equipment/wastes: updated PCB inventory, development of a detailed plan for decommissioning of PCB-containing equipment, identification of the technology for disposal of PCB-containing equipment, wastes and contaminated soil, storage and disposal of PCB waste;
- For POPs pesticides stockpiles: updated inventory of POP pesticides stockpiles and wastes; ensure environmentally safe and sound management of POPs stockpiles;
- For uPOPs releases: increase the adoption of BAT / BEP in processes that may generate uPOPs, with special reference to incineration and health care waste handling.

In course of formulation of the project document, during a series of meetings with relevant ministries it was discussed the Government would plan activities such as:

- extending the inventory of POPs stockpile and POP contaminated sites;
- Inventory update of uPOPs and new POPs of industrial use.

Mercury waste: With regard to overall situation with country-wide assessment or estimates done on mercury releases, there has been no such dedicated activity recorded to-date. One of reasons for this is that the current national legislation does not establish mercury release standards, though it does regulate mercury in form of waste and reprocessing.

On general statistics, in 2011, according to the Ministry of Energy (former Environmental Protection), 198.6 tons of mercury waste was generated, of which 22.7 tons were neutralized, 37.9 tons were stored at burial sites, 50.1 tons remain at generation sites, and the rest of waste has been sent for further treatment. With respect to the products containing mercury, both ministries, Ministry of Energy nor Ministry of Public Health, have currently no associated legal instructions on registration of mercury users, and, therefore, do not monitor and track volumes of production, sales, installation, and removal from service of such medical equipment and instruments. This situation results in lack of precise data on mercury devices generated as waste by the healthcare sector. Although healthcare establishments report on mercury containing waste, the information is of little use as it is provided in aggregated format under an overall class G waste (non-infectious hazardous waste) and in various, non-unified measurement units: mass, volume, number of items, and non-quantificational digits.

As commonly reported elsewhere worldwide, it has been confirmed that the main sources of mercury in Kazakhstan's healthcare system are thermometers, straight and compact fluorescent lamps. Preliminary investigation indicated that sphygmomanometers used by the sector are mainly mercury-free – aneroid (bellows).

Based on the methodology developed by the global GEF/UNDP/WHO/UNOPS healthcare waste and mercury management project (www.gefmedwaste.org) as applied to existing hospital/bed statistics and the quantity of mercury waste originating from broken thermometers in Kazakhstan' hospitals is estimated at 236.81 kg/year. A similar quantity of mercury is in medical devices which remain in use in the healthcare sector. No estimation was possible at this stage for lamps and other products containing mercury, being directly used by households.

At the time the ProDoc was written, the **main barriers** which prevent sound uPOPs, mercury and HCW management were considered the following:

- Limited regulatory framework: no established inventory and monitoring system for uPOPs and new POPs, lack of emissions and release standards for uPOPs and heavy metals respectively; limited linkages between various sector legislation, such as healthcare and environment, and no guidelines on, and enforcement of control measures over, uncontrolled uPOPs releases and incineration;
- Insufficient systemic and institutional capacity: lack of coordinated, cross-cutting and comprehensive system for sound waste and chemicals management, limited collaboration between government authorities, private service providers, and stakeholders such as waste producers;
- Inadequate economic incentives and technical tools: current expensive handling of medical waste, inadequate and poorly functioning systems for collection, transportation and disposal of waste;
- Information and awareness barriers: scarce knowledge on uPOPs impacts, no register and monitoring of uPOPs, HCW and mercury releases to understand the scope of the problem, poor understanding of the linkages between problematic chemical management areas and human health/environmental quality, inadequate knowledge of socio-economic benefits associated with sound waste and chemicals management.

3.3 Project Description and Strategy

This project aims to assist the country in implementing its relevant obligations under the Stockholm Convention, in particular to reduce the releases of uPOPs, as well as to build country's capacity, in line with the GEF-6 objectives, to manage mercury releases from medical devices by demonstrating sound approaches to the healthcare waste management. This is accomplished through four (4) principal project's components. Across all components, the project plans for information dissemination and awareness raising on key aspects of the project's work.

The project collaborates with central authorities as well as waste treatment facilities, hospitals and smaller rural clinics within demonstration territories. The project provides support for strengthening the implementation of international convention obligations and guidelines, and is expected to improved cross-sectoral governance for sound chemicals management at the national and local levels.

The **objective** of the project is to reduce the releases of unintentionally produced POPs and other globally harmful pollutants into the environment by promoting sound healthcare waste management in Kazakhstan, and to assist the country in implementing its relevant obligations under the Stockholm Convention.

It is expected that the objective will be reached by the following Components and Outcomes:

- Component 1 Stockholm Convention NIP update and improved institutional coordination on chemical MEAs
 - Outcome 1.1 POPs inventories improved for informed decision making and priority setting
 - Outcome 1.2 National capacities on POPs monitoring, analytical capabilities are assessed
 - Outcome 1.3 Policy, institutional frameworks and enabling regulatory environment are in place to ensure better control on POPs accumulation and emissions

- Outcome 1.4 Improved institutional coordination on chemical MEAs
- Component 2: Overall mercury situation assessed and initial mercury reduction and containment plan formulated
 - Outcome 2.1 Mercury assessment implemented, national consultations held to identify priorities for actions and capacity building on mercury risks carried out
- Component 3: Minimization of unintentional POPs and mercury releases in selected hospitals through demonstration of sound Health-care Waste Management approaches
 - Outcome 3.1 Sound health-care waste management through uPOPs and mercury reduction approaches are demonstrated in 2-3 regions of the country
 - Outcome 3.2 Linkages between sound HCWM practices and minimization of uPOPs and mercury demonstrated through training and awareness raising programmes
- Component 4: Monitoring, learning, adaptive feedback, outreach, and evaluation
 - Outcome 4.1 Monitoring, learning, adaptive feedback, outreach, and evaluation.

Component 3 represents the main capacity building and BAT/BEP demonstration element in the overall project design and will practically demonstrate uPOPs and mercury releases reduction by **piloting** modern waste management approaches at selected hospital facilities:

- waste minimization at the source,
- waste segregation techniques and recommendations for waste handling and interim collection and storage,
- demonstration of affordable non-incineration technologies for the resulting separately collected infectious healthcare waste stream, and
- introduction of mercury-free devices.

These planned activities will be carried out along with the establishment of required partnerships and dissemination and replication of results in the country with the overall target of minimizingPOPs/mercury releases into the environment.

The largest portion of GEF co-finance will be used for capital investment in ten (10) pilot healthcare waste non-combustion treatment centers as described below in Outcome 3.4, and purchase of quality mercury-free thermometers for selected health facilities. The GEF co-finance will be used also for recruitment of international and national experts who will be responsible for preparation of healthcare waste management plans for selected health facilities and regions; development of a training program for health and waste management professionals, and conversion of chosen hospitals into model facilities.

3.4 Project Implementation Arrangements and main Stakeholder

The Project Board (Steering committee) includes representatives of state bodies and other stakeholders, namely the Ministry of Energy of the Republic of Kazakhstan; The Ministry of Health and Social Development of the Republic of Kazakhstan (RSE "National center for labor hygiene and occupational diseases"); Science Committee of the Ministry of Education and Science of the Republic of Kazakhstan; The Ministry of Defense of the Republic of Kazakhstan; Ministry for Investment and Development of the Republic of Kazakhstan; Ministry of the Republic of Kazakhstan; Ministry of Sazakhstan; Ministry of Sazakhstan; Ministry of Kazakhstan; Ministry of Kazakhstan; Ministry of Kazakhstan; Ministry of National Economy of the Republic of Kazakhstan; The division of sanitary-hygiene surveillance); The Ministry of Agriculture of the Republic of Kazakhstan; The division of natural resources and environmental management of the akimat (local administration) of Astana; JSC

"ZhasylDamu" of the Ministry of Energy of the Republic of Kazakhstan; "Karaganda Ecological Museum" NGO; "Olzhas" LLP.

Meetings of the Project Board are held once a year for the purposes of reporting on the work progress and approval of the Work Plan for the forthcoming period. They are carried out in accordance with the dates that are pre-planned and coordinated with the UNDP (at the end of the reporting year or early in the year following the reporting period).

In addition, some unscheduled meetings can be arranged in order to make certain decisions and receive approval from the members of the Project Board on it. Therefore, in July 2014, the Project Board was gathered to get approval for the selection of pilot regions.

The Advisory Technical Committee comprised of representatives of various spheres, as well as experts competent in the implementation of all three components of the project and consists of 5 members: Deputy Director of the RSE "National Center for sanitary-epidemiological examination and monitoring" of the Ministry of National Economy of Kazakhstan; Deputy Head of Consumer Rights Protection Department of East Kazakhstan region, Manager of the joint project of the Government of Kazakhstan and WB for preparation of the feasibility study for construction of the plant for POPs elimination, a national expert on hazardous waste; a specialist of the division for medical and preventive work and licensing of the Health Department of East Kazakhstan region.

The Project Board meetings are held once a year. The issues that require additional expert consultations are discussed with the members of the Board upon necessity. The Board has approved the decision on selecting the regions for the collecting samples for POPs and mercury presence, in June 2016.

4 Findings

4.1 Project Strategy(S)

4.1.1 Project design

The evaluators consider that the project conceptualization and design are satisfactory. The main objective of the project is to reduce the releases of unintentionally produced POPs and other globally harmful pollutants into the environment by promoting sound healthcare waste management in Kazakhstan, and to assist the country in implementing its relevant obligations under the Stockholm convention. The procedures sought by the project for a substantial reduction of POPs release (segregation, waste treatment by alternative treatment technologies) are the very same procedures that will prevent the spreading of waste borne disease in the hospitals. Therefore, in addition to its global environmental objectives, the project produces a direct benefit on the health of patients and hospitals personnel, by improving the hygienic conditions of the facilities where it is implemented. The phasing out of mercury containing thermometer will reduce the chemical risks of contamination by broken thermometers in future and provides a new route for the safe storage. The evaluators consider that the holistic approach sought by the project, aimed at establishing an entire chain of healthcare waste management (from production to disposal) and at the same time supporting non-combustion technologies, is the correct approach for minimizing the release of U-POPs from the sector. In order to prevent the generation of waste the idea of "green procurement" is initiated but not followed up in a consequent manner by the project design. In order to follow a sustainable approach of the project activities one component is mainly aiming to assess and update the legal regulations or to provide recommendations.

4.1.2 Results Framework/Logframe

The Project's Logical Framework (PLF) as developed for the project and incorporated in the signed project document and has been reviewed and assessed as part of this MTR. The PLF outlines the project's overall objective, the project's components and outcomes, provides pre-project baseline information, presents the project's Indicatorsas well as Mid Term and End of Project Targets. One of the main objectives of the project is to create a national system for regulating POPs and mercury management, as well as sound management of healthcare waste. Nursing staff is mostly responsible for handling waste in healthcare organization. These are mostly women. Component 3 of the project is aimed at improving professional work standards for all employees of hospitals, in this case, the majority of them are women. The project is also aimed at building capacity and awareness on managing persistent organic pollutants and mercury. Due to the fact that women have the potential to deliver accumulated in their body chemicals to children these issues were given special attention during training sessions and seminars. Recommendations were provided on reducing risk of chemicals impacting women health during the seminars. Throughout its duration the project conducted a significant amount of capacity building. For the details on these training events (number of participants per training event, type of participants, etc.) kindly refer to the Annex. Based on this summary table the project involved 65 % females in their capacity building and awareness raising events and enhanced herewith women's empowerment.

Most of the project components and indicators are "Specific, Achievable, Relevant and Time Bound." Nevertheless, some deviations have been identified. In the project document the outcome 2.1 "Mercury assessment implemented, national consultations held to identify priorities for actions and capacity building on mercury risks carried out" is referring to the collaboration with UNEP which implemented a

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regional project in the Europe/CIS region on mercury inventories. As UNEP is currently supporting countries on mercury management, which have signed the "Minamata Convention", the UNDP GEF project was not supported. In accordance to the project document 10 pilot facilities were envisaged – the number was reduced during the inception phase to 8 facilities in order to finalize the project in time during the formulation of the mid-term targets.

Furthermore, repetitive indicators for capacity building (awareness raising / workshops / training) activities have been identified, which are requested for all compounds. As most capacity building activities have been conducted within one 2-days session in each of the three pilot regions the evaluation team finds it difficult to monitor and review the indicators / targets.

4.1.3 Stakeholders engagement

The project document contained a section on "Stakeholder Analysis" which listed the roles and responsibilities of various stakeholders having a role in the management ofhealthcare waste, Pesticides and POPs. The project document listed particular stakeholders (e.g. entities) with whom the project had engaged during the PIF/PPG phase, as well as larger groups of project stakeholders, which the project anticipated to engage with during project activities (e.g. Health facilities, NGOs, regional and local government authorities, general public and international development agencies, etc.). In the section "Stakeholder Involvement Plan", the project document elaborated upon the ways in which it would engage various project stakeholders, including among else, project board meetings, technical consultations, trainings and outreach activities and awareness raising events.

Throughout the MTR it was obvious that the project during its implementation had been able to reach out to and engage a very large numbers of stakeholders. For example, the was able to create awareness and capacity on POPs, mercury and healthcare waste management of more than 900 project beneficiaries (see Annex). This includes also study tours on "POPs Identification methods in theory and practice" to Czech Repubic at which Regional branches of RSE "Kazhydromet", governmental bodies,

governmental laboratories and local authority participated and a study tour on «International experience of healthcare waste management in the context of Latvia experience" at which governmental bodies in the sphere of environment and healthcare, medical institutions participated.

Furthermore, a mercury leaflethas been developed / disseminated and a Campaign on collection of pharmaceuticals and thermometer has been conducted. The project is documented on the web presents of "JSC ZhasylDamu" of the Ministry of Energy:

http://www.zhasyldamu.kz/proekt-proon.html. The project information is regularly updated and provides beside others information about the project, infographics, Implementation plan of the Republic of Kazakhstan on the obligations under the Stockholm Convention, Map of the special equipment for the disposal of medical wastes in the pilot regions, project events, news and contacts.



The evaluators are of the opinion that the involvement of the large number of stakeholders as well as significant number of project beneficiaries, which benefitted from awareness raising and capacity building is unusual, and is to the credit of the project management team and the government entities.

4.2 Progress Towards Results(S)

4.2.1 Analyze of the status of project objectives and outcomes

The status of the project objective and outcomes is described and rated in detail in the "Progress towards Results Matrix" of Annex 6.10. This table rates the progress towards the end-of-project targets for the project objective and each outcome is analyzed. The columns "Midterm Target", and "End-of-project Target" were populated with information from the results framework, scorecards, PIRs and the Project Document. The results of the status of the project towards the **end of project targets** are visualized by a color system:

Green= End-of project target	Yellow= End-of project target is	Red=End of project target is at high
already been achieved	partially achieved or on target to	risk of not being achieved by the end
	be achieved	of the project and needs attention.

The "Achievement Rating" column is used by the MTR team to assigning ratings for the project objective and each outcome, based on the achievement towards the **midterm targets and the end-of-projects** The rating is based on the following scale:

Highly Satisfactory (HS)	The objective/outcome isexpectedtoachieveorexceedallits end-of-project targets, without major shortcomings. The progress towards the objective/outcome can be presented as "good practice".			
Satisfactory (S)	The objective/outcome isexpectedtoachievemostof its end-of-project targets, withonly minorshortcomings.			
Moderately	The objective/outcome isexpectedtoachievemostof its end-of-project targets but			
Satisfactory (MS)	withsignificantshortcomings.			
Moderately	The objective/outcome is expected to achieve its end-of-project targets with major short comings.			
Unsatisfactory (HU)				
Unsatisfactory (U)	The objective/outcome is expected notto achieve most of its end-of-project targets.			
Highly Unsatisfactory (HU)	The objective/outcome hasfailed achieve its midterm targets, and is not expected to achieve any of its end-of-project targets.			

Table 4Rating for Progress towards results

The following section provides the reasoning on the rating of the objective and outcomes that was provided by the MTR team, as well as summarizes some project results and facts important for the argumentation of the rating.

Objective: To reduce the releases of unintentionally produced POPs and other globally harmful pollutants into the environment by promoting sound healthcare waste management in Kazakhstan, and to assist the country in implementing its relevant obligations under the Stockholm convention.

Indicators	
Update of the National Implementation Plan (NIP) on Stockholm Convention is prepared and	S
coordination on chemical MEAs is enhanced.	

²⁶ point Progress Towards Results Rating Scale considering mid-term and end-term project targets: HS, S, MS, his MU, U, HU

Indicators	Level and Achievement Rating ²
Mercury inventory and Reduction plan prepared.	S
POPs emissions from healthcare waste incineration are reduced through a demonstration	S
component, and wider replication of results.	
Mercury waste generated by the health sector is managed soundly and future waste is minimized	S

The mid-term targets of the objective have mainly reached. A minor deviation is based on strategic decisions of as POPs are included into the scope of the Intersectoral Commission under the National Security Council instead having a specific inter-agency cooperation on POPs.

After updating and approval of the NIP on new POPs, further update of the NIP on uPOPs will be conducted in 2017. A shortcoming of the end of project target could be in the setup of a POPs monitoring system as the required laboratory equipment may not be available till the end of the project.

At the time of the MTR the PoP emissions were not reduced by demonstration project using nonincineration technologies. Therefore, the mid-term target could not be reached. Nevertheless, it is likely that at the end of the project the target will be reached to the most extent as the 8 pilot facilities have been identified and the equipment is in the procurement process. As the reduction targets in the ProDoc are based on 10 pilot facilities, it can be assumed that the reduction rate of POPs of the end- of project target cannot be reached completely.

UNEP was not actively involved in the of mercury management activities, as Kazakhstan has not signed the Minamata Convention yet and therefore mercury management is not a priority of the work of UNEP in Kazakhstan yet. The end-of project targets are on track. Minor deviations in the end of project targets are possible, as some targets are depending on governmental strategies and decisions. The mid-term target could be reached by phasing out of 15.000 mercury containing thermometer. As it is planned to phase out another 3.000 mercury containing thermometer in 2017 it can be assumed that the end-of project aim will be reached. Supported by the project Kazakhstan is planning to sign the Minamata Convention.

Justification of the ratings

The objective is expected to achieve most of its end-of-project targets, with only minor shortcomings. This rating has been provided as the project is considering all indicators of the objective on track or is likely to achieve the targets in 2017. Nevertheless, minor deviations can be assumed on the reduction of POPs resulted by the implementation of the pilot projects as not 10 but 8 pilots will be established and therefore the POP reduction rate might not be reachable. Furthermore, there is a low but realistic risk that the piloted central waste treatment center will not win the public tender for the treatment of the waste from the public hospitals. The coordination of the MEAs is difficult as this is an intersectoral approach which need to be supported by different Ministries – responsibilities are not fully clarified and there is a certain lack of intersectoral communication.

Capacity building activities

Until the MTR s duration the project conducted a significant amount of capacity building. As in Component 1-3 capacity building elements are included, the project implemented an efficient approach to organized trainings and workshops.POPs training and workshops have been integrated into the

general (1-3 days) training, that includes also mercury and HCW issues. In the table below an overview provided of the workshops and trainings facilitated and organized by the project is summarized and not further outlined in the justification of the outcomes below. For the details on these training events (venue, number of participants per training event, type of participants, etc.) kindly refer to the Annex.

Торіс	Target groups	Time	Number of participants
Inception	Medical institutions, governmental bodies,associations, governmental bodies, governmental laboratories, NGOs, international organizations, universities.	30.4.2014	69
Hazardous chemicals in the goods and production processes	Governmental bodies in the sphere of environment, industrial enterprises (including waste disposal), NGO	1.07.2014	43
Workshop on waste and hazardous waste management	Governmental bodies in the sphere of environment, healthcare and epidemiology, medical institutions, NGOs	16-17.07. 2014	71
Sound management of healthcare waste and mercury management for impact reduction on environment and implementation of Stockholm Convention on the POPs	Governmental bodies, international organizations, industrial enterprises, waste disposal enterprises, medical institutions, scientific organizations and higher education institutions, NGOs and businessassociations	3.11.2014 5.11.2014 7.11.2014	51 48 48
Study tour «International experience of healthcare waste management in the context of Latvia experience"	Governmental bodies in the sphere of environment and healthcare, medical institutions	24- 28.11.2014	13
Training "Identification of the national priorities and Action Plans on inventory of mercury and the POPs, reduction of healthcare waste amount"	Governmental bodies, including local authorities, governmental affiliates, industrial enterprises, (including waste disposal), analytical laboratories, medical institutions, NGOs, higher level institutions	15.07.2015	50
Workshop "Sound management of POPs, mercury and healthcare waste management"	Governmental bodies, including local authorities, governmental affiliates, industrial enterprises, medical institutions, NGOs	19.10.2015 21.10.2015 27.10.2015	42 61 34
Study tour "POPs Identification methods in theory and practice"	Regional branches of RSE "Kazhydromet", governmental bodies, governmental laboratories, local authority	23- 27.11.2015	16
Round Table "Coordination of local authorities and public on the impact of hazardous substances on the goods and waste during earthquake and flood. POPs and mecury management issues" (jointly with Dipecho 8 Project)	Central governmental bodies and affiliate organizations, emergency situations departments, departments on consumer right defense, environmental departments, department of natural resources, public health department, hydrometeorology centers, Aarhus centers, NGOs.	2- 3.12.2015	90
Training "Requirements to sound healthcare waste management in the medical institutions"	Medical institutions, NGOs, governmental bodies and affiliate organizations	14.01.2016 18.01.2016 21.01.2016	76 37 46

Торіс	Target groups	Time	Number of participants
Training "Practice of sound	Governmental bodies and affiliate	15.01.2016	38
management of POPs and mercury	organizations, industrial enterprises, waste	19.01.2016	49
at the enterprises and organizations"	disposal companies, consulting organizations, NGOs.	22.01.2016	39
Training "Capacity building of laboratories for POPs and mercury environmental" monitoring	Laboratories of regional branches of RSE "Kazhydromet" and the Committee of Consumer Protection, governmental bodies	17- 18.05.2016	49
Workshop "Mercury. Minamata Convention on mercury"	Governmental bodies, industrial enterprises, international organizations, NGOs.	24.08.2016	35
		Total	967

 Table 5
 Summary of Capacity Building Activities

Outcome 1.1 POPs inventories improved for informed decision making and priority setting

Capacity building programme (trainings) for involved stakeholders developed and implemented on POPs	HS
risks, inventories, POPs tracking, monitoring of data reported by responsible parties.	
National information system (inventory) on POPs expanded (undated information on uPOPs and new POPs)	C

National information system (inventory) on POPs expanded (updated information on uPOPs and new POPs). Training module on POPs risks and their sound management with testing section has been developed by the Centre for Sustainable Development. The module is used as part of conventional training for professional educational institutions and for staff of related state institutions and businesses. The project implements a complex approach to organized trainings and workshops to make the activities logistically more efficient. POPs training and workshops have been integrated into the general (1-3 days) training, that includes also mercury and HCW issues like summarized in the Capacity building table. Furthermore 10 workshops were conducted at which 538 persons participated. The POPs inventory have been completed, reported and distributed among stakeholders. Data on new POPs have been captured in the NIP update document which was submitted to the Stockholm Convention Secretariat. The inventory of PCB has been updated.

Justification of the ratings

The outcome is expected to achieve most of its end-of-project targets, with only minor shortcomings.Overall POPs regular inventory mechanism is not yet completely developed due to insufficient laboratory capacity, standards for reporting, and deficient sampling data. But interviewed organizations and the Government expressed clear intentions to include POPs into national monitoring system of hazardous chemicals. This will naturally take longer than a project lifetime, due to reasons that are beyond the project's mandate and capacity. It is anticipated that ZhasylDamu Information Center will serve as a central data base for statistics, technical reports, and EIA related documents.

Outcome 1.2 National capacities on POPs monitoring, analytical capabilities are assessed

Studies on existing POPs analytical and monitoring capabilities for the whole range of POPs (with focus on new	S
POPs) carried out	

A set of recommendations for the improvement of such capabilities formulated and submitted to the Government

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A number of sites were selected for sampling POPs in soil and air. Soil samples were collected from meteorological stations of these cities and sampling equipment was installed for 9 months to allow for passive air sampling. Every three months, filters in the sampling equipment are replaced and the used filters are sent to the RECETOX laboratory (nominated focal point laboratory of the Stockholm Convention in the region), located in Brno, the Czech Republic. Tests will help to identify the following POPs content in soil and air: PCDD/F, HCB, PCB, pesticides. As of now, results from soil analysis from the abovementioned regions were received. Data show increased POPs concentration in the following regions: HCH in Atyrau, DDT in Atyrau and Ust-Kamenogorsk, and PCDD in Atyrau. Statistical database for the calculation of uPOPs inventory built and validated are envisaged to be finalized in December 2016.10 employees of the territorial bodies, responsible for monitoring and control of quality of the environment, were trained by the Stockholm Convention focal point for monitoring of POPs (Brno, Czech Republic).

The completed capacity assessment reports on nine (9) laboratories having the potential to determine uPOPs in the various environmental media, if methodologies are provided and accreditation is supported to enable full commercial activity. Maximum allowable emissions for dioxins and furans have been set by Decree of Ministry of Energy # 26 of January 21, 2015. The project supported travel of 16 laboratory staff to participate in training tour in RECETOX laboratory in Brno, Czech Republic.

Accreditation is in progress and roadmap developed (cost assessment, development of national standards of the Republic of Kazakhstan on performing POPs analysis of PCDD/PCDF in soil, air and water, and adding them to national register).

Justification of the ratings

The outcome is expected to achieve most of its end-of-project targets, with only minor shortcomings. Although the project achieved evident progress, the accreditation process was not sufficiently documented – the accreditation towards the end of the project is depending also on the availability of equipment which is not part of this project. The approval of a POPs monitoring system towards the end of the project, is beyond the project capacity and mandate (equipment, treatment plant), there is a risk that the project will not be able to achieve this outcome in full by the end of the project.

Outcome 1.3 Policy, institutional frameworks and enabling regulatory environment are in place to ensure better control on POPs accumulation and emissions

Institutional coordination and compliance with international agreements improved through firmer	S
institutionalization of POPs issues into national structures	
National legal framework, by aligning institutional roles, reviewed and improved to include the issue of	HS
insofar unaddressed POPs, uPOPs and new POPs	
Sectoral technical guidelines updated to include the issue of priority POPs, including sampling and analysis	S
methods	
Capacity building programme (trainings) and consultations for involved stakeholders developed and	S
implemented on POPs related risks, POPs monitoring, institutional roles and responsibilities, POPs control	
legislation benchmarks and enforcement	
National Implementation Plan (NIP) on Stockholm Convention obligations with inclusion of new POPs	HS
reviewed and updated, with elaboration of specific action plans on new POPs.	

A project has prepared a solid assessment on institutional gaps and recommended approaches to address them to comply with the requirements of three chemicals related conventions (Basel,

Rotterdam and Stockholm) and improve national communication and data management capacity. The report was submitted to the Ministry of Energy RK.

The project has managed to include POPs related issues into the scope of the Intersectoral Commission under the National Security Council. The project supported the capacity improvement of ZhasylDamu Agency under the Ministry of Energy RK that is planned to become a focal authority for all current and future International Conventions related to chemicals and waste management. Operational regulations are developed.

Amendments are included to eco code chapter 40 article 280 and the National register on POPs on maximum allowed emissions has been established (based on a new decree of the Ministry of Energy in which environmental branch is now attached to No. 26 dated 25 January 2015). Maximum allowable concentration of dioxins in the air of populated areas has been defined in sanitary regulations # 168 called "Sanitary-epidemiological requirements to air quality in urban and rural areas, soils and their safety, content areas of urban and rural settlements, conditions of work with sources of physical factors affecting people", adopted by the Government on January 25, 2012. According to the current legislation, polychlorinated dibenzodioxines and polychlorinated dibenzoforans are included in the list of pollutants, for which emission limits are set. The law of RK of 28.04.2016, 506-V on amendments and changes to certain legal acts on the matters of green economy introduced changes to Environmental code, setting requirements on the need to dispose of POPs in an environmentally safe way. The norm for content of dioxins and furans in exhaust gases was set at the level not exceeding 0,1 ng/m 3. Further, amendments have been proposed by the project in terms of a law on introducing requirements on POPs monitoring in environment into existing regulatory framework associated with the implementation of the DjasylDamu (Green Economy) National Development Programme.Guidelines for analysis of dioxins and furans in the environment were drafted by the project and sent to project stakeholders for their approval. It is planned to adopt and include the methods in the National Register in December 2016.

The updated National Implementation Plan on new POPs for 2015-2028 was approved by decree of Ministry of Energy # 228 dated 30/12/2014. It was submitted to the Ministry of Foreign Affairs to be presented to the Secretariat for the Stockholm Convention.

Justification of the ratings

The outcome is expected to achieve most of its end-of-project targets, with only minor shortcomings. A specific intersectoral Commission for POPs will not be established as an intersectoral Commission is already operational which took over the management of POPs. The NIP has been updated on new POPs – over and above that the NIP update on u-POPs has been initiated – the submission is planned for 2017.

Outcome 1.4 Improved institutional coordination on chemical MEAs

Review and better alignment of ministerial functions on implementation of Conventions' obligations	HS
Establishment of coordination mechanisms to support synergistic implementation of Stockholm, Rotterdam	S
and Basel Conventions and established framework (system) for monitoring, accountancy and reporting on the	
implementation of the Stockholm, Basel and Rotterdam conventions in Kazakhstan	
Capacity of government authorities on implementation of chemical conventions improved	S

A project has prepared a solid assessment on institutional gaps and recommended approaches to address them to comply with the requirements of three chemicals related conventions (Basel, Rotterdam and Stockholm) and improve national communication and data management capacity. The report was submitted to the Ministry of Energy RK.

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Based on the assessment a roadmap for the implementation and coordination of the Stockholm, Rotterdam and Basel Conventions was developed and sample national reports of the Republic of Kazakhstan for the three conventions were drafted. For the purposes of simplifying procedure on preparation and submission of national reports in accordance with the requirements of the Secretariat, the project developed templates of national reports of the Republic of Kazakhstan for the three conventions. A long-term plan for the submission on of national reports and suggested changes to national statistical and sectoral reporting systems were developed and submitted to the Ministry of Energy of RK for use in the daily work.

The project supported the capacity improvement of ZhasylDamu Agency under the Ministry of Energy RK that is planned to become a focal authority for all current and future International Conventions related to chemicals and waste management. Terms of References are developed. Providing that all three conventions (plus Minamata) will be coordinated by one agency (ZhasylDamu), the project has developed a report on institutional structures and functions as well as initial action plan, templates, and data management tools; this will significantly improve the country's capacity to meet the requirements of three conventions.

All complex workshops and trainings contained session on three Conventions and synergies of MEA on chemicals. A project has prepared a solid assessment on institutional gaps and recommended approaches to address them to comply with the requirements of three chemicals related conventions (Basel, Rotterdam and Stockholm) and improve national communication and data management capacity. The report was submitted to the Ministry of Energy RK. Based on the assessment a roadmap for the implementation and coordination of the Stockholm, Rotterdam and Basel Conventions was developed.

Justification of the ratings

The outcome is expected to achieve most of its end-of-project targets, with only minor shortcomings. As the approval of new strategies are currently not supported by the government, the project team changed this mid-term target towards a "long-term plan for the submission of national reports."

Outcome 2.1 Mercury assessment implemented, national consultations held to identify priorities for actions and capacity building on mercury risks carried out

Capacity building program (trainings) for involved stakeholders developed and implemented on mercury risks, inventories, sources, data tracking

Mercury situation in Kazakhstan assessed in coordinated manner jointly with UNEP

Outline of National mercury reduction plan developed

Public awareness raising campaigns on mercury risks conducted

A training course "Requirements to sound healthcare waste management in the medical institutions" was developed and presented to "ZhasylDamu" JSC and RSE "Informational and Analytical Center" for use in training courses of employees of the environmental services industry.

Quantitative assessment of mercury releases to environment was conducted – containing data sources, major sources and national capacities in which recommendations were included. "The report on the inventory of mercury in the Republic of Kazakhstan" was provided to the Ministry of Energy.

Project team participated in a regional IPEN meeting in Central Asia on public participation in chemical safety issues in Eastern Europe, Caucasus and Central Asia (EECCA) countries. Following that meeting,

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and local consultations, a justification concept on Minamata convention ratification drafted and is prepared for submission to the Ministry of Foreign Affairs for review. Furthermore, a stakeholder workshop on Minamata Convention was held in Astana with 35 participants, representing ministries, industries, NGOs.

Awareness raising: Project news and campaigns are applied on the ZhasylDamu web site, leaflets published and disseminated and media reports available. In collaboration with the UNDP/ GEF Project on Energy Efficiency two seminars were held to raise awareness of energy-resource saving in healthcare facilities, including the handling of chemicals and waste" (Aktau and Kyzylorda cities) attended by 85 people.

Justification of the ratings

It can be assumed that the end of project mosttargets will be completely fulfilled.Future plan's outline and proposed legislative improvements (inclusive release standards) to control mercury management have not been drafted yet but in accordance to the project team this is planned.

Outcome 3.1 Sound health-care waste management through uPOPs and mercury reduction approaches are demonstrated in 2-3 regions of the country

Review of national policies and update of HCWM regulatory framework and road map	
Development of Regional HCWM Management Plan in selected provinces	S
Pilot HCWM projects in selected hospitals, including phase-out of mercury containing thermometers	S
Establishment of HCW treatment centers in selected sites	S

An overview report of healthcare wastes management in the Republic of Kazakhstan – baseline assessment was completed. Recommendations were prepared to make amendments and changes to the Sanitary-epidemiological requirements for healthcare facilities. Adoption is scheduled for December 2016.Proposed changes to the legislation on public procurement were reflected in the Law of RK of 04.12.2015, #434-V «On public procurement» paragraph 4, article 37, which strengthened requirements on bidding procedures for provision of services, including healthcare waste management.

The developed training module on sound HCW management is used by regional institutions for professional upgrade of the staff. Data collection on HCW sources, types, quantities, and classification in Kazakhstan is completed and systemized in summary tables and were used for selection of the pilot regions and development of HCW Management Plans on facility and on regional level. This assessment covers 16 regions of the country, with a focus on all state-funded hospitals and medical facilities. 154 medical facilities (2,761 beds) in the pilot regions.

A baseline assessment for each pilot hospital has been conducted using the individual Rapid Assessment (I-RAT) tool developed under the Global Medical Waste project as well as the "Guidelines for conducting a baseline assessment of an experienced medical institution".

15,000 mercury containing thermometers were replaced with digital ones in the projects 8 pilot hospitals. This translates to a reduction of 30 kg/year of potential Hg releases – which in is in accordance to the mid-term target. In addition to complex trainings reported above the project organized a study tour to Riga, Latvia to learn international experience of healthcare waste management.Pilot sites for the demonstration project have been identified but not established. In accordance to national regulations autoclaving technology is not substance of an EIA.

Justification of the ratings

The outcome is expected to achieve most of its end-of-project targets, with only minor shortcomings. Shortcomings have been identified in the setup of pilot HCWM projects in selected hospitals. Here the mid-term targets have not been reached, as the non-burn technology is not operational, vehicles not purchased, the infrastructure not finalized and therefore the pilot not started yet. All activities have been initiated and it is planned to start the operation of the pilot projects in February 2017. The operation of the pilots is depending on the approval that the companies / hospitals are winning the public tenders for the treatment of the waste from the hospitals. The tender will be published in January 2017. Pricing methodologies have been elaborated by an international consultant but have not been followed up.Currently there are no mercury thermometers remaining in state budget-funded healthcare facilities in the three (3) pilot regions. Nevertheless, in 2017 additional 3000 mercury containing thermometers will be collected which would be in accordance to the end-of the project target.

Furthermore, additional training is needed for the pilot facilities on howm before the operation starts.

Outcome 3.2 Linkages between sound HCWM practices and minimization of uPOPs and mercury demonstrated through training and awareness raising programmes

Development and dissemination of BAT/BEP technical guidelines and general awareness raising

Development of national training programs on uPOPs/mercury risks and sound HCWM, partnership with stakeholders and national replication of BAT/BEP demonstration

During this reporting period, the project supported adoption of changes to the list of best available technologies (BAT) for managing healthcare waste, by the Law of RK of 25.04.2016, 505- V on Amendments and changes to certain legal acts of RK on the matters of environment and subsoil use.

The environmental code now includes a norm, which recommends the use of any recommended technologies taken up in the HCWM BAT list of the European Integrated Pollution Prevention and Control Bureau. The development of a training module on managing healthcare waste has been completed. Work has started on approving and integrating it into the training curriculum for medical colleges, universities and professional development courses. Progress in this area will be conducted in the next reporting cycles. As part of South-South cooperation and experience exchange, project team participated in the GIZ-funded international conference for Central Asia, Afghanistan and other countries on biological hazard safety and protection in the neighboring, Kyrgyzstan in October 2014.

Justification of the ratings

The outcome is expected to achieve most of its end-of-project targets, with only minor shortcomings. To obtain the end-of the target the institutionalization of training on hcwm is needed by including the already developed concept into the curricula of the medical colleges etc..

Outcome 4.1 Monitoring, learning, adaptive feedback, outreach, and evaluation.

This outcome is analyzed in Chapter 4.3.

S S

4.2.2 Results GEF Tracking Tool

As the GEF tracking tool used during development of the ProDoc has been updated in June 2015 the current GEF-6 Waste and Chemical tracking tool is used. In the Tables below a number of project results are presented and summarized, which are relevant for the indicators set in this GEF tracking tool.

Indicators	Implementation Status ³	Comments
NIP coordinating mechanism in place ²	0	N/A
Inventories undertaken ³	3	Inventory of POPs has been completed. Comprehensive report, including recently updated information and statistical data has been prepared in 2016 and is distributed among stakeholders
Draft updated NIP prepared	2	NIP update on new POPsfinalised and the update of NIP on u- POPs has been initiated – the submission is planned for 2017.
Updated NIP submitted to the Stockholm Convention	2	The updated National Implementation Plan on new POPs for 2015-2028 was approved by decree of Ministry of Energy # 228 dated 30/12/2014. It was submitted to the Ministry of Foreign Affairs to be presented to the Secretariat for the Stockholm Convention. The same is planned for 2017 for the uPOPs.

 Table 6
 GEF tracking tool: Update in Status of NIP

Indicators	Quantity (tons)*		Cost (US\$ /	Comments	
	Project target	Achieved to date	ton)		
Indicator 3.1: Amount and type of POPs eliminated or reduced	125,53 g TEQ	0 g TEQ	0	The planned implementation of autoclaving technology in exchange of incineration is planned for 2017.	
Indicator 4.1: Amount of Mercury reduced	0,03681	0,03	399.597	The project phased out 15000 mercury containing thermometer, which is exceeding the Mid-term target. In 2017 the phase out of additional 3000 mercury containing thermometers is planned.	

*Note: The ProDocrefers to gram Total Equivalence Factor (TEQ) for the reduction of POPs

Table 7 GEF Tracking tool: Reduction of POPs and Mercury

4.2.3 Identify remaining barriers to achieving the project objective

The main barriers outlined in the project document have been reviewed. All barriers namely a) Limited regulatory framework b) Insufficient systemic and institutional capacity c) Inadequate economic incentives and technical tools d) Information and awareness barriers, have been lowered by the project activities and results. Currently the regulative framework has been improved but is still under revision and improvement; training on healthcare waste management has been conducted but needs still to

 $^{^{3}}$ 0 = Not applicable: not an objective of the project; 1 = Indicator not considered; 2 = Indicator considered and partly conducted; 3 = Indicator fulfilled.

beincluded into the national training system for responsible person on healthcare waste in healthcare facilities as well as in the medical colleges and universities; the ecological friendly alternative treatment technologies are ordered but not operational – nevertheless the business plan of the centralized waste treatment center is including a complete financial reflux and will be financial effective; already more than 900 persons participated at awareness raising and training / workshop events - more training will be conducted in 2017. It can be assumed that the main barriers of the project will be further lowered by the project activities in 2017.

4.3 Project Implementation and Adaptive Management (S)

In the following the implementation and adoptive management of the project is evaluated. The reviewed objectives "management, work planning, financing and project monitoring and evaluation" are analyzed and rated. A summary of the rating results is applied in the table below.

Review Objectives	Ratings for Project Implementation & Adaptive Management		
Management Arrangements	Satisfactory		
Work planning	Satisfactory		
Finance and co-finance	Moderately Satisfactory		
Project-level monitoring and evaluation systems	Satisfactory		
Reporting	Satisfactory		
Communications	Satisfactory		

 Table 8
 Rating summary of project implementation and adoptive management review

4.3.1 Management arrangement

The management arrangements as presented in the Project Document had been clearly described and were based on common project management arrangement for UNDP National Execution modality. The project had fully followed the management arrangements as described. At the start of the project, the Executing Agency/Implementing Partner role was initially assigned to the Ministry of Environmental Protection (MEP), which later on was assumed by the Ministry of Energy. Changes in Executing Agency/Implementation Partner, were the direct result of Government changes. As stated by the Project Document the National Director position was assigned to a senior level representative of the Ministry of Environment while after the Ministry of Energy became the Executing Agency, the Deputy Director of the Waste Management Department of the Ministry of Energy became the new project director.

UNDP country office provided overall program, administrative, and financial oversight of the project progress in accordance with the common UNDP procedures and tracking tools available in Atlas system.

Project Steering Committee performed as a key decision-making body at a project strategic planning level. The project held 5 documented Steering Committee meetings over the evaluation period mainly focused on progress reporting and planning and revision of the unexpected changes in pilots.

At an operational level the project team maintains regular contacts with the National Director who acts as a coordinator and communicator of the project's objectives to Ministry of Economy and Ministry of Public Health. Although the project team reported insufficient intersectoral cooperation caused by strict distribution of responsibilities and limited mandates of the ministries, as a remaining barrier for project implementation, the evaluation team feels that some results were possible to achieve mainly due to good intersectoral coordination on the regional level.

4.3.2 Work planning

The project actual start date was delayed from September 2013 to April 2014, when the project staff was hired. The main reason for the delay was time-consuming procedures for endorsement and signing of the Project Document by the National Executing Agency. The project prepared Annual Work Plans based on the Project Document strategy description, log frame targets and indicators.

Although during the inception workshop no major changes were reported, the project transferred the significant part of the pilot activities from the second (as planned in the Project Document) to the third year of the project implementation due to need for extra time for additional data collection, selection of the pilot sites, and coordination of the preliminary agreements between the participants of the pilot activities together with associated budget for equipment. This change was not formally approved by the Steering Committee during the 2015 planning process.

4.3.3 Finance and co finance

Based on the Combined Delivery Reports (CDRs) provided by UNDP Kazakhstan for the years 2014, 2015, 2016, a summary of project expenditures by year in accordance to the ProDoc, Annual Work Plan (AWP) and CDRs can be found in Table below.

Year	Project Document	AWP	CDRs	Delivery ProDoc	Delivery AWP
2013-2014	Year 1: 467 010	488 700	508 033 ⁴	108%	104%
2015	Year 2: 2 080 760	611 180	550 623	26%	90%
2016	Year 3: 319490	1 998 400	182 117 ⁵	57%	9% ⁶
2017	Year 4: 532740				
Total	3 400 000	3 098 280	1 240 773 2 167 573		

Table 9 Project Expenditures for the period 2013 – 2016 (up to 31 August 2016)

As can be deducted from Table, project expenditures in 2016 (CDRs) are delivered for only 9% of the AWP with 4 months remained until the end of the year. The low delivery rate for 2016 is the result of procurement procedures that had been re-scheduled because of the pre-longed efforts to identify feasible partners for decontamination centers and agreeing specifications for the equipment. The project informed evaluators that the equipment will be delivered and installed by December 2016, which will affect the delivery rate accordingly.

Provided CDRs record the expenditures by budget line, but there is no break down by project components. Thus, the evaluation team could not compare the actual expenditures done for each component and analyze the cost effectiveness of the allocated budget.

At the time of the MTR, the project had an unspent balance of 2 159 227 US\$ which represents approximately 63% of the total project budget. Of that amount, at the time of the MTR,926 800 US\$ had already been committed for the equipment procurement. Even if the claimed procurement takes place by the end of 2016, it is unlikely that the project will be able to spend extra 930 707 US\$ over remaining 4 months to reach the planned expenditures in accordance with the AWP.Assuming the 926 800 US\$ is

⁴ Includes USD 429 expenditures for 2013

⁵ Expenditures as of Augusts 2016

⁶ The project plans to spend USD 926 800 for HCW treatment equipment and vehicles for decontamination centers in pilot regions to be purchased by December 2016

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spend in 2016, the spare budget indicated in the ProDoc till the end of the project in September 2017 would be 1.232.427 US\$.

Based on the remaining budget commitments for 2016 - 2017, it is recommended that the project would be extended until December 2017 to have sufficient time frame for substantive testing of pilot centers and for communication of the results and lessons.

At a MTR point the project leveraged approximately 24 million US\$ in **co-financing**, which is about 62% of planned contributions.

Source of co- financing	Name of co-financer	Type of co- financing	Amount at CEO endorsement (US\$)	Actual at MR (US\$)	Actual % of expected
UNDP	UNDP Kazakhstan		175,000	119,641	68%
Government	RK Ministry of Public Health	parallel	26,578,072	12,610,000	47%
Government	Ministry of Energy RK	parallel	7,737,748	11,139,540	144%
Private Sector	Utilizazija Ltd	cash	230,565	3,500	62%
	Ibraikhan Ltd	cash		140,000	
NGO	Center for Sustainable Devt	In-kind	291,373	12,000	12%
	Ecomuseum	In-kind		12,000	
	GreenWomen	In-kind		12,000	
	TOTAL		38,412,758	23,929,040	62%

Table 10 Planned / Actual Co-financing raised over the duration of the project

The pilot HCW treatment centers are at bottom commercial facilities that plan to provide paid services. Considering that overall capital investment of the project to the commercial companies or hospitals is about USD 1,2 million it is naturally anticipated that the contribution of the centers over the project period should be larger than it is claimed now. It is recommended that the project team accurately record contributions from all pilot projects by the time of TE.

The reported contribution from NGOs is based on co-financing letters. There is no documented evidence for commitment of USD 292 373 from NGOs. And it is unlikely that the project will be able to leverage more than already reported from NGOs. It is recommended that UNDP and Steering Committee should take notice of this issue before the TE.

4.3.4 Project-level Monitoring and Evaluation Systems

The MTR team felt that the "Monitoring and Evaluation Plan" as described and included in the Project Document was comprehensive and in line with the UNDP rules and procedures for Monitoring and Evaluation of (GEF) projects.

The Table below summarizes the M&E activities as planned for in the project document and conducted throughout the project's implementation. The column "*Comments & Observations*" summarizes the views of the TE team for each of these M & E activities. In summary the TE team is of the opinion that the M & E of the project, both at project design phase and during implementation, can be rated as **Satisfactory (S)**.

Type of M&E activity	Responsible Parties	Comments and Observations	
Inception Workshop (IW) &	 Project Manager (PM) 	Satisfactory	
associated arrangements	 UNDP CO 		
Inception Report	 Project Team 	Moderately Satisfactory	

Type of M&E activity	Responsible Parties	Comments and Observations		
	 UNDP CO National and international consultant support if needed 	The inception report did not capture delayed activities and budget allocations in the next planning periods. The logframe of the project was overloaded with detailed, descriptive and repeated indicators, which also could be revised at the inception stage to simplify the annual reporting and improve the quality of PIRs, but was not done.		
APR/PIR	PMUNDP CO	Satisfactory		
Meetings of Technical Advisory Board and relevant meeting proceedings (minutes)	PMUNDP COOther stakeholders	Satisfactory The Technical Advisory Board meets based on project needs. One meeting of Technical Advisory Board was held at the moment of MR.		
Meetings of Steering Committee and relevant meeting proceedings (minutes)	 PM UNDP CO National implementing agency 	Satisfactory 5 Meetings were held mainly for annual reporting and planning and for making decisions on arising problems or revisions.		
Quarterly status reports	 Project team 	Satisfactory		
Technical monitoring, evaluation, and reporting within project components, including final assessment of pilot hospitals, HCW treatment centers, avoided emissions, and reduced HCW and mercury releases	 Project team National and international consultants as needed 	Satisfactory The project has produced and made available for the stakeholders a number of technical reports, summarizing the project's interventions for all components. But the activities on component 2 and 3 were not fully reflected in summary reports mainly due to uncompleted pilots.		
Midterm Evaluation (external)	 Project team UNDP CO UNDP/GEF RCU External Consultants (i.e. evaluation team) 	ME was rescheduled from September 2015 to September 2016 right after PIR completion. This was based on recommendations of UNDP-GEF M&E office. This allows only one year before the TE. Planned for October 2018 (PIR), though there was no official revision of the project period.		
Final Evaluation (external)	 External Consultants (i.e. evaluation team) Project team UNDP CO UNDP/GEF RCU 			
Final Report	External ConsultantProject teamUNDP CO	Not completed yet.		
Compilation of lessons learned	Project teamUNDP COUNDP/GEF RCU	Unsatisfactory Although some lessons may be derived from the technical reports, the project has not yet stared to log the findings		

Type of M&E activity	Responsible Parties	Comments and Observations	
		and successes.	
Financial audit	 UNDP CO 	The project was subject to Audit in	
	 Project team 	2015.	
Visits to field sites	■ PM	Satisfactory	
	 UNDP CO 	PM and project experts conducted	
	 UNDP/GEF RCU (as 	regular visits to pilot regions. UNDP CO	
	appropriate)	and RTA participated in monitoring	
	 National implementing 	visits to some regions.	
	agency		

 Table 11 Project Monitoring and Evaluation Tools

4.3.5 Reporting

The project fully complies with reporting cycle and tools as required by UNDP-GEF guidance and reflected in the project document (see table above). Apart from progress reporting to NDP/GEF, the project used the mandate of the Steering Committee to communicate its results within key governmental institutions and other stakeholders and to adapt to unexpected change in selected pilot hospitals and centers over the project course.

The evaluators reviewed 2 PIRs for 2015 and 2016 and found that they provide concise information on project progress, management, and achievements and prove success in reaching multiple stakeholders and beneficiaries over the project implementation. Both PIRs were rated as satisfactory with risk rating changed down from "high" in 2015 to "low" in 2016 mainly due to efficient risk monitoring and adaptive actions of the project team.

4.3.6 Communications

The project does not have formulated communication strategy, but it undertakes targeted activities to communicate its objectives and results to various groups through media coverage, visual materials, workshops and trainings, public events. Key project target groups and beneficiaries included:

<u>National Government entities</u>: Ministry of Energy (ME); Ministry of National Economy; Ministry of Ministry of Health (MH); Agriculture (MA); Ministry of Justice (MJ); Ministry of Defense (MD); Ministry of Industry and New Technologies.

<u>Regional Ecological Departments of 3 regions:</u> Regional Environmental Departments under the Ministry of Energy, Public Healthcare Departments.

<u>Hospitals</u> in 14 regions of Kazakhstan for HCW assessment and hospitals in 3 pilot regions for project activities.

<u>Commercial and Government laboratories</u>: National Sanitary and Epidemiological Station, Almaty; Scientific analytical Center Laboratory, LLP, Almaty; Water management Plant, Ust-Kamenogorsk.

<u>NGOs</u>: Kazakhstan Association of Enterprises for Sustainable Development; Center for Cooperation for Sustainable Development; Green Women.

The project reached out to over 300 people through its awareness workshops, and was able to train, create awareness and build capacity on HCW management of more than 500 workshop and training participants.

The overall recommendation from the MTR team is to better capture lessons-learned and project results in a more systemic manner. The project has achieved many results that would be highly beneficial not only for the replication of this project's results within the country, but also for other countries in the

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Central Asia Region.

Facilitate future access to guidelines, technical documentation and information materials. At the time of the MTR it seemed that most of this information was available within the project management's unit. However, the evaluators felt that when the project comes to an end, it is likely that useful information materials, such as technical documentation, guidelines, methodologies and the like, as well as visual materials (photos/videos, etc.) prepared by the project, would not continue to be easily accessible to project stakeholders.

4.4 Sustainability (S)

In the table below, four aspects of sustainability (Financial Sustainability; Socio-Political; Institutional Framework and Governance; and Environmental Sustainability) are analyzed as well as the rated. The ratings used for sustainability aspects of the project are the following: Highly Likely (HL); Likely (L); Moderately Likely (ML) Moderately Unlikely (MU); Unlikely (U); Highly Unlikely (HU). More details on the rating system can be found in the annex.

Aspects	Risk to sustainability	Rating for Sustainability of project results
Financial risks to sustainability	It can be assumed that the centralized treatment centers will continue to operate as the system is profit orientated and will be financed by the payment for the treatment of waste. One uncertainty should be considered, as the contracts with other hospitals have not been signed yet as the tender for the treatment of waste will not be published before January/February 2017. The success of the bidding of the pilot facilities is very likely, as the prices can withstand the market prices and Kazakhstan is supporting alternative treatment technologies. To phase out mercury containing thermometer with digital ones, will result in higher costs for the thermometer and in costs for the collection, treatment and disposal of the mercury containing waste. The financial sustainability is not given, but the implementation will be followed up by the process of assessing options for joining Minamata Convention and after that will have to implement its obligations.	L
Socio-economic risks to sustainability	Considering that this aspect does not appear to be a sensitive issue in the areas of POPs and mercury management, Socio-Political changes are unlikely to have a great impact on this sector. Nevertheless, government changes appear to happen frequently in Kazakhstan, and can also results in changing national priorities, as well as legislation and the like, which indirectly might impact priorities and legislation governing PCB and POPs issues.	ML
Institutional Framework and Governance risks to sustainability	The sustainability of the project activities and results of this aspect is likely to be achieved: The regulative framework has been strengthened by the activities of the project: NIP update on new POPs, approved amendments to EcoCode, which provide good ground for further improvements of regulations and standards on HCW and mercury containing waste. There is a need for harmonization of HCW classification used by Ministry of Healthcare and Ministry of Energy to avoid statistical misreporting caused by complicated reporting procedures which sometimes causes illegal burning of waste in hospitals. Capacities of authorities and laboratories have been enhanced and training materials have been developed, which will be used further on.	L
Environmental risks to	The environmental risk to sustainability regarding the activities of this project can be considered as low as up to now the environmental risk has	L
Aspects	Risk to sustainability	Rating for Sustainability of project results
----------------	--	---
sustainability	been lowered by raising awareness and phasing out of mercury containing thermometers. Nevertheless, until today the mercury containing waste is stored at the private treatment facility in Almaty - a final solution need to be identified. The mercury phasing out activities of the project resulted in a reduction of 30 kg/year of potential Hg releases. In order to eliminate the use of mercury thermometers in healthcare facilities in the pilot regions and to ensure safe collection and treatment of mercury thermometers, MoUs have been signed with Ministry of Energy of RK and akimats (local executive bodies) of pilot regions, involving denial of further purchase and use of mercury thermometers. So the project provided good start for compliance with its requirements. There is a good example of regulated collection and utilization of mercury containing lamps that also started from UNDP project. Awareness and capacity on POPs, healthcare waste management and mercury management has been significantly increased, aware of the environmental issues, and people have been involved in awareness and training activities. This all will benefit the environmentally sound management of POPs containing products, healthcare waste management and mercury waste management.	

Table 12 Project Sustainability Rating

Overall, the evaluation team feels that the sustainability of the project is Likely (L) which indicates negligible risks to sustainability, with key outcomes on track to be achieved by the project's closure and expected to continue into the foreseeable future. Thus the project sustainability deemed Satisfactory.

5 Conclusions and Recommendations

5.1 Conclusions

Project Strategy. The evaluators consider that the project conceptualization and design are satisfactory. The evaluators consider that the holistic approach sought by the project, aimed at establishing an entire chain of healthcare waste management (from production to disposal) and at the same time supporting non-combustion technologies, is the correct approach for minimizing the release of POPs from the sector. Most of the project components and Objectively Verifiable Indicators are "Specific, Achievable, Relevant and Time Bound". As the capacity building activities have been indicated for different components but have been provided within the same workshop / training framework, the targets are difficult to evaluate. The multitude of terminology of capacity building is used in the project document's PF, create confusion and overlap and complicate monitoring towards project achievement as capacity building activities have been conducted merging the topics in one comprehensive set of trainings. Throughout the MTR it was obvious that the project during its implementation had been able to reach out to and engage a very large numbers of stakeholders. The positive impact to include the phasing-out of mercury containing thermometer into the project strategy is underlined by national activities to assess options to join the Minamata Convention.

Progress Towards Results. The Objective of the project to "to reduce the releases of unintentionally produced POPs and other globally harmful pollutants into the environment by promoting sound healthcare waste management in Kazakhstan, and to assist the country in implementing its relevant obligations under the Stockholm convention" is currently mainly tackled by the update of the NIP, the assessment and improving of the legal framework of the country and phasing-out activities of mercury containing devices. The project targets for the phasing-out of mercury are almost reached and it is very likely that the end-of the project target will be reached. Nevertheless, are the implementation of pilot projects for the centralized treatment of infectious and sharp waste with environmental friendly non-burn alternatives (autoclaving) behind the work plan but as all activities have been planned and initiated it can be assumed, that the implementation will be finalized in the first quarter of 2017. The update of GEF-tracking tools need to be considered and conducted regularly.

Project Implementation & Adaptive Management. The management arrangements followed common project management arrangement for UNDP National Execution modalities. The change of the Executing Agency/Implementing Partner from the Ministry of Environmental Protection (MEP) to the MoE, resulted in changes of the positions within the project, which did not influence the effectiveness of the project much. The Atlas system provides the UNDP country office provided overall program, administrative, and financial oversight of the project progress in accordance with the common UNDP procedures and tracking tools.Based on Atlas data (August 2016) the amount of GEF grant is disbursed up to 36%. Atlas data however does not include committed disbursementsof 1.200.000 USD which are planned on the purchase of waste equipment and transport vehicles for the pilot projects. Considering the planned disbursement there would be still 952.000 USD available for 2017.The allocation of the complete GEF grant at the end of the project needs further consideration and planning. The Co-financing table shows clearly that 99% of the expected amount has been already provided to the project. All sources of co-financing namely the MoPH, MoE, the private sector and NGOs have only small amounts

left to be allocated. The transparence of the disbursements of the NGOs needs to be improved. The Monitoring and Evaluation plan as described and included in the Project Document was comprehensive and in line with the UNDP rules and procedures for Monitoring and Evaluation of GEF projects.

Sustainability. As most the benefit of the project in term of reduction of POPsby using alternative waste treatment technology and mercury release in the environment depends on the continuation and replication of the activities and of the good practices established at the model facilities, sustainability is an important criterion for evaluating the project success. Sustainability has been evaluated taking into account socio-economical, institutional /governmental and financial risk and environmental risk. All project activities are sustainable and are not significantly endangered by environmental parameters. Financial and institutional risks have been evaluated on the basis of data gathered at component and country level in the course of the evaluation.

5.2 Recommendations

The Mid-Term Evaluation makes two types of recommendations. Firstly, recommendations, which the project should address in order to reach the defined mid-term targets and secondly recommendations, which should be considered in the project phase till the end of the project.

5.2.1 Activities to achieve mid-term targets

- Complete activities towards midterm targets on POPs management (Component 1):
 - Following up of inserting uPOPs into the NIP,
 - Finalization of pesticides inventory,
 - Finalization of uPoP inventory methodology,
 - o Finalization of national POPs monitoring plan
- Complete activities towards midterm targets on mercury management (Component 2):
 Finalization of the future mercury reduction plan
- Complete activities towards midterm targets on demonstration projects (Component 3):
 - Ensuring that the infrastructure for the centralized waste treatment centers is adequate and timely available
 - Installation and commissioning of autoclaves
 - Training of workers at the central waste treatment facilities on healthcare waste management and usage of the equipment.

5.2.2 Project Recommendations

- Exit Strategy: A clear exit strategy needs to be developed so that the mechanisms and structures are created during the project implementation to guarantee the end of funding sustainability.
- Accelerate Project Implementation: In order to meet a 100% execution mark by the end of the project in September of 2017, the measures should be taken to accelerate the project activities, as for now about 36% of budget has been utilized.
- Project extension: Based on the remaining budget commitments for 2016 2017, it is
 recommended that the project would be extended until December 2017 to have sufficient time
 frame for substantive testing of pilot centers and for communication of the results and lessons.
- Prepare a project video: The establishment of centralized treatment facilities using non-burn technology including the complete segregation, storage, transport, treatment and disposal system should be shown and marketed. It would embed confidence in project partners and

healthcare waste managers and handlers, to visually showcase the entire healthcare waste logistic from cradle to grave. A project video would also allow for a good project keepsake that could easily be used share experiences with other countries.

- Lessons learnt: Capture lessons-learned and project results in a more systemic manner. The project has achieved many results that would be highly beneficial not only for the replication of this project's results within the country, but also for other countries in the Central Asia Region.
- Project proposals: Develop at least one new project proposal which is based on the results of the project and further requests and needs identified during the project implementation.
- **Support Laboratory Accreditation**: The project should further support the process of laboratory accreditation and ensure that the necessary equipment for accreditation is available.
- Capacity building: Initiate training for medical staff and logistic staff from pilots after installation and operation of the autoclaves, Insert training concept into the institutional training of medical staff.
- Asset Management: Develop a systematic process for the central treatment centers of deploying, operating, maintaining and upgrading their assets like waste equipment, infrastructure and transport vehicles.
- Improve access to project documents: The evaluators recommend to reorganize the webpage in order to provide an easier access to project information and to upload useful project materials, such as training materials, specifications of equipment and infrastructure and regional and facility based healthcare waste management plans.
- Financial monitoring. The reported contribution from NGOs is based on co-financing letters. An
 evident based monitoring system need to be established. It is recommended that UNDP and
 Steering Committee should take notice of this issue. Also the project team should update and
 monitor the project disbursement in accordance to the AWP and ProDoc in order to react timely
 and adequate on discrepancies and to initiate mitigation measures.

5.3 Lessons Learned - Challenges

The following lessons learnt and challenges have been identified in the first phase of the project:

- In accordance to the ProDocthe replacement of mercury thermometers and their safe disposal is required. Safe disposal options for mercury waste are not available in most Central Asian Countries. In accordance to the Basel Convention hazardous waste can be exported if the country does not have adequate safe facilities for the treatment and disposal of waste and if the country the waste is sent to has a licensed and safe solution for mercury waste. Nevertheless, export of hazardous waste is very expensive and includes high administrative capacities. The costs of such cost intensive procedures for small amounts of mercury waste should be either captured in the calculation of the project or interim storage as a solution should be considered.
- The UNDP GEF procurement process is comprehensive and time consuming. In this project the procurement period was more than one year, which need to be considered in the project planning of the ProDoc.
- Another challenge to the project has been the frequent changes of Government. The national executing agency changed from the Ministry of Environmental Protection to the Ministry of Energy. Government changes resulted in changes being made to the Ministries and turnover of high-level staff involved in the project, but also resulted in changes made to national priorities and requirements for the regulatory framework following such changes. Except for going along

with the changes, there is not much a project can do, except to try to continue working with technical ministry staff which is much less likely to change as a result of Government changes.

- By providing substantial support in form of equipment, vehicles etc. from the project to private companies there is risk of distortion of competition, as due to the support the company can offer lower prices than the competitor. As this might be a unique situation focusing on the introduction of environmental friendly technology this might by an accepted impact nevertheless, this should be considered in further project planning.
- The project is actively supporting the countries access to the Minamata Convention, which will lead to substantial improvement of the mercury management in the country. The project team will have the opportunity to provide input and advice for implementation. This will enhance also the sustainability of this project.
- The extent to which laboratories require support, turns out often to be much more extensive than initially anticipated. The accreditation of laboratories is also based on the availably of adequate analyzing equipment – this should be considered in the ProDoc and its calculation.
- The setup of central waste treatment centers which will use a cost efficient billing system for the hospitals which are providing the waste to be treated, will result in a sustainable system which will continue after the project ends.

6 Annexes

6.1 MTR Terms of Reference

Terms of reference

Name of the project:	#00085149, NIP update, integration of POPs into national planning and promoting sound healthcare waste management in Kazakhstan
Type of contract:	Individual contract
Place of work:	Home based, visits to Astana, Kostanay, Ust-Kamenogorsk cities.
Duration:	28 days upon signature of the contract,
	July-September 2016

1. Introduction

Midterm Review is done upon the initiative of UNDP in Kazakhstan and executing agency of the Project. Aim of the revision: provide strategic and political options to achieve effective and rational expected outcome for the leaders and executors (PMC, UNDP country office in Kazakhstan and UNDP-GEF office). It also can be the basis for getting knowledge and reporting for executors and Project's stakeholders.

This revision is done in line with the "Monitoring and evaluation policy of GEF": <u>https://www.thegef.org/gef/PerformanceEvaluations</u> and "Monitoring and assessment policy of UNDP/GEF" <u>http://web.undp.org/evaluation/guidance.shtml#handbook</u>.

The Monitoring and Evaluation (M&E) policy at the project level in UNDP/GEF has four objectives:

- (i) to monitor and evaluate results and impacts;
- (ii) to provide a basis for decision making on necessary amendments and improvements;
- (iii) to promote accountability for resource use; and
- (iv) to document, provide feedback on, and disseminate lessons learned.

To ensure effective project Monitoring and Evaluation a combination of tools should be used. These might be applied continuously throughout the lifetime of the project, for example periodic monitoring of indicators, PIRs, or as specific time-bound exercises such as mid-term review, audit reports and independent evaluations.

In accordance with the UNDP/GEF Monitoring and Evaluation Policy and Procedures, the mid-term evaluation is recommended for all the projects with a long term of implementation. In addition to the fact that said evaluation enables to gain an independent deep view of the progress attained, such assessment introduces responsibility for the GEF Council decisions in respect of transparency and improvement of access to information at the stage of implementation. Mid-term evaluations are intended to identify potential project design problems, assess progress towards the achievement of objective, identify and document lessons learned (including lessons that might improve design and implementation of other UNDP/GEF projects), and to make recommendations regarding specific actions that might be taken to improve the project.

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The mid-term evaluation enables to assess the primary signs of the project success or failure and identify the necessary changes to be made. The evaluation shall be performed by an independent expert unrelated to the project development or implementation.

The evaluation will play a critical role in the future implementation of the project by providing advice on: (i) how to strengthen the adaptive management and monitoring function of the project; (ii) how to ensure accountability for the achievement of the GEF objective; (iii) how to enhance organizational and development learning; (iv) how to enable informed decision – making.

The evaluation on the part of UNDP will be sent to the GEF Secretariat. Special emphasis shall be made on current results of the project and opportunities to achieve objectives and results in time, considering the speed of the project's progress.

2. Project objectives

UNDP/GEF project «NIP update, integration of POPs into national planning and promoting sound healthcare waste management in Kazakhstan» has the target of reducing emission levels of unintentional persistent organic pollutants (POPs) and other pollutants in the environment by promoting sound healthcare waste management in Kazakhstan; and to assist the country in implementing commitments in the framework of Stockholm convention.

The project is working in three main dimensions.

The first outcome is related to updating national implementation plan for the commitments under Stockholm convention in the part of new and unintentional persistent organic pollutants, increase POPs monitoring capability, and improve institutional coordination of INC on chemicals.

The second outcome is aimed at assessment of mercury situation in general, to prepare recommendations on accession to Minamata convention and draft preliminary plan on reduction of mercury use.

In the third outcome the plan is to conduct activities, aimed at taking measures to minimize emissions of unintentional persistent organic pollutants (hereinafter uPOPs) when decontaminating healthcare waste. And it is aimed at creation and demonstration of the safe healthcare waste management system in pilot territories. As pilots, the following have been selected: East-Kazakhstan, Kostanay regions and the city of Astana.

The fourth component is aimed at monitoring, education, adaptation and feedback.

Project document was signed in October 2013, and project implementation started in April 2014. The full project budget is 38.4 million USD, with contribution of GEF of 3.4 million USD.

The implementing agency from the Government of Kazakhstan is Ministry of energy of the Republic of Kazakhstan.

3. Goal of the midterm evaluation

The mid-term Review (MTR) is consisted in a comprehensive project assessment and enables to make an evaluation of administrative and technical activities and strategies, problems and restrictions associated with the large-scale international and multilateral initiatives. MTR shall also provide the recommendations in relation to the strategies, approaches and/or activities in order to enhance the project capacities of achieving the expected outcomes. The evaluation results will be incorporated in the recommendations to improve the implementation of the project activities in the forthcoming period.

Aims of evaluation are as follows:

- (i) To evaluate the project effectiveness and cost-efficiency;
- (ii) To analyze the arrangements of project management and implementation;

- (iii) To evaluate the progress attained so far in relation to the project outcomes;
- (iv) To investigate the strategies and plans intended for the timely achievement of the overall project goal;
- (v) To document and analyze lessons learned in respect of the project design, its implementation and management;
- (vi) To assess the sustainability of project interventions;
- (vii) To assess the relevance in relation to the national priorities;
- (viii) To provide the recommendations for the future project activities.

In particular, the mid-term evaluation assesses the progress of the basic project objective, mitigation of threats and will identify any constraints to the project implementation and their causes. Evaluation intends also to provide for effective measures to be undertaken to make corrections in problem areas and specify the corrective actions for the future in the report.

The project effectiveness will be measured based on the indicators of the project's logical framework (see Annex 3). Indicators, related to project implementation will be applied in the assessment. The success and failure will partially be determined through the monitoring of the relative changes within the baseline conditions developed within one year of the project implementation. Where possible, the indicator species, sensitive to the changes of habitat and pressure increase, will need to be identified and monitored. In case of an identified shrinkage of the population of rare and endangered species the measures will be undertaken to identify the causes of such shrinkage and the alternative strategies will be developed to ensure the long-term welfare of the populations that will further be incorporated in the overall project management.

The mid-term evaluation report shall be a separate document, which will contain the recommendations and conclusions.

The report will be intended to meet the needs of all the related parties: GEF, UNDP, the Ministry of agriculture, Committee of forestry and animal world, the project's Steering Committee, local communities and other related parties in Kazakhstan and foreign countries.

MTR will cover such project elements, as:

<u>Project concept and design</u>: The expert will assess the project concept and design. The evaluator should review the problem addressed by the project strategy, identify the measures purposefulness, encompassing an assessment of the appropriateness of the objectives, planned outputs and outcomes, activities and inputs as compared to cost-effectiveness. The executing modality and managerial arrangements should also be judged. The evaluator will assess the achievement of indicators and review the work plan, planned duration and budget of the project.

<u>Implementation:</u> MTR will assess the implementation of the project in terms of quality and timeliness of inputs and efficiency and effectiveness of activities carried out. Efficiency of management shall also be assessed, as well as quality and timeliness of monitoring and backstopping by all parties to the project. In particular, the MTR assesses project team's use of adaptive management in project implementation. The objective of evaluation is to measure the level of achievement of the project's aims. It will also identify, which interim results have been achieved and how they have contributed to meeting the ultimate project outcomes. This section will focus on the priority areas as follows: Project outputs, outcomes and impact: assesses the outputs, outcomes and impact achieved by the project as well as the likely sustainability of project results. MTR should encompass an assessment of the achievement of the outcomes and contribution to attaining the overall objective of the project. It should also assess the extent to which the implementation of the project has been inclusive of relevant stakeholders and to which it has been able to create collaboration between different partners. Within the evaluation will be also examined, if the project has had significant unexpected effects, whether of beneficial or detrimental character.

MTR Report

<u>Project Management and Administration:</u> The evaluation should collect, document and assess the relevant elements and processes including: (i) Administrative procedures related to the project; (ii) Key decisions and interim results; and (iii) The main project implementation documents specifying how useful have the documents and reports been.

<u>Project Execution:</u> MTR should assess the degree of support to the project from the Ministry of energy of the Republic of Kazakhstan (Department for waste management), acting as the Implementing Agency and Environment and Energy unit of UNDP office in Kazakhstan (project management cost-efficiency including the achievement of interim results in terms of quality, quantity and timeliness; and the monitoring system).

MTE will also cover the following aspects:

3.1 Achieved Progress towards Results

<u>Changes in development conditions.</u> Address the following questions, with a focus on the perception of change among stakeholders:

- i. effectiveness of including the Plan indicators for healthcare waste management in strategic documents of pilot regions;
- ii. feasibility of development and possible effectiveness of National mercury reduction plan (National implementation plan;
- iii. effectiveness of national standards adoption, developed in the framework of the project:
- iv. «Method for detecting PCDD/F in soil (sampling, preparation of samples, analysis) », «Method for detecting PCDD/F in water (sampling, preparation of samples, analysis) »,
- v. «Method for detecting PCDD/F in air (sampling, preparation of samples, analysis) ».
- vi. adequacy and effectiveness of the training courses on handling POPs, mercury, and healthcare waste.
- vii. adequacy and effectiveness of technologies proposed for decontamination of healthcare waste in pilot regions;
- viii. adequacy and effectiveness of products, prepared by the project, to raise awareness in the matters of handling POPs, healthcare waste and mercury:
- ix. (v) relevance and appropriateness of developing national monitoring plan for POPs in the framework of national legislation;
- x. degree of participation in regional monitoring network;
- xi. relevance and appropriateness of developing national plan for healthcare waste management;
- xii. mechanism for coordination of regional cooperation and standards and guidelines harmonization in customs union.

To identify the degree, to which the results and project objectives have been achieved, the following three criteria will be used:

<u>Measurement of change</u>: Progress towards results should be based on a comparison of indicators before and after (so far) the project intervention.

<u>Project strategy</u>: how and why outcomes and strategies contribute to the achievement of the expected results. Examine their relevance and whether they provide the most effective route towards results.

<u>Sustainability</u>: to which extent the benefits of the project will continue, within or outside the project domain, after it has come to an end.

3.2 Adaptive management framework of the project

Monitoring Systems

a) Assess the monitoring tools currently being used:

- Do they provide the necessary information?
- Do they involve key partners?
- Are they efficient?
- Are additional monitoring tools required?

b) Reconstruct baseline data if necessary. Reconstruction should follow participatory processes and could be achieved in conjunction with a learning exercise;

c) Ensure that the monitoring system, including performance indicators, at least meets GEF minimum requirements. Apply SMART indicators as necessary;

d) Apply the GEF Management Effectiveness Tracking Tool and provide a description of comparison with the baseline values.

Risk Management

- a) Validate whether the risks identified in the project document, PIRs and the ATLAS Risk Management Module are the most important and whether the risk ratings applied are appropriate. If not, explain why. Describe any additional risks identified and suggest risk ratings and possible risk management strategies;
- b) Assess the project's risk identification and management systems:
 - Is the UNDP/GEF Risk Management System appropriately applied?
- How can the UNDP/GEF Risk Management System be used to strengthen project management? Work Planning
 - a) Assess the use of the logical framework as a management tool during implementation and any changes made to it:
 - a. Ensure the logical framework meets UNDP/GEF requirements in terms of format and content;
 - b. What impact did the modification of impact indicators have on project management?
 - b) Assess the use of routinely updated work plans;
 - c) Assess the use of electronic information technologies to support implementation, participation and monitoring, as well as other project activities;
 - d) Are work planning processes result-based? If not, suggest ways to re-orientate work planning;
 - e) Consider the financial management of the project, with specific reference to the costeffectiveness of interventions.

Reporting:

- a) Assess how adaptive the report on management changes was;
- b) Assess how lessons derived from the adaptive management process have been documented, shared with key partners and internalized by partners

3.3 Underlying factors

- a) Assess the underlying factors beyond the project's immediate control that influence outcomes and results. Consider the appropriateness and effectiveness of the project's management strategies for these factors;
- b) Re-test the assumptions made by the project management and identify new assumptions that should be made;
- c) Assess the effect of any incorrect assumptions made by the project.

3.4 Contribution of UNDP

i. Assess the role of UNDP against the requirements set out in the UNDP Handbook on Monitoring and Evaluating for Results. Consider: field visits, Steering Committee/TOR and analysis, PIR preparation and follow-up, GEF guidance;

- ii. Consider the new UNDP requirements outlined in the UNDP User Guide⁷, especially the Project Assurance role, and ensure they are incorporated into the project's adaptive management framework;
- iii. Assess the contribution to the project from UNDP "soft" assistance (i.e. policy advice & dialogue, advocacy, and coordination). Suggest measures to strengthen UNDP's soft assistance to the project management

3.5. Partnership strategy

- a) Assess how partners are involved in the project
- Involving partners and stakeholders in the selection of measures for project implementation;
- Analyzing progress towards results and determining project strategies.
- b) Identify opportunities for stronger substantive partnerships;
- c) Assess how local stakeholders participate in project management and decision-making. Include an analysis of the strengths and weaknesses of the approach adopted by the project and suggestions for improvement if necessary;
- d) Consider the dissemination of project information to partners and stakeholders and if necessary suggest more appropriate mechanisms (approaches);
- e) Assess coordination of joint activities between implementation units of other related projects;
- f) Assess local partnerships;

3.6. Project finance

a) Review the changes to fund allocations as a result of budget revisions and provide an opinion on the appropriateness and relevance of such revisions, taking into account the project activity timeframe;

b) Review the effectiveness of financial coordinating mechanisms.

4. Evaluation results

The key result expected from this mid-term evaluation is: The Mid-term Review Report

The mid-term Review report will include:

- The facts and conclusions
- Evaluation of project impact on:
 - The institution assisted and its staff;
 - The final beneficiaries including specific groups;
- Project sustainability on the basis of:
 - The commitments of the governmental agencies in relation to the project objectives
 - Involvement of local organizations (participatory process)
 - o Management and organizational factors
 - o Financing
 - Staff development
- Recommendations for the future implementation of the project activities
- Lessons learned detailed analysis and justification.

The draft and final report will be prepared in the format as provided in Annex 1 hereto. Draft report is provided to UNDP-GEF no later than8-13 September. Final report should be prepared based on feedback received. Final date for report submission is 14 May 2016. The report should be presented electronically in English.

⁷ The UNDP User Guide is currently only available on UNDP's intranet. However UNDP can provide the necessary section on roles and responsibility from

http://content.undp.org/go/userguide/results/rmoverview/progprojorg/?src=print

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5. Evaluation methodology

The Mid-Term Review will be done through a combination of processes including a desk study, site visits, questionnaires and interviews, with involvement of all the parties related but not limited by: Ministry of Energy of the Republic of Kazakhstan, UNDP, representatives of the governmental agencies of various levels, local authorities, local NGO's, etc.

The evaluator will be governed by the materials that available at: <u>www.undp.org</u>, such as:

- UNDP Handbook on Monitoring and Evaluation for Results;
- UNDP/GEF M&E Resource Kit;
- Measuring Results of the GEF Biodiversity Program.
- The evaluation methodology is assumed to cover the aspects as follows:
 - Desk study of all project documentation;
 - Consultations with Ministry of energy of RK, RSE "Kazgidromet" and its subdivisions in pilot regions, local executive bodies of pilot regions, UNDP, Project steering committee;
- Site visits (Astana, East-Kazakhstan region, Kostanay region)
- Interviews
 - Ministry of energy
 - RSE "Kazgidromet"
 - Local executive bodies
 - Local communities
 - o NGOs

6. Evaluation

The Mid-term Review will be carried out by two external experts:

- International consultant expert in areas of international projects' monitoring and evaluation with the focus on handling POPs, chemicals and hazardous waste;
- National consultant is an expert in the area of handling POPs, chemicals and hazardous waste, with work experience in international projects
- Consultants are responsible for the successful completion of the evaluation and finalizing the Mid-term Review report. Consultants to be familiar with the region and have basic knowledge of the project area (such as handling POPs, chemicals and hazardous waste, synergies of conventions on chemicals).

7. Implementation activities

The principal responsibility for organizing Midterm review lies with UNDP Kazakhstan. UNDP in Kazakhstan represented by Department of energy and environment is responsible for liaising with the project team to set up interviews with stakeholder, arrange field visits and co-ordinate with the Executing Agency and other counterparts. UNDP Kazakhstan will contract the evaluators and ensure the timely provision of funding and travel arrangements within the country for the evaluator.

The timeframe for submission of the first draft of the report: 6 weeks after the contract is signed. The report will be submitted electronically, in English.

The report should be submitted to UNDP Country Office in Kazakhstan, to the attention of ViktoriaBaygazina, mailing address: Astana, Bokeykhan str. 14, phone: +7(7172) 69-65-50.

Prior to approval of the final report, a draft version shall be circulated for comments to government counterparts, UNDP, Project Coordinator, Project Steering committee members, members representing various organizations and project team.

Visits to three pilot sites are planned:

MTR ReportPilot sitesNumber of daysAstana2Kostanay region2East-Kazakhstan region2Total6 days

If any discrepancies have emerged between impressions and findings of the evaluator, these should be explained in an annex attached to the final report.

Activities and timeframes are as follows:

Activities	Timeframe and responsibility	Implementation period
		(approx. dates)
Preparation of the MTR Team (handover of project documents)	2 days – international expert with the cooperation of national expert	July 28-29, 2016
Document review and preparing MTR Inception Report	2 days – international expert with the cooperation of national expert	August 1-2, 2016
Finalization and Validation of MTR Inception Report	3 days – international expert with the cooperation of national expert	August 3-5, 2016
MTR mission: stakeholder meetings, interviews, field visits. Concluding Stakeholder Workshop. Mission wrap-up meeting & presentation of initial findings.	8 working days – international expert with the cooperation of national expert	August 22-31, 2016
Preparing draft Report	5 days – international expert with the cooperation of national expert	September 5-9, 2016
Incorporating audit trail on draft report/Finalization of MTR report	2 days – international expert with the cooperation of national expert	September 12-13, 2016
Preparation & Issue of Management Response	5 days – international expert with the cooperation of national expert	September 14-20 , 2016
Expected date of full MTR completion	1 day – international expert with the cooperation of national expert	September 21 , 2016
TOTAL	28 days	

Working days: international expert – 28 working days

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
Objective To reduce the releases of unintentionally produced POPs and other globally harmful pollutants into the environment by promoting sound healthcare waste management in Kazakhstan, and to assist the country in implementing its relevant obligations under the Stockholm convention.	Update of the National Implementation Plan (NIP) on Stockholm Convention is prepared and coordination on chemical MEAs is enhanced.	No inventory on new POPs Fragmented legislation controls NIP not updated Several POPs initiatives are implemented not in a coordinated way	Inventory completed and publicly available NIP obligations with inclusion of new POPs reviewed and updated. Updated draft NIP is presented to the Government for review process and endorsement	The National Implementation Plan on the Stockholm Convention has been updated on new POPs, approved by the Order #228 of the Minister of Energy dated 30.12.2014, and submitted to the Convention Secretariat in May 2015. Main sources of unintentionally produced POPshave been defined. Initial inventory of unintentionally produced POPs has been completed, while the project has begun the inventory of new POPs included in the list of chemicals prohibited by the 7th Conference of the Parties (May 2015). The project has started to assess the industrial use of new POPs and possible chemical and non-chemical alternatives.
	Mercury inventory and Reduction plan prepared.	Stand-alone, site specific mercury contamination remediation programme is in place by the World Bank No other inventories of mercury initiated and completed and human exposure estimated No mercury use and release standard set No national mercury management plan formulated and	Mercury situation in Kazakhstan assessed Inventory is documented Inter-agency consultations held National capacity to handle recovered mercury is assessed and recommendations for improvement are set forward Draft National Mercury Reduction Plan developed with identified priorities. Mercury	In order to continue the work to determine the mercury situation in the country in line with UNEP guidance materials, a quantitative assessment of mercury release into environment was completed in May 2016 (Making use of the Level 1 Mercury Toolkit to conduct the inventory). The Government of RK, in collaboration with local executive bodies, continues the remediation work in historical mercury polluted sites (Pavlodar City, Karaganda). Monitoring of the mercury lake in Pavlodar continued during this reporting period. In order to build capacity in handling of mercury and

6.2 Progress toward Development Objective: 2nd Project Implementation Report (PIR) – 30th of June 2016

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
		approved	emission standard established.	practical application of capacity building programme prepared by the project to create awareness of the risks associated with the use and release of mercury into the environment, 3 regional trainings were held. A total of 269 people was trained and familiarized on mercury risks in the reporting period. During the meeting of the Interagency committee on international agreements, ratification of Minamata Convention was included in a Prospective plan for international agreements of the Republic of Kazakhstan for 2017- 2019, according to the Minutes of the meeting #13 dated 31.03.2016. Currently, work is underway to prepare the Convention for the ratification.
	POPs emissions from healthcare waste incineration are reduced through a demonstration component, and wider replication of results.	Waste segregation for waste source reduction is not a standard accepted approach in medical facilities Routine waste incineration without emission controls and risk reduction measures is commonly practiced Low level of practical knowledge and use of non-combustion techniques Baseline emissions constitute 124.88 g TEQ/a to air, and 0.65 g TEQ/a to bottom ash.	Mid-term: Releases reduced to 86.08 g TEQ/a to air, and 0.46 g TEQ/a to bottom ash. End of project: Releases reduced to 16.38 g TEQ/a to air, and 0.11 g TEQ/a to bottom ash	In three selected pilot regions (Kostanay, Astana (capital) and Ust-Kamenogorsk), work was done to prepare the project healthcare centers to decontaminate infectious healthcare waste by autoclaving. Working meetings were held and agreements were signed on the selected waste decontamination method and capacities of the treatment installations for each of the centers (three in regional centers, cities of Kostanay, Ust-Kamenogorsk and Astana, and two in district centers of Kostanay and East-Kazakhstan regions 8 in total). Main indicators from the Healthcare Waste Management Plans that were developed for the pilot regions in terms of reducing the volume of production and placement of infectious healthcare waste were included in the strategic development documents of those regions.

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016		
				In order to raise awareness on managing healthcare waste and alternative decontamination/treatment methods as well as principles of waste segregation, four (4) seminars and three (3) trainings were delivered (a total of 216 employees of healthcare organizations responsible for waste management system have so far participated in these trainings).		
	Mercury waste generated by the health sector is managed soundly and future waste is minimized	Broken thermometers: 236.81 kg/a.	Mid-term: Releases reduced to (in broken thermometers): 210.81 kg/a. End of project: Releases reduced to 200 kg/a	As a result of the project, mercury thermometers were replaced by digital (15 000 units) in all public healthcare facilities of three pilot regions. Mercury-containing waste (thermometers) were decontaminated in a safe way, which led to a reduction in the total annual emissions of 30 kg of elemental mercury in the health sector from broken glass thermometers. The situation on the use of mercury thermometers in the healthcare system has changed for the better since the preparation of the project document. Today, there is widespread rejection of the use of mercury thermometers. Further estimates on the project's impacts in this area will provided during MTR and in future reporting cycles, based on incoming information from the health sector.		
Component 1 Stockholm	Component 1 Stockholm Convention NIP update and improved institutional coordination on chemical MEAs					
Outcome 1.1 POPs inventories	Capacity building programme (trainings) for involved	Training on PCBs inventory and management is being	Mid term: Conventional training	Implementation of capacity building programme on POPs and mercury management has been achieved		
improved for informed decision making and	stakeholders developed and	carried out in the framework of the UNDP PCB project. No training	material completed and disseminated;	conducted in three pilot regions.		
priority setting	implemented on POPs risks, inventories, POPs tracking,	on new POPs is currently planned on POPs issue in Kazakhstan Limited	One (1) workshop and one (1) training for trainers	An informational database on the implementation of three chemicals related Conventions (Stockholm,		

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
	monitoring of data reported by responsible parties.	information on new POPs is available	completed for relevant stakeholders in the public and industrial sectors; Training effectiveness assessed (with both training feedback from the trainees and final tests) Number of requests for data sent out and processed Number of visits made to related stakeholders	Rotterdam, Basel), has been established. Inventory of new POPshas been completed. The NIP has been updated and was submitted to the SC secretariat in June 2015.
	National information system (inventory) on POPs expanded (updated information on uPOPs and new POPs).	·Original 2003-2005 uPOPs inventory conducted with a limited set of industrial sources and outdated. Inventory of POPs pesticides stockpiles and burial sites limited to 20% of the country at the NIP stage. Under the sectoral programs ZhasylDamu (Green Growth) for 2010- 2014, adopted by the Government of the Republic of Kazakhstan dated September 10, 2010 # 924, a detailed inventory	POPs Regular Inventory Mechanism established. Industrial sources of uPOPs identified. Statistical database for the calculation of uPOPs inventory built and validated. Industries using new POPs or recycling waste containing new POPs identified. Reports from responsible parties reviewed and data	The analysis and assessment of the current POPs situation has been completed during this reporting period. The work was started to prepare the national inventory of POPs. The experience of the inventory compilation is used, as well as the analysis of the challenges and errors in conducting the POPs inventory; analysis of the use and import of new POPs listed by the 7th Conference of the Parties in May 2015 has been prepared. An analysis on the use and import of new POPshas been also completed during this reporting period. Furthermore, the project conducted an assessment of preliminary data from the uPOPs inventory, including sectors releasing uPOPs. The main uPOPs sources have been identified, and the uPOPs inventory was completed/updated.

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
		of all POPs and obsolete pesticides is envisaged but not started yet.	limitations revealed Data quality and consistency evaluated with recommendations for improvement At least 60% of the questionnaire survey completed and elaborated. Inventory of pesticide stockpiles or burial sites extended to at least 40% of the country. Inventory of PCBs updated by coordination with the UNDP PCB project.	
Outcome 1.2 National capacities on POPs monitoring, analytical capabilities are assessed	Studies on existing POPs analytical and monitoring capabilities for the whole range of POPs (with focus on new POPs) carried out	A few laboratories identified in the course of NIP preparation and GEF/UNDP PCB management programme. Laboratories are currently only nationally accredited for PCB analyses Draft POPs national monitoring plan developed by RECETOX a Stockholm Conventions	uPOPs analysis methods included in the national register; Laboratories capacities for uPOPs analysis and POPs in goods and environment assessed. Stakeholder-reviewed national POPs monitoring plan submitted to government for approval.	In order to prepare a National POPs monitoring plan, the project started the preliminary monitoring of POPs in coordination with the Ministry of Energy of the Republic of Kazakhstan. The following sampling sites were selected for sampling: Ust-Kamenogorsk city, Kostanay city, Pavlodar city, Atyrau city, Kyzylorda city. Soil samples were collected from meteorological stations of these cities and sampling equipment was installed for 9 months to allow for passive air sampling. Every three months, filters in the sampling equipment are replaced and the used filters are sent to the RECETOX laboratory

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
		Regional Centre in the Czech Republic.		 (nominated focal point laboratory of the Stockholm Convention in the region), located in Brno, the Czech Republic. Tests were planned to be done to identify the following POPs content in soil and air: PCDD/F, HCB, PCB, pesticides. As of now, results from soil analysis from the abovementioned regions were received. Data show increased POPs concentration in the following regions: HCH in Atyrau, DDT in Atyrau and Ust- Kamenogorsk, and PCDD in Atyrau. 10 employees of the territorial bodies, responsible for monitoring and control of quality of the environment, were trained by the Stockholm Convention focal point for monitoring of POPs (Brno, Czech Republic), including 10 people in the reporting period.
	A set of recommendations for the improvement of such capabilities formulated and submitted to the Government	No full range of POPs and POPs in goods/environment is handled by existing laboratories No national consultations held on priorities No action plan is in place for improvements	At least two (2) laboratories accredited to perform uPOPs analysis in goods/environment;	On the basis of the assessment of laboratory capacity of 9 laboratories in conducting POPs analysis, carried out during the previous reporting period, two (2) laboratories were selected (East-Kazakhstan and North- Kazakhstan branches of RSE Kazhydromet) with the purpose to increase the number of laboratories accredited to perform PCDD/F, uPOPs and mercury testing. Currently, preparation for accreditation is in progress (cost assessment, development of national standards of the Republic of Kazakhstan on performing POPs analysis of PCDD/PCDF in soil, air and water, and adding them to national register). Laboratory staff was trained in the RECETOX, Stockholm Convention focal point for monitoring of POPs, as well as at the base of the laboratory of RSE with REA "Research and practical center of sanitary-

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
				epidemiological expertise and monitoring" of the Committee for Consumer Rights Protection of the Ministry of National Economy of RK.
Outcome 1.3 Policy, institutional frameworks and enabling regulatory environment are in place to ensure better control on POPs accumulation and emissions	Institutional coordination and compliance with international agreements improved through firmer institutionalization of POPs issues into national structures	No POPs coordination center in existence due to lengthy Governments approval procedures and unaligned MEP mandate, and mismatch of proposed workplans (to 2028) with 3 year long financial planning processes POPs coordination happens in a fragmented manner with no alignment of roles Nu funding sources to sustain POPs coordination function are available	Roles and responsibilities of related stakeholders defined Draft regulation defining TOR and potential Government's funding sources of the POPs coordinating mechanism established POPsintersectoral working group (mechanism) established (for example, as part of the "Green Development" Center) NGO's participation and input considered in the composition of the mechanism	During this reporting period, the project has developed proposals for the institutional structure of government bodies and organizations responsible for implementation of three conventions. The project has also provided assistance in creating such structures (analysis of the existing system and proposals on its improvement). And thus, the responsibility of coordinating the implementation of three conventions has been delegated to the structural subdivision of the Ministry of Energy of RK ZhasylDamu JSC.
	National legal framework, by aligning institutional roles, reviewed and	Ecological Code contains only general information on POPs management (chapter 40 on dangerous	• Preliminary report on the improvement of current regulatory system drafted.	According to the current legislation, polychlorinated dibenzodioxines and polychlorinated dibenzoforans are included in the list of pollutants, for which emission limits are set.
	the issue of insofar unaddressed POPs,	amendments related to PCBs supported by GEF/UNDP programme on	• One (1) stakeholder consultation workshop conducted.	The law of RK of 28.04.2016, 506-V on amendments and changes to certain legal acts on the matters of green economy introduced changes to Environmental

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
	uPOPs and new POPs	PCBs The Government has plans to extend the provisions of chapter 40 to regulate emissions uPOPs MEP plans measures to improve the operational control of industrial emissions, including burning of fuels, and promote the construction and modernization of facilities for cleaning exhaust gases in the steel industry.	• Review and update of EcoCode and other key regulations covering chemicals management (number of legislations reviewed and updated) ⁸	code, setting requirements on the need to dispose of POPs in an environmentally safe way. The norm for content of dioxins and furans in exhaust gases was set at the level not exceeding 0,1 ng/m 3. The project team was part of the working group that helped introduce these changes. This is a very good result, given that the country plans to build a plant for POPs disposal, as well as the private sector attempts to incinerate POPs. Currently it is envisaged to amend the Order of the Minister of Energy of RK, which regulated the treatment and disposal of POPs.
	Sectoral technical guidelines updated to include the issue of priority POPs, including sampling and analysis methods Capacity building programme (trainings) and consultations for	Guidelines and action plans are being drafted on the sectors related to POPs waste and PCBs, under the UNDP PCB project under ZhasylDamu (Green Growth) initiative. No national training held on new POPs, developments in the	 Preliminary draft of the guidelines completed and disseminated to the relevant stakeholders (Government, Industry, NGOs) for amendment Results of stakeholder consultations At least, three (3) trainings held on general POPs issues and NIP 	Guidelines for analysis of dioxins and furans in the environment were drafted by the project and sent to project stakeholders for their approval. It is planned to adopt and include the methods in the National Register in December 2016. In order to raise awareness, 4 seminars on POPs management were organized during the reporting period, in which 530 people have participated, making
	involved stakeholders developed and	Stockholm Convention and NIP update guidelines;	update process, in particular	the total number of people trained since the start of the project. A capacity building programme is being

⁸ The "Environmental Code" and the laws regulating Chemical Product Safety and Pesticides ("On Plant Protection", technical regulation "Requirements to the Safety of Pesticides ") analyzed, gap analysis performed, amendments identified and submitted for approval (through relevant national legislative mechanisms).

Objective/Outcome / Description Indicator	on of Baseline Level	Target Level at end of project	Level at 30 June 2016
implemen related ris monitorin institution responsib control le benchma enforcem	nted on POPs sks, POPs ng, nal roles and pilities, POPs egislation rrks and hent control measures and approaches control measures and approaches	on hd • One hundred (100) stakeholders participated in trainings Results of stakeholder consultations	implemented on managing POPs and mercury by delivering trainings together with the Public Fund "Center "Cooperation for sustainable development". Three trainings were delivered in pilot regions, 225 representatives of local executive bodies, industries, NGOs and healthcare organizations were trained, making the total number of people trained since the start of the project. A training was delivered for 50 participants on the topic Laboratory capacity building for monitoring of persistent organic pollutants (POPs) and mercury in environment, which was organized in the laboratory of RSE with REA "Research and practical center of sanitary-epidemiological expertise and monitoring" of the Committee for Consumer Rights Protection of the Ministry of National Economy of RK. Matters of POPs monitoring in environment and food products were discussed, including methodologies for conducting monitoring, POPs identification, etc. Furthermore the work done by RSE Kazhydromet on POPs detection was discussed as well as matters related to mercury pollution control in the environment, and accreditation/expanding laboratory accreditation .POPs analysis using modern equipment was also demonstrated in the pesticide toxicology laboratory of the RSE with REA Scientific and practical center for sanitary and epidemiological expertise and monitoring. 50 training participants unanimously decided on the need to include methodologies for analyzing POPs into the national register of the Republic of Kazakhstan; to adopt international methods; and tests to analyze POPs in the environment, food products and liquid biological material for state laboratories of the Republic of

Objective/Outcome / Description of Description Indicator		Baseline Level	Target Level at end of project	Level at 30 June 2016		
				Kazakhstan. In order to raise awareness about project activities and to build capacity on managing chemicals and waste, the team took part in a round table meeting on the Development of the municipal solid waste management sector in the Republic of Kazakhstan, which was organized by the Ministry of Energy of RK together with Operator ROP LLP, Kazakhstan center for PPP JSC, with participants from regional akimats, environment departments, waste disposal industries, and NGOs, total 65 people.		
	National Implementation Plan (NIP) on Stockholm Convention obligations with inclusion of new POPs reviewed and updated, with elaboration of specific action plans on new POPs.	The Government is carrying out several non- coordinated actions on POPs (update of inventories on pesticidalPOPs in 5 regions, PCB management, inventory and partial disposal, planning better control of uPOPs, improving of existing regulations).	 Updated NIP structure and content agreed in consultations with relevant stakeholders. A first draft of updated NIP prepared which contains preliminary draft of the inventory, guidelines, legislation and action plan and circulated. 	Data of on new POPs were reflected in the updated NIP, and approved by the Order of the Ministry of Energy (of 30.12.2014, 228) and subsequentely, and it was submitted to the Secretariat of Stockholm Convention. Work continues on updating NIP in the part of unintentionally produced POPs, new POPs and pesticides.		
Outcome 1.4 Improved institutional coordination on chemical MEAs	Review and better alignment of ministerial functions on implementation of Conventions obligations	No or very fragmented institutional structure overseeing chemicals MEAs Lack of common knowledge on synergies between chemical MEAs	 Functional review of stakeholders' functions is complete Recommendations for improvement drafted Stakeholder consultations 	A roadmap for the implementation coordination of the Stockholm, Rotterdam and Basel Conventions was developed. For the purposes of simplifying procedure on preparation and submission of national reports in accordance with the requirements of the Secretariat, samples of national reports of the Republic of Kazakhstan for the three conventions were prepared. Model national reports of for the Republic of		

Objective/Outcome / DescriptionDescription of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
		held for priority selection	Kazakhstan for the three conventions were prepared. A long-term plan procedure for the submission on of national reports and suggested changes to national statistical and sectoral reporting systems were developed and submitted to the Ministry of Energy of RK for use in the daily work.
Establishment of coordination mechanisms to support synergisti implementation o Stockholm, Rotter and Basel Conven and established framework (syster for monitoring, accountancy and reporting on the implementation o Stockholm, Basel a Rotterdam conventions in Kazakhstan	No conceptual understanding (strategy) on the synergism and collaborative operation of responsible parties No or dam very fragmented ions institutional structure overseeing chemicals n) MEAs No formal coordination mechanism established for synergistic implementation of MEAs the No TOR and mandate of the mechanism is in existence No formal central monitoring on reporting obligations is maintained to assess quality of MEA implementation Data collection challenges to ensure better reporting	 Drafting and approval of a joint synergistic action plan (concept, strategy note) for the implementation of the Stockholm, Basel and Rotterdam conventions Functional review of stakeholders' functions is complete Draft TOR and mandates are defined in the context of existing Governmental mandates and financial planning processes supporting institutional structures Stakeholder consultations held with agreements received form key authorities (Ministry of Justice and Ministry of Finance) Principles of monitoring system drafted Data collection and 	Three seminars were held, focusing on the synergies between chemicals related of MEA, a total of 314 people were trained in the reporting period on chemicals. Proposals on the institutional structure of government bodies and organizations, responsible for the implementation of three conventions, were developed, as well as assistance in creating such structures was provided by the project, as well as recommendations for the establishment of a coordination mechanism for the three conventions, in part of a single center for implementation of conventions. A long-term plan for the submission of national reports and proposed changes to national systems of statistical and sectoral reporting systems were developed by the project. Proposals were also developed for the organization ofing awareness raising activities for communities and cooperation with NGOs on implementation of the three conventions.

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016		
			reporting processes are reviewed and proposals for improvement drafted			
	Capacity of government authorities on implementation of chemical conventions improved Improved data collection and chemical review processes for decision making and control improvements on the import and use of new dangerous chemical substances	Lack of legal framework for cooperation among key stakeholders No previous training on synergies and MEA implementation held Data collection challenges to ensure better reporting No conceptual understanding (strategy) on the synergism and collaborative operation of responsible parties No action plan in place to support operation of the MEA coordinating mechanism	 At least, three (3) training workshops held for key stakeholders on key aspects of cooperation and data collection and analysis One hundred (100) stakeholders participated in trainings Draft strategic concept and action plan formulated Stakeholder consultations held 	Three seminars were held, focusing on synergies of MEA on chemicals. Proposals on institutional structure of government bodies and organizations, responsible for implementation of three conventions, were developed, as well as assistance in creating such structure. Long-term plan for submission of national reports and proposed changes to national systems of statistical and sectoral reporting were developed. Proposals were developed for organizing awareness raising activities for community and cooperation with NGOs on implementing the three conventions.		
Component 2 Overall m	ercury situation assesse	d and initial mercury reduct	ion and containment plan f	ormulated		
Outcome 2.1 Mercury assessment implemented, national consultations held to identify priorities for actions and capacity building on mercury	Capacity building programme(trainings) for involved stakeholders developed and implemented on mercury risks, inventories, sources,	No previous larger scale efforts applied to build capacity of related stakeholders on mercury negotiations, mercury convention, mercury associated risks etc Limitations in the scale of stakeholder activities on	 Capacity building program (trainings) for involved stakeholders prepared and initiated. At least, three (3) training workshops held One hundred (100) participants participated in training workshops 	Implementation is underway of the capacity-building programme that was developed during the previous reporting period and which aims to raise awareness on risks related to use and release of mercury into environment. This program aims to increase knowledge about the impacts of mercury on the environment and human health as well as the practical application of requirements for the mercury inventory in various		

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
risks carried out	data tracking	mercury, with exception to Ust-Kamenogorsk WBs programme on decontamination	• Key stakeholders are trained in inventory and data tracking	manufacturing processes by subsoil users. As part of this programme, during this reporting period three (3) trainings were delivered in the pilot regions. Training was attended by 216 representatives (since the start of the project) from local executive bodies, the healthcare sector and industry. The programme is presented to "ZhasylDamu" JSC and RSE "Informational and Analytical Center" for use in training courses of employees of the environmental services industry.
	Mercury situation in Kazakhstan assessed in coordinated manner jointly with UNEP	No national mercury assessment made, except in form of waste product No database on sources and mercury releases is in existence No full understanding of scale impact on human health	 Partnership with stakeholders established Data sources accessed Major sources are identified National capacity to manage mercury products and waste assessed and recommendations for capacity improvement developed 	Quantitative assessment of mercury releases to environment was done. "The report on the inventory of mercury in the Republic of Kazakhstan" was provided to the Ministry of Energy. It is currently posted on the internet portal for public discussion. The total mercury releases to the environment amounted to 577,000 kg in 2014. Analysis of inventory results showed that the main source of mercury in Kazakhstan is "Production of primary metal": copper, zinc, gold and other metals, is 97% (558,598 kg) of all mercury. The following categories of significant amounts of mercury is the "Coal combustion and other ways of its use" - 2% (10,255 kg), and "The use and disposal of mercury- containing products" - 1% (3,395 kg). The Government of RK Kazakhstan, in collaboration with local executive bodies, continues its work on elimination the remediation of historical mercury pollution sites and monitoring thereof (Pavlodar and Karaganda cities).
	Outline of National mercury reduction	No national mercury assessment made, except in form of waste product	 Consultations with stakeholders are held, inclusive coordination 	The quantitative assessment of mercury release into the environment (first stage of inventory) has been completed. In order to assess the situation in the

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016		
	plan developed	No mercury action plan in place outlining priority action and setting budgetary allocations	with GEF/UNEP's region programme • Future plan's outline and proposed legislative improvements (inclusive release standards) to control mercury management drafted Data collection and assessment initiated	country with respect to the treatment of mercury- containing waste, as well as acceptable technologies for their treatment, a questionnaire was developed on existing installations for treatment of mercury- containing waste, which was sent to the territorial subdivisions of the Ministry of Energy for data collection. Based on those questionnaires the Center "Cooperation for Sustainable Development" has performed an analysis and prepared a report on the existing system of the treatment of mercury wastes in Kazakhstan. It was understood that the main method of demercurisation is a sulphidation method. One of the main objectives of the project is to assist the country in making a decision on ratification of the Minamata Convention. In achieving this objective, the project worked to survey and record the views of all stakeholders, whose interests are affected by the signing of the Convention (public authorities, industry, NGOS). As a result of the work, the Government decided to proceed with accession of the Minamata Convention. Currently work has started on procedures of accession to the Convention in the country. The project has also started preparing recommendations for an action plan of reducing mercury use/generation in the country.		
	Public awareness raising campaigns on mercury risks conducted	Low awareness of sources of mercury in consumer goods and consequences of their improper disposal.	 Public awareness campaign developed 50% of planned awareness activities carried out by MTE. 	In the current reporting period, four (4) seminars were held, where matters related to mercury and its management were discussed with participants, as well as combined on general matters related to POPs management.		

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
				Three (3) trainings in pilot regions. 530 representatives of stakeholders were trained during the reporting period. Since the start of the project awareness of various aspects of the sound management of mercury has been raised in more than 800 people from the Government, healthcare sector and industry. In collaboration with the UNDP/ GEF Project on Energy Efficiency 2 seminars were held to raise awareness of energy-resource saving in healthcare facilities, including the handling of chemicals and waste" (Aktau and Kyzylorda cities) attended by 85 people.
Component 3 Minimizat approaches	ion of unintentional PO	Ps and mercury releases in s	selected hospitals through c	lemonstration of sound Health-care Waste Management
Outcome 3.1 Sound health-care waste management through uPOPs and mercury reduction approaches are demonstrated in 2-3 regions of the country	Review of national policies and update of HCWM regulatory framework and road map	No comprehensive conceptual note on improving HCWM policies is in existence No currently established emission standard for waste incineration (POPs, heavy metals). No legal provisions exist, except minimum temperature standard for healthcare waste incineration. No technical standards set for hazardous healthcare waste treatment, including non-combustion methods. No current	 Existing fragmented national policies fully reviewed with recommendations for improvement along with road map defining strategy and timeline for HCWM plan implementation developed; Consultations with stakeholders, including regional authorities in target regions and service providers are held (at least, two workshops); List of products and services to be included in 	A review of the current legislation legislative framework on healthcare waste management in healthcare system was completed in this reporting period. Recommendations were prepared to make amendments and changes to the Sanitary- epidemiological requirements to for healthcare facilities. Adoption is scheduled for December 2016. In the next reporting period, Work will be completed on organizing the bidding process for procurement of non- combustion equipment to create healthcare waste management centers (5 centers in total) will be completed. Proposed changes to the legislation on public procurement were reflected in the Law of RK of 04.12.2015, #434-V «On public procurement» paragraph 4, art.37, which strengthened requirements

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
		requirements defined for waste management plans and country budget does not consider non- incineration technologies for wider replication. Public procurement rules do not include provisions on EPP (procured products can still contain heavy metals and other harmful substances), and the lowest price criterion is the main foundation. Reporting systems (on waste amounts, tracking and monitoring) are underdeveloped	the public procurement rules submitted to stakeholders for discussion. • Legislative amendments, inclusive emission standards and financial disincentives, are drafted, consulted with key stakeholders (government, civil society, NGOs etc). • Awareness raising workshops and media reports (at least, 3 expanded workshops for medical and private sectors, and 5 media reports)	on bidding procedures for provision of services, including healthcare waste management. In order to raise awareness, four (4) seminars were organized on healthcare waste management principles. And on practical skills on the use of needle destroyers cutters and separate segregated waste collection, three (3) trainings were organized with 136 participants attended. On raising awareness on healthcare waste management and alternative waste treatment methods, as well as separate segregated waste collection, four (4) seminars were held and three trainings (in total, 179 employees of healthcare facilities, responsible for waste management system took part in those). In future, work is planned on for the development of standard operating procedures for waste management in healthcare facilities. In the current reporting period, the project prepared proposals to improve the national systems of statistical and industry reporting on chemicals.
	Development of Regional HCWM Management Plan in selected provinces	Baseline situation indicates no concerted action with adherence to BAT/BEP in medical sector Sectoris fragmented with disorganized players with no systemic approach to resolving uPOPs, mercury issues and inappropriate HCWM practices. No	 In selected provinces, all HCW generators and waste disposal installations and companies are identified and mapped. The core data is collected and process of it verification is in progress. BAT/BEP requirements defined, and end-of-use 	During the previous reporting period, HCWM plans were developed for the pilot regions. Key indicators of the HCWM plans were included (mainstreamed) into strategic documents for regional development to ensure that local executive bodies take measures to improve HCWM systems. An assessment of waste generations volume in the pilot regions and in the country were completed during the previous reporting period, as well as data collection,

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
		specifically tailored action plan exists, and quality data is missing. No previous capacity building and demonstration of BAT/BEP to reduce uPOPs and mercury releases implemented	mercury management capacity is engaged for safe storage (identification, training) • Stakeholders' consultations are held with at least (6) workshops in selected regions (3) held. Draft action plans in preparation with close consultations	analysis and mapping of existing incineration and autoclaving equipment and treatment plants. A map indicating the location of these technologies has been posted on the ZhasylDamu JSC information portal. Healthcare waste management plans for pilot hospitals were sent for review and approval to 8 pilot hospitals: Astana (Research Institute of Traumatology and Orthopedics, Central Road Hospital), East-Kazakhstan oblast (CSE on EAR "Center of Mother and Child"; CSE on EAR Ust-Kamenogorsk city hospital 1, CSE on EAR "Central District Hospital of Katonkaragay District"), and Kostanay oblast (CSE on EAR Kostanai Drug Dispensary; SCCE Oblast Hospital; SCCE Zhitigarinskaya CDH.Adoption of these plans is scheduled in December 2016.
	Pilot HCWM projects in selected hospitals, including phase-out of mercury containing thermometers	No target hospitals for pilots defined before baseline assessment. Waste minimization and segregation at source not practiced No alternative (non-mercury) thermometers and alternative product substitution demonstrated No model facilities (with individual action plans) pilot sustainable BAT/BEP and reduction in waste generation and uPOPs/mercury releases	 The baseline situation is assessed. At least four (4) pilot projects in health facilities identified. HCWM Plans developed, inclusive of BAT/BEP, waste minimization and segregation, waste tracking and reporting, and implemented. Required training is provided on spot (at least, 300 staff trained) 	 15,000 mercury containing thermometers were replaced with digital ones in the projects 8 pilot hospitals. This translates to a reduction of 30 kg/year of potential Hg releases. In order to eliminate the use of mercury thermometers in healthcare facilities in the pilot regions and to ensure safe collection and treatment of mercury thermometers, MoUs have been signed with Ministry of Energy of RK and akimats (local executive bodies) of pilot regions, involving denial of further purchase and use of mercury thermometers. Currently there are no mercury thermometers remaining in state budget-funded healthcare facilities in the three (3) pilot regions.

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
		BAT/BEP are not up taken on a larger scale Overall waste management system is weak		
	Establishment of HCW treatment centres in selected sites	Overall waste management system is weak Health facilities have no access to organised waste treatment system or the waste is incinerated in installations not fulfilling BEP/BAT criteria. No non- incineration technologies procured and adopted to support new management system in selected regions Waste disposal and transportation of waste in peripheral areas (away from municipal or capital centers) is disadvantaged due to high price Low quality of service provision results in additional sanitary risks	 Tender is held and the winning bid(s) is/are selected. EIA and permit procedure is carried on At least 8 rural and 2 urban HCW treatment centres established with non-incineration demonstration supplied, installed and commissioned Transportation: vehicles supplied or reconstructed to meet ADR standards (6 items) Transportation and waste disposal pricing recommendations drafted for stakeholder review (criteria per weight or volume) 	In the selected three pilot regions, working meetings were held to identify sites for centralized waste treatment plants, and their capacities. Decontamination method of steam sterilization was selected, as a method recognized by WHO as priority for decontamination of healthcare waste, and autoclaving was selected as steam sterilization method. The work on the tender is being completed for the procurement of equipment for the purposes of creation of the healthcare waste management centers (5 centers). The total amount of infectious healthcare waste generated in the Republic of Kazakhstan for the reporting period is equal to 9.5 thousand tons, including in the pilot regions: East-Kazakhstan - 2,082 tons; Kostanay - 172 tons; Astana - 443 tons.
Outcome 3.2 Linkages between sound HCWM practices and minimization of	Development and dissemination of BAT/BEP technical guidelines and general	No technical BAT/BEP guidelines in line with international benchmarks (SC, BC) for	 Baseline information is collected and processed. Draft technical guidelines (concept, scope, and content) 	During this reporting period, the project supported adoption of changes to the list of best available technologies (BAT) for managing healthcare waste, by the Law of RK of 25.04.2016, 505-V on Amendments

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
uPOPs and mercury demonstrated through training and awareness raising programmes	awareness raising	uPOPs/mercury release reduction and HCW management in place No guidance materials for data collection and processing Hospitals do not have guidance materials in support of trainings and daily safe practices General awareness on uPOPs/mercury and management is limited	prepared and consulted with stakeholders. • Project team participates in scientific medical conferences (at least, 3), public campaigns (media reports, at least 10, interviews, at least, 4) Changes are proposed to educational curricula of medical and other institutions offering medical degree programmes	and changes to certain legal acts of RK on the matters of environment and subsoil use. The environmental code now includes a norm, which recommends the use of any recommended technologies taken up in the HCWM BAT list of the European Integrated Pollution Prevention and Control Bureau. During this reporting period, the development of a training module on managing healthcare waste has been completed. Work has started on approving and integrating it into the training curriculum for medical colleges, universities and professional development courses. Progress in this area will be presented in the next reporting cycles.
	Development of national training programs on uPOPs/mercury risks and sound HCWM, partnership with stakeholders and national replication of BAT/BEP demonstration	Currently, no HCW management training program exists as established by MPH No manuals specifying details of waste management in a hospital setting exist Limited in scope debriefings are practiced for new hospital staff, but no regular capacity building is in place or regularly planned by hospital facilities	 Training materials prepared in consultations with stakeholders and approved by the Project Board. Training documentation adjusted to regional situation and needs Training plan and schedule are developed for local, regional and national levels 	Seminar on Persistent organic pollutants. Issues of POPs sound handling and management was held in three (3) pilot regions and attended by 224 representatives of healthcare and sanitary-epidemiologic service, as well as for representatives of central government bodies and industrial enterprises. In January 2016 three (3) trainings for employees of healthcare organizations delivered on managing HCW and practical application of segregated waste collection (136 people). Since the start of the project 450 people have been trained.
Outcome 4 Monitoring, learning,	M&E and adaptive management applied to project in	No Monitoring and Evaluation system No evaluation of project	 Monitoring and Evaluation system developed. 	Final evaluation report will be provided at the end of project activities. Midterm review is scheduled in line with UNDP-GEF Evaluation Office recommendations for

Objective/Outcome / Description	Description of Indicator	Baseline Level	Target Level at end of project	Level at 30 June 2016
adaptive feedback, outreach, and evaluation.	response to needs, mid-term evaluation findings with lessons learned extracted.	output and outcomes	• Mid-term-evaluation of project output and outcomes conducted with lessons learnt at 30 months of implementation.	August-September 2016.Since the start of the projectimplementation the following prepared:9 QuarterlyProgress reports;1 PIR;2 Annual ProgressReports;5 meetings of Project SteeringCommittee;1 meeting of the ConsultativeTechnical Council;Inception workshop.

6.3 MTR evaluative matrix

Evaluative Questions		Indicators		Soι	Sources		Methodology			
Pro	Project Strategy: To what extent is the project strategy relevant to country priorities, country ownership, and the best route towards expected results?									
•	Does the project objective fit within the national and municipal priorities?	•	Level of coherence between project objective and national policy priorities and strategies, as stated in official document, as well as stated priorities of municipalstakeholders	• • •	National policy documents, such as National Transport Strategy, Action Plan for production and use of environmentally friendly transport, etc. National legislation regulations, state target programs related to road transport Relevant regional and local planning documents Government stakeholders at federal level and in two project pilot municipalities	• •	Field visit interviews Desk review			
•	Did the project concept originate from local or national stakeholders, and/or were relevant	•	Level of involvement of municipal and national stakeholders in project origination and development as indicated by number of planning	•	Project developers Project staff Local and national stakeholders	•	Field visit interviews Desk review			

stakeholders sufficiently involved in project development?	meetings held, representation of stakeholders in planning meetings, and level of incorporation of stakeholder feedback in project planning	•	Project documents			
 Does the project design and project strategy seem adequate for the achievement of the declared objective? 	The project Results Framework is clear and its indicators respond to SMART criteria The project is designed in a way that the route towards achievement of the expected results is clear and the project interventions are planned to contribute to the achievement of the overall objectives	•	Project documents	• •	Desk review Brainstorming with the project team and key experts	
Progress Towards Results: To what extent have the expected outcomes and objectives of the project been achieved thus far?						
 Are the planned outputs being produced? Are they likely to contribute to the expected project outcomes and objective? 	Level of project implementation progress relative to expected level at current stage of implementation Existence of logical linkages between project outputs and outcomes/impacts	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review	
 Are the anticipated outcomes likely to be achieved? Are the outcomes likely to contribute to the achievement of the project objective? 	Existence of logical linkages between project outcomes and impacts	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review	
 Are impact level results likely to be achieved? Are they likely to be at the scale sufficient to be considered Global Environmental Benefits? 	Environmental indicators, first of all – CO2 emission reductions	• • • •	Project documents Project reports Project staff Project stakeholders	•	Field visit interviews Desk review GEF methodology for CO2 emission reduction calculations for the transport sector	
Project Implementation and Adaptive Management: Has the project been implemented efficiently, cost-effectively, and been able to adapt to any changing conditions thus far? To what extent are project-level monitoring and evaluation systems, reporting, and project communications supporting the project's						

im	implementation?						
•	Are management and implementation arrangements efficient in delivering the outputs necessary to achieve outcomes?	•	Appropriateness of structure of management arrangements Extent of necessary partnership arrangements Level of participation of relevant stakeholders	•	Project documents Project staff Local, regional and national stakeholders	•	Desk review Interviews with project staff Field visit interviews
•	Is the project cost- effective?	•	Quality and comprehensiveness of financial management procedures Project management costs share of total budget	•	Project documents Project staff	•	Desk review Interviews with project staff
•	Is the project objective likely to be met? To what extent and in what timeframe?	•	Level of progress toward project indicator targets relative to expected level at current point of implementation	• • •	Project documents Project reportgs Project staff Project stakeholders	•	Field visit interviews Desk review
•	What are the key factors contributing to project success or underachievement?	•	Level of documentation of and preparation for project risks, assumptions and impact drivers	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review
•	What are the key risks and priorities for the remainder of the implementation period?	•	Presence, assessment of, and preparation for expected risks, assumptions and impact drivers	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review
•	Is adaptive management being applied to ensure effectiveness?	•	Identified modifications to project plans, as necessary in response to changing assumptions or conditions	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review
•	Is monitoring and evaluation used to ensure effective decision-making?	•	Quality of M&E plan in terms of meeting minimum standards, conforming to best practices, and adequate budgeting Consistency of implementation of M&E compared to plan, quality of M&E products Use of M&E products in project management and implementation decision-making	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review

Sustainability: To what extent are there financial, institutional, socio-economic, and/or environmental risks to sustaining long-term project results?							
•	To what extent are project results likely to be dependent on continued financial support? What is the likelihood that any required financial resources will be available to sustain the project results once the GEF assistance ends?	•	Financial requirements for maintenance of project benefits Level of expected financial resources available to support maintenance of project benefits Potential for additional financial resources to support maintenance of project benefits	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review
•	Do relevant stakeholders have or are likely to achieve an adequate level of "ownership" of results, to have the interest in ensuring that project benefits are maintained?	•	Level of initiative and engagement of relevant stakeholders in project activities and results	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review
•	To what extent are the project results dependent on issues relating to institutional frameworks and governance?	•	Existence of institutional and governance risks to project benefits	•	Project documents Project staff Project stakeholders	•	Field visit interviews Desk review
6.4 Example Questionnaire or Interview Guide used for data collection

Questions for structured interviews with the project partners

1. Please describe the role of your organization in the project (goal, objectives, and completed activities).

2. What are the current obligations of your organization on HCW management and what are the official documents regulating your obligations.

3. What are the most important achievements of the project a) in the contexts of Kazakhstan obligations on PCB management, b) in the context of your organization?

4. What were the main contributions from the project:

a) technical assistance and advise on the implementation and scope of new regulations;

b) knowledge/skills on the good management of HCW containing equipment;

c) equipment/infrastructure;

d) training/awareness raising on handling, storage, transportation, maintenance, etc. purchased equipment;

e) inventory support;

f) access to funding for the best practices introduction, treatment centers, mercury phase-out ;

5. What targets of the project have not been achieved and what are the reasons and impacts of this a) in the context of Kazakhstan; b) in the context of your organization.

6. What were the key challenges and barriers over the project's implementation. Are there any challenges that remain to exist and that still need to be overcome, either by the project or by the government?

7. Do you think the results of the project are sustainable and why a) in the context of Kazakhstan; b) in the context of your organization.

8. What is a scaling up potential of the project? Do you think the project has undertaken sufficient scaling up activities and what would be your recommendations to further improve project sustainability?

9. Any other recommendations/wishes that would improve Kazakhstan's (and your organization's) ability to manage HCW in the future?

10. When the project comes to an end how do you see your organization continuing the phase-out and dispose HCW. And what would be the financial mechanisms your organization/entity would make use of to ensure the continued disposal of HCW.

11. Has your organization provided any (in-kind/cash co-financing) to the project, if so could you estimate how much approximately?

6.5 Ratings Scales

Ra	Ratings for Progress Towards Results: (one rating for each outcome and for the objective)								
	Highly Satisfactory	The objective/outcome isexpectedtoachieveorexceedallits end-of-project							
6	(HS)	targets, without major shortcomings. The progress towards the objective/outcomecan be presented as "good practice".							
5	Satisfactory (S)	The objective/outcome isexpectedtoachievemostof its end-of-project targets, withonly minorshortcomings.							
Λ	Moderately	The objective/outcome isexpectedtoachievemostof its end-of-project targets but							
4	Satisfactory (MS)	withsignificantshortcomings.							
2	Moderately	The objective/outcome isexpectedtoachieveitsend-of-project targets withmajor							
5	Unsatisfactory (HU)	shortcomings.							
2	Unsatisfactory (U)	The objective/outcome isexpected nottoachievemostof its end-of-project targets.							
1	Highly	The objective/outcome hasfailedto achieve its midterm targets, and is not expected							
	Unsatisfactory (HU)	toachieve any of its end-of-project targets.							

Ra	tings for Project Imple	mentation & Adaptive Management: (one overall rating)
6	Highly Satisfactory (HS)	Implementation of all seven components – management arrangements, work planning, finance and co-finance, project-level monitoring and evaluation systems, stakeholder engagement, reporting, and communications – is leading to efficient and effective project implementation and adaptive management. The project can be presented as "good practice".
5	Satisfactory (S)	Implementation of most of the seven components is leading to efficient and effective project implementation and adaptive management except for only few that are subject to remedial action.
4	Moderately Satisfactory (MS)	Implementation of some of the seven components is leading to efficient and effective project implementation and adaptive management, with some components requiring remedial action.
3	Moderately Unsatisfactory (MU)	Implementation of some of the seven components is not leading to efficient and effective project implementation and adaptive, with most components requiring remedial action.
2	Unsatisfactory (U)	Implementation of most of the seven components is not leading to efficient and effective project implementation and adaptive management.
1	Highly Unsatisfactory (HU)	Implementation of none of the seven components is leading to efficient and effective project implementation and adaptive management.

Ra	tings for Sustainability	: (one overall rating)
4	Likely (L)	Negligible risks to sustainability, with key outcomes on track to be achieved by the project's closure and expected to continue into the foreseeable future
3	Moderately Likely	Moderate risks, but expectations that at least some outcomes will be sustained due to
	(ML)	the progress towards results on outcomes at the Midterm Review
2	Moderately Unlikely	Significant risk that key outcomes will not carry on after project closure, although some
_	(MU)	outputs and activities should carry on
1	Unlikely (U)	Severe risks that project outcomes as well as key outputs will not be sustained

#	Date	Place	Time	Activity/Organization	Representatives
1	5.09.2016 (Monday)	Astana	9:00-11:00	NIP Update, Integration of POPs into National Planning and Promoting Sound Healthcare Waste Management Project	 Nina Gor – Project Manager Assel Shakhanova – Project Expert Saltanat Bayeshova – Project Expert
			11:30-12:00	Meeting with representatives of "Kazhydromet" RSE	Ibrayev Serik – Head of Unit of Department of Environmental Monitoring, AlimbayevaDanara – Head Department of Environmental Monitoring
			12:00-13:00	Meeting with the Committee for the Protection of Consumer Rights	UrazbekovaZhuldyz – Chief Expert of the Department of Health Surveillance
			14:30-16:30	Meeting with Project National Director Mrs. BizaraDosmakova	DosmakovaBizara – Deputy Director of Waste Management Department of the Ministry of Energy of RK
			17:00-18:00	Meeting with UNDP Kazakhstan	Mrs. MunkhtuyaAltangerel – Deputy Resident Representative (DRR) of UNDP Kazakhstan
2	6.09.2016 (Tuesday)	Kostanay	10:00-11:00	Meeting with the Department of Natural Resources and Environmental Governance of Kostanay Region.	 Arsentyeva Svetlana – Head of the Department of Natural Resources and Environmental Governance of Kostanay Region. SamatKaliyev – Deputy Head of Department of Natural Resources and Environmental Governance of Kostanay Region. MaukulovAmirkhan– Director of department of Natural Resources and Environmental Governance of Kostanay Region.
			11:00-12:00	Meeting with Public Health Department of Kostanay region of Kostanay Region.	KenzhegulAlimova – Head of the Public Health Department of Kostanay region of Kostanay Region.
			13:00-15:00	City Hospital #1 of Rudnyi	Kaikenov Talgat – Chief Doctor of City Hospital #1 of Rudniy
			15:30-18:00	Visit of sites, where the old incinerator is located and visiting the place, where new autoclave will be installed.	Mikhailenko Vladimir – Chief Doctor of "Kostanay Regional Narcological Dispensary"

6.6 MTR mission itinerary and persons interviewed

#	Date	Place	Time	Activity/Organization	Representatives
3	7.09.2016	Astana (trip)	12:30 arrival	Trip from Kostanay to Ust-	
	(Wednesday)		time from	Kamenogorsk through Astana	
			Kostanay		
			19:30-21:00	Trip from Astana to Ust-	
				Kamenogorsk	
4	8.09.2016	Ust-	10:30-11:00	Meeting with the Center of	Popov Sergey – Head of the Center of Mother and Child
	(Thursday)	Kamenogorsk		Mother and Child East-	
				Kazakhstan oblast	
			11:00-11:30	Visiting place for autoclave	Bakina Gulnara – Deputy Head of the Center of Mother and
				installation in the Center of	Child
				Mother and Child	
			14:00-16:00	Public Health Department of East-	SarkulovaAltyn – Infectious Disease Officer of the Center of
				Kazakhstan oblast/ Health	Mother and Child, ex-representative of the Department of
				Inspection Services	Healthcare of East-Kazakhstan region
5	9.09.2016	Astana	10:00-12:00	Meeting with JSC "ZhasylDamu"	Asanova Zhanara – Head of the Department of Hazardous
	(Friday)				Waste Handling
			14:00-16:00	Meeting with IE "Mercury Safety"	Stoyanov Alexey – Individual entrepreneur
				and visiting place for autoclave	
				installation	
			16:00-18:00	NIP Update, Integration of POPs	Recommendations, discussions on Project related issues.
				into National Planning and	Conclusion.
				Promoting Sound Healthcare	
				Waste Management Project	

6.7 List of documents reviewed

1 Project Document Eng 2 AWP 2014, 2015 Rus 3 Annual Progress Report 2014 Rus 4 Annual Progress Report 2015 Rus 5 Project Implementation Review 2015 Eng 6 Project Implementation Review 2016 Eng 7 CDRs (to be checked and resent) Eng 9 Minutes of the Board meetings for 2014-2015 (d documents) Rus 10 Kazakhstan NIP for Stockholm Convection on POPS 2014-2018 Eng 11 Technical report on implementation of three Conventions (Basel, Stockholm, and Rotterdam)-Stage 1: Data Base completion, Review of the progress of implementation of three Conventions in Kazakhstan, scomditions and institutional environment, Review of legislation, planning tools, and institutional structures subject to Conventions requirements and COP's resolutions; Recommendations for etablishing institutional and rganizational environment for implementation of three Conventions (Basel, Stockholm, and Rotterdam)-Stage 3: Preparation of National Reports to three Conventions, Long term planning of national reporting and improving relevant statistics and sectoral reports Rus 13 Technical report on implementation of the stage 1 and 2 of the above technical reports. Parational reporting waste. Rus 14 Summary report on implementation of the stage 1 and 2 of the abov	#	Document	Language
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36	Summary table on HCW in hospitals in the East Kazakhstan	Rus
37	Summary table HCW treatment facilities in Kostanai region	Rus/Eng
38	Summary table on HCW in hospitals in Kostanai region	Rus/Eng
39	Informational leaflet about mercury handling	Rus
40	Summary of workshops and trainings	Eng

Nº	The title of event	Componen t	Target groups	Timimg	Venue	Number of participants	Gender component	
							male	female
2014								
1.	Inception	4	Medical institutions, governmental bodies,associations, governmental bodies, governmental laboratories, NGOs, international organizations, universities.	30 April 2014	Astana, «Grand Park Esil"	69	34	35
2	Hazardous chemicals in the goods and production processes	1,2	Governmental bodies in the sphere of environment, industrial enterprises (including waste disposal), NGO	1 July 2014	Astana, bussines-center "Turan"	43	21	22
3	Workshop on waste and hazardous waste management	1,2,3	Governmental bodies in the sphere of environment, healthcare and epidemiology, medical institutions, NGOs	16-17 July 2014	Almaty	71	33	38
4	Sound management of healthcare waste and mercury management for impact reduction on environment and implementation of Stockholm Convention on the POPs	1,2,3	Governmental bodies, international organizations, industrial enterprises, waste disposal enterprises, medical institutions, scientific organizations and higher education institutions, NGOs and businessassociations	3 November 2014 r	Astana, Business-center "Turan"	51	13	38

6.8 Overview of trainings, workshops and study tours (2014 – 2016)

5	Sound management of healthcare waste and mercury management for impact reduction on environment and implementation of Stockholm Convention on the POPs	1,2,3	Governmental bodies, international organizations, industrial enterprises, waste disposal enterprises, medical institutions, scientific organizations and higher education institutions, NGOs and businessassociations	5 November 2014	Kostanay	48	14	34
6	Sound management of healthcare waste and mercury management for impact reduction on environment and implementation of Stockholm Convention on the POPs	1,2,3	Governmental bodies, international organizations, industrial enterprises, waste disposal enterprises, medical institutions, scientific organizations and higher education institutions, NGOs and businessassociations	7 November 2014 r.	Ust-Kamenogorsk	48	11	37
7	Study tour «International experience of healthcare waste management in the context of Latvia experience"	3	Governmental bodies in the sphere of environment and healthcare, medical institions	24- 28.11.201 4	Latvia, Riga	13	4	9
2015								

8	Training "Identification of the national priorities and Action Plans on inventory of mercury and the POPs, reduction of healthcare waste amount"	1,2,3	Governmental bodies, including local authorities, governmental affiliates, industrial enterprises, (including waste disposal), analytical laboratories, medical institutions, NGOs, higher level institutions	15 July, 2015	Astana, «King Otel Astana»	50	16	34
9	Workshop "Sound management of POPs, mercury and healthcare waste management"	1,2,3	Governmental bodies, including local authorities, governmental affiliates, industrial enterprises, medical institutions, NGOs	19 October 2015	Astana, Bussiness center "Isker"	42	11	31
10	Workshop "Sound management of POPs, mercury and healthcare waste management"	1,2,3	Governmental bodies, including local authorities, governmental affiliates, industrial enterprises, medical institutions, NGOs, laboratories	21 October 2015	Ust-Kamenogorsk, Hotel «Shiny River»	61	34	27
11	Workshop "Sound management of POPs, mercury and healthcare waste management"	1,2,3	Governmental bodies, including local authorities, governmental affiliates, industrial enterprises, medical institutions, NGOs, higher level institutions	27 October 2015	Kostanay, Hotel "Tobol"	34	6	28
12.	Study tour "POPs Identification methods in theory and practice"	1	Regional branches of RSE "Kazhydromet", governmental bodies, governmental laboratories, local authority	23-27 November 2015	Czech Republic, Brno	16	7	9

13.	Round Table "Coordination of local authorities and public on the impact of hazardous substances on the goods and waste during earthquake and flood. POPs and mecury management issues" (jointly with Dipecho 8 Project)	1,2	Central governmental bodies and affiliate organizations, emergency situations departments, departments on consumer right defense, environmental departments, department of natural resources, public health department, hydrometeorology centers, Aarhus centers, NGOs.	2-3 December 2015	Almaty, Hotel "Kazhol"	90	51	39
2016								
14	Training "Requirements to sound healthcare waste management in the medical institutions"	3	Medical institutions, NGOs, governmental bodies and affiliate organizations	14 January 2016	Ust-Kamenogorsk, Hotel «Shiny River»	76	11	65
15	Training "Practice of sound management of POPs and mercury at the enterprises and organisations"	1,2	Governmental bodies and affiliate organizations, industrial enterprises, waste disposal companies, consulting organizations, NGOs.	15 January 2016	Ust-Kamenogorsk, Hotel «Shiny River»	38	14	24
16	Training "Requirements to sound healthcare waste management in the medical institutions"	3	Medical institutions, NGOs, governmental bodies and affiliate organizations	18 January 2016	Astana, Hotel "Kazzhol"	37	3	34
17	Training "Practice of sound management of POPs and mercury at the enterprises and organisations"	1,2	Governmental bodies and affiliate organizations, industrial enterprises, waste disposal companies, consulting organizations, NGOs.	19 January 2016	Astana, Hotel "Kazzhol"	49	17	32

18	Training "Requirements to sound healthcare waste management in the medical institutions"	2	Medical institutions, NGOs, governmental bodies and affiliate organisations	21 January 2016	Kostanay Hotel "Tobol"	46	7	3	9
18	Training "Practice of sound management of POPs and mercury at the enterprises and organisations"	1,3	Governmental bodies and affiliate organizations, industrial enterprises, waste disposal companies, consulting organizations, NGOs.	22 January 2016	Kostanay, Hotel "Tobol"	39	17	2	2
19	Training "Capacity building of laboratories for POPs and mercury environmental" monitoring T	1,2	Laboratories of regional branches of RSE "Kazhydromet" and the Committee of Consumer Protection, governmental bodies	17-18 May 2016	Almaty, RSE on REU "Scintific-practical Center of sanitary and epidemiological expertize and monitoring" of the Committee of consumer rights of the Ministry of the national economy of RK	49	15	3.	4
	Workshop "Mercury. Minamata Convention on mercury"	2	Governmental bodies, industrial enterprises, international organizations, NGOs.	24 August 2016	Astana, «Park-Inn» Hotel	35			
	Total					967	339		631

6.9 MTR Mission Report – Minutes of Meetings

MTE Mission Report 85149 NIP Update, integration of POPs into national planning and promoting sound HCW management

05.09.2016, continued on 09.09.2016 Project team Nina Gor, Project Manager Assel Shakhanova, Project Expert Saltanat Bayeshova, Project Expert

- The team explained the current institutional context of the POPs and HCW waste management in Kazakhstan and roles of key Ministries and their sub-divisions in the project.
- Poor coordination between Ministry of Energy (hazardous waste management and focal point for Conventions), Ministry of Health (HC institutions control), and Ministry of Economy, Committee for Consumer's rights protection (sanitation regulations and infectious waste handling). So far there is no operational mechanism for coordination. Intersectoral Commission on Ecological Security partially implements the functions of such mechanism in terms of legislation and policy unification. But operational level and Coordination of three Conventions remain uncovered.
- To address this barrier, it is planned to set up a Coordination Center on POPs Conventions under the ZhasylDamu Agency, responsible for handling all unclaimed waste in Kazakhstan. Considering significant pesticide and PCB unclaimed storages ZhasylDamu is engaged in POPs issues for a long time already. It is expected that Coordination Center will serve a secretariat for three POPs conventions and potentially for Minamata Convention.
- The team has briefed on the upcoming meetings to be held over the mission.
- The team explained the structure of the HCW and mercury pilots and current status of their implementation. So far it is agreed that three regional centers will be established (Kostanai, Astana, Oskemen) where autoclaves and vehicles will be purchased by the project. Additionally four rural centers in Katon-Karagai, Zaisan, Rudny, and Zhetygora where smaller autoclaves and vehicles will be purchased.
- Project team and evaluation team reviewed the midterm indicators to confirm the specific deliverables for each outcome. A list of deliverables was compiled to be later submitted to the evaluation team for verification.
- Project team and evaluation team reviewed the terminal indicators to for each outcome to estimate the upcoming work scope and targeted activities to achieving the indicators.

5.09.2016

Kazgidromet Astana Ibrayev Serik, Head of Unit of Department of Environmental Monitoring, AlimbayevaDanara, Head Department of Environmental Monitoring

State agency responsible for running environmental, meteorological and hydrological monitoring in Kazakhstan and supporting related research and methodology. The agency has a broad network of monitoring stations all over Kazakhstan operated by regional branches. Kazgidromet maintains national

data base of monitoring data, including chemical pollutants in air, water and soils. 33 parameters are published in a monthly statement available online.

Role in the project

- Some staff, including heads of regional branches and laboratory assistants, participated in the trainings, workshops in Kazakhstan and info tours to Czech Republic on issues related to POPs monitoring in general and with particular focus on sampling and laboratory analysis.
- The project provided methodological support for pilot sampling of POPs in air and soil in 5 regions of Kazakhstan during 9 months and was sent to Recetox laboratory. Results are expected in November. The results will be further used to prove the emissions, develop standards and include POPs into monitoring system after accreditation of the laboratory. This will also help to justify the state budget applications for implementing the monitoring.
- Project supported the process of lab accreditation by providing standards, methodology and guidance based on available international practices.
- It was mentioned that the whole hazardous waste management system may become operational only if the POPs treatment facility in Pavlodar is operational, which is still suspended issue.

Main achievements of the project

- The project provided information and practical knowledge on a variety of issues related to POPs in general and on HCW in particular through a number of targeted workshops and trainings. The project initiated professional contacts with international companies and labs and organized visits there. High quality of training materials and modules was mentioned.
- It is expected that by the end of the project at least one laboratory will be accredited for new POPs and uPOPs.
- National monitoring system will include data on new POPs and uPOPs.
- Support of country's objectives related to waste management indicated in the Green Economy strategy. Support of implementation of the country's obligations under international conventions.

Problems and challenges

 No problems were faced so far. They have smooth and coordinated cooperation with the project. The problems may arise after the project ends, because the project staff and consultant do a lot of technical work to support and push all processes and keep them coordinated, which may become more difficult after the project.

Procurement

 Project provided samplers, bags, polyurethane sponges to organize collection and transportation of samples to Recetox.

Sustainability of the results

 It is very important that the project documents and transfers all developed analytical and technical reports and guidance to be used as reference material on almost a daily basis.

05.09.2016

Committee for the Protection of Consumer Rights of the Ministry of National Economy RK, Astana UrazbekovaZhuldyz, Chief Expert of the Department of Health Surveillance

Central state agency responsible for implementation of the national policies on sanitation and epidemiological wealth, development and endorsement of relevant legislation and regulations, intersectoral coordination providing for sanitation and epidemiological wealth.

Role in the project

- Committee had a key role in development of the sanitation rules for handling the HCW, that will be endorsed after coordination with other ministries. Project provided support in sharing international standards and practices.
- Committee (with the project's support) coordinated development of the regional action plans in three pilot regions to ensure that activities on HCW management are included into the regional development strategies.
- Committee participated in the development and coordination of the guidance for healthcare organizations on handling HCW.
- Representatives of the Committee and its regional Departments participated in workshops and trainings organized by the project and they find it very informative and systemic.

Main achievements of the project

- Amendment to Ecological Code on alternative methods of HCW utilization other than incineration where approved, which provides good ground for replacing the incinerators by alternative equipment.
- Amendment to Ecological Code on inclusion of mercury containing waste to the type of waste requiring special handling over its lifecycle based on the national standards.
- New knowledge and practices on handling expired medicine and drugs.
- Systemic approach to the overall management of HCW policy and operational guidance, demonstration of practical results through the pilots, targeted capacity building at all levels and among different groups.
- Development of high quality training materials that are used by the Committee for upgrading qualifications of the staff in the regional branches.
- Intersectoral Commission on Ecological Security has took up the issues of HCW and mercury containing waste onto its agenda in order to include this type of waste into national register supported with relevant sanitation and utilization standards.

Problems and challenges

- Transportation of HCW from remote rural areas in a proper way was a major problem. So the establishment of regional Centers in three regions and purchase of the treatment equipment will significantly contribute to solving this problem.
- Intersectoral coordination still remains a problem. Ministry of Health Care does not fully take up its responsibilities on HCW management. Though Intersectoral Commission on Ecological Security under the National Security Council is now becoming an efficient mechanism for discussing and lobbying the issues related to POPs and HCW.

Procurement No

Sustainability of the results

- The approved amendments to EcoCode provide good ground for further improvements of regulations and standards on HCW and mercury containing waste.
- Training materials and are used now and will be used in the future.
- Operational guidance for HCW handling will be used.

05.09.2016

Ministry of Energy RK, Astana

DosmakovaBizara, Deputy Director of Waste Management Department of the Ministry of Energy of RK, National Director for the project

Role in the project

- Ministry of Energy is an implementing partner for the project and provides full support to the project in terms of coordination of the newly developed policies, lobbying the issues at the meetings of intersectoral Commission on Ecological Security, coordination of the project tasks between three key Ministries (Ministry of Health, General Prosecutors Office, and Ministry of Economy).
- As a national Director organize Steering Committee meetings at least once per year for reporting the results and planning for the next year, and additional meetings as necessary to discuss and agree on specific urgent issues.
- As a focal point for environmental conventions the Ministry worked closely with the project on NIP and reporting to Stockholm Convention.
- Supported the approval of the EcoCode amendments, proposed by the project.

Main achievements of the project

- Training, workshops and visits to other countries to learn theory and practice of HCW handling.
- Amendments on alternative treatment methods will enable the gradual replacement of outdated incinerators.
- Connections with international experts and equipment providers.
- Development of the operational rules on lifetime management of medical wastes.
- Replacement of thermometers.

Problems and challenges

- No major problems. Regular and timely communication with the project helped to avoid potential problems and go on smoothly with the planned activities.
- Selection of pilot regions caused some difficulties. Akmola region suddenly rejected to participate after the preliminary agreements and the project had to look for the alternative. But finally the project signed Memorandums of cooperation with three regions – Kostanai, East Kazakhstan and Astana.
- Initially it was planned to recycle the collected thermometers at the KazZink plant in Oskemen, but they were not classified as waste, because were not broken. KazZink later refused to participate due to small volumes for recycling. So all collected thermometers were transported to Alamaty Company licensed for transportation, storage and utilization. So the task now is to provide an option in regulations for classification of the replaced thermometers as mercury containing waste suitable for recycling.

Sustainability of the results

- Kazakhstan is now in the process of assessing options for joining Minamata Convention and after that will have to implement its obligations. So the project provided good start for compliance with its requirements. There is a good example of regulated collection and utilization of mercury containing lamps that also started from UNDP project.
- There is a need for harmonization of HCW classification used by Ministry of Healthcare and Ministry of Energy to avoid statistical misreporting caused by complicated reporting procedures which sometimes causes illegal burning of waste in hospitals.
- The Strategy on Green Economy sets the 50% target on separate collection and recycling of waste until 2050. So the project results contribute to the achievement of this target.

05.09.2016 UNDP Kazakhstan, Astana MunkhtuyaAltangerel, Deputy Resident Representative (DRR)

UNDP sees the waste management problem in general and HCW problem in particular to be one of the most significant challenges for the country and UNDP technical assistance program. Because the waste treatment industry is undeveloped, standards are outdated, legislation is not working. So the project sets quite ambitious targets – to improve standards and legislation, to demonstrate best practices in terms of technologies, methodology and equipment, to build professional capacity on different levels, and to improve state procurement procedures to ensure priority of green bids.

UNDP creates opportunities for building synergies within its portfolio and with other international institutions like WHO, OECD.

UNDP considers that the project is delivering the planned outcomes in full.

06.09.2016

Department of Natural Resources and Environmental Governance of Kostanay Region, Kostanai Arsentyeva Svetlana, Head of the Department of Natural Resources and Environmental Governance of Kostanay Region.

SamatKaliyev, Deputy Head of Department of Natural Resources and Environmental Governance of Kostanay Region.

MaukulovAmirkhan, Director of department of Natural Resources and Environmental Governance of Kostanay Region.

Role in the project

- The problem of decontamination of HCW is very urgent in the region, because 94% of waste is burned. The transportation of HCW is also causes difficulties because of the large distances. That is why Kostanai region was very interested in becoming a pilot region for the project.
- Department of Natural Resources plays coordination role in the region to ensure that all involved state regional agencies (department of health care and department of consumer's rights protection) provide informed contribution to the project's objectives.

- The Department of Natural Resources together with other agencies helped the project to select the pilot hospital #1 in Rudny, Zhetykara Hospital, and detoxication clinic in Kostanai. Signed Memorandum on cooperation.
- Department of natural Resources in coordination with healthcare and consumer's rights departments coordinated collection and replacement of thermometers.
- Participated in the workshops, trainings and tours, organized by the project. Three main topics
 of the trainings POPs, HCW, and mercury waste.

Main achievements of the project

- Replacement of incinerator in Kostanai that 28 times exceeded the maximum allowable concentration of POPs. Establishment of decontamination center in Kostanai that will treat HCW from 13 hospitals in the city.
- Establishment of regional decontamination center in Rudny that will treat medical waste from 8 rural hospitals in the region.
- Establishment of regional decontamination center in Zhitikara that will treat medical waste from 4 rural hospitals in the region.
- Assisted in improving transportation of HCW in the region by purchasing vehicles for decontamination centers.
- Developed Regional Plan for HCW Management.
- Increase of autoclaved HCW in the region from 6% to 40% until 2020.
- Improved capacity of the regional governments and hospitals through the trainings and international tours; developed operational guidance for hospitals and decontamination centers.
- International expertize brought by the project was very valuable. When the representatives of different stakeholders in the region had an opportunity to ask specific questions and receive answers about international practices on variety of toxic waste related issues.

Problems and Challenges

 The only problem that we faced was the change of pilot hospital at the last moment after assessment of the room for autoclaving the HCW it was decided that the room provided by the psychoneurological hospital did not comply with the requirements for decontamination facility. So they had to change the hospital and selected hospital # 1 in Rudny.

Procurement

- The project will purchase one large autoclave for Kostanai decontamination center.
- 2 small autoclaves for Rudny and Zhitikara decontamination centers.
- 2 big vehicles for Rudny and Zhitikara decontamination centers.

Sustainability of the project results

- The Department now has full capacity to provide training on HCW management to its staff in the region based on the developed training materials and guidance.
- The Department already serves as a dialog platform for the stakeholders from other regions of Kazakhstan to share experiences, discuss problems and solutions, and to improve the system of HCW management on the regional level.
- After testing the new autoclaves, they will work investment plan to gradually replace the active incinerators in the region and distribute the results in other regions.
- The Department is already searching for opportunities to recycle the treated plastic in the region instead of selling it to Russia.

- The purchased equipment will be maintained from the state budget through the applications annually submitted by the hospitals.
- Pricing policy for decontamination services to other hospitals will be approved by the authorized state agency.

06.09.2016

Public Health Department of Kostanay region, Kostanai KenzhegulAlimova, Head of the Public Health Department of Kostanai region

Role in the project

- Support of project activities in the region and communication of project targets and results to the hospitals in Kostanai region, including trainings and workshops.
- Support of pilot hospitals and decontamination centers.
- Coordination with other regional agencies.
- Provided data on generated and transported HCW waste for assessment completed by the project.

Main achievements of the project

- Development and implementation of regional Plan on HCW management for three years.
- Development of the operational guidance on HCW handling for the hospitals.
- Trainings and workshops on POPs, mercury waste and HCW management international experience.
- Replacement of thermometers.
- Replacement of incinerator in Kostanai region.
- New autoclaves in Rudny and Zhitikara.

Problems and challenges

– No problems have been observed over the project implementation.

Procurement

- The project will purchase one large autoclave for Kostanai decontamination center.
- 2 small autoclaves for Rudny and Zhitikara decontamination centers.
- 2 big vehicles for Rudny and Zhitikara decontamination centers.

Sustainability

- Developed operational guidance will be used after the project end.
- Training materials are used for the regular staff upgrade courses.
- Results of the tested equipment will help to justify the budget for additional autoclaves to be purchased in the future.

06.09.2016 City Hospital #1 of Rudnyi Kaikenov Talgat – Chief Doctor of City Hospital #1 of Rudny

The hospital has just recently been selected for the establishment of the HCW decontamination center after the one hospital was not able to provide a suitable room. It a big medical complex that include several hospitals, morgue, and maternity hospital. The staff of the hospital participated in the

workshops and trainings on HCW management organized by the project in Almaty and Kostanai. The hospital has 2 options for rooms for the autoclave installation. And are now expecting detailed specifications and requirements for the decontamination facility from the project.

The project manager and evaluation team visited two rooms proposed for the decontamination center. Both rooms need renovations and upgrade of heating, sewage and water supply systems. The hospital is ready to do the needed works after the detailed plan and technical specifications are received.

06.09.2016

Visit of sites, where the old incinerator is located and facility, where new autoclave is planned to be installed, Kostanai

Mikhailenko Vladimir, Chief Doctor of the Regional Narcological Dispensary

This pilot case is very much connected to the Chief Doctor of the Narcological Dispensary, since he is operating incinerator that serves most of the hospitals in Kostanai. He has an established network of HCW suppliers, which made him a good candidate for replacement case, he will be able to start immediately and does not have to do any extra marketing. It is unclear whether the existing incinerator is somehow affiliated to the clinic or it is a private business of the Chief Doctor. The last is more likely. For the new decontamination center it was agreed that the facility and transportation will be provided by another Ltd Company because the current Regulations of the hospital do not provide for waste decontamination services. So it is expected that the purchased equipment will be owned and maintained by the hospital, but will be operated by the Ltd Company within a signed agreement with the hospital.

Since now it is not completely clear how the new autoclaves will be maintained and how the budget will be structured, it is recommended that the Terminal evaluation look at the legal framework for operation of the Kostanai decontamination center to clearly define the roles and responsibilities of the engaged parties.

The facility itself looked fine, but needs additional planning and appropriate modifications. Though the issue of transportation and storage remained unclear. It is recommended that the project takes close attention to compliance with relevant requirements.

08.09.2016 Center of Mother and Child of East-Kazakhstan oblast, Oskemen Popov Sergey – Head of the Center of Mother and Child

The project manager informed about very recent changes in the health care sector in the region and the key contact from the Center retired. The new Chief Doctor of the Center used to work in the regional Department of health. So he is somewhat familiar to the project's activities in the region, but not yet fully engaged in the details of the pilot activities of the Center.

Now the center is responsible only for collection of their own HCW, after the decontamination center will become operational (which is planned for the beginning of 2017) the Center will collect medical waste from other hospitals in Oskemen and the region. The Center expects that the Healthcare Department and Department of Natural Resources will provide administrative support for the collection process in addition to obvious pricing advantage of the Center on the market due to granted equipment

(150-200 KZT autoclaved vs. 350 KZT incinerated waste). As a side effect of establishment of the decontamination center they expect complaints from other companies engaged in waste decontamination business to the General Prosecutor's Office due to violation of the fair competition rules, but the Center feels confident they will win the cases.

The Center expects that the equipment will be delivered on November 2016 and they will be able to participate in tender process in the beginning of 2017.

The project manager and evaluation team were accompanied by **Bakina Gulnara**, Deputy Head of the Center of Mother and Child, to the location of the decontamination center and explained the planned reconstructions and utilities upgrade to be completed before the autoclave is delivered. The room and the proposed design were already discussed and approved by Matachana experts.

08.09.2016

East-Kazakhstan Kazgidromet office, Oskemen

Role in the project and main achievements

- Participation in workshops, trainings, and international info tours organized by the project with a focus on Recetox laboratory.
- Work with the project on expanded accreditation of the laboratory for new and uPOPS monitoring in water, soil, and air. And mercury in water and air.
- Development of the analysis methodologies.
- Sampling collection and analysis done in Recetox.

Sustainability

- Two laboratories (East and North Kz) plan to buy mass-spectrometer to measure the new and uPOPs to b included into the general monitoring program of Kazgidromet.
- East Kakzakhstan is one of the most polluted regions. It has 36 industrial facilities with potential POPs emissions. Plus oil containing capacitors production facility with historical wastes.
- All monitoring data is published in monthly bulleting and is available online.
- Future work largely depends on construction of big decontamination plant in Pavlodar.

08.09.2016

Role in the project and main achievements

- Was involved in the development of the regional Plan for HCW management.
- Participated in assessment of the baseline situation with HCW in the region together with regional Healthcare Department, Rayon Akimats.
- Participated in the workshops and trainings organized by the project in Almaty and Oskemen.
- Development and approval of new operational guidance for handling HCW with a focus on transportation requirements.
- Establishment of regional decontamination centers in Katon-Karagai and Zaisan (both located 500 km from the regional Center) will significantly improve the situation with HCW utilization in remote rural hospitals.
- 9000 thermometers were replaced, but this is responsibility of the healthcare department.

Problems and challenges

 The latest requirement for incineration of the HCW were introduced in 2009 and at that time business invested in new incinerator, best available at that time. So it is too difficult to make them invest again after only six years into new equipment.

Sustainability

- The developed operational guidance and training materials will be used for continuous professional upgrade and control of the staff involved in HCW management.

09.09.2016 JSC "ZhasylDamu" Asanova Zhanara, Head of the Department of Hazardous Waste Handling

Role in the project and main project's achievements

- ZhasylDamu is a sub-devision of the Ministry of Energy and is responsible for all unclaimed waste in Kazakhstan. It is also a focal agency for three conventions related to chemicals management.
- ZhasylDamu has its Information Center that maintains the data base of related documentation including documents and data produced by the project.
- Member of the Project Steering Committee.
- Participated in project activities related to inventories and data collection, legislation and policy development, training and awareness raising.
- It is planned that ZhasylDamu will be responsible for running POPs national monitoring system, when established.
- The project has a key role in capacity building centrally and in the regions, local governments and staff of the hospitals became more informed and professional after participation in the project's workshops and trainings.
- Project provided support to ZhasylDamu on accession to Minamata Convention.

Problems and challenges

- The suspended construction of the POPs decontamination plant hampers many preparatory processes where the project is engaged.
- National reports to the conventions are now prepared by side organizations winning the tender. This leads to poor reporting and takes extra work to correct. The project is now pushing the amendment that will allow ZhasylDAmu to do the reporting since it has all data and technical documentation for that.
- Electronic waste is an untouched issue in Kazakhstan and there is o capacity at the moment to address this problem.

09.09.2016

IE "Mercury Safety" and visiting place for autoclave installation Stoyanov Alexey – Individual entrepreneur

Role in the project and main project's achievements

- This is a private company that was already engaged in the project for collection and transportation of thermometers from different regions to Almaty.
- The Company is fully certified (permission for services, transportation, vehicles, drivers) to handle waste classified as hazardous.

- The company was selected as one of the pilot HCW decontamination Center that will collect and utilize waste from Astana hospitals and close rural areas.
- The project will provide 1 big autoclave to the company that is to be delivered I November 2016.
- A company has fully suitable room and has preliminarily developed a design for contaminated, clean, storage etc zones based on provided requirements and specifications.

6.10 Progress towards results matrix

		Targe	ets	Mid-	Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term	ment	
	-	Wild-term		Level	Rating	
To reduce the releases of unintentional ly produced POPs and other globally harmful pollutants into the environment by promoting	National Implementation Plan (NIP) on Stockholm Convention is prepared and coordination on chemical MEAs is enhanced.	 Sources of new POPs identified and assessment started. Legislative gaps found and recommendations for improvement are prepared Initial inter-agency cooperation 	 Inventory completed and publicly available NIP obligations with inclusion of new POPs reviewed and updated. Updated draft NIP is presented to the Government for review process and endorsement 		5	The objective/outcome isexpected to achieve most of its end-of- project targets, withonlyminorshortcomings. The mid-term targets have mainly reached. A minor deviation is based on strategic decisions of the government as a specific inter- agency cooperation on POPs will not be established but POPs are included into the scope of the Intersectoral Commission under the National Security Council. After updating the NIP on U-POPs. A further update of the NIP on new POPs was submitted to the Stockholm Convention Secretariat – the approval is envisaged in 2017.A shortcoming of the end of project target could be in the setup of a POPs monitoring system as the required laboratory equipment may not be available till the
sound healthcare waste management in Kazakhstan, and to assist the country in implementing its relevant obligations under the Stockholm convention.	Mercury inventory and Reduction plan prepared.	 Data collection teams established and operational Sources of mercury, storages and contaminated sites identified. Legislative gaps analyzed and recommendations drafted UNDP and UNEP separate initiatives progressively advance with their objectives 	 Mercury situation in Kazakhstan assessed Inventory is documented Inter-agency consultations held National capacity to handle recovered mercury is assessed and recommendations for improvement are set forward Draft National Mercury Reduction Plan developed with identified priorities. Mercury 		S	 end of the project. The objective/outcome isexpectedtoachievemostof its end-of-project targets, withonlyminorshortcomings. The mid-term targets could be reached – although UNDP was not actively involved. UNEP was not supporting the activities as Kazakhstan has not signed the Minamata Convention yet and therefore mercury management t is not a priority of the work of UNEP in Kazakhstan. The end-of project targets are on track. Minor deviations in the end of project targets are possible, as some targets are depending on governmental strategies and decisions.

[%] point Progress Towards Results Rating Scale considering mid-term and end-term project targets: HS, S, MS, MU, U, HU

		Targe	ets	Mid-	Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
			emission standard established.			
	POPs emissions from healthcare waste incineration are reduced through a demonstration component, and wider replication of results.	86.08 g TEQ/a to air, and 0.46 g TEQ/a to bottom ash.	16.38 g TEQ/a to air, and 0.11 g TEQ/a to bottom ash		MS	The objective/outcome isexpectedtoachievemostof its end-of- project targets but withsignificantshortcomings. At the time of the MTR the PoP emissions were not reduced by demonstration project using non-incineration technologies. Therefore, the mid-term target could not be reached. Nevertheless, it is likely that at the end of the project the target will be reached to the most extent as the 8 pilot facilities have been identified and the equipment is in the procurement process. As the reduction targets in the ProDoc are based on 10 pilot facilities, it can be assumed that the end- of project target cannot be reached completely.
	Mercury waste generated by the health sector is managed soundly and future waste is minimized	• Broken thermometers: 210.81 kg/a.	• In broken thermometers: 200 kg/a.		HS	The objective/outcome isexpectedtoachievemostof its end-of- project targets, withonlyminorshortcomings. The mid-term target could be reached by phasing out of 15000 mercury containing thermometer. As it is planned to phase out another 3000 mercury containing thermometer in 2017 it can be assumed that the end-of project aim will be reached. Supported by the project Kazakhstan is planning to sign the Minamata Convention.
Outcome 1.1: POPs inventories improved for informed decision making and priority setting	Capacity building programme (trainings) for involved stakeholders developed and implemented on POPs risks, inventories, POPs tracking, monitoring of data reported by responsible parties.	 Conventional training material completed and disseminated; One (1) workshop and one (1) training for trainers completed for relevant stakeholders in the public and industrial sectors; Training effectiveness assessed (with both training feedback 	 Web tool for on line training completed and published; At least three (3) complementary trainings completed; Training effectiveness assessed (with both training feedback from the trainees and final tests) Number of 		ΗS	 Training module on POPs risks and their sound management with testing section has been developed by the Centre for Sustainable Development. The module is used as part of conventional training for professional educational institutions and for staff of related state institutions and businesses. The project implements a complex approach to organized trainings and workshops to make the activities logistically more efficient. So POPs training and workshops usually are integrated into the General (1-3 days) training, that includes also mercury and HCW issues. Number of such complex trainings came up to 5, including 1 in Almaty, 2 in Astana, 1 in Oskement, and 1 in Kostanai. Total number of participants in complex trainings is 224 people representing governmental bodies, local authorities, governmental affiliates, industrial enterprises, laboratories, medical institutions, NGO.

		Targets		Mid-	Achieve	Justification for Rating
Indica	ator	Mid-term	End of project	term Level	ment Rating ⁹	
		from the trainees and final tests) • Number of requests for data sent out and processed • Number of visits made to related stakeholders	requests for data sent out and processed • Number of visits made to related stakeholders			 Number of complex workshops – 10 (2 in Almaty, 4 in Astana, 2 in Oskemen, 2 in Kostanai) with the total participants' number – 538 people. Interviewed organizations confirmed they used the training materials for continued training of their staff. POPs inventory completed. Comprehensive report, including recently updated data has been prepared in 2016 and is distributed among stakeholders.
National informati system (inventor POPs exp. (updated informati uPOPs an POPs).	ion y) on landed ion on lid new	 POPs Regular Inventory Mechanism established. Industrial sources of uPOPs identified. Statistical database for the calculation of uPOPs inventory built and validated. Industries using new POPs or recycling waste containing new POPs identified. Reports from responsible parties reviewed and data limitations revealed Data quality and consistency evaluated with recommendations for improvement At least 60% of the questionnaire survey completed and elaborated. 	 uPOPs inventory completed using the most recent data available. POPs inventories updated for uPOPs and POPs pesticides, covering all the territory of Kazakhstan. Industrial use of new POPs identified and possible chemical and non-chemical alternatives assessed. Inventory of stockpiles and burial sites of pesticides covering at least 70% of the country. Plan for maintaining and completing the above inventories elaborated and institutional 		S	 POPs inventory completed. Comprehensive report, including recently updated information and statistical data has been prepared in 2016 and is distributed among stakeholders. The project completed inventory in accordance with UNEP guidance. This work was supported by an international expert to guide the process. Data on new POPs have been captured in the NIP update document which was submitted to the Stockholm Convention Secretariat. Overall POPs regular inventory mechanism is not yet completely developed due to insufficient laboratory capacity, standards for reporting, and deficient sampling data. But interviewed organizations and the Government expressed clear intentions to include POPs into national monitoring system of hazardous chemicals. This will naturally take longer than a project lifetime, due to reasons that are beyond the project's mandate and capacity. It is anticipated that ZhasylDamu Information Center will serve as a central data base for statistics, technical reports, and EIA related documents Inventory of PCBs is updated.

		Targe	ets	Mid-	Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
		 Inventory of pesticide stockpiles or burial sites extended to at least 40% of the country. Inventory of PCBs updated by coordination with the UNDP PCB project. 	 responsibilities assigned. An information system on inventories of POPs substances established 			
Outcome 1.2: National capacities on POPs monitoring, analytical capabilities are assessed	Studies on existing POPs analytical and monitoring capabilities for the whole range of POPs (with focus on new POPs) carried out	 uPOPs analysis methods included in the national register; Laboratories capacities for uPOPs analysis and POPs in goods and environment assessed. Stakeholder- reviewed national POPs monitoring plan submitted to government for approval. 	 National POPs monitoring plan approved as part of relevant national policies and documents. Participation in regional monitoring networks. 		MS	 A number of sites Oskemen, Kostanai, Pavlodar, Atyrau, Kyzylorda were selected for sampling POPs in soil and air. Soil samples were collected from meteorological stations of these cities and sampling equipment was installed for 9 months to allow for passive air sampling. Every three months, filters in the sampling equipment are replaced and the used filters are sent to the RECETOX laboratory (nominated focal point laboratory of the Stockholm Convention in the region), located in Brno, the Czech Republic. Tests will help to identify the following POPs content in soil and air: PCDD/F, HCB, PCB, pesticides. As of now, results from soil analysis from the abovementioned regions were received. Data show increased POPs concentration in the following regions: HCH in Atyrau, DDT in Atyrau and Ust- Kamenogorsk, and PCDD in Atyrau. Statistical database for the calculation of uPOPs inventory built and validated will be finalsiedvtill Dec 2016. 10 employees of the territorial bodies, responsible for monitoring and control of quality of the environment, were trained by the Stockholm Convention focal point for monitoring of POPs (Brno, Czech Republic). The completed capacity assessment reports on nine (9) laboratories having the potential to determine uPOPs in the various environmental media, if methodologies are provided and accreditation is supported to enable full commercial activity. Maximum allowable emissions for dioxins and furans have been set by Decree of Ministry of Energy # 26 of January 21, 2015. The approval of a POPsmonitoring system towards the end of the project, is beyond the project capacity and mandate

		Targ	ets	Mid- Achieve		Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
						(equipment, treatment plant), there is a risk that the project will not be able to achieve this outcome in full by the end of the project.
	A set of recommendatio ns for the improvement of such capabilities formulated and submitted to the Government	 Qualified laboratories are identified for further accreditation Cost of accreditation is estimated Consultations held and roadmap prepared 	 At least two (2) laboratories accredited to perform uPOPs analysis in goods/environmen t 		MS	 Two (2) laboratories were identified/selected to receive project support for national accreditation. The project supported travel of 16 laboratory staff to participate in training tour in RECETOX laboratory in Brno, Czech Republic. Accreditation is in progress and roadmap developed (cost assessment, development of national standards of the Republic of Kazakhstan on performing POPs analysis of PCDD/PCDF in soil, air and water, and adding them to national register). Although the project achieved evident progress, the accreditation process was not sufficiently documented – the accreditation towards the end of the project is depending also on the availability of equipment which is not part of this project.
Outcome 1.3: Policy, institutional frameworks and enabling regulatory environment are in place to ensure better control on POPs accumulation and emissions	Institutional coordination and compliance with international agreements improved through firmer institutionalizati on of POPs issues into national structures	 Roles and responsibilities of related stakeholders defined Draft regulation defining TOR and potential Government's funding sources of the POPs coordinating mechanism established POPs intersectoral working group (mechanism) established (for example, as part of the "Green Development" Center) NGO's participation and 	 POPs group meets regularly to guide the NIP update process Institutionalizati on of new POPs issues into relevant line ministries ensured according to defined roles. Coordination mechanisms on POPs issues institutionalized and embedded into draft regulations sent for Government's review and approval. Funding sources to ensure the mechanism's 		S	 A project has prepared a solid assessment on institutional gaps and recommended approaches to address them to comply with the requirements of three chemicals related conventions (Basel, Rotterdam and Stockholm) and improve national communication and data management capacity. The report was submitted to the Ministry of Energy RK. The project has managed to include POPs related issues into the scope of the Intersectoral Commission under the National Security Council – an additional specific intersectoral WG on POPs is not seen as necessary. NGOs participated in the process and in 2016 the NGO ecoforum presented on a conference in Georgia. The project supported the capacity improvement of ZhasylDamu Agency under the Ministry of Energy RK that is planned to become a focal authority for all current and future International Conventions related to chemicals and waste management. Operational regulations are developed.

	Targets		Mid- Achieve		Justification for Rating
Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
National legal framework, by	 input considered in the composition of the mechanism Preliminary report on the improvement 	sustainability are defined, consulted on with MoF, and proposed for inclusion in national planning • Final report on the improvement		HS	 December 2015 workshop conducted with 2 other UNDP projects (depeco aid, energy efficient lighting) and a second
aligning institutional roles, reviewed and improved to include the issue of insofar unaddressed POPs, uPOPs and new POPs	of current regulatory system drafted. • One (1) stakeholder consultation workshop conducted. • Review and update of EcoCode and other key regulations covering chemicals management (number of legislations reviewed and updated) ¹⁰	of current regulatory system for including the issues of insofar unaddressed POPs, uPOPs and new POPs. • Amended regulation drafted and submitted.			 one in January 2016 Amendments are included to eco code chapter 40 article 280 National register on POPs on maximum allowed emissions has been established (based on a new decree of the Ministry of Energy in which environmental branch is now attached to No. 26 dated 25 January 2015). Maximum allowable concentration of dioxins in the air of populated areas has been defined in sanitary regulations # 168 called "Sanitary-epidemiological requirements to air quality in urban and rural areas, soils and their safety, content areas of urban and rural settlements, conditions of work with sources of physical factors affecting people", adopted by the Government on January 25, 2012. According to the current legislation, polychlorinated dibenzodioxines and polychlorinated dibenzoforans are included in the list of pollutants, for which emission limits are set. The law of RK of 28.04.2016, 506-V on amendments and changes to certain legal acts on the matters of green economy introduced changes to Environmental code, setting requirements on the need to dispose of POPs in an environmentally safe way. The norm for content of dioxins and furans in exhaust gases was set at the level not exceeding 0,1 ng/m 3. Further, amendments have been proposed by the project in

¹⁰ The "Environmental Code" and the laws regulating Chemical Product Safety and Pesticides ("On Plant Protection", technical regulation "Requirements to the Safety of Pesticides ") analyzed, gap analysis performed, amendments identified and submitted for approval (through relevant national legislative mechanisms).

	Targets		Mid-	Achieve	Justification for Rating
Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
					monitoring in environment into existing regulatory framework associated with the implementation of the DjasylDamu (Green Economy) National Development Programme.
Sectoral technical guidelines updated to include the issue of priority POPs, including sampling and analysis methods	 Preliminary draft of the guidelines completed and disseminated to the relevant stakeholders (Government, Industry, NGOs) for amendment Results of stakeholder consultations 	 Technical guidelines and action plans on POPs are submitted for approval by relevant state bodies. 		S	 Guidelines for analysis of dioxins and furans in the environment were drafted by the project and sent to project stakeholders for their approval. It is planned to adopt and include the methods in the National Register in December 2016.
Capacity building programme (trainings) and consultations for involved stakeholders developed and implemented on POPs related risks, POPs monitoring, institutional roles and responsibilities, POPs control legislation benchmarks and enforcement	 At least, three (3) trainings held on general POPs issues and NIP update process, in particular One hundred (100) stakeholders participated in trainings Results of stakeholder consultations 	 At least, two (2) complementary workshops held Sixty (60) stakeholders participated in workshops Results of stakeholder consultations NIP update formulated 		S	 The project practice a complex approach to organized trainings and workshops to make the activities logistically more efficient. POPs training and workshops were integrated into the General (1-3 days) training, that includes also mercury and HCW issues. Number of such complex trainings came up to 5, including 1 in Almaty, 2 in Astana, 1 in Oskement, and 1 in Kostanai. Total number of participants in complex trainings is 224 people representing governmental bodies, local authorities, governmental affiliates, industrial enterprises, laboratories, medical institutions, NGO. Number of complex workshops – 10 (2 in Almaty, 4 in Astana, 2 in Oskemen, 2 in Kostanai) with the total participants number – 538 people, representing governmental bodies, local authorities, governmental affiliates, industrial enterprises, laboratories, medical institutions, NGO.
National Implementation Plan (NIP) on Stockholm	• Updated NIP structure and content agreed in consultations with	• Final draft of the NIP completed and circulated for review within the		HS	• The updated National Implementation Plan on new POPs for 2015-2028 was approved by decree of Ministry of Energy # 228 dated 30/12/2014. It was submitted to the Ministry of Foreign Affairs to be presented to the Secretariat for the Stockholm

		Targo	ets Mi		Mid- Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
	Convention obligations with inclusion of new POPs reviewed and updated, with elaboration of specific action plans on new POPs.	relevant stakeholders. • A first draft of updated NIP prepared which contains preliminary draft of the inventory, guidelines, legislation and action plan and circulated.	main stakeholders. • Updated NIP submitted for approval to the Government, approved and submitted to the Secretariat.			 Convention. Furthermore the NIP update u-POPshas been initiated – the submission is planned for 2017.
Outcome 1.4: Improved institutional coordination on chemical MEAs	Review and better alignment of ministerial functions on implementation of Conventions' obligations	 Functional review of stakeholders' functions is complete Recommendatio ns for improvement drafted Stakeholder consultations held for priority selection 	 Roadmap in place for joint coordination of MEAs Draft regulation to enforce selected recommendation s is in place 		HS	 A project has prepared a solid assessment on institutional gaps and recommended approaches to address them to comply with the requirements of three chemicals related conventions (Basel, Rotterdam and Stockholm) and improve national communication and data management capacity. The report was submitted to the Ministry of Energy RK. Based on the assessment a roadmap for the implementation and coordination of the Stockholm, Rotterdam and Basel Conventions was developed. For the purposes of simplifying procedure on preparation and submission of national reports in accordance with the requirements of the Secretariat, the project developed templates of national reports of the Republic of Kazakhstan for the three conventions. Sample national reports of the Republic of Kazakhstan for the three conventions were drafted. A long-term plan for the submission on of national reports and suggested changes to national statistical and sectoral reporting systems were developed and submitted to the Ministry of Energy of RK for use in the daily work.
	Establishment of coordination mechanisms to support synergistic implementation of Stockholm,	• Drafting and approval of a joint synergistic action plan (concept, strategy note) for the implementation of the Stockholm, Basel	• Draft legislation supporting establishment of the coordinating mechanism submitted for review and		S	 The project supported the capacity improvement of ZhasylDamu Agency under the Ministry of Energy RK that is planned to become a focal authority for all current and future International Conventions related to chemicals and waste management. Structure and operational regulations are developed. Providing that all three conventions (plus Minamata) will be coordinated by one agency (ZhasylDamu), the project has

Targe		ets	Mid- A	Achieve	Justification for Rating
Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
Rotterdam and Basel	and Rotterdam conventions	 approval Temporary (with 			developed a report on institutional structures and functions as well as initial action plan, templates, and data management
Basel Conventions and established framework (system) for monitoring, accountancy and reporting on the implementation of the Stockholm, Basel and Rotterdam conventions in Kazakhstan	conventions • Functional review of stakeholders' functions is complete • Draft TOR and mandates are defined in the context of existing Governmental mandates and financial planning processes supporting institutional structures • Stakeholder consultations held with agreements received form key authorities (Ministry of Justice and Ministry of Finance) • Principles of monitoring system drafted • Data collection and reporting processes are reviewed and	 Temporary (with GEF/UNDP project's help) and fixed (Government) budgets for operation of the MEA mechanism defined and proposal for financing submitted to MoF Monitoring system forms part of the prepared draft legislation on the MEA coordinating mechanism Draft strategic concept and action plan are in place 			well as initial action plan, templates, and data management tools; this will significantly improve the country's capacity to meet the requirements of three conventions.
	proposals for improvement drafted				

		Targets		Mid-	Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
	Capacity of government authorities on implementation of chemical conventions improved	 At least, three (3) training workshops held for key stakeholders on key aspects of cooperation and data collection and analysis One hundred (100) stakeholders participated in trainings Draft strategic concept and action plan formulated Stakeholder consultations held 	 Draft legislation supporting establishment of the coordinating mechanism submitted for review and approval Received capacity is applied in decision-making forums 		S	 All complex workshops and trainings contained session on three Conventions and synergies of MEA on chemicals. A project has prepared a solid assessment on institutional gaps and recommended approaches to address them to comply with the requirements of three chemicals related conventions (Basel, Rotterdam and Stockholm) and improve national communication and data management capacity. The report was submitted to the Ministry of Energy RK. Based on the assessment a roadmap for the implementation and coordination of the Stockholm, Rotterdam and Basel Conventions was developed. For the purposes of simplifying procedure on preparation and submission of national reports in accordance with the requirements of the Secretariat, the project developed templates of national reports of the Republic of Kazakhstan for the three conventions were prepared. Sample national reports of the Republic of Kazakhstan for the three conventions were dated. As strategies are currently not supported by the government a strategic concept is changed to long-term plan for the submission on of national reports and suggested changes to national statistical and sectoral reporting systems were developed and submitted to the Ministry of Energy of RK for use in the daily work
Outcome 2.1: Mercury assessment implemented, national consultations held to identify priorities for actions and capacity building on	Capacity building programme (trainings) for involved stakeholders developed and implemented on mercury risks, inventories, sources, data tracking	 Capacity building program (trainings) for involved stakeholders prepared and initiated. At least, three (3) training workshops held One hundred (100) participants participated in training workshops 	 Capacity building program (trainings) for involved stakeholders completed. 		S	 Training course "Requirements to sound healthcare waste management in the medical institutions" was developed and presented to "ZhasylDamu" JSC and RSE "Informational and Analytical Center" for use in training courses of employees of the environmental services industry. This course was used as a part of complex trainings that were held in three pilot regions. Number of such complex trainings came up to 5, including 1 in Almaty, 2 in Astana, 1 in Oskement, and 1 in Kostanai. Total number of participants in complex trainings is 224 people representing governmental bodies, local authorities, governmental affiliates, industrial enterprises, laboratories, medical institutions, NGO. One training on "Requirements to sound healthcare waste

		Targe		Mid-	Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
mercury risks carried out		 Key stakeholders are trained in inventory and data tracking 				management in the medical institutions" was held in Kostanai with a focus on medical institutions at which 46 persons participated.
	Mercury situation in Kazakhstan assessed in coordinated manner jointly with UNEP	 Partnership with stakeholders established Data sources accessed Major sources are identified National capacity to manage mercury products and waste assessed and recommendations for capacity improvement developed 	 Assessment of country's mercury sources, releases, contaminated sites and priority areas for mercury control completed The country's baseline data is established. Information made available through database and open access web-site 		HS	 Quantitative assessment of mercury releases to environment was conducted – containing data sources, major sources and national capacities. Recommendations were included. "The report on the inventory of mercury in the Republic of Kazakhstan" was provided to the Ministry of Energy. It can be assumed that the end of project targets will be completely fulfilled.
	National mercury reduction plan developed	 Consultations with stakeholders are held, inclusive coordination with GEF/UNEP's region programme Future plan's outline and proposed legislative improvements (inclusive release standards) to control mercury management drafted Data collection and assessment initiated 	 Required data collected and analysed, and discussed in stakeholder forums Priorities identified and agreed with stakeholders Draft National Mercury Reduction plan is formally reviewed and cleared by relevant line Ministries and submitted for final approval. 		5	 The quantitative assessment of mercury release into the environment (first stage of inventory) has been completed. A report on the existing system of the treatment of mercury wastes in Kazakhstan was prepared. Project team participated in a regional IPEN meeting in Central Asia on public participation in chemical safety issues in EECCA countries. Following that meeting, and local consultations, a justification concept on Minamata convention ratification drafted and is prepared for submission to the Ministry of Foreign Affairs for review. A stakeholder workshop on Minamata Convention was held in Astana with 35 participants, representing ministries, industries, NGOs.

		Targe	ets	Mid- term Level	Achieve	Justification for Rating
	Indicator	Mid-term	End of project		ment Rating ⁹	
	Public awareness raising campaigns on mercury risks conducted	 Public awareness campaign developed 50% of planned awareness activities carried out by MTE. 	 Remaining 50% of activities designed in the awareness campaign accomplished 		S	 Project news and campaigns are applied on the ZhasylDamu web site 10 workshops 538 participants in 4 regions. In collaboration with the UNDP/ GEF Project on Energy Efficiency 2 seminars were held to raise awareness of energy-resource saving in healthcare facilities, including the handling of chemicals and waste" (Aktau and Kyzylorda cities) attended by 85 people. Leaflet published and disseminated. Media reports available
Outcome 3.1: Sound health- care waste management through uPOPs and mercury reduction approaches are demonstrate d in 2-3 regions of the country	Review of national policies and update of HCWM regulatory framework and road map	 Existing fragmented national policies fully reviewed with recommendations for improvement along with road map defining strategy and timeline for HCWM plan implementation developed; Consultations with stakeholders, including regional authorities in target regions and service providers are held (at least, two workshops); List of products and services to be included in the public procurement rules submitted to stakeholders for discussion. Legislative amendments, 	 Legislative improvements (through amendments in the EcoCode) are submitted for final approval by the Government. Technical standard for hazardous healthcare waste treatment, including non- combustion methods, is established in close consultations and forms a part of legislative improvements Public procurement rules are amended and EPP criteria are set Awareness raising workshops and media reports 		HS	 Overview report of healthcare wastes management in the Republic of Kazakhstan – baseline assessment was completed. Recommendations were prepared to make amendments and changes to the Sanitary-epidemiological requirements for healthcare facilities. Adoption is scheduled for December 2016. Proposed changes to the legislation on public procurement were reflected in the Law of RK of 04.12.2015, #434-V «On public procurement» paragraph 4, art.37, which strengthened requirements on bidding procedures for provision of services, including healthcare waste management. Training module on sound HCW management was developed and is now used by regional institutions for professional upgrade of the staff. Apart from above reported complex workshops and trainings, additional targeted trainings on HCW management were held in each of three regions (Oskemen, Astana, Kostanai) with the total participants number – 159 people.

	Targets		Mid-	Achieve	Justification for Rating
Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
	 inclusive emission standards and financial disincentives, are drafted, consulted with key stakeholders (government, civil society, NGOs etc). Awareness raising workshops and media reports (at least, 3 expanded workshops for medical and private sectors, and 5 media reports) 	 (at least, 3 complementary workshops for medical and private sectors, and 10 media reports) National reporting to POPs convention improved 			
Development of Regional HCWM Management Plan in selected provinces	 In selected provinces, all HCW generators and waste disposal installations and companies are identified and mapped. The core data is collected and process of it verification is in progress. BAT/BEP requirements defined, and end-of- use mercury management capacity is engaged for safe storage (identification, training) Stakeholders' 	 The Management Plan is adopted, and further actions and investments scheduled Roadmap to support its implementation is approved by participating stakeholders 		S	 Data collection on HCW sources, types, quantities, and classification in Kazakhstan is completed and systemized in summary tables and were used for selection of the pilot regions and development of HCW Management Plans. This assessment covers16 regions of the country, with a focus on all state-funded hospitals and medical facilities. 154 medical facilities (2,761 beds) in the pilot regions. The total amount of infectious healthcare waste generated in the Republic of Kazakhstan for the reporting period is equal to 9.5 thousand tons, including in the pilot regions: East- Kazakhstan - 2,082 tons; Kostanay - 172 tons; Astana - 443 tons. Draft regional HCW Management Plans are developed based on international approaches and standards for three pilot regions. Indicative activities from this Plans are introduced into Regional Development Strategies.
	Targe	ets	Mid-	Achieve	Justification for Rating
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Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
	consultations are held with at least (6) workshops in selected regions (3) held. • Draft action plans in preparation with close consultations				
Pilot HCWM projects in selected hospitals, including phase- out of mercury containing thermometers	 The baseline situation is assessed. At least four (4) pilot projects in health facilities identified. HCWM Plans developed, inclusive of BAT/BEP, waste minimization and segregation, waste tracking and reporting, and implemented. Required training is provided on spot (at least, 300 staff trained) 	 BAT/BEP (uPOPs and mercury reduction) policies are implemented and targets recorded. Mercury thermometers are replaced by electronic devices, with resulting mercury waste safely handled Health facilities dispose IHCW in non-combustion installation. Evaluation and documentation of practical results (inclusive of waste amounts minimized, uPOPs/mercury releases reduced) in conjunction with Outcome 4 		5	 15,000 mercury containing thermometers were replaced with digital ones in the projects 8 pilot hospitals. This translates to a reduction of 30 kg/year of potential Hg releases. Currently there are no mercury thermometers remaining in state budgetfunded healthcare facilities in the three (3) pilot regions. A baseline assessment for each pilot hospital has been conducted using the individual Rapid Assessment (I-RAT) tool developed under the Global Medical Waste project as well as the "Guidelines for conducting a baseline assessment of an experienced medical institution". Draft HCW Management Plans for 8 pilot hospitals are developed: Astana (Research Institute of Traumatology and Orthopedics, Central Road Hospital), East-Kazakhstan oblast (CSE on EAR "Center of Mother and Child"; CSE on EAR Ust-Kamenogorsk city hospital 1, CSE on EAR "Central District Hospital of Katonkaragay District"), and Kostanay oblast (CSE on EAR Kostanai Drug Dispensary; SCCE Oblast Hospital; SCCE Zhitigarinskaya CDH. In addition to complex trainings reported above the project organized a study tour to Riga, Latvia to learn international experience of healthcare waste management.
Establishment of HCW treatment centres in	• Tender is held and the winning bid(s) is/are selected.	HCW treatment centres successfully operate at		S	 In accordance to national regulations autoclaving technology is not substance of an EIA. 3 urban and 4 rural HCW Treatment Centers are formally set up

		Targe	ets	Mid-	Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
	selected sites	 EIA and permit procedure is carried on At least 8 rural and 2 urban HCW treatment centres established with non- incineration demonstration supplied, installed and commissioned Transportation: vehicles supplied or reconstructed to meet ADR standards (6 items) Transportation and waste disposal pricing recommendations drafted for stakeholder review (criteria per weight or volume) 	preliminary planned capacity (950 tpa). • Pricing policies implemented at target groups of stakeholders and service providers • Applicable recommendations on possible pricing criteria proposed for legislative amendments • Waste reduction amounts and uPOPs reductions are measured and reported on			 Infrastructure need to be adopted to the specifications of the equipment and to logistic requirements. Non-incineration technologies (three 100 kg/h autoclaves, four 20 kg/h autoclaves) for distant districts are procured and to be delivered in November 2016. 3 vans and 2 smaller vehicles are procured and to be delivered in November 2016. Pricing methodologies have been developed – no review. Most mid-term targets have not been achieved at the time of the MTR, but are initiated and planned to be completed at the end of 2016.
Outcome 3.2: Linkages between sound HCWM practices and minimization of uPOPs and mercury demonstrate d through training and awareness raising	Development and dissemination of BAT/BEP technical guidelines and general awareness raising	 Baseline information is collected and processed. Draft technical guidelines (concept, scope, and content) prepared and consulted with stakeholders. Project team participates in scientific medical conferences (at least, 	 Technical guidelines approved and printed (legislative support to back guidelines proposed) Hospitals receive materials for application in daily work Project team participates in scientific medical 		S	 During this reporting period, the project supported adoption of changes to the list of best available technologies (BAT) for managing healthcare waste, by the Law of RK of 25.04.2016, 505- V on Amendments and changes to certain legal acts of RK on the matters of environment and subsoil use. The environmental code now includes a norm, which recommends the use of any recommended technologies taken up in the HCWM BAT list of the European Integrated Pollution Prevention and Control Bureau. The development of a training module on managing healthcare waste has been completed. Work has started on approving and integrating it into the training curriculum for medical colleges, universities and professional development courses. Progress in this area will be presented in the next reporting

		Targ	ets	Mid-	Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
programmes		 3), public campaigns (media reports, at least 10, interviews, at least, 4) Changes are proposed to educational curricula of medical and other institutions offering medical degree programmes 	conferences (at least, 2), public campaigns (media reports, at least 5, interviews, at least, 3), ZhasylDamuuprogr amme discussions and roundtables • National curricula updated			cycles. • As part of South-South cooperation and experience exchange, project team participated in the GIZ-funded international conference for Central Asia, Afghanistan and other countries on biological hazard safety and protection in the neighboring, Kyrgyzstan in October 2014.
	Development of national training programs on uPOPs/mercury risks and sound HCWM, partnership with stakeholders and national replication of BAT/BEP demonstration	 Training materials prepared in consultations with stakeholders and approved by the Project Board. Training documentation adjusted to regional situation and needs Training plan and schedule are developed for local, regional and national levels 	 Training carried in two demonstration regions for major health facilities, regional administration, and waste management service providers. Training carried in 12 regions for major health facilities, and regional administration and integrated into national training system. Training program adopted and replicated by health institutions. Media follows the initiative 		S	 The following training modules are developed and used by stakeholders: Training Module on sound HCW Management for medical staff and educational courses Training module on the existing monitoring system and capacity on mercury management Training module on current legislation and recommendations for improvements to decrease the HCW generation. Training Module on POPs plus Test Training Module on risks, sources, and inventory of mercury emissions and related data bases The project practices a complex approach to organized trainings and workshops to make the activities logistically more efficient. So POPs training and workshops usually are integrated into the General (1-3 days) training, that includes also mercury and HCW issues. Number of such complex trainings came up to 5, including 1 in Almaty, 2 in Astana, 1 in Oskement, and 1 in Kostanai. Total number of participants in complex trainings is 224 people representing governmental bodies, local authorities, governmental affiliates, industrial enterprises, laboratories, medical institutions, NGO. Number of complex workshops – 10 (2 in Almaty, 4 in Astana, 2 in Oskemen, 2 in Kostanai) with the total participant's number – 538 people. Media reports

		Targets		Mid- Achie	Achieve	Justification for Rating
	Indicator	Mid-term	End of project	term Level	ment Rating ⁹	
						To obtain the end-of the target the instituteilistion of training on hcwm is needed and the training waste handlers in the pilot faciltiies before the operation starts.
Outcome 4: Monitoring, learning, adaptive feedback, outreach, and evaluation.	M&E and adaptive management applied to project in response to needs, mid-term evaluation findings with lessons learned extracted.	 Monitoring and Evaluation system developed. Mid-term- evaluation of project output and outcomes conducted with lessons learnt at 30 months of implementation. 	• Final evaluation report ready in the end of project			 M&E is carried out in accordance with the plan stated in the ProDoc. Inception workshop was held 2 AWP have been approved by the National Director. 9 Quarterly Progress reports; 2 PIRs; 2 Annual Progress Reports; 5 meetings of the Project Steering Committee; 1 meeting of the Technical Advisory Council

6.11 Signed UNEG Code of Conduct forms

Evaluators:

- 1. Must present information that is complete and fair in its assessment of strengths and weaknesses so that decisions or actions taken are well founded.
- 2. Must disclose the full set of evaluation findings along with information on their limitations and have this accessible to all affected by the evaluation with expressed legal rights to receive results.
- 3. Should protect the anonymity and confidentiality of individual informants. They should provide maximum notice, minimize demands on time, and respect people's right not to engage. Evaluators must respect people's right to provide information in confidence, and must ensure that sensitive information cannot be traced to its source. Evaluators are not expected to evaluate individuals, and must balance an evaluation of management functions with this general principle.
- 4. Sometimes uncover evidence of wrongdoing while conducting evaluations. Such cases must be reported discreetly to the appropriate investigative body. Evaluators should consult with other relevant oversight entities when there is any doubt about if and how issues should be reported.
- 5. Should be sensitive to beliefs, manners and customs and act with integrity and honesty in their relations with all stakeholders. In line with the UN Universal Declaration of Human Rights, evaluators must be sensitive to and address issues of discrimination and gender equality. They should avoid offending the dignity and self-respect of those persons with whom they come in contact in the course of the evaluation. Knowing that evaluation might negatively affect the interests of some stakeholders, evaluators should conduct the evaluation and communicate its purpose and results in a way that clearly respects the stakeholders' dignity and self-worth.
- 6. Are responsible for their performance and their product(s). They are responsible for the clear, accurate and fair written and/or oral presentation of study imitations, findings and recommendations.
- 7. Should reflect sound accounting procedures and be prudent in using the resources of the evaluation.

Ute Pieper:

Evaluation Consultant Agreement Form*

Agreement to abide by the Code of Conduct for Evaluation in the UN System

Name of Consultant: Ute Pieper

Name of Consultancy Organization (where relevant): NA

I confirm that I have received and understood and will abide by the United Nations Code of Conduct for Evaluation.

Signed at Kuala Lumpur on 12. October, 2016

lite Theper

Signature:

*<u>www.unevaluation.org/unegcodeofconduct</u>

Olga Klimanova:

Evaluation Consultant Agreement Form*					
Agreement to abide by the Code of Conduct for Evaluation in the UN System					
Name of Consultant: Olga Klimanova					
Name of Consultancy Organization (where relevant): NA					
I confirm that I have received and understood and will abide by the United Nations Code of Conduct for Evaluation.					
Signed at St. Petersburg on 12. October, 2016					
Pert					
Signature:					

*<u>www.unevaluation.org/unegcodeofconduct</u>

MTR Report

6.12 Signed MTR final report clearance form

(to be completed by the Commissioning Unit and UNDP-GEF RTA and included in the final document)

Midterm Review Report Reviewed and Cleared by:	
Commissioning Unit	
Name: Roescu Bathimov	
Signature:	Date: 31.10.2016
UNDP-GEF Regional Technical Advisor	
Name: Makrin Surker	
Signature: Mar Gury P.	Date: 31/10/2016
V V. VY	