



Health System Strengthening – Mozambique

Final Evaluation Report

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Disclaimer

This project evaluation report presents the evaluator's view and does not necessarily fully correspond to the opinions of UNDP or other stakeholders referred to in this report.

Acronyms

CPD	Country Programme Document (UNDP)
CMAM	Central Medical Stores (Central de Medicamentos e Artigos Médicos)
CO	Country Office
GF	Global Fund
HSS	Health System Strengthening
MoH	Ministry for Health
M&E	Monitoring and Evaluation
PB	Project Board
PELF	Pharmacy and Logistics Strategic Plan (Plano Estratégico de Logística Farmacêutica)
PMU	Project Management Unit
SC	Supply Centre
TB	Tuberculosis
ToC	Theory of Change
ToR	Terms of Reference
TWGs	Technical Working Groups
UNEG	United Nations Evaluation Group
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme

Executive summary

The independent final evaluation of the “Health System Strengthening Project (HSS)” was carried out on the initiative of the United Nations Development Programme (UNDP) Mozambique Country Office. The evaluation focused on assessing the project’s performance and on generating relevant findings, conclusions, lessons learned, and recommendations, which can be used by UNDP Country Office (CO) and its strategic and operational partners in future similar projects. Aspects of the project relevance, effectiveness, efficiency, sustainability, and impact were the focus of the evaluation.

The project represents a unique opportunity for learning to UNDP CO. It was the first infrastructure project supported by UNDP and funded by the Global Fund through the MoH - and is first in nature within the Health sector. It aims to strengthen the national health system by reinforcing the medical supply chain system management and waste management. One component of the project, referred to as the HIV component (hereinafter the Project), is the subject of this evaluation report. This component aimed at constructing a complete new Intermediary Medical Warehouse in Manica province of Mozambique. The project's main objective is to strengthen the national health system by reinforcing the medical supply chain system management. The main strategic actions of the project focused on constructing an Intermediary Medical Warehouse in Chimoio, Manica province.

The HSS project includes two outputs; however, the output of the project under evaluation is:

- Output 1: Improved safety, security, and storage conditions of medicines, vaccines, and other health products at the sub-national level.

The evaluation was conducted within a context in which the Government and partners are concerned with the success of construction projects considering challenges faced by stakeholders and the increasing complexity in design and implementation. A successful project is defined as one that has met its technical requirements, maintained its schedule, and remained within budget. Success could also be defined as the degree to which project goals and expectations are met.

The evaluation is detailed in this report according to the methodology and outlined in terms of Reference (ToR) (annex 1). The evaluation methodology was based on remote data collection from all stakeholders. It followed a mixed approach, using qualitative methods (mostly individual interviews with the project team and other stakeholders) and quantitative methods (data from the online questionnaires). Primary information was collected through semi-structured interviews and involved representatives of UNDP CO, including the project team, some of the Project Board members, and other stakeholders. Secondary information was gathered through a desk review of project documents, thematic policy documents, progress reports, and other

documents developed and provided by UNDP CO. The final evaluation encountered some limitations in terms of available data (none were significant). Most of the identified evaluation risks reflected in the inception report have not negatively impacted the evaluation and its results. Overall, the conclusion on the analyzed aspects of the project is largely positive, based on the evidence collected from the desk review and analyzed reflections shared during the interviews with the key informants engaged within the implementation.

The overall assessment of the Project was successful (at 92.5% performance). It is at the upper limit of the range of performance that could be considered very successful. To arrive at the overall assessment, the individual component ratings were aggregated using weightings developed by the UNDP Evaluation Office: Relevance (6 out of 6); Effectiveness (5 out of 6); Efficiency (5 out of 6); Sustainability (3 out of 4), and Impact (4 out of 4). These reflect the relative importance of the component groupings to expected overall project outcomes, considering their contribution to project outcomes appraisal. Individual criterion ratings were in whole numbers from 0 to 6, increasing project performance, while sustainability and impact followed different ratings.

The project is relevant; it reflects the thematic relevant priorities of the development partners in Mozambique. The project is linked and contributes to United Nations Development Assistance Framework (UNDAF) Outcome 8 and UNDP Country Program Document (CPD) Outcome 68. It is also linked and has been derived from Mozambique Pharmacy and Logistics Strategic Plan (PELF). The project involves several stakeholders from different agencies, local stakeholders, and donors (the Global Fund). It is consistent with a results-based approach with a set of results, baselines, targets, milestones, and performance indicators.

The project output is linked to the outcome defined in the Theory of Change (ToC) set at the design stage and without significant gaps. The output indicator is qualitative, given the nature of the project. The project performed well regarding its target, despite the delays during the implementation determined by multiple factors. The effectiveness is an important strength of the project, judging the fulfillment towards its targets and the absorbed resources.

The project implementation proved to be efficient when analyzing the delivery and fulfillment of results versus the use of financial resources. Regarding the timeliness of the implementation of the planned activities, the project had some delays.

The distribution of the costs per output is adequate, and resources are used for the budget lines as planned without significant deviations. The evaluation did not indicate any significant alternative solutions, which could be provided at fewer expenses and would be more economical for the project.

Increasingly, sustainability is becoming a requirement rather than just a desirable characteristic, and its pursuit is bound to affect both the construction process and the built asset itself –

financing for respective interventions for increased sustainability are therefore encouraged in future projects. In terms of institutional sustainability, the project was geared towards storage capacity development of the recipient entities (namely the Ministry of Health and the Ministry of Public Works). Perspectives are promising in terms of knowledge acquired, and skills developed. It is premature to assess the sustainability of the project outcomes and impact because it is not institutionalized. In terms of financial sustainability, there was no evidence that the project would not be sustained from local public resources (mainly government budget); hence, no risks to financial sustainability have been highlighted by any stakeholders. However, as described in the report, advocacy for mobilizing resources for additional similar projects is essential.

Following the analysis of the gathered data and consultations, the evaluation developed some key recommendations, which might increase the relevance, performance, efficiency, and sustainability perspectives of future similar projects:

1. Continue to build the partnership between the UNDP and MoH to support the health system's decentralization agenda and enhance equity outcomes.
2. Align the governance and coordination of similar future projects with existing structures.
3. Work in advance to address and overcome the anticipated bottlenecks.
4. Align health-related development prioritization according to government prioritization.
5. Develop an integrated approach for technical assistance and capacity building, if funded by donors in future interventions.
6. Document lessons learned on the design of the intermediary medical warehouses before the expansion of the model.
7. MOH to focus the capacity-building interventions on priority areas and based on robust need assessment.
8. Diversify and differentiate the approach and business model for the technical assistance beyond construction activities to include other initiatives and innovations.
9. Identify opportunities for achieving efficiencies in scale and high value-for-money.
10. Ensure the Government maintains sustainable budgetary support for the operational costs associated with the new projects.
11. Establish and integrate robust M&E systems as part of projects management of similar construction projects.
12. Conduct a technical evaluation to assess the performance of the medical warehouse, if funded by donors in future interventions.
13. Conduct follow-up evaluation activities to complement the findings of this evaluation, if funded by donors in future interventions.

Section 1: Introduction & Background

Introduction:

The “Health System Strengthening” (HSS) Project was initiated by United Nations Development Programme (UNDP) Mozambique Country Office (CO) in February 2019. Its creation aimed to support the Ministry of Health of the Republic of Mozambique (MoH) to operationalize some initiatives supported through a grant from the Global Fund to fight AIDS, Tuberculosis, and Malaria (GF). The HSS project comprises different components focused on health infrastructure, including the construction of an intermediary medical warehouse and other components focusing on facilities for patients with multi-drug resistant Tuberculosis. UNDP Mozambique has commissioned an evaluation of the HSS project to measure the contributions made by the project and in designing future interventions for strengthening the Strategic Plan for Pharmaceutical Logistics (PELF) implementation and waste management. This plan is a strategic master plan that has set the road map for strengthening the supply chain and logistics system in the country.

While the HSS project has different components, this evaluation has focused on evaluating the component linked to the newly constructed Intermediary Medical Warehouse in Chimoio (including installing an incinerator). Funding from the GF was provided through an HIV grant to MoH Mozambique to support the HIV program and health system strengthening activities. This component of the HSS project is referred to as HIV Project (its funding is channeled through the mentioned HIV grant). Hence, the reference of ‘the project’ in this report refers to the HIV project in this evaluation report. The Medical Warehouse is also equipped with innovative models for the incineration of pharmaceutical waste. The province of Manica and the city of Chimoio receive from this intervention a new and modern health infrastructure that replaces the one completely burned down during a fire back in 2017.

The independent final evaluation of the “HSS HIV Project” (hereinafter the project) was carried out within the scope mentioned above. The evaluation focused on assessing the project performance and generating evidence, lessons learned, and recommendations that UNDP CO and other stakeholders can use. This evaluation report is aligned to the UNDP Evaluation Guidelines. It is prepared based on a review of the documents related to the project and consultations with stakeholders of the project. The report provides the background and the context, describes the overall methodology of the evaluation and how it was conducted, and highlights some of the key findings, conclusions, and lessons learned. It provides recommendations for advancing the utilization of the mentioned project and apply lessons learned for future similar projects.

This post-project evaluation is a comprehensive evaluation of indicators developed at the planning stage. It includes efficiency evaluations with indicators for actual costs and estimated

costs, quality evaluation, effectiveness evaluation, safety evaluation, and environmental evaluation. UNDP and stakeholders agreed on the specific scope of this evaluation, as detailed below.

Project Brief Description:

This section will provide a brief description of the wider HSS Project, with more details on the HIV component of the project.

The HSS project was, and continues to be, uniquely positioned to add an important value within the context of the health system in the country. As mentioned before, the HSS project is composed of different components, including the construction of an intermediary medical warehouse and Multi-drug resistance Tuberculosis (MDR-TB) wards and shelters for TB clinics. In particular, the construction of the intermediary medical warehouse in Manica province aimed at strengthening the capacities of the national medicine supply chain system, which in turn contributed to increasing storage space and availability of essential medicines and medical commodities and improving the quality of health care services in a wider context. Such partnership has been established through different models to conceptualize health systems strengthening interventions. These high-impact interventions are central to the development of health systems in developing countries. The HSS project contributes to implementing different strategic plans in its wider context, including the (PELF), the Health Sector Strategic Plan, and UNDP Strategic Plan 2018-2021.

HSS Project's purpose is to strengthen the national health system by reinforcing the medical supply chain system management and enhancing the MDR-TB treatment outcome. **The HIV component specifically focuses** on improving the safety, security, and storage conditions of medicines, vaccines, and other health products at the sub-national level. This output was targeted to cover the key needs for this component of the project, as will be discussed in subsequent sections. The project contributes to the implementation of the CMAM's Strategic Plan (PELF).

The project under main focus of this evaluation **main objective** is to strengthen the national health system by reinforcing the medical supply chain system management. **The main strategic actions** of the project are the construction of an intermediary medical warehouse in Chimoio and respective equipment, including with one incinerator.

The project duration was 22 February 2019 to 31 December 2020. The Intermediary Medical Warehouse provisional delivery was done in December 2020; the provisional delivery of waste management component was done 15 February 2021; with final handover to MoH on 30 June 2021 and Open Ceremony conducted 1 July 2021.

Budget and funding source: Please see the table below, which summarizes the HSS budget, including the HIV project. The HSS project was funded through three grants from the Global Fund, through the Ministry of Health (MoH) in Mozambique.

Table 1: Summary of HSS Project Budget by funding component

Component	Total Budget
HIV	\$ 6,252,385.57
TB	\$ 2,622,538.07
Malaria	\$ 2,499,204.93
Covid19	\$ 354,340.69
Total HSS Project	\$ 11,728,469.26

Section 2: Evaluation Approach and Methods

The final evaluation took place from Mid-June to Mid-July 2021.

2.1. Evaluation Purpose and Objectives

UNDP Mozambique has commissioned an evaluation of its HSS project to measure the contributions made by the project and to inform the design of future interventions for strengthening the PELF implementation and Waste management. The main intended primary users of this evaluation include UNDP, MoH authorities, and development partners. In addition, different stakeholders are central to the implementation of the project. Through the recommendations of this evaluation, they will also benefit from generating an evidence-based assessment on the added value of this project in the local context.

General Objective:

The evaluation's primary objective is to assess the progress made by the project against the project outputs and indicators.

Specific objectives:

- **Objective 1:** To assess and evaluate the progress made by the project towards the attainment of the results as specified in the project results resource framework / Annual work plan.

- **Objective 2:** To measure the contributions made by the project in enhancing the accountability, effectiveness, and efficiency of the supply chain system focus on PELF.
- **Objective 3:** To assess the relevance, sustainability, effectiveness, and efficiency of the project interventions.
- **Objective 4:** To identify challenges to project implementation and make recommendations on possible ways forward.
- **Objective 5:** To examine the cost efficiency and effectiveness of HSS project assistance.
- **Objective 6:** To document main lessons learned, best practices and propose recommendations to integrate Project Final Report.

2.2. Scope of the Evaluation

Based on UNDP's request, this evaluation has focused on the HIV project (i.e., constructing the intermediary medical warehouse in Chimoio). The evaluation did not include evaluating TB-related activities in its scope as described in this report, as this project is still under implementation. The evaluation has focused on evaluating the relevance, sustainability, effectiveness, and efficiency of the assistance provided by the project to MoH.

2.3. Methodology

The final project evaluation adopted a participatory approach, engaging a wide and diverse range of project stakeholders. Participation of the main stakeholders was a necessary condition to ensure accountability and promote ownership of the evaluation and its outcomes. The methodology was based on designing data collection techniques to suit the remote nature of engagement of this evaluation (due to travel restrictions). The evaluator applied a hybrid approach and used qualitative and quantitative methods to approach the evaluation.

The evaluation adopted the following approaches:

1. Theory of Change (ToC) validation and confirmation:

Through this process, the evaluator investigated the links between activities and expected impacts by investigating the validity of links along the causal chain between activities, outputs, intermediate outcomes, and impacts of the project. The ToC was reviewed for its appropriateness, comprehensiveness, and accuracy and revised as necessary.

2. Context analysis:

The context analysis, using a qualitative approach for data collection and analysis through a case study, interviews, and group discussions, aimed at gathering information about changes observed in the broader environment of the project, e.g., understanding the perceptions

associated with the needs for the project. To the extent possible, the evaluator has utilized the Design Mapping & Review approach to validate the evidence and provide feedback to inform changes in the project design or concept in the future.

3. Process evaluation:

Process evaluation focuses mainly on internal project issues. It will be designed to generate information, findings, and recommendations that can help to improve future management of similar projects.

2.4. Data Collection and Analysis

The evaluator adopted different methods to collect the required data, including:

1. Review of project's key documents.
2. Case study.
3. Interviews with key stakeholders.
4. Online questionnaire targeting all of the stakeholders.

The evaluation findings and results reflect the evaluation objectives (including the specific objectives), the evaluation questions, and the key issues for considerations and recommendations. The analysis and synthesis of data were guided by evaluation rubrics that reflect the main evaluation criteria as presented before. Please see Annex 3 to summarize the evaluation findings and judgment based on the selected criteria.

2.5. Ethics

The evaluation was conducted per the principles outlined in the United Nations Evaluation Group (UNEG) 'Ethical Guidelines for Evaluation.' The evaluator worked to safeguard the rights and confidentiality of information providers, interviewees, and stakeholders through measures to ensure compliance with legal and other relevant codes governing data collection and reporting on data. The evaluator ensured the security of collected information before and after the evaluation and protocols to ensure anonymity and confidentiality of sources of information where that is expected. The information knowledge and data gathered in the evaluation process were solely used for the evaluation and not for other uses with the express authorization of UNDP and partners

2.6. Limitations

Considering the current situation and by analyzing our proposed methodological approach, we believe the following represent key risks and limitations:

- Travel restrictions due to the COVID-19 pandemic prevented the international consultant from visiting Mozambique. The evaluator adopted a mixture of local experts' engagement as well as remote support where needed.
- Time constraints and remoteness made it impossible to visit the project location and interview all partners and beneficiary groups.
- The unavailability of some respondents to provide information due to their busy schedules and other activities was also a great limitation.
- The evaluation relied on reports by project staff of their activities, documents produced as an outcome of the project, and primary data generated from the fieldwork. The self-reports of the project staff in terms of review meetings and progress reports were verified through triangulation during the data collection to enable our team to obtain an in-depth understanding of the evaluation questions under investigation. Project documents were examined where information gaps existed in the project staff's responses.
- A key aspect missing from this evaluation is the outcome evaluation, which refers broadly to an indicator or measure of quality or performance. The evaluation was conducted immediately following the completion of the project, without a time-space to allow for the warehouse to operate and assess its functionality. Outcome data have significant importance because they provide the soundest and most reasonable basis for evaluating whether the warehouse itself is efficient and effective. Outcome evaluation was not part of funded activities in UNDP-MoH agreement. We recommend the Principal Recipient the MoH conducting another evaluation within a 9 to 12 months period to cover this important component.

Section 3: Evaluation Findings

The findings of the final evaluation are presented in this section of the report per the evaluation criteria as identified by the UNDP CO. These include:

1. Relevance
2. Effectiveness
3. Efficiency
4. Sustainability, and
5. Impact.

In addition, and to the extent possible, the findings are structured to reflect (a) project design stage, (b) project implementation, and (c) project results.

3.1. Relevance

Within the scope of this evaluation, **Relevance** was defined as the extent to which the project's objectives were consistent with beneficiaries' (MoH) requirements, country needs, global priorities, and partners' and donors' (GF) policies. The evaluation sought evidence that the project was relevant to the governments' priorities and policies in Mozambique (when the project was launched and at the time of evaluation, with evidence indicating its relevance as fit-for-purpose in the future).

The evaluation concluded that the project is relevant and consistent with the Government, donor, and UNDP's priorities as described below. The stakeholders rate the project as either highly relevant or relevant.

The ToR of the evaluation has focused on specific questions to evaluate and assess the project's relevance within its wider context. The findings are reflecting the key findings based on the indicators (in purple below) used to analyze the data as follows:

1. Level of coherence and alignment between project's objectives, national policy priorities and strategies, stated priorities of stakeholders, and UNDP strategic priorities

The logistics for drugs, vaccines, and equipment in Mozambique are managed at the central level through two institutions in different MoH Directorates: The Central Medicine Stores (CMAM, Central de Medicamentos e Artigos Médicos), in charge of drug logistics, rapid tests, and laboratory reagents, and the Supply Centre (SC) responsible for managing supply chains for consumables, medical and surgical equipment, hospital furniture and vehicles. From one side, CMAM is responsible for planning, procurement, importing, storage, and distribution, while the

SC is focusing on the management of the warehousing. The MoH developed the Pharmacy and Logistics Strategic Plan (PELF, Plano Estratégico de Logística Farmacêutica), which was considered the main guide for achieving the major reforms. The plan has responded to various needs the system has for other medical products. The plan aimed to improve the structure of the logistics chain to meet better the needs of a decentralized health system under expansion, which has been one of the MoH's main objectives within the reform agenda.

There were multiple challenges and capacity issues that are facing the local health system in Mozambique. These were confirmed through multiple assessments and reviews, including the following as top relevant issues to the HSS project:

1. The current storage capacity of medical products includes three regional warehouses, two of those are based in Maputo and the third one based in Beira. Maputo stores support and supply the southern and northern zones, while the Beira warehouse supports the country's central zone. CMAM plans continue to focus on the decentralization of medical storage facilities.
2. The logistics system is unequal in supplying drugs and other medical supplies to all locations resulting in frequent stock-outs and compromising the quality of care.
3. The existence of multiple lines of command and weak institutional capacity is associated with the lack of qualified Human Resources (HR) and no logistics profile. These problems limit operational capacity in this area and, among other things, result in the incorrect application of procedures and routines.

In 2019, the Ministry of Health (MISAU) and stakeholders identified UNDP as a strategic partner for support and collaboration in different areas. That has included establishing collaboration building on UNDP expertise and potentialities to support construction or rehabilitation of warehouses, procurement, and supply management. Through the Ministry of Health, the Government of Mozambique has requested the support of UNDP to implement Global Fund Grants, under Technical Assistance modality (implementor of health infrastructure funded activities). In particular, the UNDP support was materialized as an HSS project (as described before).

The relevant component of the HSS project, in its wider context, is targeting interventions that enhance the quality of health services to the population at the national and local level living in remote areas in absolute poverty. Despite the public sector reform process underway, the logistics system remains highly centralized, resulting in excessive and unnecessary warehousing, handling, and transport costs, hindering the operational capacity of the SC and the system's capacity to respond to health problems. Looking at the network of regional center medical stores

(current and planned), the evaluation considers the Manica project as a strategic priority target. It fills an important gap towards ensuring better availability of medicines and health products.

On the other hand, the Health Sector Strategic Plan (PESS) 2014-2019 prioritized the Decentralization agenda of the health system. Within the Health System Reform and Decentralization agenda framework, the plan affirms the importance of access to medicines and medical products central to the plan. The plan described the availability of medicines and medical supplies as one of the biggest challenges for the National Health Service. Therefore, structuring the supply chain to better respond to the needs of a decentralized and expanding health system will be a primary objective for MoH under the reform agenda. The decentralization plan is a means to achieving greater equity in access to essential medical products and technologies. At the same time, the equity dimension was not considered in the project document as an important value that shapes such a regional medical warehouse's outcomes. Equity in access is still an important goal to the entire health system. Moving forward, UNDP and other stakeholders can provide targeted support to the Government to advance the Decentralization agenda in a meaningful manner. The evaluation found this support provided by constructing the intermediary medical warehouse in Manica as a well-informed decision to support the decentralization agenda in Mozambique. Strategizing the support to implement the PELF can benefit from a well-elaborated and aligned support plan to achieve coherent development agenda in the area.

In addition, according to the PELF, storage of medicines and other health products in Mozambique is currently facing the below major challenges:

- Several reviews of the supply systems have highlighted some of the weaknesses, including the infrastructure component and the low capacity of the Central Medical Store (CMAM), constitute risks that could significantly impact health services and health products quality and safety. This challenge is one of the major contributing factors to frequent stock-outs and pilferage at health facility levels.
- The vast majority of the local medicine stores have limited storage capacity while facing growing needs. Most of the medical warehouses need improvements, which range from small to large construction work and repairs. There is a district medical store in each of the country's 128 districts. In general, these medical warehouses have limited storage capacity, on average 45 square meters according to a survey carried out in 2010. The newly constructed intermediary medical warehouse in Manica comes with an additional 2000 square meters, and storage capacity of 1620 pallets - which is a significant advantage and addition.
- The current Mozambique medical storage facilities are divided into four levels and consist of regional medical warehouses, local medical stores, district medical stores, and health centers. The current total storage capacity of the Mozambique medical warehouse

network is 19,106 pallets. The plan to expand the regional medical warehouse in Beira and to construct the Manica intermediary medical warehouse is central to achieving the PELF objectives.

Within this context, the evaluation considers that the project was well-positioned to meet some of these challenges at their root causes.

In terms of alignment, the evaluation considers the project fully aligned to Mozambique's wider partnership environment. There is a consistency between the needs for the project, its prioritization within the development plan, and stakeholders' commitments to its objectives.

In general terms, the project contributes to UNDAF Outcome 8 / CPD Outcome 68. As emphasized before, the project supports the Government's decentralization policy, and it reflects different principles that guide the development agenda in Mozambique. The CPD in specific calls for 'All people benefit from democratic and transparent governance institutions and systems that guarantee peace consolidation, human rights, and equitable service delivery.' In addition, the project is one of the critical interventions that aim at reinforcing UNDP efforts towards the achievement of the UNDP Strategic Plan 2018-2021. Based on the outcomes from data collected for this evaluation, multiple partners confirmed the role of the project in strengthening the capacities at sub-national levels to promote inclusive local economic development and deliver basic services. Looking at the cross-cutting nature of the projects and initiatives sponsored by the health portfolio of UNDP CO, these are key principles that continued to guide the prioritization of different activities.

The Project Objectives/ outputs	Health sector plan Objectives/ strategies	PELF Objectives/ strategies	UNDP CPD
Outcome: improving safety, security, and storage conditions of medicines, vaccines, and other health products at the sub-national level.	The project contributes to - Increase warehousing capacity, along with the levels of safety for drugs and medical material.	Operational decentralization of CMAM to better respond to the challenges of ensuring the availability of medicines and other health products in National Health System - health units	The project contributes to UNDAF Outcome 8 / CPD Outcome 68: All people benefit from democratic and transparent governance institutions and systems that guarantee peace consolidation, human rights, and equitable service delivery.

Objective: strengthen the national health system by reinforcing the medical supply chain system management.	Logistics strategy – Improving warehousing, current number, new constructions and renovations, operational costs, and vehicles	The rational management of medical items requires a standardization that allows defining with accuracy what is needed, and, on that basis, the quantities needed. Having a National Catalog of Medical Articles will be a goal to achieve.	UNDP Strategic Plan 2018-2021 Workplan aims to strengthen national and sub-national levels to promote inclusive local economic development and deliver basic services, including HIV and related services.
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2. Level of involvement of local and national stakeholders in project origination and development

All interviewees and stakeholders who responded to the online survey have indicated close and consistent involvement and engagement in the design and implementation of the project. In such a project, the higher the involvement, the better the stakeholder's ownership of the project, which is essential for good outcomes of the project. UNDP project team has been in the continuous engagement of different stakeholders through different means and frequencies (depends on the nature of issues at hand). It is recommended that UNDP continues to align the composition of the boards that oversee similar projects to already existing structures. As indicated during the interviews, there is already a National Taskforce that supports the implementation of PELF at the national level that is composed of almost similar stakeholders. Building on exiting coordination and engagement platforms is essential to increase efficiency and strengthen the capacities in the long term.

3. Review of the project ToC and interventions map indicates lessons learned incorporated

The Theory of Change (ToC) validation is an essential part of any process and outcomes evaluation. Besides the logical framework of the HSS project, it was essential to assess the robustness of the ToC by incorporating the appropriate level of risks analysis and solid assumptions. These aspects are essential to assess if the project was kept dynamic during the implementation by incorporating the frequent changes that make the project relevant at different stages. The evaluation confirms that the ToC was technically sound as set at the design stage and during the project life cycle, including the closure stage.

The project document identified the next logical framework to implement the project:

- **Outcome 1:** Reinforced medical supply chain system management.
- **Output 1:** Improved safety, security, and storage conditions of medicines, vaccines, and other health products at the sub-national level.
- **Activity 1.1:** Construction and Equipment of Manica Intermediary Medical Warehouse.

Multiple project documents captured the following issues. These are reflecting the robustness of the ToC:

1. The following **assumptions** were set clearly at the inception stage:
 - Stakeholders (MoH, CMAM, and Ministry of Public Works) understand and subscribe to the objectives and long-term goals of the project; and contribute to achieving the desired results.
 - The government will be able to retain all the capacity created with the support of the project since the project is aligned with the sector's human resources development plan.
 - A strong, committed, and inspiring leadership of the UNDP Country Office guarantees the financial and technical support the project requires to achieve results effectively.
 - Technical expertise with the knowledge and experience required to achieve the desired results is available for UNDP CO and can ensure innovative approaches and highly relevant contributions to the process.
 - Effective coordination between UNDP programs, other UN agencies, and development partners ensures a collaborative approach, promotes synergies, and avoids duplication of effort.
 - The project will face primarily institutional and financial risks that might negatively impact the delivery of results.
2. Best practices from other countries supporting sustainable healthcare infrastructure and health system strengthening will be applied through learning and sharing global knowledge with project partners and stakeholders. That was particularly important as the project was the UNDP CO's first opportunity to support the beneficiaries of this project.
3. The project's design and implementation have benefited from sharing best practices implemented in other countries (Zimbabwe and South Africa specifically). Engagement with other UNDP country offices, through the south-to-south collaboration, was a fundamental approach to ensure translation of knowledge and skills that take the similarity of contexts into account. The utilization of technical expertise, especially in engineering relevant to the project, was a success factor that ensured the relevance of the country's support through this project.

4. The project envisages the transfer of knowledge and skills to key personnel of the MoH at the national, regional, and provincial levels. Technical and advisory support from UNDP Global Health and Development team was channeled through the project design and implementation to ensure the potential benefit and knowledge from the other health-related activities implemented at UNDP corporate level.
5. Knowledge and lessons learned backed by credible evidence will be explicitly used to design the approach used by the project. The project has been designed in conjunction with the Health Implementation Support Team drawing on UNDPs experience.

Despite some of the points highlighted above, inadequate incorporation of assumptions in the project plan and timelines was one of the gaps identified as part of the evaluation. It seems that the project team has put greater emphasis on defining the final design of the warehouse than on planning the actual construction process. That has led to many unanticipated delays and challenges. Some of these challenges and risks included the following:

1. Significant delay in importing and transporting goods to the country for many reasons, including the impact of the COVID-19 pandemic.
2. Extreme fluctuation in market prices and unavailability of products affected the procurement plan of low-middle construction companies and their ability to prevent stock-outs due to the closure of borders.
3. High rotativity of human resources in UNDP due to travel restrictions and Visa policy, with a gap in core positions of UNDP Operations and Engineering Management, led to insufficient HR for project implementation contracted at UNDP.
4. Complete restructuring of the modality of work with team elements located in different continents and time zones.
5. The political situation deteriorates, and the government cannot adhere to long-term health strategies due to the turnover of key decision-makers and changes in priorities.
6. Overall fiscal space shrinks, limiting the state's ability to take over fully operational costs and sustain critical health services.
7. Government internal review and approval procedures could cause a delay in the Project implementation.
8. Contractors' failure in meeting contractual obligations/deliverables on time and budget.
9. Civil Works specifications are incomplete, leading to a large number of variations.

A key lesson learned was the importance of incorporating reasonable assumptions about the conditions and external requirements for such a project before committing a timeline with the beneficiary. Government regulations were identified as the most important driver of increasing complexity; next is bureaucracy and political risk. Construction permits were also cited as a

source of delays and as a constraint in other projects, namely TB component. On the other hand, the Manica project provided a good opportunity for the UNDP team to study all aspects and understand how to avoid backlogs in granting permits and avoiding delays in future projects. On the other hand, UNDP's internal procurement process has been cited as a source of delay and has contributed to overall construction delays. An appropriate balance is required between offering speedy approval processes while managing all stakeholders' contributions.

The evaluation found that the design of the project has reflected robust risk analysis adopted for similar projects. In addition, it was clear how results achieved by partners will complement the project's intended results, and a communication strategy is in place to communicate results and raise visibility vis-à-vis key partners.

4. Perceptions of stakeholders about the suitability of project design and complementarity to its wider results matrix

All of the key informants interviewed for this evaluation have indicated that the project design and added-value have been suitable and fit-for-purpose when considering the wider project context. In particular, stakeholders from the Government departments were appreciative of UNDP's approach to complete the project.

It is imperative to note that this evaluation did not cover the warehouse design as part of its scope – this was not part of UNDP funded activities. The performance evaluation of the warehouse was not technically evaluated in terms of assessing the overall warehouse structure; sizing and dimensioning the warehouse and its departments; determining the detailed layout within each department, selecting warehouse equipment; and selecting operational strategies. That is an important learning activity that could be completed immediately following this evaluation to inform the next similar construction efforts. Performance evaluation is important for both warehouse design and operation. Warehousing is an essential component in any supply chain. It is recommended that the performance evaluation methods include benchmarking and any suitable analytical models. Medical Warehouse benchmarking is systematically assessing the performance of a warehouse, identifying inefficiencies, and proposing improvements.

An essential component of evaluations of such kinds of projects requires 'Project Functionality and 'Fitness for Purpose.' Project functionality and fitness for a purpose are usually associated with project effectiveness measures. Project 'functionality' is one of the success measures in the post-construction phase when the project is finished and delivered. Project functionality correlates with the expectations of project participants and can be best measured by the degree of conformance to all technical specifications. It will benefit the Principal Recipient the MoH to conduct a functionality analysis in the next period to gather technical information if the design

functionality is good for replication. This technical assessment can generate good insights into the operational aspects of the relationship between design and the purpose of intermediary medical warehouses.

5. Evidence that needs assessment has been utilized in the project's design and implementation

As reflected in the project document, the initial assessments of the project and its viability indicate a good analysis of the needs for the medical warehouse project. Besides reflecting on the supply chain needs and associated health system issues, the project document has reflected on the end beneficiaries. The project document stated the following “... *the targets groups are identified in the context of TB and HIV disease components, to which the project is related. The context analysis, with evidence of source of data, is described, and refers to the geographic aspect, gender and age, key populations and vulnerable groups.*”. At the same time, the project document has crafted the needs in multiple dimensions and taken into account different levels of the needs.

We know that the geography of Mozambique is unique and has challenging interiors (e.g., mountainous, limited road connections, heavy rainy season, natural hazardous), which are all considered limiting factors to achieve sufficient supplies distribution systems. The government adopted an efficient approach for importing, distributing, and storing medicines and other health products by aligning that to different ports that serve different country areas. Accordingly, Maputo was assigned to serve the southern area, Beira to serve the central area, and Nacala to serve the northern area. MoH's investment program in the area of drug logistics in the public sector has been established, which has the support of cooperation partners, already includes the concluded extension of the Zimpeto medical warehouse in Maputo and the rehabilitation of regional medical warehouse in Beira. The definition of the number and exact location of future intermediary medical warehouses was the object of a specialized study that consider different factors. The modeling exercise has considered some criteria, including the roads and junctions, support services, main health network, transport distance, needs for storage space, and frequency of transport.

The selection of the location for the Manica intermediary medical warehouse project was well reflected in different documents, which makes it relevant to the true needs of the communities. In addition to reducing transportation costs, the Manica medical warehouse location is strategic in different ways. It was determined based on major health facilities, supply points, the volume of products moving to or from supply points, and these facilities. Local geographical conditions and transportation infrastructure also played a significant role in determining the location. Moving forward, UNDP may continue to align its development priority actions on HSS to the government prioritization of the different zones depends on the actual needs.

In conclusion and building on all of the dimensions discussed above, the evaluation found the project is highly relevant and aligned to stakeholders' needs, properties, and objectives in Mozambique. Lessons learned may inform future partnerships on similar projects.

3.2. Effectiveness

Within the scope of this evaluation, *Effectiveness* was defined as the extent to which the project's objectives were achieved or are expected to be achieved. Effectiveness construct was used as an aggregate measure of the merit or worth of the project in achieving its major relevant objectives in a sustainable fashion and with a positive institutional development impact. The evaluation sought evidence indicating that the project had achieved its objectives, supported by the alternative's analysis and other means when it was feasible.

The evaluation concluded that the effectiveness represents one of the project's key strengths judging through the existing set of performance indicators and targets. This section of the report provides further details on this important area.

The evaluation of Effectiveness was guided by the following indicators (in purple below) that corresponded to the evaluation questions, and it was evaluated accordingly (as indicated in the ToR); these include the following:

Level of project implementation targeted outputs and outcomes

The evaluator found that the project has achieved its expected output that was set at the design stage. Additional components of the project were added through the project implementation process at the request of MoH. These variations, although verified add value by the different parties as documented in project board meetings, may have contributed to some delays in the implementation but have not affected the ability of the project team to deliver the desired output or results. Two main result areas will be analyzed below (1) the finalization of the warehouse infrastructure and (2) the capacity building component.

1. Finalization of the warehouse infrastructure:

One of the main advantages that stakeholders appreciated in UNDP's role was establishing clear, fair, and transparent procurement procedures that ensure all parties are equally aware of project dimensions, criteria for evaluation, and the timeline and stages of the procurement process. These aspects were crucial to achieving effective implementation of the warehouse when UNDP was compared to other alternative entities that could have been selected to manage the project. All of the stakeholders interviewed or surveyed have agreed with this aspect of the project evaluation.

The Ministry of Health stakeholders believe that extensive communication and social mobilization efforts have yielded the desired results, and lower-scale efforts would be sufficient to sustain the achievements. The CMAM technical leadership was very satisfied by the project's outputs, and the engagement has resulted in better transfer of the know-how at the technical level.

It has been envisaged that the UNDP and the Government's financial agreement has been considered an important vehicle to facilitate the implementation of additional components and expansion of the scope of planned projects. The quick demonstration of the values brought by UNDP to the implementation of construction projects (covered by the agreement) has resulted in gaining trust and a smooth agreement between the two parties to mobilize additional resources, where needed, to enhance the implementation of the HSS project. To meet the challenge, the project team has advocated for additional human resources needed to support the implementation.

Close cooperation was considered essential to increase adherence and accountability to project results; the schedule of activities is adjusted to ensure the effective and timely implementation of project activities in the project target areas. This aspect will continue to be an essential component of any future similar projects, and it is crucial to address it through sustained solutions in the long term. The project under evaluation was revised jointly with MoH verified and validated for future use as a model (project type) for intermediary medical warehouses construction to reinforce the implementation of national reforms (with 28 additional intermediary warehouses targeted in the next period). Extending this model to the rest of future projects will enhance the learning process for successful implementation. A formal capacity-building program relevant to the construction and management of intermediary warehouses will be an important foundation for successfully implementing the additional warehouses; and respective advocacy to donors is important to secure this component funded in future projects.

2. *The capacity building component:*

The entire HSS project has been developed to support the Ministry of Health's capacities through different workstreams. In the long term, the UNDP role will be instrumental in building MoH and CMAM staff capacities in the supply chain management area. The project's design has considered the findings of the initial capacity assessments done in areas related to supply management. This strategy to strengthen these capacities of national institutions (i.e., CMAM) was based on the results of these capacity assessments. However, this component was not an intended result area in the initial scope of the project, neither fund was envisaged for that.

On the other hand, the capacity of local authorities and duty-bearers by the time of commencing the project has been considered limited to support and enable results expected within the project. Ensuring successful know-how transfer across phases was essential. That has been achieved by transferring construction experts temporarily to the engineering team or using the same project manager across the engineering and construction sub-phases. It usually entails new delivery methods with the early involvement of the contractor or an approach where a single company is responsible for the design, engineering, and construction.

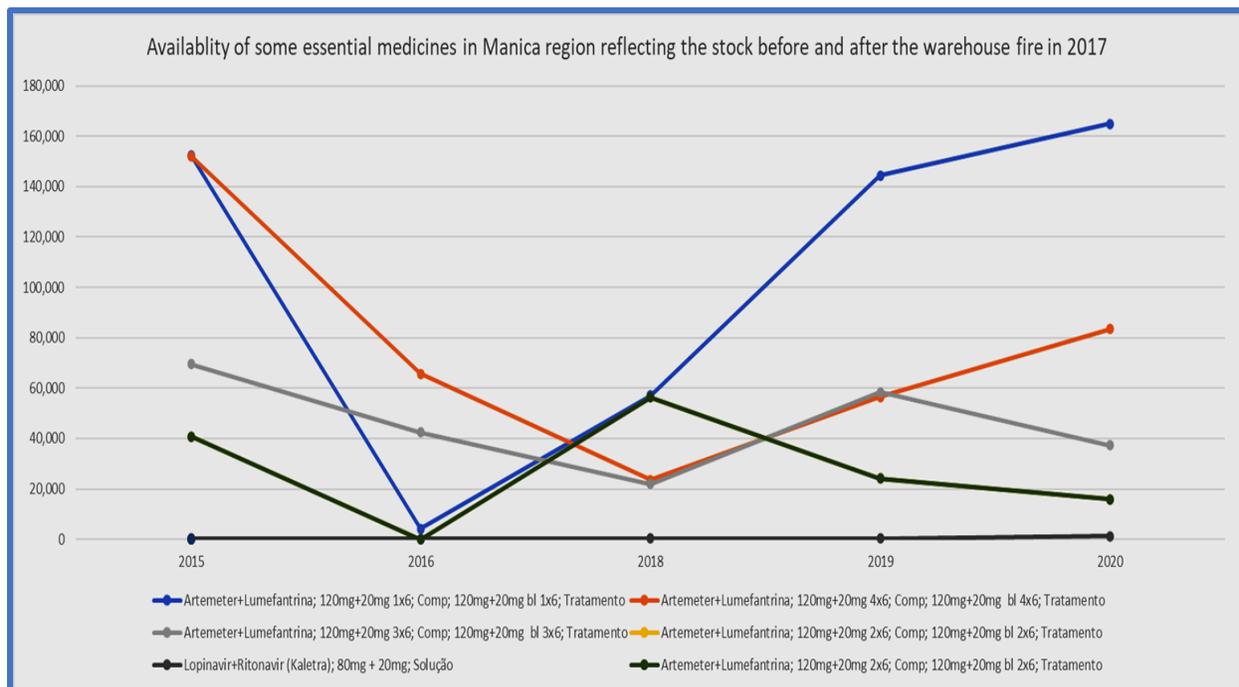
While this project under evaluation has no funded component to support structured formal training or capacity-building activities, it is recommended to adopt such intervention as part of a wider package of offering from UNDP in the future. As reflected in the national strategic plans, some priority areas could be targeted by UNDP to complement the development of infrastructure and to advance the decentralization agenda. For instance, training supply chain managers in priority areas is a short-term solution to cover urgent gaps. Better integration of medical university curriculum and in-service training is considered a long-term solution for capacity building and sustaining the required level of knowledge and skills.

Despite the above, insufficient knowledge transfer from the project was a concern for some interviewees. Although each construction project will have its unique characteristics, construction processes are repeated in their essentials from project to project. Lessons learned from the Manica intermediary medical warehouse project could therefore be usefully applied to future projects. This process needs to be institutionalized by the UNDP country office. Such experience would be a significant advantage to UNDP to craft the offering on strengthening the supply systems in the public health sector in Mozambique. Additional areas for capacity building and training were identified during the project implementation and identified for the next period. What is essential is to capitalize on the existing capacities already available at the MoH or created thanks to the project in Manica.

2. Expected outcomes relevant to supplies management

While the construction of the Manica intermediary medical warehouse itself has no control per se over the availability of the medicines, the disease management programs strive to ensure the best availability that has the greatest likelihood of producing the intended outcomes by utilizing the existence of the medical warehouse. As such, the presence of the warehouse is a precursor to achieving the outcomes related to the availability of medical products (i.e., the availability of medical products could be attributed to the establishment of the warehouse). The fire of the warehouse in Manica in 2017 has resulted in apparent disruption of supplies in the region.

The figure below reflects the sharp decline in the availability of some essential medicine following the fire in the warehouse in Manica. The region was able to adjust gradually following the incident. It is anticipated that the newly constructed medical warehouse contributes significantly to achieving better outcomes quickly.



3. Level of progress toward project indicator targets relative to expected level during the implementation

As the project is mainly a construction and equipment activity, there are not many indicators that could be adopted to assess its output and outcomes. What makes a medical warehouse project effective is if it is well designed, well located, well built. The use of technology and mechanical support systems is a great advantage.

Indicator	Target	Actual performance
Number of newly constructed regional medical warehouses	One warehouse by the end of 2020	One warehouse by the end of 2020, with the provisional delivery document available.

The project agreement covers the entire HSS project, including the HIV component (i.e., the construction and equipment of the Manica Intermediary medical warehouse). There have been six amendments to the project agreement during its course of implementation. However, not all of these amendments were related to the HIV component. Below is the summary of these amendments. The evaluation covers only the amendments that are relevant to HIV project.

Table 2: Summary of the amendments of the entire HSS project agreement

Amendment	Date	Summary of rationale
1	4 November 2019	Increase the project financial ceiling from USD 6,311,156 to USD 7,751,531 and adjust the payment schedule accordingly. - Updates to UNDP's contract were made. - There was no extension of the delivery date beyond 31st December 2020
2	6 April 2020	Increase the project financial ceiling from USD 7,751,531 to USD 10,824,315 and adjust the payment schedule accordingly. - Updates to UNDP's contract were made. - There was an extension of the final delivery date to 31st March 2021 to allow time to complete the renovation of the Beria Medical warehouse (i.e., not directly linked to Manica warehouse).
3	15 July 2020	Note: this amendment was only to increase the financial agreement because of COVID19 funds and was not related to HIV. Increase the project financial ceiling from USD 10,824,315 to USD 11,105,178 and adjust the payment schedule accordingly. Installation of laboratory modules to strengthen the capacity of COVID-19 testing was requested by MoH and was included as part of the financial agreement.

		- There was no extension of the delivery date beyond 31st March 2021.
4	3 December 2020	Increase the project financial ceiling from USD 11,105,178 to USD 11,728,471 and adjust the payment schedule accordingly. The amendment was driven by additional work scope changes in the Manica warehouse and additional work required on COVID-19 related laboratory works. - Updates to UNDP's contract were made. - There was no extension of the delivery date beyond 31 st March 2021.
5	15 April 2021	- There was no amendment to the financial ceiling of the project. - There was an extension of the delivery date to 30 th June 2021 to allow additional time to complete the final works on HIV and TB projects.

Of particular importance, the evaluation looked at the drivers or motivations behind these amendments to assess any potential lessons learned from such changes. At the same time, it was important to assess if these changes have resulted in any delays or presented any basis for inefficiencies in managing and implementing the project. The evaluation found some of the key aspects that have contributed to these changes:

- The initial project design and work plan were adequate and feasible; however, the impact of the COVID-19 epidemic was inevitable and had its role on the whole HSS project implementation. The original scope did not include a separate equipment component or a waste management component, which is now a distinct UNDP sub-project. Now it's spreading to two more sites.
- The aspects related to contractual arrangements with the service providers impact the effectiveness of the implementation.
- Donor programmatic and financial coordination: In collaboration with National Logistics Working Group, through the Gavi, 02 cold rooms were acquired by UNICEF to be installed in the Medical Warehouse Chimoio.

4. Perceptions of stakeholders about the inclusiveness of the process for project design and implementation to its wider partnership space

UNDP's partnership with the Ministry of Health is evolving, though not new on health interventions in general. However, the scope of the HSS project has brought a new dimension to this partnership. UNDP continuous engagement with the Ministry of Health, CMAM, and the

Ministry of Public Works was key for accomplishing the project outputs. The evaluation survey revealed that stakeholders have very positive perceptions about the inclusiveness of project design and implementation in its wider partnership space.

Respondents were particularly appreciative of UNDP's expertise and internal resources in managing construction works, especially through the Global Fund grants. This expertise, which has been brought on board, has enabled a more effective project implementation. While other entities could have been selected for such intervention, UNDP's partnership has been considered within its entirety as a development partner to the government in other areas (i.e., beyond the project scope). As such, this dimension is considered one of the success factors that contributed to the effective implementation of the project.

In this construction project and its development, MoH and stakeholders have a favorable impression of UNDP. They have a positive experience in the services offered with a good quality finished product tailored to the country's needs and stakeholders' expectations. In this respect, maintaining UNDP's positive image and reputation could be an effective measure of project success to contractors and project consultants by creating good results in performance while implementing projects development. A positive reputation may be further strengthened by working closely with the project management team at MOH central levels, identifying opportunities for operational improvements, exploiting new technologies, identifying management information requirements and resources constraints in offering well-defined services, and delivering an expected product that fits the MoH's business objectives. These aspects are very fundamental for the sustainability of the project as well. Extending UNDP's development support should be extended to the post-construction stage to support the operationalization as well. This issue is critical, as know-how of effective storage and logistics management has been identified as a gap or area for intervention under the PELF. The evaluation of project success and the level of success criticality in the development of construction projects are according to the specific requirements and priorities of different project stakeholders and will vary from project to project.

Operationally, UNDP has systems in place that are established already to ensure required resources are available for identifying and assessing contractors and for overseeing the contractors once engaged. This technical advantage has been fundamental to assure the technical role that UNDP can play to support the project's design, implementation, and monitoring. Linked to that, the effectiveness of project implementation has been positively influenced by UNDP's experience in managing risks associated with such projects. The existing legal and administrative agreements with the Government of Mozambique have played an instrumental role in managing the implementing contractors that were assigned to different workstreams to implement the project. That was another important factor that has positioned the project for successful outputs.

Province level administrations of the selected areas were directly involved in project implementation. The main role of the local administrations was to support the sustainable socio-economic status of the areas, improving the welfare of people living in these areas, development of socio-economic infrastructure, support with licensing requirements and in-country specific processes. UNDP has established a fruitful collaboration with the local authorities by building and strengthening their capacity in strategic planning and budgeting, management and leadership, resource mobilization, doing business, and improving the socio-economic infrastructure, which is expected to be used in project implementation.

5. Adequacy of implementation structure and mechanisms for coordination and communication

The Project Board (PB) has been established since March 2019 as a central element of the project governance. Its major role is to provide strategic oversight and direction of the program to ensure that it retains strategic focus and delivers the agreed benefits. The PB focused on providing the overall guidance and strategic direction to the project, including development, periodic revision, implementation of the project strategy, and adaptation of global policies and best practices to country circumstances. The PB has been also responsible for carrying out monitoring and progress assessment of the activities. On the other hand, the PB has served as a platform for the major stakeholders of the project to discuss the overall progress of the project and make strategic decisions and recommendations to be implemented by the project team. Within this frame, the PB was an instrumental coordination and management mechanism to ensure effective partnership towards achieving successful resources mobilization for project outcomes achievement. In addition, several technical working groups (TWGs) have been established to support the implementation of different workstreams related to the project. In addition, and as will be explained below, the role of UNDP PMU was very fundamental for ensuring successful implementation.

3.3. Efficiency

Efficiency was defined as a measure of how economic resources and inputs (funds, expertise, time, etc.) are converted to results within the scope of this evaluation. Given the nature of the project, the evaluation judgment applied to the input-output link in the causal chain of the project. The evaluation assessed project outputs measures – qualitative and quantitative – and indicates favorable outcomes and progress compared to suitable benchmarks and standards.

To evaluate the success of the project management, the relative project management efficiency needs to be defined. For this evaluation, UNDP's internal standards and or external benchmarks could be used for this purpose. The evaluation findings showed that the material and financial resources invested in the project (human resources, thematic capacity strengthening interventions) are adequate and mostly sufficiently for reaching the initially planned results. Given the nature of the project, mainly the construction and equipment of infrastructure, the indicators (in purple below) to judge the efficiency of project implementation included the following:

1. Perceptions of stakeholders about the project efficiency

Research in development construction projects revealed that the level of success criticality regarding project efficiency performance is directly linked to the specific requirements and priorities of different project stakeholders. Judging the overall success is a commutative assessment of the project's relevance to stakeholders' needs and priorities. The feedback from the interviews and the online survey has confirmed that all stakeholders have favorable opinions about the efficiency of the implementation. However, there were some concerns regarding the delays that occurred and the slowness of the implementation process.

2. Financial delivery rate vs. expected rate

The main factors in evaluating construction projects are time, cost, and quality. Cost evaluation is conducted by comparing the actual cost with the planned costs: if there is a deviation, the reasons must be identified. Many projects suffer from cost deviation; cost underestimates are more common than are cost overestimates in construction projects. Project cost performance is used to show whether the project adheres to the agreed budget. As standard measured benchmarking, a project with a percentage cost overrun above 20% is regarded as a poor project in terms of a cost-performance project between 10% and 20% regarded as an average project. In terms of cost performance, a project whose percentage cost overrun falls below 10% is regarded as an outstanding project (Samuel I Egunatum 2017). Using these standards, the project stands with an outstanding performance. The budget of the warehouse project was 6,252,385.57, which represents 53% of the total HSS project (11,728,469.26).

According to an evaluation conducted by UNDP in 2019 to its CPD of Mozambique CO, the evaluation found that *"... a total of 12 projects were implemented between 2017 and 2018. The budget amounted to \$7.3 million and expenditures to \$6 million, an 82 percent execution rate"* (UNDP 2019). With a final execution rate of 90.1%, the project under evaluation has achieved an overall good performance compared to the results from the mentioned evaluation.

3. Direct and management costs as a percentage of the total cost

The following table summarizes the project's finances disaggregated by cost categories (all figures are in United States Dollars).

Table 3: The Project Cumulative Performance Summary

Activity	Description	Total Budget	Total disbursement expenditures	+ Total Variance	% performance
All project	Total Disbursements	6,252,385.19	6,252,366.64	18.55	100.0%
Activity 1	Construction of medical warehouse	4,268,415.21	3,847,485.92	420,929.29	90.1%
Activity 5	Supervision to warehouse construction	311,349.54	261,704.99	49,644.55	84.1%
Activity 7	Environmental Impact study	13,886.50	13,886.50	-	100.0%
Activity 6	Incinerator	345,000.00	326,640.00	18,360.00	94.7%
Activity 8	Waste management	9,101.06	9,061.87	39.19	99.6%
Activity 13	HSS Final Evaluation	22,400.00	9,152.00	13,248.00	40.9%
Activity 4	Direct costs	1,041,424.59	946,152.61	95,271.98	90.9%
GMS	Indirect costs - GMS 4%	240,808.66	216,468.09	24,340.57	89.9%
Delivery	Total delivery	6,252,385.56	5,630,551.98	621,833.58	90.1%

In many projects, construction's share of the total cost over the lifetime of the warehouse can be as high as 10- 50%. This cost component is largely determined early on during the design and engineering phase. At that early stage, it is still relatively easy and inexpensive to make changes. As indicated in Table 3 above, there was an accurate estimation of the direct construction costs of the project (which was accounted for around 68% of the total cost). There was no significant variance for this specific component of the project budget.

Concerning management cost (direct and indirect), it represented around 21% of the delivery cost (i.e., 1,162,621 out of 5,630,552). Specifically, the direct management cost represents 17% of the total delivery cost. During the project implementation, reviews by the UNDP PMU indicated a high level of direct costs, which has been rationalized to identify potential savings. The PMU has worked to ensure that management costs are maintained to a minimum, striking a balance between sufficient and skilled human resources and reasonable costs, aiming to optimize the achievement of program goals and objectives.

4. Cost of project inputs and outputs relative to norms and standards for UNDP in the country or region

The evaluator aimed to assess the cost inputs' reasonableness (both as percentages and absolute figures) using suitable standards or references. The attempt was to benchmark the activities presented in Table 3 above and judge whether the performance is acceptable. However, no suitable and relevant standards could be identified for this purpose, and this analysis was not conducted as part of this evaluation.

5. Factors associated with the funding landscape that influenced the funding levels of the project

The objective of construction planning and controls, a basic project management function, is to ensure a well-coordinated and successful project. Before presenting information on the different storage systems, project managers should (and are expected to) review many important considerations and parameters. The planning process can be demanding, but time spent in planning can educate all concerned about the challenges to be faced. A long-range strategic plan should accompany any major investment related to a warehouse facility. It can provide direction and a vision for a facility's operation that will produce long-term benefits by ensuring that your facility has the right equipment. The stakeholders believed that the assessment and planning devoted to the warehouse have benefited from the existence of the logistics masterplan and the PELF. Enhancing the efficiency of the warehouses' network will only be achieved after introducing multiple warehouses into operations. However, the current financial landscape may not allow for large-scale implementation of similar projects in the near future. Hence, lessons learned from the Manica project need to be identified, and sources for reducing the cost and achieving better efficiencies of scale should be identified before the next phase of the implementation.

6. Evidence on value for money gained because of the close coordination and emergence of efficient utilization of resources

It is well anticipated that the only way that prices could be seriously reduced, value for money significantly increased, and the out-turn costs kept within budget is by the elimination of unnecessary costs caused by the ineffective and inefficient utilization of labor and materials. However, these unnecessary costs can only be eliminated if their causes can be located. UNDP and stakeholders must devote efforts to identify the sources of value for money and eliminate avoidable and unnecessary costs for any future projects. Performance measurement provides how these unnecessary causes of waste can be identified to know where to focus its efforts. Furthermore, assessing the efficiency of such interventions generally requires comparing

alternative approaches to achieving the same outputs. That will be easier for some types of intervention than for others. Applying this approach will help partners develop robust investment cases that can drive additional investment in this strategic area within the health system.

7. Quality and adequacy of financial management procedures

The efficiency of a project would only be achieved through having a standard system and methodology put in place. The efficiency of such construction projects involves utilizing resources, which may be represented by the ratio of the resources expected to be consumed divided by the resources consumed. Hence, the quality of the inputs and the outputs is an important consideration in assessing efficiency. Within the context of the HSS project, UNDP already has existing quality procedures that have been utilized to govern the project. Given its institutional capacity and expertise, it is anticipated that UNDP's systems and procedures played a supporting and favorable role in such development projects. Stakeholders, especially from CMAM leadership and Global Fund PMU (i.e., the MOH as PR), considered the UNDP's systems and procedures as the main strengths contributing to UNDP's success in implementing the project. UNDP has multiple measures of control and standards that have allowed greater control of financial resources and project management. The project can be thought of as efficient. It used the least costly resources appropriate and available to achieve the desired outputs, i.e., deliverables, in terms of quantity and quality. In addition, the challenge of fiduciary risks and corruption has been cited by interviewees as one of the reasons why UNDP has been selected as a solution to address this challenge. According to Transparency International and the IMF, Mozambique scores 25/100 and ranks 149/180 in corruption perceptions. This is not unique to Mozambique, as, in many countries, corruption remains one of the greatest barriers to economic and social development.

8. Planned and actual level of human resources available

The continual improvement and the experience acquired by the people involved in the specific projects have been reflected in the project management efficiency values. UNDP CO managed to mobilize an adequate level of expertise to support the implementation of the project. Despite some challenges encountered during the implementation, the restructuring of the technical team enabled UNDP CO to respond to the complexity of the construction works. UNDP formulated a PMU composed of 5 full-time staff (international project manager, and local staff of a civil engineer, a UNV, and finance assistant). A Procurement Assistant (50%) was assigned to the project. In addition, the second amendment of the project agreement provided additional resources to recruit one civil engineer, one project associate, and one procurement specialist. Through the

amendments, UNDP was enabled to mobilize specialized consultants to support some of the critical milestones of the construction process. Direct costs covered the hiring of a vehicle, the expenses related to fuel, and other general operating expenses such as field visits, communication, office rent, and office supplies.

9. Project milestones on time

The total cost of a construction project varies inversely with the completion time starting from a certain point which can be defined as the minimum possible completion time of the project. This minimum time, usually determined by technical matters, can be achieved through special technology, reduced manufacturing time of equipment, and acceleration of works using additional recourses and overtime. The likely resulting increase of the timely completion leads to a relative reduction of the project's cost up to a certain point where the cost starts to rise again due to the indirect cost and the reduced productivity of the human resources (the same result in longer time). Time performance is calculated for the percentage increase in the completion period over the planned completion period. Those projects whose percentage of delay falls below 10% are regarded as outstanding in terms of time or schedule performance; those that fall between 10% to 20% are regarded as an average project. In comparison, projects with schedule performance above 20% are regarded as a poor project. Using this standard, the project achieved an average performance with a 12.5% delay (i.e., delivery of the project after six months beyond the scheduled delivery date). Reasons for this delay were discussed in different sections, including the addition of new components that were not originally part of the scope.

10. Planned results affected by delays

The government's internal review, approval procedures, and some internal processes within the UNDP system have all contributed to delays in completing procurements on time. In addition, delays in securing the required approval of the relevant project documents have impacted the implementation negatively. Furthermore, other constraints such as the delay start-up of ab equipment (due to long delivery time of special equipment) may impact the scheduled time completion of the project. For instance, one of the lessons learned is the importance of avoiding starting dates during the rainy seasons, which has contributed to delay in the commencement of foundational works. That has resulted in increasing the direct costs of the project associated with salaries and related management costs. This included main the costs associated with human resources.

11. Quality and adequacy of M&E procedures (in line with UNDP and national policies, legislation, and procedures)

Construction is an information-intensive activity, and the success of a construction project is dependent on the availability of accurate and timely data. Establishing M&E systems for managing such projects provides opportunities for the project implementing agency to meet the requirements of donors. The UNDP described M&E as the major management function hence, it is a good management tool that can be relied upon to improve projects' performance. However, interviewees indicated that M&E practices (including structured indicators-based reporting in accordance with a pre-set monitoring plan) were given less recognition in the project execution processes. Hence, the importance of M&E in the realization of project success can't be overstressed. M&E practices are important in managing project scope, time, cost, project quality, human resources, communication, and risk. There is a need to ensure assigning a dedicated M&E officer within UNDP CO in a project setting to help enforce M&E practices that lead to a successful project. The importance of an interactive communication process during the various stages of construction projects is needed to facilitate effective coordination throughout the project lifetime and provide sufficient information about the project to the appropriate stakeholders. Building on existing M&E system as per the project document to enable more efficient workflows, also at level of communication and coordination of contractors - is critical for future projects.

In conclusion, the project implementation was considered efficient as it incorporated the following criteria as part of its implementation:

- Deliverables achieved on time and budget (to the extent possible).
- The overhead cost is as low as possible.
- Appropriate resources acquired with due regard for relevant economic measures.
- Implementation decisions were made by the architect and engineers on the implementation levels as close to where the services are delivered.
- Duplication of resources was addressed and avoided.

3.4. Sustainability

Within the scope of this evaluation, Sustainability was defined as the continuation or likely continuation of positive effects from the project after it has come to an end and its potential replication. UNDP-supported projects are intended to be environmentally and institutionally, financially, politically, culturally, and socially sustainable. The evaluation sought evidence that suggests the project's benefits are likely to continue after the handover of the project to MoH. It will be maintained per relevant guidelines (demonstrated in leadership commitment, financial and policy measures).

The evaluation has focused essentially on three aspects of economic and financial performance. Firstly, the cost-effectiveness of the UNDP strategy to implement the project (see section 3.2). Secondly, investments' economic and financial benefits are compared with the funds and resources spent (see section 3.3). Finally, the financial sustainability of operations in the future to explore whether funds are or will be sufficient to cover future operations, maintenance, and depreciation of investments.

Many indicators could be used to indicate the level of sustainability anticipated following the completion of the project. The evaluation focused on the following indicators (in purple below) based on the questions indicated in the ToR:

1. Level of gains in institutional capacity and its sustainability

In terms of institutional sustainability, the project was geared towards institutional capacity development of the key actors, i.e., CMAM staff in particular. The evaluation findings show that the institutional and individual sustainability perspectives are favorable, as CMAM leadership was satisfied by the hands-on approach that UNDP adopted during the implementation phase. The approach contributed to better knowledge transfer that will benefit the implementation of the PELF beyond this warehouse construction. As stated before, the UNDP partnership with the Government would benefit from a more comprehensive approach in setting a package of support to the implementation of the logistical plan that ensures robust and sustained capacity (both as infrastructure and institutional skills to develop and manage these infrastructures). Training of supply chain managers in priority areas is a short-term solution to cover urgent gaps; better integration of medical university curriculum and in-service training is considered a long-term solution for capacity building and sustaining the required knowledge and skills. In addition, it is important to devote attention to aspects related to managing a reliable Logistics Management Information system (LMIS), electricity supply for cold chain maintenance services, and other technical aspects that enable effective management of the warehouses.

In addition, and as stated before, it is essential that all future similar projects continued to be coordinated under the umbrella of the National Taskforce that supports the implementation of PELF at the national level composed of the key stakeholders. Adopting such an approach is essential to ensure an integrated development effort that is sustained and built on existing national capacities.

2. Policy sustainability

In terms of policy sustainability, the project mostly did not focus on influencing policymaking; rather, it is an infrastructure intervention. This scope has influenced the conversation around the sustainability dimensions covered through the evaluation. Specific dimensions were considered

to be included within the scope of the evaluation, including the Government's role in the post-closure phase, anticipated financing sources to run the project, knowledge gains by the end-users, and other aspects related to socio-economic gains beyond the establishment of the functioning warehouse. The advocacy of UNDP and the PR the MoH for including the maintenance costs (in broader terms) as part of the annual government budget is considered a crucial process that goes in parallel with providing technical assistance to the Government on implementing the project. UNDP shall continue its efforts to support future investments in such projects and their maintenance.

In a particularly challenging year during the COVID-19 pandemic, close cooperation with the Ministry of Health, as well as collaborative monitoring and decision-making, enabled prompt problem-solving and attainment of projected outcomes in line with donor expectations. Through the Gavi, two cool rooms were purchased in cooperation with the National Logistics Working Group and placed in the Medical Warehouse Chimoio. With financing from GFATM, UNDP is proposing a complete rehabilitation project for the Administrative building, including demolition and construction of a Medical Warehouse in Beira city, Sofala province, with a capacity of more than 5200 pallets and cool rooms for vaccinations. Furthermore, UNDP intends to build a second incinerator in Nampula to serve the North Region. UNDP is standardizing the equipment and adding the required National guidelines in accordance with current policies homologated by Government for appropriation and sustainability, thus the toolkit and materials will be produced under Gavi TCA.

3. Role and level of the Government commitment in the post-closure phase to sustain project benefits

The Ministry of Health officials expressed the Government's commitment to fully cover and maintain the operational costs of the newly constructed intermediary medical warehouse to ensure uninterrupted delivery of essential services during and after the project implementation. There was no evidence that the Government has failed to honor such a commitment for other similar projects. All the supply chain-related operational cost for the similar project is normally covered fully by the Government budget without support from donors.

Beyond the project under evaluation, the government shall consider achieving further improvements in the available supply chain infrastructure to improve health services in the medium term. The planned and ongoing projects need to be completed and linked strategically to achieve the broader goals of the national strategic plan.

In terms of process, the MoH needs to ensure that a fully budgeted and approved PELF based on a holistic and cross-cutting approach is adopted to provide sustainable support for this project (as part of its reform agenda).

4. Sustainability and Resilience of the Buildings and the Environment

The sustainable building approach has a high potential to make a valuable contribution to sustainable development. Sustainability is a broad and complex concept, which has grown to be one of the major issues in the building industry. In general, there is a consensus that the breadth of the principle of the sustainable building mirrors those of sustainable development, which is about synergistic relationships between economic, social, and environmental aspects of sustainability. Sustainable buildings are considered an essential pillar of the sustainable development agenda. The promotion of sustainable building practices is to balance economic, social, and environmental performance in implementing construction projects (Kediri 2012).

The overall project design has integrated sustainability and resilience dimensions of development challenges. Relevant shocks, hazards, adverse social and environmental impacts have been identified and assessed, and relevant management and mitigation measures are incorporated into project design and budget. All equipment procured were strictly followed international and UNDP environmental safeguards. The evaluator noted that the resilience and sustainability of societies and ecosystems were assessed through the Social and Environmental Screening Procedure (SESP) checklist, focusing on principle three and across the seven standards. In addition, the assessments have informed many aspects of the project design and implementation; for instance, all equipment procured were strictly followed international and UNDP environmental safeguards. The project design integrates sustainability and resilience dimensions of development challenges. The Government agencies must be aware of the technologies used to build the Manica medical warehouse, and such knowledge will be replicated in future projects to ensure the sustainability and resilience of such investments. Building on the experience of installing the Incinerator to expand this to other medical warehouses, it is important to assess how this will be linked strategically with the implementation of the logistics masterplan and the collaboration with MoH Environmental health, relevant donors and sector partners, to implement the relevant waste management policy.

In conclusion, the evaluator considers the project is likely to be sustainable, its outcomes are likely to be maintained, and its benefits and use will be continued in the future. As a result, capacity-development of communities and organizations is a common objective of development interventions, consistent with the overall goal of promoting increased autonomy and self-reliance of partner countries to provide public services. However, as sustainability is concerned with what happens after development activities are completed, it is ideal to be measured some

years after completing the project. It isn't easy to provide a reliable assessment of sustainability while activities are still underway or immediately (i.e., only assessing the likelihood based on available or historical information from similar projects). In this project case, the assessment of such project should be based on projections of future developments based on available knowledge about the intervention and the capacity of involved parties to deal with the context of the warehouse (mainly the Government and the Global Fund). That was important, as the project agreement was the first of its kind where the UNDP was assigned to implement a project funded by the Global Fund through the MoH, in Mozambique.

3.5. Impact

Within the scope of this evaluation, Impact was defined as the significant effects of the project, positive or negative, expected, or unforeseen, on its beneficiaries and other affected parties. The evaluation sought evidence on (a) tangible and observed reduction of stockouts or supplies disruption of key commodities, (b) positive perceptions of stakeholders on the project role as a facilitating factor to enhance overall health outcomes, (c) absence of significant or unacceptable negative effects.

The selection of indicators to evaluate the impact of the HSS HIV project was influenced by the nature of the project and the definition of the impact within the project context. For this evaluation, the following dimensions were considered to evaluate the impact:

- 1. Evidence that needs assessment has been utilized in the project's design**
Evidence on this indicator was covered under section 3.1. 'Relevance.'
- 2. Project ToC confirms that the project enables the society to improve their livelihood and social benefits**
Evidence on this indicator was covered under section 3.1. 'Relevance.'
- 3. Level of technical capacity of relevant stakeholders relative to the level required to sustain project benefits**
'Relevance' and 'Effectiveness.' Evidence on this indicator was covered under section 3.1. and 3.2.
- 4. The extent to which the intervention achieved or is expected to achieve results.**
Evidence on this indicator was covered under section 3.2. 'Effectiveness.'
- 5. Attributed contribution of the project on the public health impact**
See below.
- 6. Positive or negative effects of the project on local populations**

1. Attributed contribution of the project on the public health impact

Health is both a driver and outcome of development, and it is a human right. UNDP focuses on addressing the social, economic, and environmental determinants of health, primarily responsible for health inequalities. The project supports the Ministry of Health in the implementation of the Global Fund HIV and TB Grants. The project's key activities are critical to building a Resilient and Sustainable System for Health that can support efficient, scale-up, quality national responses to priority diseases and health conditions. In addition, the project was guided by human rights by prioritizing accountability, meaningful participation, and non-discrimination. Potential adverse impacts on the enjoyment of human rights were identified and assessed as relevant and appropriate mitigation and management measures incorporated into the project design and budget.

The evaluator found that the project has been successfully linked to multiple dimensions that confirm the assumptions for its future impact.

- ✓ Within the current CDP cycle, the project will contribute to UNDAF Outcomes and the UNDP Strategic Plan. The project also contributes to achieving a border partnership objective shared among different partners that focus on Building Resilient and Sustainable Systems for Health.
- ✓ Medical Warehousing facilities play a vital role in the overall supply chain process for health commodities. This is especially true in resource-poor environments where intermediary medical warehouses act as buffers against uncertainties and breakdowns within the supply chain. When properly managed and appropriately stocked, these medical warehouses provide a consistent supply of products as they are needed.
- ✓ The evaluator found that the project document has specified how it will contribute to higher-level change through linkage to the program's Theory of Change. This HSS project has a clear change pathway that explains how the project will contribute to outcome-level change and why the project's strategy will likely lead to this change.
- ✓ The target groups of the project were identified in the context of the health system in Mozambique. The context analysis is described and clearly refers to the geographic aspect, gender and age, key populations, and vulnerable groups with evidence of data source. The project document described in detail how the project will contribute to development results. An explicit link to the program's theory of change was completed. The project document has provided adequate details on the strategy that will lead to outcome-level change. The project's contributions to broader goals were identified for all of the components under the HSS project. The analysis is backed by credible evidence of what works effectively in this context and includes assumptions and risks.
- ✓ In its broader context, the project reduces inequalities and social exclusion that drive poor health outcomes. Given the location of the project, the evaluation found that the project

is well-positioned to address some of the key disparities between provinces and cover hard-to-reach populations and ensure that the target and beneficiary communities have access to treatment and care, receives goods in the rights quantities, in good condition, at the right time, for the right cost.

- ✓ For the materialization of the principle of equity, which is an ethical concept based on the principle of fair distribution of benefits and manifested by disparities in the distribution of health services and the health status of the population, three dimensions shall be considered, including equal access for the same needs, identical usage rates for the same needs, and identical quality care for everyone. Within the current contextual factors, the evaluator recognizes the high potential of the project to ensure the achievement of equity outcomes associated with this project.

2. Positive or negative effects of the project on local populations

The evaluator found that the social and environmental risk screening was completed for the project at the design phase, and only three risks were identified. These include some aspects that have been identified in section 3.1.1 above. Risk management has been incorporated within the project management operations. In particular, the project team focused on mitigating the impact of unforeseen external factors, including the COVID-19 pandemic, political changes and unrest, counterpart staff turnover, and management of the contractors.

While the project's scope is not new, the capacities of the national and sub-national government institutions and duty-bearers were assumed to be limited in the technical aspects of the construction of medical warehouses. That was considered a potential source of risk affecting the quality of service provided. On the other hand, the project has not contributed directly to any main workstream on environmental sustainability. It will cover environmental sustainability in the framework of building health system infrastructure.

The evaluator considers that the project will likely achieve its desired impact. No evidence from other similar contexts indicates the failure of medical warehousing projects to contribute to achieving a wide positive impact in the communities it serves. No evidence from the local context suggests that will not be the situation in Manica and neighboring provinces. While it is too early to measure and evaluate the actual impact, interventions that aim to strengthen the medical supply systems have indicated positive evidence of the linkages. In addition, given the current context in Mozambique, there is no reason to expect different or contradictory evidence on such impact. However, the evaluator recommends to the Principal Recipient the MoH that an impact evaluation be conducted three years after the warehouse becomes operating fully. The evaluation could be conducted as a stand-alone or as part of wider supply chain evaluation activity. Challenges, such as the increase in various products in the public health system and the

demand for reduced processing time, can be addressed by improving inventory management and using technologies. The attribution of the project's impact could be expressed in terms of likelihood rather than proof that project will achieve its targeted impact. Hence, such similar projects must be adopted and evaluated as comprehensive projects in the future. Measuring the impact of the medical warehouse on ensuring sustained availability of essential medicines and contribution of that into reducing morbidity and mortality due to priority disease is an important impact dimension to be measured.

Section 4: Conclusions

Overall Assessment

Qualitatively, a construction project can be judged as successful when completed on time, within budget, and according to specifications. In addition, the project’s success in the construction industry is generally affected by factors such as quality performance, health and safety performance, relationship with stakeholders of a project, scope, and environmental performance of projects. Post-evaluation plays a major role in the construction works when determining whether the project is a success or a failure. Selecting criteria and determining performance indicators are difficult problems for evaluators of such projects and link them with its wider health system development ecosystem. All of the qualitative measures indicate that the project under evaluation is successful.

The overall assessment of the Project was successful (at 92.5% performance). It is at the upper limit of the range of performances that could be considered very successful. To arrive at the overall assessment, the individual criteria ratings were aggregated using weightings developed by the UNDP Evaluation Office: Relevance (20%); Effectiveness (30%); Efficiency (30%); and Sustainability (20%). These reflect the relative importance of the component groupings to expected overall project outcomes, considering their contribution to project cost at appraisal. Individual criterion ratings were in whole numbers from 0 to 6, increasing project performance, while sustainability and impact followed different ratings. The overall assessment is summarized in Table 4 below. Further details are in annex 3.

Table 4: The general rating of the evaluation criteria

1. Assessment of Outcomes		Rating
Relevance		6/6
Effectiveness		5/6
Efficiency		5/6
Overall Outcomes Rating		5/6
2. Sustainability		Rating
Overall Likelihood of Sustainability	of	3/4
3. Impact		Rating
Overall Likelihood of Impact		4/4

Specific assessment:

The specific rating of each criterion was based on pre-defined standards set by UNDP. The table below shows the rubric used for the rating of Relevance, Effectiveness, Efficiency.

Table 5: Outcome Ratings Scale - Relevance, Effectiveness, Efficiency

Rating	Description
6 = Highly Satisfactory (HS)	The level of outcomes achieved exceeds expectations and/or there were no shortcomings
5 = Satisfactory (S)	Level of outcomes achieved was as expected and/or there were no or minor shortcomings
4 = Moderately Satisfactory (MS)	Level of outcomes achieved more or less as expected and/or there were moderate shortcomings.
3 = Moderately Unsatisfactory (MU)	Level of outcomes achieved somewhat lower than expected and/or there were significant shortcomings
2 = Unsatisfactory (U)	Level of outcomes achieved substantially lower than expected and/or there were major shortcomings.
1 = Highly Unsatisfactory (HU)	Only a negligible level of outcomes achieved and/or there were severe shortcomings
Unable to Assess (UA)	The available information does not allow an assessment of the level of outcome achievements

Judging the sustainability and impact has been built using a different rubric developed by UNDP. The table below illustrates that.

Table 6: Rating Scale – Sustainability and Impact

Rating	Description
4 = Likely (L)	There are little or no risks to sustainability/ likely to achieve impact
3 = Moderately Likely (ML)	There are moderate risks to sustainability / moderately likely to achieve impact
2 = Moderately Unlikely (MU)	There are significant risks to sustainability/ moderately unlikely to achieve impact

1 = Unlikely (U)	There are severe risks to sustainability/ unlikely to achieve impact
Unable to Assess (UA)	Unable to assess the expected incidence and magnitude of risks

Relevance

The Project is rated relevant (index = 6 out of 6). Relevance was the strongest aspect of the project design and implementation. The rating takes account of (i) relevance to the country's priorities and UNDP's country strategy and sector strategies, (ii) adequacy of justification for the construction of the medical warehouse as a priority intervention, and (iii) extent that each intervention was appropriately designed to achieve the intended outcomes and impacts. All three components were fully consistent with Government priorities at the time of appraisal and evaluation. At the initial appraisal conducted by UNDP CO in 2018, the project was among the Government's top priorities for strengthening the health system. The evaluation found that institutional strengthening and capacity-building support were relevant to the current needs in the health sector. In addition, the project components were consistent with UNDP's country strategy at the time of initial appraisal and final evaluation. Since this was the first experience for UNDP CO to support such projects in Mozambique, it would have been appropriate to adapt more dynamic implementation arrangements to address unanticipated circumstances. For instance, proactive risks management can be adapted based on the rich experience during the implementation of this project.

The project focused on supporting the MoH in the process of implementing the National Logistics Pharmaceutical Plan (PELF) for establishing one Intermediary Medical Warehouse in strategic geographical area that will ensure medical and non-medical products stocks available in quantity and quality necessary to be distributed through optimized and safer routes to reach the last mile and be accessible to all citizens at all time. Particularly in Manica, the newly constructed Medical warehouse will allow adequate supply chain management, preventing stock-outs and allowing the citizens of the districts of this province to receive adequate treatment when accessing health centers services.

Effectiveness

The Project was rated effective (index = 5 out of 6). This evaluation considers whether intended outcomes and outputs were achieved or are likely to be achieved in assessing effectiveness. It also considers the effect of the implementation process on project outcomes, including delays in outcomes and implementation side effects. The project performed adequately in terms of soundness and acceptance by recipients, technical specifications, and general operational features. It was the best solution as per the requirements of the MoH.

Efficiency

The Project was rated as efficient (index = 5 out of 6). Despite the delays in the delivery date, the general acceptance and satisfaction of the recipient entities and the contextual factors for the delays have contributed to a favorable rating of the project's efficiency. The efficiency assessment was based on benchmarking (to the extent possible), which has provided objective measures to assess the efficiency. Given the wider context, with plans to establish an additional 28 similar intermediary medical warehouses, efficiencies of scale and value for money need to be improved significantly. The current funding landscape is challenging and identifying efficiency gains is important for the next period.

Sustainability

The Project was rated likely to be sustainable (index = 3 out of 4). The assessment of sustainability considers the likelihood that human, institutional, financial, and other resources will be sufficient to maintain the project outcomes over the life of the Project. The prospects for the sustainability of the project are not clear. In the past few years, the fluctuated situation of the Government's fiscal position has led to changes in annual healthcare budgets. However, since the Government considers the health sector's investments a high priority, it will likely provide sufficient financing for routine and periodic warehouse maintenance. In addition, UNDP and development partners need to play additional roles in advocating for more resources to support implementing some strategic initiatives and projects that contribute to strengthening the health system in Mozambique.

Impact

The Project was rated likely to result in the desired impact (index = 4 out of 4). However, given the timing of this evaluation, it is not possible to assert this conclusion using the available evidence. The evaluation of the impact likelihood was derived mainly by factors as illustrated in section 3.5. The initial appraisal of the project confirmed that it has had no significant environmental impact and the absence of significant negative unintended effects. Those interviewed stated that they expect that supply chain improvements will result in several positive impacts. Measurement and attribution of such kind of project do not follow a linear path of causal effects. However, there are no reasons to anticipate that the project would not contribute to the targeted goals and objectives as identified by the theory of change.

Key lessons learned:

Some lessons learned have been identified throughout the evaluation and were highlighted in detail as part of this report. Among these issues, three areas were prioritized for the way forward:

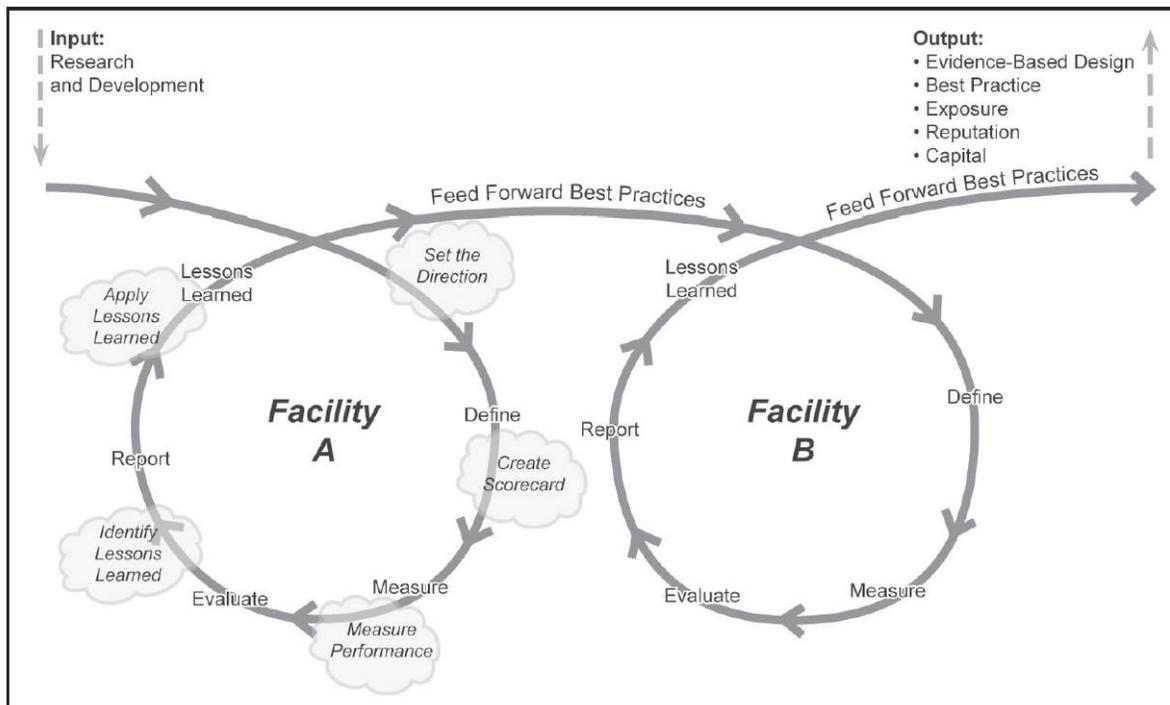
- **Adopting reasonable assumptions at the design and inception stage:** a key lesson learned was the importance of incorporating reasonable assumptions about the conditions and external requirements for such a project before committing a timeline with the beneficiary.
- **Role of M&E systems:** M&E practices were important in the management of project scope, time, cost, project quality, human resources, communication, and risk. There is a need to strengthen and empower the M&E Unit within UNDP CO in a project setting to help enforce M&E practices that lead to a successful project.
- **Partnership:** close collaboration with MoH and jointly monitoring and decision-making ensured timely problem-solving in a particularly difficult year and achieved planned results as per donor expectations. The UNDP partnership with the Government would benefit from a more comprehensive approach in setting a funding package for support to the implementation of the logistical plan that ensures robust and sustained capacity (both as infrastructure and institutional skills to develop and manage these infrastructures).
- **Donor programmatic and financial coordination:** In collaboration with the National Logistics Working Group, through the Gavi, additional interventions and opportunities for value-for-money could be identified and achieved. UNDP planned with the MoH-CMAM, with funding from GF, a full Rehabilitation Project for the Administrative building, including Demolition and Construction with Expansion up to more than 5200 pallet capacity for Medical warehouses Beira city, Sofala province – that is also to have cold rooms for vaccines. In addition, is also planned in the same context to install a second incinerator in Nampula to serve North Region, and for which the toolkit and materials that are planned to be prepared under Gavi TCA will be adopted, as UNDP is standardizing the equipment and complementing the necessary National guidelines in line with existing policies homologated by Government for appropriation and sustainability.
- **Integrated approach:** While space and equipment are important, having well-trained people with the appropriate supervision and accountability is the essential factor in determining whether a medical warehouse is productive and successful or not. In addition, hiring people and finding the correct mix is critical, particularly when there are unpredictable highs and lows in the workload. The medical warehouse planner's single most important activity is determining the type and number of people needed to operate the warehouse. The continued alignment of UNDP with sector partners namely through Health Partners Group (HPG) is important and can contribute to reinforce advocacy in this key aspect to ensure holistic approaches for transformative interventions.

Section 5: Recommendations

This part of the evaluation report provides a manageable number of thirteen recommendations based on the findings and conclusions of the final evaluation. Recommendations are developed and explained by the evaluator to his best professional judgment following analysis of the gathered data and consultations with the key stakeholders. The learning through this evaluation addresses specific criteria in terms of organizational learning, changes in knowledge structure, ongoing improvements, and feedback.

Learning can be defined as the process of improving actions through better knowledge and understanding. In construction project development, the lessons learned in executing a project (whether the project is a success or failure) could be applied to future projects. These principles were adopted to develop the list of recommendations below. The evaluator recommends using the process as illustrated in the figure below to link the lessons learned from the establishment of the Manica warehouse more effectively to UNDP's overall mission and goals in future partnership projects.

Figure 2: Feed-forward knowledge loop: Evaluating building performance



1. **Continue to build the partnership between the UNDP and MoH to support the health system's decentralization agenda and enhance equity outcomes.** There is a need for structuring the supply chain to better respond to the needs of a decentralized and expanding health system will be a primary objective for MoH under the reform agenda. The decentralization plan is a means to achieving greater

equity in access to essential medical products and technologies. Moving forward, UNDP and other stakeholders can provide targeted support to the Government to advance the Decentralization agenda in a meaningful manner. Strategizing the support to implement the PELF can benefit from a well-elaborated and aligned support plan to achieve coherent development agenda in the area. Within this domain, UNDP has established a fruitful collaboration with the local authorities by building and strengthening their capacity in strategic planning and budgeting, management and leadership, resource mobilization, doing business, and improvement of the socio-economic infrastructure, which is expected to be used in project implementation. These partnerships need to be maintained and strengthened. For the materialization of the principle of equity, future collaboration must ensure the achievement of equity outcomes associated with similar kinds of projects.

2. **Align the governance and coordination of similar future projects with existing structures.** It is recommended that UNDP align the boards' composition that oversees similar projects to existing structures or coordination forums. UNDP is already a key member of some of these forums. As indicated during the interviews, there is already a National Taskforce that supports the implementation of PELF at the national level that is composed of almost similar stakeholders. Building on exiting coordination and engagement platforms is essential to increase efficiency and strengthen the capacities in the long term.
3. **Work in advance to address and overcome the anticipated bottlenecks.** A key lesson learned was the importance of incorporating reasonable assumptions about the conditions and external requirements for such a project before committing a timeline with the beneficiary. Government regulations were identified as the most important driver of increasing complexity; next is bureaucracy and political risk. On the other hand, the Manica project provided a good opportunity for the UNDP team to study all aspects and understand how to avoid backlogs in granting permits and avoiding delays in future projects. This could be achieved through seeking support from MoH dedicated focal persons to coordinate with local authorities. On the other hand, UNDP's internal processes (including development of project document, as well as approvals) have been cited as a source of delay and has contributed to overall delays in completing the construction. An appropriate balance is required between offering speedy approval processes while managing all stakeholders' contributions. In addition, it is important to promote partnerships or even informal sharing among individual local private sector companies at a large scale. Increasing knowledge sharing among peers can help close the gap between technological development (available for early adaptors or technology) and application of these new technologies. For this purpose, the relevant partners (including UNDP and others) should strengthen the existing platform that coordinate the local and regional private firms. That platform could encourage the regular sharing of best practices, benchmarking across peers.
4. **Align health-related development prioritization according to government prioritization.** The selection of the location for the warehouse project was well reflected in different documents, which makes it

relevant to the true needs of the communities. Moving forward, it is recommended that UNDP continues to align its development priority actions on HSS in close collaboration with the government and agree on prioritization of the different zones depending on the actual needs.

5. **Develop an integrated approach for technical assistance and capacity building, if funded by donors in future interventions.** Close cooperation was considered essential to increase adherence and accountability to project results; the schedule of activities is adjusted to ensure the effective and timely implementation of project activities in the project target areas. This aspect will continue to be an essential component of any future similar projects, and it is crucial to address it through sustained solutions in the long term. A formal capacity-building program relevant to the construction and management of intermediary warehouses will be an important foundation for successfully implementing the additional warehouses. It is important that MOH (as the PR) should look into these needs for all future projects. The UNDP partnership with the Government would benefit from a more comprehensive approach in setting a package of support to the implementation of the logistical plan that ensures robust and sustained capacity (both as infrastructure and institutional skills to develop and manage these infrastructures). Applying this strategy for people development ensures that local staff continuously grow and acquire the right skill set. It does so by leveraging the UNDP's knowledge base.
6. **Document lessons learned on the design of the intermediary medical warehouses before the expansion of the model.** The project under evaluation was revised jointly with MoH verified and validated for future use as a model (project type) for intermediary medical warehouses construction to reinforce the implementation of national reforms (with 28 additional intermediary warehouses targeted in the next period). Extending this model to the rest of future projects will enhance the learning process for successful implementation. Lessons learned from the Manica medical warehouse project could be usefully applied to subsequent projects. This process needs to be institutionalized by the MOH. Such experience would be a significant advantage to UNDP to craft the offering on strengthening the supply systems in the public health sector in Mozambique. Even though no two construction projects are identical, the "lessons learned" from one project can prove very helpful when applied to another. UNDP CO has been shared key lessons and good practices even with other UNDP CO so that that project management can undergo continuous improvement across projects.
7. **MOH to focus the capacity-building interventions on priority areas and based on robust need assessment.** While this project under evaluation has no component to support structured formal training or capacity-building activities, it is recommended to adopt such intervention as part of a wider package of offering from UNDP in the future. As reflected in the national strategic plans, some priority areas could be targeted by UNDP to complement the development of infrastructure and to advance the decentralization agenda. For instance, training of supply chain managers in priority areas is a short-term solution to cover urgent gaps; better integration of medical university curriculum and in-service training

is considered a long-term solution for capacity building and sustaining the required knowledge and skills. It is essential to capitalize on the existing capacities already available at the MoH or created because of the project in Manica. There is a need however to avoid any overlap in this area as other partners are supporting this component. In addition, it is important for other partners to devote attention to aspects related to managing a reliable Logistics Management Information system (LMIS), electricity supply for cold chain maintenance services, and other technical aspects that enable effective management of the warehouses. It is recommended that UNDP CO develop a toolkit or hand booklet to capture the procedures and process of building the capacity of the government staff in the project's area that could be used for future projects. In addition, MoH and CMAM should be supported to identify gaps and risks and devise, on that basis, an executable workforce plan, including interventions to address any over-or under-supply of staff and any skills gaps. Initiate measures, such as recruiting, training, transfers, in-outsourcing, or lay-offs, appropriate to the business's significance and the time for qualification.

8. **Diversify and differentiate the approach and business model for the technical assistance beyond construction activities to include other initiatives and innovations.** Maintaining the positive UNDP's partnership with the Government requires working closely with the project management team at central levels to identify opportunities for operational improvements, exploiting new technologies, identifying management information requirements and resources constraints in offering well-defined services, and delivering an expected product that fits the MoH's business objectives. UNDP's development support should be extended to the post-construction stage to support the operationalization as well. UNDP can diversify and differentiate its services in this area of health system support in Mozambique and identify its strategic focus. This should be done in a way that complements the existing offer, mandate and comparative advantage of other development partners and UN agencies. The needs are huge for supporting the health system, to further decentralize the operations that are the system's backbone, including medical supply operations. However, it is essential to finding the right balance between providing specialized in-country set-up and developing customized solutions on the one hand and becoming more general and thereby achieving economies of scale and diversifying risk on the other. UNDP main comparative advantage is the ability to develop and mobilize the required know-how internally.
9. **Identify opportunities for achieving efficiencies in scale and high value-for-money.** Lessons learned from the Manica project are identified and have been shared in different forums and reports. While there is no available funds by the time of this evaluation to establish the new warehouse, it is important this analysis to be conducted by MOH and stakeholders to inform the future plans. Sources for reducing the cost and achieving better efficiencies of scale should be identified before the next phase of the implementation. UNDP and stakeholders must devote efforts to identify the sources of value for money and eliminate avoidable and unnecessary costs for any future projects. Applying this approach will help partners develop robust investment cases that can drive additional investment in this strategic area

within the health system. Furthermore, assessing the efficiency of such interventions generally requires comparing alternative approaches to achieving the same outputs. That will be easier for some types of intervention than others.

- 10. Ensure the Government maintains sustainable budgetary support for the operational costs associated with the new projects.** Beyond the project under evaluation, the government shall consider achieving further improvements in the available supply chain infrastructure to improve health services in the medium term. The planned and ongoing projects need to be completed and linked strategically to achieve the broader goals of the national strategic plan. UNDP shall continue its efforts to support future investments in such projects and their maintenance. UNDP is already a member of different coordination form and is well positioned to advocate for these important aspects. UNDP, in his integrator role, can play an important role of sensitizing the decision and policy makers of this essential provision.
- 11. Establish and integrate robust M&E systems as part of projects management of similar construction projects.** There is a need to strengthen and assigned an M&E staff within UNDP CO in a project setting to help enforce M&E practices that lead to a successful project. Building an M&E system that enables efficient communication and coordination is critical for future projects. The evaluator recommends that UNDP CO establish the right M&E metrics and monitor the project progression continuously. Define appropriate KPIs that create transparency on the project's progress and enable early identification of any deviation.
- 12. Conduct a technical evaluation to assess the performance of the medical warehouse, if funded by donors in future interventions.** The performance evaluation of the warehouse was not technically evaluated in terms of assessing the overall warehouse structure; sizing and dimensioning the warehouse and its departments; determining the detailed layout within each department, selecting warehouse equipment; and selecting operational strategies. Performance evaluation is important for both warehouse design and operation. That is an important learning activity that could be completed immediately following this evaluation to inform the design of the next similar construction efforts. It is recommended that the performance evaluation methods include benchmarking and any suitable analytical models. This recommended evaluation can focus on 'Project Functionality and 'Fitness for Purpose.' The project functionality and fitness for a purpose are usually associated with project effectiveness measures. It is recommended for the Principal Recipient the MoH to conduct the analysis jointly with CMAM after one year of effective use to gather technical information of the design functionality is good for replication.

- 13. Conduct follow-up evaluation activities to complement the findings of this evaluation, if funded by donors in future interventions.** Multiple activities were identified below during this evaluation as essential and complementary to its scope. It is recommended that stakeholders consider the following:
- a. It is recommended that MoH to adopt the pre-design evaluation process systematically to better understand early design decisions' effect, including beneficiary response initially. Incorporating the lessons learned from the design and implementation of the Manica medical warehouse is “fed forward” to the next facility design as a feedforward loop, which can lead to better-informed decisions and ultimately better designs. Conducting a process-design evaluation workshop before any future project will be crucial to incorporate the lessons learned.
 - b. The Principal Recipient the MoH may consider conducting a sustainability assessment within two years period following this evaluation. It wasn't easy to provide a reliable assessment of sustainability while activities are still underway or immediately following the closure of the project.
 - c. The evaluator recommends an impact evaluation be conducted three years after the warehouse becomes operating fully. The evaluation could be conducted as a stand-alone or as part of wider supply chain evaluation activity. It was too early to measure and evaluate the actual impact; interventions that aim to strengthen the medical supply systems have indicated positive evidence on the linkages. Measuring the impact of the warehouse on ensuring sustained availability of essential medicines and contribution of that into reducing morbidity and mortality due to priority disease is an important impact dimension to be measured.
 - d. Conducting an outcomes evaluation. The evaluation was conducted immediately following the completion of the project, without a time space to allow for the warehouse to operate and to assess its functionality. A key aspect missing from this evaluation is an outcome evaluation, which refers broadly to an indicator or measure of quality or performance. The evaluator recommends that the Principal Recipient the MoH to conduct another evaluation within a 9 to 12 months period to cover this important component. Suitable funding should be dedicated for this purpose.

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Annexes

Annex 1: Evaluation Terms of Reference

Services/Work Description: International Consultant to conduct Final Evaluation

Project/Programme Title: Health System Strengthening Project

Consultancy Title: Evaluator consultant

Duty Station: Mozambique, Maputo – to deliver HOME-BASED

Duration: 22 days

Expected start date: 1 June 2021

Background:

In Mozambique, the Health Portfolio has been expanding since February 2019.

The Project “Health System Strengthening” (HSS) supports the Government’s efforts towards the achievement of the Agenda 2063 of the African Union - Objective 3: Citizens are healthy, well-nourished and have long life spans of the Aspiration 1: A Prosperous Africa based on Inclusive Growth and Sustainable Development. The Project also contributes for the Agenda 2030, more directly to Sustainable Development Goals (SDG) 3, Good Health and well- being: Ensure healthy lives and promote well-being for all at all ages. The Project contributes to UNDAF Outcome 8

/ CPD Outcome 68 - All people benefit from democratic and transparent governance institutions and systems that guarantee peace consolidation, human rights, and equitable service delivery. The Project also reinforces UNDP CO efforts towards the achievement of the UNDP Strategic Plan 2018-2021, output 1.2.1 strengthening capacities at national and sub-national levels to promote inclusive local economic development and deliver basic services. The Project is in line with the UNDP Country Programme 2017-2020 and will be consider for the next CPD currently underplanning.

Under the HSS Programme, UNDP’s intervention contributes to the implementation of the Central Medical Stores (CMAM) Strategic Plan for Pharmaceutical Logistics (PELF). UNDP technical support contributes to the CMAM efforts to improve storage conditions of the medicines, vaccines and other health products.

UNDP has been selected as implementing partner on health infrastructure due to the corporate expertise and solid partnership with main donors; as well as due to evidence-based results in providing successful similar services in other countries worldwide and in the sub-region.

In respect to identified need for increase the number of health facilities in Mozambique according to the 2020 Economic and Social Plan (PES) - Project responds to MoH key priority in ensuring that the required health infrastructure is constructed/rehabilitated, particularly in emergency context where is essential for citizens to have guaranteed access and reliability in health prevention, treatment and care services at the different levels and particular sub-national.

Project works to support the MoH in implementing National Logistics Pharmaceutical Plan (PELF) for establishing Intermediary Medical Warehouses in strategic geographical areas that will ensure medical

and non-medical products stocks available in quantity and quality necessary to be distributed through optimized and safer routes to reach the last mile and be accessible to all citizens at all time.

The Project established a newly constructed Intermediary Medical Warehouse (1620 pallets) in Chimoio, including with 1 Incinerator (fully Licensed). This Medical Warehouse is also being equipped namely with innovative models for incineration of pharmaceutical waste inspired in green technology. The newly constructed Medical warehouse will allow adequate supply chain management, preventing from stock-outs and allowing the citizens of the districts of this province to receive adequate treatment when accessing health centers services. The province of Manica and city of Chimoio receive from this intervention a new and modern health infrastructure that replaces the one completely burned by the fire back in 2017.

All the civil works Executive Projects undertaken by UNDP respect WHO guidelines and include safe construction elements increasing the health facilities resilience to the impact of climate change, a sustainable approach to enhance preparedness of the Projects to respond to the natural hazardous mapped for Mozambique.

This Project, in total of USD 6.6M will contribute for a regular and continuous supply chain management, ultimately promoting access to basic social services and ensuring the citizens the right to Health.

In accordance with UNDP policies and procedures, the project is required to undergo Final Project Evaluation upon completion of implementation. **These terms of reference (TOR) sets out the expectations for Final Project Evaluation of the Health System Strengthening Project, NFM2 HIV Project (12 February 2019 – 30 June 2021).** Therefore, the UNDP is seeking a qualified international consultant to undertake the final evaluation of the HIV project and respective activities undertaken between 2019-2021 and prepare and present the Final Evaluation Report.

The Final Evaluation Report will be conducted according to the guidance, rules and procedures established by UNDP as reflected in the UNDP Evaluation Guidance (please refer to annexes of this ToR). The evaluation must provide evidence-based information that is credible, reliable and useful. The evaluator is expected to follow a participatory and consultative approach ensuring close engagement with national counterparts such as Department of Cooperation and Planning, Department of Infrastructure, Central Medical Stores, UNDP Country Office, project team and key stakeholders.

SCOPE OF WORK, RESPONSIBILITIES AND DESCRIPTION OF THE PROPOSED WORK

The evaluator is expected to frame the evaluation effort using the criteria of relevance, effectiveness, efficiency, sustainability, and impact.

The project evaluation is being carried out to assess the progress made by the project against the project outputs and indicators. In-depth analysis will be needed to review the results achieved under the different activities conducted.

The evaluation should look into the relevance, sustainability, effectiveness and efficiency of the assistance provided by HSS to the Ministry of Health during the project cycle.

The project is ending 30 June 2021 and therefore final evaluation is required to be completed within this period. The analysis and recommendations presented by the evaluation will be useful to UNDP, MoH authorities, development partners in measuring the contributions made by the project and in designing future interventions for strengthening the Strategic Plan for Pharmaceutical Logistics (PELF) implementation and Waste management.

The specific objectives of the evaluation are the following:

- To assess and evaluate the progress made by the project towards an attainment of the results as specified in the project results resource framework / Annual work plan
- To measure the contributions made by the project in enhancing the accountability, effectiveness and efficiency of supply chain system focus on PELF
- To assess the relevance, sustainability, effectiveness and efficiency of the project interventions
- To identify challenges to project implementation and make recommendations on possible ways forward
- To examine the cost efficiency and effectiveness of HSS project assistance
- To document main lessons learned, best practices and propose recommendations that will integrate Project Final Report

During the evaluation, the evaluator is expected to apply the following approaches for data collection and analysis:

- Desk review of relevant documents (project document, financing agreement addenda's, project reports, preparation phase documents, project budget revisions, lesson learned, national strategic and legal documents, etc.)
- The consultant is expected to follow a participatory and consultative approach ensuring close engagement with MoH Senior Management, UNDP, CMAM, as well as with other partners as applicable
- Interviews with partners and stakeholders (questionnaires may be applied as relevant)
- Consultation meetings only if it is possible with the current situation of the COVID-19 pandemic

The specific design and methodology for the evaluation should emerge from consultations between the consultant and the above-mentioned parties regarding what is appropriate and feasible for meeting the technical evaluation purpose and objectives and answering the evaluation questions, given limitations of budget, time and data.

The final methodological approach including interview schedule and data to be used in the evaluation must be clearly outlined in the evaluation Inception Report and be fully discussed and agreed between UNDP, stakeholders and the consultant.

The evaluation report will assess the achievement of project results against what was expected to be achieved and draw lessons that can both improve the sustainability of benefits from this project, and aid in the overall enhancement of MOH and UNDP programming. The evaluation report promotes accountability and transparency and assesses the extent of project accomplishments.

The final report must describe the full technical evaluation approach taken and the rationale for the

approach making explicit the underlying assumptions, challenges, strengths and weaknesses about the methods and approach of the evaluation.

EVALUATION CRITERIA AND KEY GUIDING QUESTIONS

Relevance

- Does the project's objective align with the priorities of the local government and local communities?
- Does the project's objective fit within the national development priorities?
- Did the project concept originate from local or national stakeholders, and/or were relevant stakeholders sufficiently involved in project development?
- Does the project objective fit Global Fund strategic priorities?
- Was the project linked with and in-line with UNDP priorities and strategies for the country?
- To what extent HSS Project technical assistance were relevant in addressing the needs and strategic priorities of the MoH, namely for PELF implementation?
- To what extent were lessons learned from other relevant projects considered in the project's design?
- To what extent were perspectives of those who could affect the outcomes, and those who could contribute information or other resources to the attainment of stated results, taken into account during the project design processes?
- To what extent the project was able to cater the needs of the beneficiaries in the changed context? If and when required an alteration of focus/strategy, was the project flexible? Is there any evidence that the project advanced any key national priorities of MoH, UN, UNDP?
- How relevant was the geographical coverage?
- On constructing the health infrastructure, what factors drove you to select location?

Effectiveness

- How effective has the project been in enhancing the institutional and professional capacity of MoH authorities?
- Has the project achieved its outputs? What were the major factors influencing the achievement or non-achievement of the outputs?
- To what extent did the project contribute to the MoH outcomes and outputs and national development priorities? To what extent were the project outputs achieved?
- What are the key factors contributing to project success or underachievement?
- What are the key risks and barriers that remain to achieve the project objective?
- To what extent has the UNDP partnership strategy been appropriate and effective?
- What factors contributed to effectiveness or ineffectiveness?
- In which areas does the project have the greatest achievements? Why and what have been the supporting factors? How can the project build on or expand these achievements?
- In which areas does the project have the fewest achievements? What have been the constraining

factors and why? How can or could they be overcome?

- What, if any, alternative strategies would have been more effective in achieving the project's objectives?
- Are the project's objectives and outputs clear, practical and feasible within its frame?
- To what extent have stakeholders been involved in project implementation?
- To what extent are project management and implementation participatory and is this participation contributing towards achievement of the project objectives?
- To what extent has the project been appropriately responsive to the needs of the national constituents and changing partner priorities?

Efficiency

- To what extent have resources (financial, human, institutional and technical) been allocated strategically?
- What factors influenced decisions to fund certain proposed activities, and not others?
- To what extent did the coordination with other UN agencies and UNDP projects in other CO reduce transaction costs, optimize results and avoid duplication?
- Did the project's activities overlap and duplicate with other similar interventions (funded nationally and /or by other donors)?
- What were the strengths, weaknesses, opportunities and threats of the project implementation process?
- Is the project cost-effective?
- Are expenditures in line with international standards and norms?
- Is the project implementation approach efficient for delivering the planned project results?
- Is the project implementation delayed? If so, has that affected cost-effectiveness?
- To what extent is the project leveraging additional resources?
- To what extent do the M&E systems utilized by UNDP ensure effective and efficient project management?

Impact

- What impact did the work of HSS project have on the institutional/professional capacity of MoH authorities? Is there evidence of knowledge transfer?
- What has happened or is happening in the country that is making this intervention especially relevant now?
- Is there evidence that this health infrastructure & supply chain project that started in 2019 would presumably play a pivotal role in supporting the Government in responding to COVID?
- Has the intervention caused or will be able to cause a significant change in the lives of the

intended beneficiaries?

- How did the intervention cause higher-level effects?
- Did or will all the intended target groups, including the most disadvantaged and vulnerable, benefit equally from the intervention?
- Is the intervention transformative – does it create enduring changes in norms – including gender norms – and systems, whether intended or not?
- Is the intervention leading to other changes, including “scalable” or “replicable” results?
- How will the intervention contribute to changing society for the better?

Sustainability

- What is the level of ownership of MoH authorities towards the project?
- What are the key factors that will require attention in order to improve prospects of sustainability of the Project outcome and the potential for replication of the approach?
- What are the recommendations for similar support in future?
- 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 Global Fund assistance ends?
- 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?
- Do relevant stakeholders have the necessary technical capacity to ensure that project benefits are maintained?
- To what extent are the project results dependent on socio-political factors?
- To what extent are the project results dependent on issues relating to institutional frameworks and governance?

SCOPE OF THE EVALUATION AND TIMEFRAME

Under the overall supervision of the responsible officer of UNDP Mozambique, the Consultant will assess project performance against expectations set outlined in the results framework of the HIV project.

Interviews will be held with the following organizations and individuals not limited to:

- Coordinator of the Principal Recipient the MoH Project Management Unit
- Officers of MoH Department of Infrastructure
- Officers of CMAM
- UNDP Senior Management
- Project staff
- Representatives of contractors (companies involved in the project)
- Donor Civil Engineer that had visited and evaluated the Project

The evaluator will review all relevant sources of information – including progress report, project work

plan and budget revisions, combine delivery report (CDR), any other materials that the evaluator considers useful for this evidence-based assessment. The project team will provide these documents to the selected evaluator.

The tentative schedule will be the following:

Planned Activities	Tentative Days
Desk review and preparation of design	2 days
Briefing by MoH/UNDP Senior Management	1 day
Finalizing design, methods & inception report and sharing with reference group for feedback	3 days
Stakeholders meetings and interviews	5 days
Analysis, preparation of draft report, presentation of draft findings	5 days
Stakeholder meeting to present draft findings	1 day
Finalize and submit report and review brief	5 days
Total	22 days

EVALUATION CRITERIA & RATINGS:

An assessment of project performance will be carried out, based against expectations set out in the Project Results Resource Framework/ further revised Annual Work Plans. The evaluation will at a minimum cover the criteria of relevance, effectiveness, efficiency, sustainability and impact.

Ratings must be provided on the following performance criteria:

- Quality of UNDP Implementation – Implementing Agency (IA)
- Overall quality of Implementation / Execution
- Sustainability of Financial resources
- Institutional sustainability

The Evaluation will assess the key financial aspects of the project utilization of funds. Project cost and funding data will be required, including annual expenditures, revision of budget, financial reports. The evaluator will receive assistance from the Country Office (CO) and Project Team to obtain financial data in order to complete assessment of financial reports which will be included in the final evaluation report.

The evaluator will assess the extent to which the project is achieving impacts or progressing towards the achievement of impacts. Key findings that should be brought out in the evaluations include whether the project has successfully implemented the activities within the project time frame.

2. Expected Outputs and deliverables

The evaluator should delivery the following outputs:

- **Evaluation inception report by 6 June 2021:** The inception report should be carried out following and based on preliminary discussions with UNDP after the desk review and should be produced before the evaluation starts. The consultant should clarify the objectives, methodology and timing of the evaluation. The inception report should also include a proposed schedule of tasks, evaluation tools, activities and deliverables.
 - Start of mission debriefing/meeting on proposed methodology, design and work plan
 - Presentation of the inception report to the Reference Group (MoH and UNDP)
- **Evaluation debriefing by 17 June 2021:** The consultant will present his/her initial findings and recommendations (*using guidelines on report content, please refer to ToR Annexes*)
- **Draft Evaluation Report:** The consultant will share a full draft report with annexes within 17 days of the start date.
- **Evaluation Report audit trail:** Comments and changes by the evaluator in response to the draft report should be retained by the evaluator to show how they have addressed comments.
- **Final Evaluation Report:** within 22 days of the start date of sufficient detail and quality and taking on board comments from, with annexes and working papers as required.
- **Presentations to stakeholders and/or the evaluation reference group.**

Specifically, the evaluator will perform the following tasks

- Design the detailed scope and methodology (including the methods for data collection and analysis) for the report
- Conduct an analysis of the outcome, outputs and partnership strategy (as per the scope of the review described above) for the report
- Contribute to and ensure overall quality of the outputs and final report

S/he will perform the following tasks:

- Review documents
- Provide contextual knowledge on Mozambique and analysis
- Participate in the design of the review methodology
- Data collection
- Actively participate in conducting the analysis of the outcomes, outputs and targets (as per the scope of the evaluation described above), as agreed with the team
- Draft evaluation report

The reports to include, but not be limited to, the following components:

- Executive summary
- Introduction
- Description of the review methodology
- Political and development context
- Key findings

- Lessons learned
- Recommendations
- Annexes: mission report including list of interviewees, and list of documents reviewed

3. Institutional arrangements/reporting lines

- To facilitate the evaluation process, project will assist in connecting the evaluator with MoH officials, development partners and key stakeholders. In addition, the project will provide operational support in organizing meetings, if necessary.
- Key project materials will be sent and will be reviewed by the evaluator prior to the commencement of the field work. The field work will be conducted according with the pandemic situation in Mozambique, and also as Visa's are not being granted to Consultants, the field work will be conducted through video conferences or other similar options.
- The evaluator will prepare and share the draft inception report before the field mission. The evaluator will be briefed by UNDP on the objectives, purpose and output of the project evaluation.
- The evaluator will assess the project based on interviews undertaken, discussions and consultations with all relevant stakeholders or interested parties and review of project documents. As a minimum indication, the
- evaluator should consult with key government stakeholders. UNDP will provide guidance in identifying, contacting and arranging for discussions, meetings with the stakeholders as required.
- A wrap-up meeting during which comments from participants will be noted for incorporation in the final review report.
- The principal responsibility for managing this evaluation resides with the UNDP CO of Mozambique.
- The evaluation will be conducted by one international external/independent consultant, that will be responsible for the achievements of the objective of the evaluation and for the submission of the deliverables.

Annex 2: Annex 2 Data collection tools

Interview guidance

1. UNDP Questions: questions will be adjusted based on the specialist area/ job role of the interviewee (not all questions will be asked to all interviewees)

1. Does the project's objective align with the priorities of the local government and local communities?
2. Does the project's objective fit within the national development priorities?
3. Did the project concept originate from local or national stakeholders, and/or were relevant stakeholders sufficiently involved in project development?
5. Was the project linked with and in-line with UNDP priorities and strategies for the country?
6. To what extent HSS Project technical assistance were relevant in addressing the needs and strategic priorities of the MoH, namely for PELF implementation?
7. To what extent were lessons learned from other relevant projects considered in the project's design?
8. To what extent were perspectives of those who could affect the outcomes, and those who could contribute information or other resources to the attainment of stated results, taken into account during the project design processes?
9. To what extent the project was able to cater the needs of the beneficiaries in the changed context? If and when required an alteration of focus/strategy, was the project flexible? Is there any evidence that the project advanced any key national priorities of MoH, UN, UNDP?
11. On constructing the health infrastructure, what factors drove you to select location?
12. How effective has the project been in enhancing the institutional and professional capacity of MoH authorities?
13. Has the project achieved its outputs? What were the major factors influencing the achievement or non- achievement of the outputs?
15. What are the key factors contributing to project success or underachievement?
16. What are the key risks and barriers that remain to achieve the project objective?
17. To what extent has the UNDP partnership strategy been appropriate and effective?
19. In which areas does the project have the greatest achievements? Why and what have been the supporting factors? How can the project build on or expand these achievements?
20. In which areas does the project have the fewest achievements? What have been the constraining factors and why? How can or could they be overcome?
21. What, if any, alternative strategies would have been more effective in achieving the project's objectives?
22. Are the projects objectives and outputs clear, practical and feasible within its frame?
23. To what extent have stakeholders been involved in project implementation?

24. To what extent are project management and implementation participatory and is this participation contributing towards achievement of the project objectives?
26. To what extent have resources (financial, human, institutional and technical) been allocated strategically?
27. What factors influenced decisions to fund certain proposed activities, and not others?
28. To what extent did the coordination with other UN agencies and UNDP projects in other CO reduce transaction costs, optimize results and avoid duplication?
29. Did the project's activities overlap and duplicate with other similar interventions (funded nationally and /or by other donors)?
30. What were the strengths, weaknesses, opportunities and threats of the project implementation process?
34. Is the project implementation delayed? If so, has that affected cost-effectiveness?
35. To what extent is the project leveraging additional resources?
36. To what extent do the M&E systems utilized by UNDP ensure effective and efficient project management?
36. What impact did the work of HSS project have on the institutional/professional capacity of MoH authorities? Is there evidence of knowledge transfer?
38. Is there evidence that this health infrastructure & supply chain project that started in 2019 would presumably play a pivotal role in supporting the Government in responding to COVID?
39. Has the intervention caused or will be able to cause a significant change in the lives of the intended beneficiaries?
42. Is the intervention transformative – does it create enduring changes in norms – including gender norms – and systems, whether intended or not?
43. Is the intervention leading to other changes, including “scalable” or “replicable” results?
44. How will the intervention contribute to changing society for the better?
45. What is the level of ownership of MoH authorities towards the project?
46. What are the key factors that will require attention in order to improve prospects of sustainability of the Project outcome and the potential for replication of the approach?
47. 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 Global Fund assistance ends?
48. What are the recommendations for similar support in future?

2. MoH Stakeholder Questions: questions will be adjusted based on the specialist area/ job role of the interviewee (not all questions will be asked to all interviewees)

1. Does the project’s objective align with the priorities of the local government and local communities?
2. Does the project’s objective fit within the national development priorities?
3. Did the project concept originate from local or national stakeholders, and/or were relevant stakeholders sufficiently involved in project development?
6. To what extent HSS Project technical assistance were relevant in addressing the needs and strategic priorities of the MoH, namely for PELF implementation?
7. To what extent were lessons learned from other relevant projects considered in the project’s design?
8. To what extent were perspectives of those who could affect the outcomes, and those who could contribute information or other resources to the attainment of stated results, taken into account during the project design processes?
9. To what extent the project was able to cater the needs of the beneficiaries in the changed context? If and when required an alteration of focus/strategy, was the project flexible? Is there any evidence that the project advanced any key national priorities of MoH, UN, UNDP?
11. On constructing the health infrastructure, what factors drove you to select location?
12. How effective has the project been in enhancing the institutional and professional capacity of MoH authorities?
13. Has the project achieved its outputs? What were the major factors influencing the achievement or non-achievement of the outputs?
14. To what extent did the project contribute to the MoH outcomes and outputs and national development priorities? To what extent were the project outputs achieved?
15. What are the key factors contributing to project success or underachievement?
16. What are the key risks and barriers that remain to achieve the project objective?
17. To what extent has the UNDP partnership strategy been appropriate and effective?
19. In which areas does the project have the greatest achievements? Why and what have been the supporting factors? How can the project build on or expand these achievements?
20. In which areas does the project have the fewest achievements? What have been the constraining factors and why? How can or could they be overcome?
21. What, if any, alternative strategies would have been more effective in achieving the project’s objectives?
22. Are the projects objectives and outputs clear, practical and feasible within its frame?
23. To what extent have stakeholders been involved in project implementation?

24. To what extent are project management and implementation participatory and is this participation contributing towards achievement of the project objectives?
25. To what extent has the project been appropriately responsive to the needs of the national constituents and changing partner priorities?
30. What were the strengths, weaknesses, opportunities and threats of the project implementation process?
34. Is the project implementation delayed? If so, has that affected cost-effectiveness?
35. To what extent is the project leveraging additional resources?
36. What impact did the work of HSS project have on the institutional/professional capacity of MoH authorities? Is there evidence of knowledge transfer?
38. Is there evidence that this health infrastructure & supply chain project that started in 2019 would presumably play a pivotal role in supporting the Government in responding to COVID?
39. Has the intervention caused or will be able to cause a significant change in the lives of the intended beneficiaries?
40. How did the intervention cause higher-level effects?
41. Did or will all the intended target groups, including the most disadvantaged and vulnerable, benefit equally from the intervention?
42. Is the intervention transformative – does it create enduring changes in norms – including gender norms – and systems, whether intended or not?
43. Is the intervention leading to other changes, including “scalable” or “replicable” results?
45. What is the level of ownership of MoH authorities towards the project?
46. What are the key factors that will require attention in order to improve prospects of sustainability of the Project outcome and the potential for replication of the approach?
47. 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 Global Fund assistance ends?
48. What are the recommendations for similar support in future?

3. Central Medical Stores Questions: questions will be adjusted based on the specialist area/ job role of the interviewee (not all questions will be asked to all interviewees)

6. To what extent HSS Project technical assistance were relevant in addressing the needs and strategic priorities of the MoH, namely for PELF implementation?
7. To what extent were lessons learned from other relevant projects considered in the project's design?
9. To what extent the project was able to cater the needs of the beneficiaries in the changed context? If and when required an alteration of focus/strategy, was the project flexible? Is there any evidence that the project advanced any key national priorities of MoH, UN, UNDP?
11. On constructing the health infrastructure, what factors drove you to select location?
12. How effective has the project been in enhancing the institutional and professional capacity of MoH authorities?
13. Has the project achieved its outputs? What were the major factors influencing the achievement or non- achievement of the outputs?
15. What are the key factors contributing to project success or underachievement?
16. What are the key risks and barriers that remain to achieve the project objective?
17. To what extent has the UNDP partnership strategy been appropriate and effective?
18. What factors contributed to effectiveness or ineffectiveness?
19. In which areas does the project have the greatest achievements? Why and what have been the supporting factors? How can the project build on or expand these achievements?
20. In which areas does the project have the fewest achievements? What have been the constraining factors and why? How can or could they be overcome?
21. What, if any, alternative strategies would have been more effective in achieving the project's objectives?
22. Are the projects objectives and outputs clear, practical and feasible within its frame?
23. To what extent have stakeholders been involved in project implementation?
24. To what extent are project management and implementation participatory and is this participation contributing towards achievement of the project objectives?
25. To what extent has the project been appropriately responsive to the needs of the national constituents and changing partner priorities?
26. To what extent have resources (financial, human, institutional and technical) been allocated strategically?
27. What factors influenced decisions to fund certain proposed activities, and not others?
29. Did the project's activities overlap and duplicate with other similar interventions (funded nationally and /or by other donors)?
30. What were the strengths, weaknesses, opportunities and threats of the project implementation process?

34. Is the project implementation delayed? If so, has that affected cost-effectiveness?
35. To what extent is the project leveraging additional resources?
36. What impact did the work of HSS project have on the institutional/professional capacity of MoH authorities? Is there evidence of knowledge transfer?
38. Is there evidence that this health infrastructure & supply chain project that started in 2019 would presumably play a pivotal role in supporting the Government in responding to COVID?
39. Has the intervention caused or will be able to cause a significant change in the lives of the intended beneficiaries?
41. Did or will all the intended target groups, including the most disadvantaged and vulnerable, benefit equally from the intervention?
45. What is the level of ownership of MoH authorities towards the project?
46. What are the key factors that will require attention in order to improve prospects of sustainability of the Project outcome and the potential for replication of the approach?
48. What are the recommendations for similar support in future?

4. All other stakeholders Questions: questions will be adjusted based on the specialist area/ job role of the interviewee (not all questions will be asked to all interviewees)

1. Does the project's objective align with the priorities of the local government and local communities?
2. Does the project's objective fit within the national development priorities?
3. Did the project concept originate from local or national stakeholders, and/or were relevant stakeholders sufficiently involved in project development?
4. Does the project objective fit Global Fund strategic priorities?
19. In which areas does the project have the greatest achievements? Why and what have been the supporting factors? How can the project build on or expand these achievements?
21. What, if any, alternative strategies would have been more effective in achieving the project's objectives?
23. To what extent have stakeholders been involved in project implementation?
24. To what extent are project management and implementation participatory and is this participation contributing towards achievement of the project objectives?
30. What were the strengths, weaknesses, opportunities and threats of the project implementation process?
36. What impact did the work of HSS project have on the institutional/professional capacity of MoH authorities? Is there evidence of knowledge transfer?
43. Is the intervention leading to other changes, including "scalable" or "replicable" results?
46. What are the key factors that will require attention in order to improve prospects of sustainability of the Project outcome and the potential for replication of the approach?
47. 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 Global Fund assistance ends?

48. What are the recommendations for similar support in future?

Online Questionnaire

The reference to 'the project' in this questionnaire refers to the construction of the warehouse, and not the entire project.

This section is about relevance of the project.

Relevance of the project could be defined as 'the extent to which the project's objectives are consistent with beneficiaries' requirements, country needs, global priorities and partners' and donors' policies.'

1/Based on your experience and interaction with the project design and implementation, how you rate the following:

Outcomes

The project outcomes exceed expectations on its benefits.

The project outcomes met the expected benefits.

The project outcomes are more or less same as expected benefits.

The project outcomes are less than the expected benefits.

The project outcomes are substantially lower than expected benefits.

The project has negligible level of outcomes achieved.

Shortcomings

The objectives of the project were consistent with requirements and needs of stakeholders (i.e. no shortcomings).

The objectives of the project were slightly different from requirements and needs of stakeholders (i.e. minor shortcomings).

The objectives of the project were somehow inconsistent with requirements and needs of stakeholders (i.e. moderate shortcomings).

The objectives of the project were now consistent with requirements and needs of stakeholders (i.e. significant shortcomings).

The objectives of the project have major deviation from the requirements and needs of stakeholders (i.e. major shortcomings).

The objectives of the project were completely different compared to the requirements and needs of stakeholders (i.e. severe shortcomings).

2/Does the project's objective align with the priorities of the local government and local communities?

Yes – No – somewhat – I do not know. Space for comments.

3/Does the project's objective fit within the national development priorities?

Level of coherence between project objective and national policy priorities and strategies, as stated in official documents.

Yes – No – somewhat – I do not know. Space for comments.

4/Did the project concept originate from local or national stakeholders, and/or were relevant stakeholders sufficiently involved in project development?

Mainly about the level of involvement of local and national stakeholders in project origination and development (number of meetings held, project development processes incorporating stakeholder input, etc.).

Yes – No – somewhat – I do not know. Space for comments.

5/Does the project objective fit Global Fund strategic priorities?

Level of coherence between project objective, and donors' priorities

Yes – No – somewhat – I do not know. Space for comments.

This section is about effectiveness of the project.

Effectiveness of the project could be defined as 'the extent to which the project's objectives were achieved or are expected to be achieved. Effectiveness is also measuring the extent to which the project has attained, or is expected to attain, its major relevant objectives'.

6/Based on your experience and interaction with the project design and implementation, how you rate the following:

Objective:

The project exceeded expectations in achieving its objectives.

The project achieved the expected objectives.

The project achieved more or less same as its expected objectives.

The project achieved less than its expected objectives.

The project achievements are substantially lower than its expected objectives.

The project did not meet its expected objectives.

Shortcomings

The project achieved its objectives with no shortcomings.

The project achieved its objectives with minor shortcomings.

The project achieved its objectives with moderate shortcomings.

The project achieved its objectives with significant shortcomings.

The project achieved its objectives with major shortcomings.

The project achieved its objectives with severe shortcomings (OR) did not achieved its objective.

7/In which areas does the project have the greatest achievements? Why and what have been the supporting factors?

Space for comments.

8/In which areas does the project have the fewest achievements? What have been the constraining factors and why?

Space for comments.

9/To what extent have stakeholders been involved in project implementation? And the project management and implementation were participatory?

Stakeholders involvement exceeded expectations

Stakeholders involvement was as expected.

Stakeholders involvement was more or less as expected.

Stakeholders involvement was lower than expected.

Stakeholders involvement substantially lower than expected.

Stakeholders involvement was negligible.

Space for comments.

This section is about the Efficiency of the project

Efficiency of the project could be defined as ‘a measure of how economically resources and inputs (funds, expertise, time, etc.) are converted to results.’

10/Based on your experience and interaction with the project design and implementation, how you rate the following:

Outputs

The project outputs exceeded the expectations on efficient management of resources and inputs.

The project outputs met expectations on efficient management of resources and inputs.

The project outputs are more or less same as expectations on efficient management of resources and inputs.

The project outputs are less than the expectations on efficient management of resources and inputs.

The project outputs are substantially lower than expectations on efficient management of resources and inputs.

The project was not efficient in managing the resources and inputs.

Shortcomings

The project was completed without shortcomings of resources and inputs management.

The project was completed with minor shortcomings of resources and inputs management.

The project was completed with moderate shortcomings of resources and inputs management.
The project was completed with significant shortcomings of resources and inputs management.
The project was completed with major shortcomings of resources and inputs management.
The project was completed with severe shortcomings (OR) did not efficient in managing resources and inputs.

11/To what extent did the coordination with other UN agencies and UNDP projects in other CO reduce transaction costs, optimize results and avoid duplication?

The question is mainly targeting the UN agencies including UNDP. It is about evidence on value for money gained because of the close coordination and emergence of efficient utilization of resources.

The coordination level was highly effective.

The coordination level was effective.

The coordination level was somehow effective.

The coordination level was less effective.

The coordination level was not effective.

Space for comments.

12/To what extent have resources (financial, human, institutional and technical) been allocated strategically?

Allocation of resources was highly strategic.

Allocation of resources was strategic.

Allocation of resources was somehow strategic.

Allocation of resources was not strategic enough.

Allocation of resources was not strategic.

This section is about the Sustainability of the results

Sustainability of the results could be defined as ‘the continuation or likely continuation of positive effects from the project after it has come to an end, and its potential for scale-up and/or replication. UNDP-supported projects are intended to be environmentally as well as institutionally, financially, politically, culturally, and socially sustainable.’

13/Based on your experience and interaction with the project design and implementation, how you rate the following:

Outcomes

The project outcomes are very likely to continue after the completion of the project.

The project outcomes will continue after the completion of the project.

The project outcomes may continue after the completion of the project.

The project outcomes may not continue after the completion of the project.

The project outcomes are very unlikely to continue after the completion of the project.

The project outcomes are not sustainable after the completion of the project.

Shortcomings

The design and delivery of the project has no shortcomings regarding its sustainability measures or plan.

The design and delivery of the project has minor shortcomings regarding its sustainability measures or plan.

The design and delivery of the project has moderate shortcomings regarding its sustainability measures or plan.

The design and delivery of the project has significant shortcomings regarding its sustainability measures or plan.

The design and delivery of the project has major shortcomings regarding its sustainability measures or plan.

The design and delivery of the project has severe shortcomings (OR) the project outcomes are not sustainable.

14/What are the key factors that will require attention in order to improve prospects of sustainability of the Project outcome and the potential for replication of the approach?

Space for comments.

15/What is the likelihood that any required financial resources will be available to sustain the project results and maintain its management once the Global Fund assistance ends?

Resources are highly likely to made available from local resources.

Resources are likely to made available from local resources.

Resources are likely will not made available from local resources.

Resources are highly likely will not made available from local resources.

Space for comments.

16/What are the recommendations for the next steps or for similar support in the future?

Space for comments.

Annex 3: Data analysis and synthesis matrix

The tables and approaches in this section were guided by the UNDP guidance on conducting projects evaluation¹.

Evaluation Ratings Table

3. Assessment of Outcomes	Rating
Relevance	
Effectiveness	
Efficiency	
Overall Project Outcome Rating	
4. Sustainability	Rating
Overall Likelihood of Sustainability	

Assessment of Outcomes	Rating
Relevance	
Effectiveness	
Efficiency	
Overall Project Outcome Rating	

¹ UNDP - GUIDANCE FOR CONDUCTING TERMINAL EVALUATIONS OF UNDP-SUPPORTED, GEF-FINANCED PROJECTS
http://web.undp.org/evaluation/guideline/documents/GEF/TE_GuidanceforUNDP-supportedGEF-financedProjects.pdf

outcomes achieved:

- exceeds expectations
- as expected,
- more or less as expected
- lower than expected
- substantially lower than expected
- negligible level of outcomes achieved

shortcomings

- there were no shortcomings
- there were minor shortcomings
- there were moderate shortcomings
- there were significant shortcomings
- there were major shortcomings
- there were severe shortcomings

Outcome Ratings Scale - Relevance, Effectiveness, Efficiency

Rating	Description
6 = Highly Satisfactory (HS)	Level of outcomes achieved clearly exceeds expectations and/or there were no shortcomings
5 = Satisfactory (S)	Level of outcomes achieved was as expected and/or there were no or minor shortcomings
4 = Moderately Satisfactory (MS)	Level of outcomes achieved more or less as expected and/or there were moderate shortcomings.
3 = Moderately Unsatisfactory (MU)	Level of outcomes achieved somewhat lower than expected and/or there were significant shortcomings
2 = Unsatisfactory (U)	Level of outcomes achieved substantially lower than expected and/or there were major shortcomings.
1 = Highly Unsatisfactory (HU)	Only a negligible level of outcomes achieved and/or there were severe shortcomings
Unable to Assess (UA)	The available information does not allow an assessment of the level of outcome achievements

Sustainability	Rating
Financial resources	
Socio-political	
Institutional framework and governance	
Environmental	

Overall Likelihood of Sustainability	
--------------------------------------	--

Sustainability Ratings Scale

Ratings	Description
4 = Likely (L)	There are little or no risks to sustainability
3 = Moderately Likely (ML)	There are moderate risks to sustainability
2 = Moderately Unlikely (MU)	There are significant risks to sustainability
1 = Unlikely (U)	There are severe risks to sustainability
Unable to Assess (UA)	Unable to assess the expected incidence and magnitude of risks to sustainability

Annex 4: List of consulted stakeholders

Name	Organization/ Entity	Position
Ivan Amade	CMAM	Infrastructure focal point, technical group
Carla Silva Matos	Ministry of Health	Coordinator, Global Fund Management Unit
Angela Marques	UNDP Mozambique County Office	Programme Manager, Health Portfolio
Valdo Estevao	UNDP Mozambique County Office	Programme Associate, Health Portfolio
Eduardo Shigueo Fujikawa	UNDP Mozambique County Office	
Serena Gonfiantini	UNDP Mozambique County Office	M&E Officer
Eurico Conceicao	UNDP Mozambique County Office	Project Architect
Emmanuel Munatsi	UNDP Mozambique County Office	Project Civil Engineer
Ana Cristina Fernandes	WHO Mozambique Country Office	Program officer Medicines Supply, Health Infrastructure & Equipment Maintenance

Annex 5: List of Consulted documents

1. Financing Agreement between UNDP and Government of Mozambique through MOH, January 2019.
2. Financing Agreement between UNDP and Government of Mozambique through MOH – *Amendment number 1*, November 2019.
3. Financing Agreement between UNDP and Government of Mozambique through MOH – *Amendment number 2*, April 2020.
4. Financing Agreement between UNDP and Government of Mozambique through MOH – *Amendment number 3*, July 2020.
5. Financing Agreement between UNDP and Government of Mozambique through MOH – *Amendment number 4*, December 2020.
6. Financing Agreement between UNDP and Government of Mozambique through MOH – *Amendment number 5*, April 2021.
7. MOH. Health Sector Strategic Plan 2014-2019.
8. CMAM. Pharmaceutical Logistics Strategic Plan (PELF) 2014-2024.
9. CMAM. Operational Plans of PELF 2014-2019.
10. CMAM. Interim Evaluation. Pharmaceutical Logistics Strategic Plan (PELF) 2014-2024.
11. CMAM. PRESENTATION OF THE RESULTS OF THE INDICATORS FOR THE FIRST 9 MONTHS OF 2020.
12. The Health System Strengthening project document, February 2019.
13. UNDP. Project Annual Work Plan.
14. UNDP. Progress update presented to HSS Project Board, January 2021.
15. UNDP. Progress update presented to HSS Project Board, June 2020.
16. UNDP. Progress update presented to HSS Project Board, September 2020.
17. UNDP. PROJECT QA ASSESSMENT: DESIGN AND APPRAISAL, 2019.
18. UNDP. Minutes of the Local Project Evaluation Committee meeting, February 2019.
19. UNDP. Country programme document for Mozambique (2017 2020), July 2016.
20. UNDP. The Independent Evaluation Office (IEO) of UNDP, 2019.

Appendix A: Evaluation Criteria Matrix

Evaluation Criteria and Questions	Indicators (or project attributes)	Methodology	
		Data source(s)	Collection method(s)
Relevance			
Overarching question: How does the project relate to the main objectives of the GEF Focal area, and to the environment and development priorities a the local, regional and national level?			
1. Does the project's objective align with the priorities of the local government and local communities?	Level of coherence between project objective and stated priorities of local stakeholders	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders All other stakeholders including donor	Documents review Interviews Online Questionnaire
2. Does the project's objective fit within the national development priorities?	Level of coherence between project objective and national policy priorities and strategies, as stated in official documents	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders All other stakeholders including donor	Documents review Interviews Online Questionnaire
3. Did the project concept originate from local or national stakeholders, and/or were relevant stakeholders sufficiently involved in project development?	Level of involvement of local and national stakeholders in project origination and development (number of meetings held, project development processes incorporating stakeholder input, etc.)	UNDP CO staff Project's technical officers MOH stakeholders All other stakeholders including donor	Interviews Online Questionnaire
4. Does the project objective fit Global Fund strategic priorities?	Level of coherence between project objective, national priorities and UNDP	All other stakeholders including donor	Online Questionnaire

	strategic priorities (including alignment of relevant focal area indicators)		
5. Was the project linked with and in-line with UNDP priorities and strategies for the country?	Level of coherence between project objective and design with CPD	Project documents/ reports Other relevant documents UNDP CO staff	Documents review Interviews
6. To what extent HSS Project technical assistance were relevant in addressing the needs and strategic priorities of the MoH, namely for PELF implementation?	Level of coherence between project objective and UNDP strategic priorities (including alignment of relevant focal area indicators)	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
7. To what extent were lessons learned from other relevant projects considered in the project's design?	Review of the project ToC and interventions map indicates lessons learned incorporated.	Project documents/ reports UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
8. To what extent were perspectives of those who could affect the outcomes, and those who could contribute information or other resources to the attainment of stated results, taken into account during the project design processes?	Perceptions of stakeholders about the suitability of project design and complementarity to its wider results matrix.	UNDP CO staff Project's technical officers MOH stakeholders	Interviews
9. To what extent the project was able to cater the needs of the beneficiaries in the changed context? If and when required an alteration of focus/strategy, was the project flexible? Is there any evidence that the project advanced any key national priorities of MoH, UN, UNDP?	Evidence that needs assessment has been utilized in project's design and implementation.	UNDP CO staff Project's technical officers MOH stakeholders	Interviews

10. How relevant was the geographical coverage?	Level of coherence between project objective and stated priorities of local stakeholders	Project documents/ reports Other relevant documents	Documents review
11. On constructing the health infrastructure, what factors drove you to select location?	Evidence that needs assessment has been utilized in project's design.	UNDP CO staff Project's technical officers MOH stakeholders	Interviews
Effectiveness			
Overarching question: To what extent have the expected outcomes and objectives of the project been achieved?			
12. How effective has the project been in enhancing the institutional and professional capacity of MoH authorities?	<ul style="list-style-type: none"> • Level of project implementation progress relative to expected level at current stage of implementation • Level of technical capacity of relevant stakeholders relative to level required to sustain project benefits 	UNDP CO staff Project's technical officers MOH stakeholders	Interviews
13. Has the project achieved its outputs? What were the major factors influencing the achievement or non- achievement of the outputs?	Level of progress toward project indicator targets relative to expected level at current point of implementation	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
14. To what extent did the project contribute to the MoH outcomes and outputs and national development priorities? To what extent were the project outputs achieved?	Existence of logical linkages between project outcomes and impacts	Project documents/ reports Other relevant documents	Documents review
15. What are the key factors contributing to project success or underachievement?	<ul style="list-style-type: none"> • Level of project implementation progress relative to expected level at current stage of implementation 	UNDP CO staff Project's technical officers MOH stakeholders	Interviews

16. What are the key risks and barriers that remain to achieve the project objective?	Presence, assessment of, and preparation for expected risks, assumptions, and impact drivers	UNDP CO staff Project's technical officers MOH stakeholders	Interviews
17. To what extent has the UNDP partnership strategy been appropriate and effective?	Perceptions of stakeholders about the inclusiveness of the process for project design and implementation to its wider partnership space.	UNDP CO staff Project's technical officers	Interviews
18. What factors contributed to effectiveness or ineffectiveness?	Level of documentation of and preparation for project risks, assumptions and impact drivers	Project documents/ reports Other relevant documents	Documents review
19. In which areas does the project have the greatest achievements? Why and what have been the supporting factors? How can the project build on or expand these achievements?	Level of project implementation progress relative to expected level at current stage of implementation	UNDP CO staff Project's technical officers MOH stakeholders All other stakeholders including donor	Interviews Online Questionnaire
20. In which areas does the project have the fewest achievements? What have been the constraining factors and why? How can or could they be overcome?	Level of project implementation progress relative to expected level at current stage of implementation	UNDP CO staff Project's technical officers MOH stakeholders	Interviews Online Questionnaire
21. What, if any, alternative strategies would have been more effective in achieving the project's objectives?	Description of alternative strategies that would have been more effective in achieving the project's objectives (lessons learned)	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders All other stakeholders including donor	Documents review Interviews Online Questionnaire
22. Are the projects objectives and outputs clear, practical and feasible within its frame?	Existence of logical linkages between project outputs and outcomes/impacts	Project documents/ reports Other relevant documents UNDP CO staff	Documents review Interviews Online Questionnaire

		Project's technical officers MOH stakeholders	
23. To what extent have stakeholders been involved in project implementation?	Perceptions of stakeholders about the inclusiveness of the process for project design and implementation to its wider partnership space.	UNDP CO staff Project's technical officers MOH stakeholders All other stakeholders including donor	Interviews Online Questionnaire
24. To what extent are project management and implementation participatory and is this participation contributing towards achievement of the project objectives?	Perceptions of stakeholders about the inclusiveness of the process for project design and implementation to its wider partnership space.	UNDP CO staff Project's technical officers MOH stakeholders All other stakeholders including donor	Interviews Online Questionnaire
25. To what extent has the project been appropriately responsive to the needs of the national constituents and changing partner priorities?	Evidence that needs assessment has been utilized in project's design.	Project documents/ reports Other relevant documents	Documents review
Efficiency			
Overarching question: Was the project implemented efficiently, in line with international and national norms and standards?			
26. To what extent have resources (financial, human, institutional and technical) been allocated strategically?	Adequacy of implementation structure and mechanisms for coordination and communication	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers	Documents review Interviews

27. What factors influenced decisions to fund certain proposed activities, and not others?	Factors associated with the funding landscape that influenced the funding levels of the project.	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers	Documents review Interviews
28. To what extent did the coordination with other UN agencies and UNDP projects in other CO reduce transaction costs, optimize results and avoid duplication?	Evidence on value for money gained because of the close coordination and emergence of efficient utilization of resources.	UNDP CO staff Project's technical officers	Interviews Online Questionnaire
29. Did the project's activities overlap and duplicate with other similar interventions (funded nationally and /or by other donors?	Evidence on value for money gained because of the close coordination and emergence of efficient utilization of resources.	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers	Documents review Interviews
30. What were the strengths, weaknesses, opportunities and threats of the project implementation process?	Perceptions of stakeholders about the strengths, weaknesses, opportunities and threats of the project	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders All other stakeholders including donor	Documents review Interviews Online Questionnaire
31. Is the project cost-effective?	<ul style="list-style-type: none"> • Quality and adequacy of financial management procedures (in line with UNDP, UNOPS, and national policies, legislation, and procedures). • Financial delivery rate vs. expected rate. • Management costs as a percentage of total costs. 	Project documents/ reports Other relevant documents	Documents review
32. Are expenditures in line with international standards and norms?	<ul style="list-style-type: none"> • Cost of project inputs and outputs relative to norms and standards for 	Project documents/ reports Other relevant documents	Documents review

	donor projects in the country or region.		
33. Is the project implementation approach efficient for delivering the planned project results?	<ul style="list-style-type: none"> Planned and actual level of human resources available. Extent and quality of engagement with relevant partners / partnerships. Quality and adequacy of project monitoring mechanisms. 	Project documents/ reports Other relevant documents	Documents review
34. Is the project implementation delayed? If so, has that affected cost-effectiveness?	<ul style="list-style-type: none"> Project milestones in time Planned results affected by delays. Required project adaptive management measures related to delays 	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
35. To what extent is the project leveraging additional resources?	Amount of resources leveraged relative to project budget	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
36. To what extent do the M&E systems utilized by UNDP ensure effective and efficient project management?	<ul style="list-style-type: none"> Quality and adequacy of M&E procedures (in line with UNDP, UNOPS, and national policies, legislation, and procedures). 	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers	Documents review Interviews
Impact			
Overarching question: Are there indications that the project has contributed to, or enabled progress toward reduced environmental stress and/or improved ecological status?			
36. What impact did the work of HSS project have on the institutional/professional capacity of MoH	<ul style="list-style-type: none"> Extent to which the intervention achieved, or expects to achieve, results (taking into account the key factors that influenced the results 	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers	Documents review Interviews Online Questionnaire

authorities? Is there evidence of knowledge transfer?		MOH stakeholders All other stakeholders including donor	
37. What has happened or is happening in the country that is making this intervention especially relevant now?	Evidence that needs assessment has been utilized in project's design.	Project documents/ reports Other relevant documents	Documents review
38. Is there evidence that this health infrastructure & supply chain project that started in 2019 would presumably play a pivotal role in supporting the Government in responding to COVID?	<ul style="list-style-type: none"> Attributed contribution of the project on public health impact. 	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
39. Has the intervention caused or will be able to cause a significant change in the lives of the intended beneficiaries?	<ul style="list-style-type: none"> Attributed contribution of the project on public health impact. Extent to which the project contributed to the Theory of Change for the relevant country programme outcome 	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
40. How did the intervention cause higher-level effects?	Existence of logical linkages between project outputs and outcomes/impacts	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
41. Did or will all the intended target groups, including the most disadvantaged and vulnerable, benefit equally from the intervention?	Positive or negative effects of the project on local populations.	Project documents/ reports Other relevant documents UNDP CO staff Project's technical officers MOH stakeholders	Documents review Interviews
42. Is the intervention transformative – does it create enduring changes in norms	Extent to which the project contributed to the Theory of Change	Project documents/ reports Other relevant documents	Documents review Interviews

– including gender norms – and systems, whether intended or not?	for the relevant country programme outcome	UNDP CO staff Project’s technical officers MOH stakeholders	Online Questionnaire
43. Is the intervention leading to other changes, including “scalable” or “replicable” results?	Level of technical capacity of relevant stakeholders relative to level required to sustain project benefits	Project documents/ reports Other relevant documents UNDP CO staff Project’s technical officers MOH stakeholders All other stakeholders including donor	Documents review Interviews Online Questionnaire
44. How will the intervention contribute to changing society for the better?	Project ToC confirms that the project enables the society to improve their livelihood and social benefits.	Project documents/ reports Other relevant documents	Documents review
Sustainability Overarching question: To what extent are there financial, institutional, socio-political, and/or environmental risks to sustaining long-term project results?			
45. What is the level of ownership of MoH authorities towards the project?	<ul style="list-style-type: none"> • Level of initiative and engagement of MoH authorities in project activities and results • Level of technical capacity of relevant stakeholders relative to level required to sustain project benefits 	Project documents/ reports Other relevant documents UNDP CO staff Project’s technical officers MOH stakeholders	Documents review Interviews
46. What are the key factors that will require attention in order to improve prospects of sustainability of the Project outcome and the potential for replication of the approach?	<ul style="list-style-type: none"> • Existence of institutional and governance factors, socio- political factors, and other factors that might reduce the project benefits in the future. 	Project documents/ reports Other relevant documents UNDP CO staff Project’s technical officers MOH stakeholders All other stakeholders including donor	Documents review Interviews Online Questionnaire

<p>47. 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 Global Fund assistance ends?</p>	<ul style="list-style-type: none"> • 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 	<p>Project documents/ reports Other relevant documents UNDP CO staff Project’s technical officers MOH stakeholders All other stakeholders including donor</p>	<p>Documents review Interviews Online Questionnaire</p>
<p>48. What are the recommendations for similar support in future?</p>	<p>Stakeholders suggestions and recommendations, in addition to synthesis of findings compared to relevant guidance.</p>	<p>Project documents/ reports Other relevant documents UNDP CO staff Project’s technical officers MOH stakeholders All other stakeholders including donor</p>	<p>Documents review Interviews Online Questionnaire</p>