

2009

PROJECT EVALUATION

Executive Summary



UNV Support to the Health Sector in Limpopo Province



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Notice: This report represents an independent evaluation and the views and opinions contained in this report are not necessarily those of the UNDP, the UNV Programme, the Limpopo Provincial Departments of Health and Social Development.

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FOREWORD

As the UNV Doctors Programme Evaluation Team, we have the privilege and pleasure to release the “UNV Support to the Health Sector in Limpopo Province, Evaluation Report 2009”. This Executive Summary of the Report presents our investigation and findings as an independent evaluation team during the period May 2009 to July 2009 at the bequest of the UNDP PMU Polokwane Office.

BizMetrics’ brief was to undertake a rapid Project Evaluation to identify and establish whether the objectives of the current project implementation have been achieved and whether adjustments if any, need to be made to the current project in order to achieve the stated objectives. As the evaluation team, we put all our efforts to reach a wide consensus among the interviewees and stakeholders as possible. We hope that the recommendations of this evaluation will inform the project leadership and stakeholders as well as strengthen the institutional arrangements and capacity to manage UNDP’s programmes. It is our belief that this project is strategically located to facilitate and strengthen access to quality health care for people of Limpopo. Thus may it find resonance with UNDP’s senior management and staff and the programme partners going forward. We also sincerely hope that the evaluation will provide a basis for deepening the positive lessons, overcoming institutional obstacles and setting clear benchmarks for tracking progress of the UNV doctor and similar programmes in the future.

This report is a result of many people’s dedication and contributions, thus at the end of this rapid evaluation exercise, we would like to thank all the key stakeholders (especially the UNV Doctors, the Hospital CEOs and Clinical Managers and the Staff and co-workers at the facilities – see Appendix 4) interviewed for their precious time spent and the valuable information provided. We are also deeply indebted to all the people who worked tirelessly under a very tight timeline to complete this evaluation.

We were are humbled and appreciated the valuable support and contribution from the UNDP Offices and the Limpopo Provincial Department Health and Social Development, which would not have been possible without the dedicated support and guidance from the PMU specifically from Mr Gavin Joachims, the Project Manager.



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ACRONYMS and ABBREVIATIONS

CTO	Compensatory Time Off
DoH	Department of Health
MDGs	Millennium Development Goals
MGDs	Millennium Development Goals
PDGs	Provincial Development Goals
PMU	Project Management Unit
PSD	Programme Support Document
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNDP CO	United Nations Development Programme Country Office
UNV	United Nations Volunteer Programme
UNVs	UNV Doctors

EXECUTIVE SUMMARY

This is a report on the evaluation of the UNDP UNV Doctors project in the Limpopo Province, South Africa. The purpose of the review was to establish whether the objectives of the current projects have been achieved and whether adjustments if any, need to be made to the current projects in order to achieve the stated objectives. The executive summary gives a brief synopsis of the substantive elements of the evaluation, while emphasising performance highlights, recommendations and lessons learned.

1.1. Key Evaluation Findings

The evaluation considered the aspects of performance of the UNDP UNI Program along the key evaluation themes criteria as outlined in the summary below. The findings are given from the perspectives of the three main categories of the target respondents: the UNV Doctors themselves, the UNDP UNV Programme Partners and the staff who worked with the UNV Volunteers.

1.1.1. Brief demography of the UNV Doctors and specialist services rendered

An attempt was made to present a profile of the UNV doctors and the services they provide. At the time of the evaluation the nationalities of the UNV doctors included Russians, Filipino, Ethiopian, Nepalese, and Bangladesh and Indian volunteers. In terms of gender 8 were female and 14 male. Their specialties included Anaesthesia; General Surgery; Endoscopy; Ophthalmology; Neurosurgery; Cardiology; Community/Environmental Health; Obstetrics and Gynaecology; Paediatrics; and Family Medicine. The table below provides a profile of the UNV doctors' specialties.

Table: Summary Profile of the UNV Specialist Doctors Currently Under the Project (July 2009)

(a) Gender Distribution		(c) Speciality Distribution		(d) Duty Station Distribution	
Gender	No	Speciality	No	Duty Station (Hospital)	No
Male	14	Anaesthesia	6	Tshilidzini	3
Female	8	General Surgery	2	Mecklenburg	1
Total	22	Paediatrics	1	St. Ritas	2
(b) Nationality Distribution		Cardiology	2	Polokwane/Mankweng	7
Nationality	No	Endoscopy	1	Philadelphia	2
Russian	4	Family Medicine	5	Lebowakgomo	1
Filipino	6	Neurosurgery	1	Zebetela	1
Ethiopian	1	Obstetrics & Gynaecology	2	Letaba	2
Indian	3	Ophthalmology	1	Elim	2
Nepalese	2	Community/ Enviro. Health	1		
Ukrainian	3	Total	22	Total	22
Bangladesh	2				
Total	22				

1.1.2. Providing Care & Support to UNV Doctors

Support to the UNV doctors is crucial to the success of the UNV Doctors programme and this was evaluated from the UNV Programme Partners and the UNV doctors' perspectives (but not the co-workers) and the following findings were elicited:

- The UNV Doctors Project had interacted with UNV doctors and facilitated their development and learning through encouraging their attendance to conferences and seminars. However, this was rather erratic and could be improved.
- The UNV Doctors Project has ensured that all UNV doctors' concerns (vis-à-vis entitlements, accommodation, etc.) were dealt with speedily and efficiently, but there were instances of tardiness in responses from the volunteers' perspectives. Thus there is room for improvement.
- The UNV Doctors Project has ensured that there is the transferral of skills between UNV Doctors and local junior doctors/specialists and interns. However the heavy demand for service delivery has limited the full potential of this aspect of the programme.
- However, there are some weaknesses with regards efficiency and effectiveness with which UNV Doctors issues are dealt with - a specific example is delays in the issuance of UNV doctors' Diplomatic ID Cards in 2008.

1.1.3. Enhancing Better Health Service Delivery

The overall objective of the project was to enhance service delivery in the province of Limpopo and evaluation of this aspect was pursued under this evaluation theme with the following findings:

- The Project has strengthened and facilitated relationships between the internal and external project partners.
- The Project increased close interaction between external project partners and hospitals/clinics where UNVs are placed.
- The Project has continued fielding and recruiting international specialists to assist with the skills shortages in the Province.
- The Project ensured that there is the transferral of skills between UNV Doctors and local junior doctors/specialists and interns; and
- The Project made a real difference to health care provision in the Limpopo Province especially in the facilities (mostly rural) where the doctors have been deployed.

1.1.4. Encouraging volunteerism through the Volunteerism Campaign

Evaluation in this section aimed at finding out the contribution and achievements of the project with respect to encouraging volunteerism among the local doctors and other medical professionals, a stated objective of the UNV programme in Limpopo.

- The UNV doctors as vehicle for promoting volunteerism amongst local medical staff and professionals has not had much impact though some that opportunities are still there to leveraged the programme in this regard.
- The project's aim was to raise awareness within Limpopo Province of the importance and the value of voluntary activity. This has been mostly in the appreciation of the role of the UNV doctors in service delivery rather than volunteerism among the local medical personnel.
- The programme has indeed increased support for the Limpopo Department of Health in the delivery of its services.
- There has been some instances where the importance of volunteerism has been amply demonstrated: e.g. during the Cholera outbreak in Messina in November 2008. Then, a UNV Epidemiologist and several other UNVs were joined by local specialists and doctors who volunteered during this outbreak.
- Unfortunately, it seems that while the UNV programme aims to promote volunteerism among the local staff, they continue to perceive the UNV doctors as extra hands of cheap labour and not as support personnel.

1.1.5. The weaknesses of the UNV Doctors Project

- There was a feeling among respondents that the project was poorly conceptualised and that the project documentation was inadequate. This has affected the project implementation itself as is reflected in delays in the finalisation of critical documentation due extensive content editing and process support from UNDP Pretoria.
- There are organisation structural problems with need for clarification of lines of accountability, especially with regard to UNDP CO and UNV Bonn (roles and responsibilities) and human resources and leadership development.
- There are some problems in programming capabilities such as poor understanding of Results Based Management. There is no standard monitoring and support of UNVs within health facilities. As a result there was poor reporting, although this has improved in the last 12 months due to UNDP active involvement.

- The project has often suffered undue delays and long recruitment process has resulted in fewer doctors being recruited than was originally envisaged.
- A significant weakness in the project itself has been that the roles of the UNV doctors were not really defined from the start with regards the hospitals where the UNV doctors serve.
- Though the programme aims to impact positively in volunteerism among the local doctors and other professionals, there are no operational guidelines or form strategies on how the UNVs can promote volunteerism among local doctors; especially notable was the lack of the envisaged Volunteerism Campaign; and
- There are no guidelines on how the UNVs' should be treated and their relationship with other SA government agencies aside from the Department of Health remains clouded. This has resulted in problems for the UNV doctors' renewal of licences and visas.

1.1.6. Strengths of the UNV Doctors Project

- The project has brought Specialist medical doctors to the province and in many instances these are the only ones in Limpopo with the particular specialization. This has increased access to specialized care and thus the project has strengthened health service delivery at an affordable level, especially in these rural communities.
- Additionally, though felt that it was minimal and unstructured by some, there has been transfer of skills and knowledge and as result much needed medical competencies were provided. The project has the potential of bringing the idea of volunteerism closer to the local professionals, though sat the moment this is not happening significantly.
- The UNVs are selfless and hardworking brought about by the values instilled in them while they were training in their respective countries and the patients are benefiting from this kind of work ethic bringing about an improved quality of patient care in the hospitals they serve in.
- Since the UNVs come from different countries, the program fosters a global brotherhood of medical professionals whose South African experience will always form a bond between them when they go back to their respective countries.
- The project has also helped by enhancing the UNVs skills in working and improvising with limited/restricted resources. Aside from providing additional man power in the delivery of healthcare services it has shown the community or dedication and willingness of the province to provide the people of health needs; and
- Some UNV doctors also felt that the patience, tolerance and support from the Department Focal Point was remarkable and this promotes the very spirit of volunteerism and camaraderie among the stakeholders.

1.2. Lessons Learned

The UNV Project has also produced lessons that can be taken cognation of in future projects and these include lessons with respect to the following:

1.2.1. Support to UNV Doctors

- The UNV Doctors Project has interacted with UNV doctors and facilitated their development and learning through encouraging their attendance to conferences and seminars, but there is room for improvement.
- The UNV Doctors Project has ensured that all UNV doctors' concerns (vis-à-vis entitlements, accommodation, etc.) are dealt with speedily and efficiently, but more could be done.
- The UNVs are not just workhorses, they can be utilized to make decisions for the hospitals they work in and the UNV Doctors project as well.

1.2.2. Role of UNV Doctors in enhancing health service delivery.

- As a short term measure, UNV doctors play a significant role in reducing the doctor-patient ratio; and
- The Limpopo Department of Health cannot only depend on UNV doctors for its healthcare needs - a comprehensive retention strategy is required to keep local doctors.

1.2.3. Role of UNV Doctors in promoting volunteerism and retention of local doctors in target areas.

- The role of UNV doctors as a vehicle for promoting volunteerism amongst local medical staff and professionals might not be effective.
- The impact of the project on retention of local doctors in the target areas is not really known as this has not been measured or tracked.
- Promotion of volunteerism should come from the DOH and UNDP CO/ PMU using the UNVs' works as a focal point.
- Enhancement of skills of local doctors alone is not enough to achieve the aims of the programme.
- South African public healthcare system has a lot of problems which are not expected to be sorted out soon; and the programme is only temporary stop gap measure.
- A lot more can be achieved if there is willingness and involvement not only of the UNV programme partners but also on the part of the host community and the people.

1.2.4. UNV Doctors recruitment and deployment

- One UNV databases is not sufficient to source profiles of UNVs targeted for recruitment; and
- Recruited specialists need to be assigned to hospitals according to their level of qualifications and experience to better utilise their skills.

1.2.5. UNV Doctors programme project management

- Poorly designed project document provided challenges in the overall planning and implementation of the project; and
- There need to be closer interaction between stakeholders for the project to be a success.

1.3. Recommendations

Part of the aims of this evaluation was to get recommendations on the UNV Programme and these are presented below as specific and general recommendations:

1.3.1. Specific Recommendations

- The UNV Doctors Project must enhance general support for UNV Doctors.
- The UNV Doctors Project must continue interaction with UNV doctors and facilitating their development and learning through encouraging their attendance to conferences and seminars.
- The UNV Doctors Project should help the UNV doctors especially in speedily and efficiently resolving with matters operating to emigration and renewals.
- There should be clarification of roles and responsibilities among partners and creation of an interactive platform to maximise healthcare delivery.
- The project should develop strategies to diversify the skills of the volunteer base as well as structure the transfer of these skills to the local doctors.
- Programme must review its strategies on Promoting Volunteerism among local doctors.
- The project needs to review its role in enhancing retention and commitment of local medical experts to serve in disadvantaged areas as a result of increased appreciation of volunteerism; and
- The project should critically review its impact towards the MDGs and PDGs and incorporate this into its programming and reporting.

1.3.2. General Recommendations

- The programme needs to enhance recruitment and placement of UNV Doctors.
- There is need to develop a more efficient UNV Volunteer Recruitment & Retention Database.
- The programme should enhance capacity of the PMU to manage the project and its demands and challenges.
- The programme should enhance the project programming components and mainstream Results Based Management these into the project.
- The programme should establish an effective monitoring and evaluation system; and
- There is a need to develop a stronger and responsive volunteers supervision strategy; and
- South African doctors themselves should enrol in UNV Doctors programme.

1.4. The Conclusion

In conclusion, the evaluation revealed that:

- The project has achieved a number of its objectives satisfactorily but what has been painful outstanding has been the imparting of volunteerism to local medical practitioners. This has not happened to any noticeable extent.
- The project has made a real difference to health care provision in the Province. It has vastly improved health service delivery both in quantity and quality of services.
- There has been a transferral of skills and medical expertise to a reasonable extent. The limitation here has been the fact that most of the volunteers are inundated with work and have little time to transfer skills direct as they are at the forefront of health care delivery often without a local co-worker.
- With regard to the UNV doctors as a vehicle for promoting volunteerism amongst local medical staff and professionals, and the public has unfortunately not done well. The envisaged volunteer programme did not materialize and without a focus on promoting volunteerism directly there has been failure in achieving this outcome.
- The project partners (UNDP CO, UNV, PMU and Health Authorities) have indeed each played its role satisfactorily despite challenges commensurate to such a complex and extended project. Better collaboration will enhance the programme.
- Regarding organizational capacity the project has been doing progressively better especially since the appointment of the project manager. Save for a few areas where more can still be done, e.g. supporting the UNV through enhanced visits etc, the project management through the PMU has done well.

Finally, it is hoped that the lessons learnt and recommendations that have been identified above offer opportunities and best practices to inform the design of other UNV Doctors Projects. In all, the UNV Doctors programme has been effective in increasing service delivery through the importation and placement of qualified volunteer-doctors to address a serious skill shortage in the province of Limpopo. This is what should be expanded and built upon going into the future.

Appendix 01

The UNV Project Evaluation Project Log Frame

PROJECT PURPOSE
<ul style="list-style-type: none"> The primary purpose of this evaluation will be to assess the impact of this Project toward health promoting, and development services to the people of Limpopo. The evaluation should clearly assess the progress of the project since the project formulation, whether benchmarks and/or targets have been met, and whether the design of the Project is enabling a participatory process of development

PROJECT OBJECTIVES
<ol style="list-style-type: none"> Assess the Project objectives, expected outcomes (indicators), activities undertaken, inputs and resources as stated in the Project Document (as well as the Terms of References of this Evaluation). Assess the progress in achieving the objectives and results so far. Assess action to be taken to complete already initiated tasks toward meeting the objectives and expected outcomes, or in the case of not obtaining the expected results, recommend ways forward. Assess whether the activities and outputs of the project is consistent with the overall goal and the attainment of its objectives; and, the effectiveness and extent to which activities have attained its objectives. Assess whether the project has made a real difference to health care provision in the Province Capture lessons from experiences of the project - issues, opportunities and best practices emerging from this project to inform the design of other UNV Doctors Projects, and how these experiences can inform future funding for further resource mobilization for the project.

Key Project Stakeholders	
<i>Primary</i>	<i>Secondary</i>
<ul style="list-style-type: none"> UNDP Limpopo Provincial Departments of Health and Social Development. 	<ul style="list-style-type: none"> LDOHSD Facilities UNV doctors co-workers Communities served by hospitals

Resources	Activities	Deliverables
<ol style="list-style-type: none"> Human Resources: <ol style="list-style-type: none"> Technical consultants: Nomvula Marawa and Pino Mavengere and support staff (BizMetrics) Financial Resources: <ol style="list-style-type: none"> Budgeted (R 210 000) Materials for the Programme: <ol style="list-style-type: none"> BizMetrics Evaluation Framework and Tools Equipment or physical resources: <ol style="list-style-type: none"> None particularly Information and Technology: <ol style="list-style-type: none"> Computers and programmes 	<ol style="list-style-type: none"> Prepare and present of an action plan for the Project Evaluation to the UNV/UNDP CO. Develop the Evaluation Toolkit (qualitative and quantitative) focusing on key issues as identified in the TORs (see our sample evaluation Checklist). Review relevant material for the project (Project document, Project reports, Project Work Plans) as provided by the UNV/UNDP CO Plan and undertake field visits in Polokwane and other places of UNV placements. Meet with the relevant Project stakeholders at DoHSD in Polokwane, Project management, UNDP staff and UNV Programme Officer. Data Synthesis and Develop and present Draft Report Develop and present Final Report 	<p><i>A Comprehensive Analytical Report</i> (in English) that should include at least the following:</p> <ul style="list-style-type: none"> Executive summary Introduction The Project and its development context Key findings and conclusions Recommendations Lessons learnt Annexes: TOR, field visits, people interviewed, documents reviewed, etc.

Key Programme Assumptions:	Key Programme Risks
<ul style="list-style-type: none"> Necessary funding will be available from UNDP and the Limpopo Department of Health and Social Development. Support by Health sectoral partners and stakeholders Cooperation from incumbents within the provincial DOHSD Senior management goodwill and support at all levels of stakeholders 	<ul style="list-style-type: none"> Lack of cooperation by provincial personnel and/or stakeholders Negative perceptions by stakeholders Disputes regarding findings of the evaluation and review Project duration and mandates can easily expand beyond initial expectations Lack of programme information and evidence