

Minutes of the Project Board Meeting

- **Project Name:** Reducing UPOPs and Mercury Releases from the Health Sector in Africa
- **Project ID:** 00096344
- **Output IDs:** 00090700
- **Venue:** Conference room, Ridge Royal Hotel, Cape Coast, Ghana
- **Date & Time:** 14 December 2018, 13h00-14h30 (GMT)

Meeting Participants

Project Board:

- **Executive:**
 - Ekaterina Paniklova*, Senior Programme Coordinator, UNDP IRH (via call, on behalf of IRH Manager)
- **Senior Supplier:**
 - Etienne Gonin*, Programme Analyst, Montreal Protocol and Chemicals Unit, UNDP IRH
 - Rosemary Kumwenda*, Regional Team Leader, HIV, Health and Development, UNDP IRH (excused)
- **Senior Beneficiary:**
 - Ernest Konadu Asiedu*, Quality Manager, Ghana Health Services, Ministry of Health, Ghana (on behalf of National Project Director, Ghana)
 - Joel Ayim Darkwah, Assistant Programme Officer, UNDP Ghana
 - Hanitriniaina Randrianomenjanahary*, National Project Director, Ministry of Environment, Madagascar
 - Hantanirina Ravaosendrasoa, Deputy National Project Director, Ministry of Health, Madagascar
 - Noah Langeni Mwasalujoja*, Principal Health Officer, Ministry of Health (MoHCEDC), Tanzania (on behalf of National Project Director, Tanzania)
 - Florence Kabinga Mwale*, Chief Environmental Health Officer, Ministry of Health, Zambia (on behalf of National Project Director, Zambia)
 - Caoimhe Hughes, Programme Officer, UNDP Zambia

**Voting members in the project board.*

Others:

- **Responsible Parties:**
 - Susan Wilburn, Sustainability Director, Healthcare Without Harm (HCWH)
 - Ute Pieper, Senior Expert, World Health Organization (WHO)
 - Akosua Kwakye, Programme Officer, World Health Organization (WHO) Ghana
- **Regional Expert Team:**
 - Jan-Gerd Kuehling, Chief Technical Expert, UNDP IRH (Project)
 - Ruth Stringer, International Science and Policy Coordinator, HCWH
 - Selimcan Azizoglu, Project Manager, UNDP IRH (Project)
- **Project Support:**
 - Zühre Güven, Project Assistant, UNDP IRH (Project)
- **National Project Implementation Units:**
 - Abena Nakawa, National Project Coordinator, UNDP Ghana (Project)
 - Richard Amfo-Otu, National Technical Expert, UNDP Ghana (Project)
 - Gifty Amuah, National Project Assistant, UNDP Ghana (Project)
 - Sandrine Andriantsimietry, National Project Coordinator, UNDP Madagascar (Project)
 - Brian Mwape Nkandu, National Project Coordinator, UNDP Zambia (Project)
 - Tsibu Bbuku, National Technical Expert, UNDP Zambia (Project)
 - Mazuba Mwambazi, National Project Assistant, UNDP Zambia (Project)
 - Deogratias Mkembela, National Project Coordinator, UNDP Tanzania (Project)
 - Hussein L. Mohamed, National Technical Expert, UNDP Tanzania (Project)
- **External participants/observers**
 - Gladys Ngeno, National Technical Expert, Kenya
 - Joseph Okwesio, National Technical Expert, Kenya
 - Victoria Masemba, National Technical Expert, Uganda
 - Zaidoun I. Al Qasem, National Project Manager, UNDP Jordan
 - Peder Bisbjerg, Midterm Review Consultant, USA (via call)

Meeting Agenda:

Time	Session
13h00 – 13h10	<i>General opening and introduction</i> <ul style="list-style-type: none">• Chair: Ekaterina Paniklova, Senior Programme Coordinator, UNDP IRH (on behalf of IRH Manager, participation through a call)
13h10 – 13h50	<i>Presentation on progress and planning</i> <ul style="list-style-type: none">• <i>Presentation of the progress for 2018 and work plan for 2019</i>, Selimcan Azizoglu, Project Manager• <i>Presentation of the draft midterm review (MTR) report</i>, Peder Bisbjerg, independent MTR consultant• <i>Presentation of the key technical issues</i>, Jan-Gerd Kuehling, Chief Technical Expert• <i>Questions and answers</i>
13h50 – 14h20	<i>Discussions and inputs from Board Members</i>
14h20 – 14h30	<i>Recommendations and conclusions</i>

Meeting opening, and discussions were facilitated by Etienne Gonin. Minutes of the meeting was taken by Zühre Güven.

1. General Opening and Introduction

Ekaterina Paniklova (Senior Programme Coordinator):

- Welcomed the Project Board members and informed that Gerd Trogemann (IRH Manager) could not chair this Project Board meeting due to the last-minute request to attend another important event. She will be in this meeting on behalf of him but considering the fact all participants are all in Ghana and she is in Istanbul, she has requested Etienne Gonin to facilitate the meeting and mentioned that whenever there is a possibility, she will be asking to speak or to comment.

Etienne Gonin (MPU/Chemicals):

- Thanked Ekaterina and he reminded that another board member as a senior supplier for this project, Rosemary Kumwenda (Team Leader for HHD Team, UNDP IRH) could not join this meeting and he, himself, is representing Montreal Protocol and Chemicals Unit.
- Introduced four senior beneficiaries; Ministry of Health of Ghana, Ministry of Health of Tanzania, Ministry of Environment of Madagascar and Ministry of Health of Zambia. He suggested that it will be good if only one person for delegation could take the floor.
- Also, introduced responsible parties; Susan Wilburn and Ruth Stringer from the NGO Healthcare Without Harm (HCWH) as well as Ute Pieper, Senior Expert representing the WHO.
- Additionally, on behalf of the regional expert team, he mentioned Chief Technical Expert, Jan Gerd Kühling and project coordinators from team members both from the regional component and from the four national components of this project.
- We have had important discussion in the last 2,5 days on all aspects of the project implementation, so we are all very familiar with the latest development in each of the four countries and particularly in this regional component which we are having this board now. We also have discussed particularly this morning, planning for the upcoming year. Based on these discussions, board meeting started with the agenda and presentation on the progress report and workplan of the project by Selimcan Azizoglu, Project Manager (UNDP IRH).

2. Presentation of the progress and the planning

Selimcan Azizoglu (Project Manager):

- Provided brief progress report (covering the period between May-December 2018).¹
 - The implementation of regional component, by January 2019, is moving from Activity 3a to Activity 4a. Outcome 5 related to M&E is implemented throughout the project.

Activity 3

- The first procurement round with the delivery for the procurement of mercury free medical devices and healthcare waste management (HCWM) equipment was completed in this reporting period.

¹ To avoid duplication with the progress report, only key highlights of the progress are covered in the minutes.

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- On the procurement of HCWM equipment, 57 different items, in total of 2553 equipment were procured centrally through UNDP IRH. All items were fully delivered and installed in 4

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project countries by the end of August 2018. First installation of the autoclaves was completed in Ghana (April-18) and this followed with installations in Tanzania (May-18), Zambia (July-18) and Madagascar (August-18).

- Overview of the regional procurement budget allocation is given in below table with additional note of regional support for local activities including technical training after delivery/installations of HCWM equipment in Ghana; consultancy support on bio-digestion, flagship activity in Tanzania; and provision of electric cables for site readiness in Madagascar. It should be noted that minus/plus balances will be balanced in the second round of procurement, which was earlier projected as \$1,021,282 and in the current context, it will be \$890,461.

	Allocated Budget	2017 PB Support	Mercury Free DAP	HCWM Lot1 DAP	HCWM Lot2 DAP	HCWM DDP Costs	HCWM Total	Local Activity	Total	Balance
Ghana	313,611.00	10,000.00	14,197.60	69,742.65	283,306.25	12,270.00	365,318.90	8,308.87	387,825.37	-64,214.37
Madagascar	313,611.00	10,000.00	11,167.40	55,859.45	172,199.55	24,975.00	253,034.00	80,299.82	344,501.22	-20,890.22
Tanzania	313,611.00	10,000.00	8,370.25	41,604.10	259,458.45	28,910.00	329,972.55	4,990.00	343,332.80	-19,721.80
Zambia	313,611.00	10,000.00	15,173.30	45,713.85	306,832.75	31,885.00	384,431.60	-50,000.00	349,604.90	-25,993.90
	1,254,444.00	40,000.00	48,908.55	212,920.05	1,021,797.00	98,040.00	1,332,757.05	43,598.69	1,425,264.29	-130,820.29

Table 1. Procurement budget allocation and disbursement plan per country at regional level

Activity 5

- As planned, the Mid-Term Review (MTR) is being conducted by an independent international consultant, Peder Bisbjerg (Denmark). During October-November 2018, he had missions to each of project countries and Istanbul Regional Hub to evaluate the progress in the project. Draft findings and recommendations will be presented in the upcoming regional board meeting in Ghana. The finalization of MTR process with the submission of management responses is expected by the end of January 2019.
- Following discussions during the last regional project meeting, on establishing expertise and enhancing operational capacity for communication/outreach activities at regional and national levels, the regional component has very recently completed the recruitment of an international expert on knowledge management and communication. With this regional meeting, Fitsum Habtemariam (Ethiopia) has started his post as communication and knowledge management specialist with an engagement of ca. 50% until April 2020 and will be based in Istanbul Regional Hub.

Financial Report (as of 11 December 2018)

- Approved budgets for regional component in 2018, 2019 and 2020
 - 2018: \$617,726; current delivery is \$593,745 (96%)
 - 2019: \$1,202,249
 - 2020: \$232,085
- The total budget delivery at regional level (\$2,532,473 - 63% of total budget) is on track and also in line with the overall project budget delivery including all national components (63%).

Planning – Next steps (2019-2020):

- Thematic focus of the next steps until the project closure in April 2020 is detailed in the progress report.
- Details of 2019-2020 annual workplan with detailed 2018-2020 budgeting excel is also shared in the meeting folder. In terms of implementation schedule, the project is on track for the completion of its all activities by April 2020.
- Feedbacks and recommendations on the way forward of the project implementation at the regional level have been provided during the regional meeting and following items were noted as key consideration on the way forward for the project implementation at regional level:
 - Intensification of capacity building on HCW monitoring and data collection, including quarterly key indicators reporting (on mercury and UPOPs reductions) from national components.
 - Intensification of communication and outreach activities.
 - Follow up assignment on gender equality and human rights.
 - Development of project's exit strategy with roadmaps on key HCWM issues.
 - Capacity building and regional coordination for the development of national replication and scale up proposals.
 - Consideration for the date and location of next regional project meeting.
- Selimcan Azizoglu also reminded that the progress report including updates on annual targets, results, project risks and other relevant updates; and planning documents including annual workplans were both shared with meeting participants in the meeting package and by email as well as uploaded into the meeting's online folder.
- Planning – elements to be approved by the project board:
 - Consideration of project progress report (May-December 2018).
 - Consideration of budgets and annual work plans for 2019-2020.
 - Consideration of date and location for the next regional project board meeting.
 - Any other recommendations.

3. Presentation of draft Midterm Review (MTR)

Peder Bisbjerg (MTR consultant):

- Briefed about the structure of his presentation: (1) Objectives of a Midterm Review; (2) Findings of the MTR; (3) Recommendations and Conclusions; (4) Next Steps
- Objectives of a Midterm Review, an independent evaluation of a development work, are (1) Assessment of progress towards results; (2) Monitoring of implementation and adaptive management to improve project outcomes; (3) Early identification of risks to sustainability; and (4) Emphasis on supportive recommendations.

- Activities undertaken during the MTR are (1) Meetings with all key stakeholders (about 120 people in five countries); (2) Visits to 27 sites, inclusive 20 HCFs; and (3) Desk review of documents.
- Preliminary findings of the MTR are in terms of project strategy:
 - The project is well aligned with the various stakeholder's policies: GEF, UN SDG, WHO, HCWH and MoH & MoE of project countries.
 - Project budget and resources are adequate to implement the projected activities.
 - There is a very good collaboration amongst stakeholders, especially between regional and national components as well as with partners.
- Findings on the progress toward results:
 - The project is on track to complete its objectives.
 - Delivered a total of 2,553 items to 24 model healthcare facilities; this included 18 autoclaves for 14 HCFs.
 - The 24 model facilities also received 2,301 mercury-free devices.
- Findings on the progress toward results:
 - Regional component under Direct Implementation Modality (DIM) has progressed very well with successful capacity building activities and professional execution of international procurement cases.
 - National components under National Implementation Modality (NIM) also progressed well as model facilities have been (mostly) established and legislation and national training programmes have been (mostly) completed.
 - Good collaboration and communication among all stakeholders of the project (regional or national)
 - Sound financial management
 - Advantage with regional implementation with strong capacity building dimensions and economy of scale benefited during the international procurement cases.
- Recommendations are as follows:
 - Recommendation #1 - Disposal of Sterilized Waste

The placement of sterilized waste on a dumpsite or landfill, without any change of physical form is clearly a concern to all project countries. To fully utilize the autoclaves, it is clear that the sterilized waste must be shredded or otherwise altered prior to landfilling.
 - Recommendation #2 – Rural Health Posts

It is strongly recommended that the project focusses on larger hospitals in the second phase.
 - Recommendation # 3 – TTM service technicians

There are clearly issues with the availability of a local service technicians from TTM to provide maintenance and repair services for the autoclaves. It is essential that this issue is resolved with the TTM main office.

- Recommendation # 4 – Composting

While it is environmentally sound guidance to collect and treat organic waste by composting, this activity, like other forms of waste treatment, costs money and it is very unlikely that the compost can be sold. Therefore, the Regional Project Team should not push for composting.
- Recommendation # 5 – Consider phase 2 autoclaves carefully

If the national Project Implementation Unit (PIU) decides to purchase one or more autoclaves in the second phase of the project, very great care must be taken in selecting the receiving HCFs, so that it is certain that all necessary resources are available to rapidly establish a building for the new autoclaves, in the view of project closure in April 2020.
- Recommendation # 6 – Fully utilize autoclave treatment capacity

When planning the second phase of the project, it is important that measures are taken to ensure that the treatment capacities of the installed (and any future) autoclaves are fully utilized. To utilize this excess capacity, the PIU should work toward ensuring that all surrounding HCFs send their infectious waste to the hospitals with treatment systems.
- Recommendation # 7 – Ensure sustainability of Phase 1 model facilities.

The project must ensure that the non-incineration and mercury-free technologies introduced under Phase 1 of the project become or remain (as applicable) sustainable in the long-term through periodic follow-up visits.
- Peder noted that recommendations #1-4 target the regional component and #5-7 target all national components. MTR report will also include country specific recommendations.
- Overall, the MTR finds that this project is well-managed and achieved good progress towards the results, therefore very likely to be a successful project. The project is highly relevant for all stakeholders. All activities are on schedule and the quality of work is good. The project has been financially prudent and effective.
- Next step: (1) Draft MTR Report will be submitted by 16 December for review and comments (2) Final MTR Report submitted one week after receipt of comments.

4. Presentation on key technical issues

Jan Gerd Kühling (Chief Technical Expert):

- Provided an update on the Activity 3; sites were selected, infrastructures were set up; two procurement rounds were carried out; non-Mercury containing devices supplied; non-Incineration systems were installed.
- Key lessons learned is that despite that nearly all autoclaves are fully installed and tested, most are not working with full capacity, mainly due to:
 - Problems in the final disposal of treated waste
 - Maintenance problems (mostly small problems but difficulties in the repair...)
 - Operation problems (changes in the operators, etc.)

- Currently, the project is working on finalization of activities already started and it seems there is already big amount of work to be completed therefore as a next step, he highly recommended that we should not include any additional activity than activities agreed in Zanzibar meeting (in May 2018) to be implemented at national level before the closure in April 2020.
- The project is now heading to its Activity 4 in line with implementation schedule. To ensure timely implementation of Activity 4a – Procurement of additional non-incineration and mercury free technologies, new pilot facilities should be ready to house non-incineration treatment equipment by June 2019 and all installations should be completed latest by October 2019, as projected in Table 2.

Version B -19 Nov 2018		2018		2019											
		Month	11	12	1	2	3	4	5	6	7	8	9	10	11
Procurement															
P	Preparation of Procurement (BoQ, Site selection)														
P-A	Procurement of Non-Mercury Equipment														
A.1	Local Tendering														
A.2	Contract sign & preparation for delivery														
A.3	Delivery to country														
P-B	Procurement of HCW Equipment														
B.1	Tendering														
B.2	Evaluation & Contract sign														
B.3	Manufacturing														
B.4	Installation & Commissioning														

Table 2. Implementation schedule of 2nd procurement round

- Our main goal until April 2020 is to ensure successful implementation, at national components of Activity 4b, “Expand HCWM systems and the phase-out of mercury in the recipient countries and disseminate results in the African region.”
- Activity 4b1. HCWM systems expanded to other facilities in the country. This will require: (1) Available infrastructure for the non-incineration systems; (2) Implementation of a good segregation system; (3) Ensuring occupational health and safety; (4) Monitoring to ensure sustainability; (5) Ensuring long-term coverage of operation cost & maintenance
- Activity 4b2. Country Capacity to Manage Mercury and to phase-in Mercury-free devices improved. This will require: (1) Available segregation and collection system for mercury containing devices; (2) Strategy for the collection and disposal of the collected mercury; (3) Ensuring occupational health and safety; (4) Monitoring to ensure sustainability, mercury exit plan; (5) Ability to procure non-mercury containing devices.
- Activity 4b3. National Training Expanded. This will require: (1) Fully agreed on and available national training system & strategy; (2) National training program, integrated in the curriculum for environmental health officer + available post-graduate courses; (3) Officially approved curriculum, complete set of training materials, available master trainer; (4) Fully trained training providers; (5) Ability to carry out training and to certificate trainees
- Activity 4b4. Information disseminated at environment and health conferences in the region. This will require: (1) Availability of real data (investment cost, operation cost, etc.); (2) Availability of case studies and factsheets; (3) Distribution of materials and participating in conferences.

- Part of Activity 4b, it is discussed and agreed that the project should prepare some fact sheets (2 pages) proposed as follows: (1) Project Factsheet; (2) Factsheet: HCWM in Ghana; (3) Factsheet: HCWM in Madagascar; (4) Factsheet: HCWM in Tanzania; (5) Factsheet: HCWM in Zambia; (6) Factsheet: Mercury elimination in African healthcare facilities. Additional factsheets can be prepared based on actual needs.
- It also discussed and agreed that the project can prepare short case studies (1 page) proposed as follows, but not limited to; (1) Case Study: ZoomPak, Ghana (cooperation with the private sector); (2) Case Study: Identification of user friendly sharp management systems, Ghana; (3) Case Study: Central treatment facility, Antananarivo, Madagascar; (4) Case Study: Cluster treatment facility, Ndola, Zambia; (5) Case Study: Onsite treatment facility, Buguruni, Tanzania; (6) Case Study: Photovoltaic for HCW treatment, Madagascar; (7) Case Study: Advanced pathological waste treatment (Bio-digester); (8) Case Study: Close-loop recycling of HCW, Zambia.
- In these 2.5 days, it was important to see that countries have concerns about beyond 2020. Therefore, during the last 17 months of project implementation, countries agreed on intensifying efforts on following items to ensure sustainability of project results beyond 2020:
 - Proposal for follow up projects (each country to prepare at least one proposal), replication strategies
 - Outreach of project results, replication package (standard training tools, BoQs, budget, policies, standard designs, standard cost estimations)
 - National budget for coverage of operation cost, service fees, focal point
 - National monitoring and enforcement system
- Jan mentioned that considering the good results we have so far, he is sure that project will be successful again to implement this ambitious plan discussed in earlier sessions. We are on the real operation which will need the support and leadership of the board to ensure that we can be successful and be ready for on-time closure by April 2020.

5. Comments of the Project Board members and discussions

Ekaterina Paniklova (Senior Programme Coordinator):

- Noted that participants of the meeting had very good dive-in into to the project and its activities, thanks to the comprehensive presentations.
- With regards to the findings of Midterm Review, stressed that it was really good to hear that project has been making an important progress and there are things that are moving on and a number of issues that still have to be addressed. When Peder visited UNDP IRH, one of the discussion points was how the project risk contributing to the public policies of the countries and whether this result influence decision makers to adopt programmes, budget or anything related to ensure sustainability. She promised to send out comments online whenever we get the report. Thanked MTR consultant for his presentation and congratulated all countries for making such progress with this important project.
- Indicated that the exit strategy and the way project will be working in the next year has been mentioned but with all of that said and with all of these presentations, it would be very good to hear from the countries whether this project is fulfilling the expectations and whether there is

something that we as UNDP should do more to support the countries in this very important activity?

- Thanked for presentations and asked to hear from the countries that are participating in the project board meeting.

Etienne Gonin (MPU/Chemicals):

- Proposed countries to respond the question from Ekaterina on what UNDP can do more to support your actions.

Deogratias Mkembela (Tanzania):

- Indicated that the job Peder Bisbjerg, MTR Consultant did have been an eye opener for the countries. We have seen a lot good in the draft recommendations provided. As Jan said, we achieved so much but there is so much work to do in terms of sustaining and moving forward.
- For UNDP, Ministries in Tanzania would like to see similar kind of projects coming up in the future. This project looks seems to be short, but it has been catalytic in terms of changing manner in handling, taking the issue of HCWM in the country. Project has also allowed introduction of innovative waste or treating healthcare waste. MOH appreciated the project, even the officials in environment facilities they asked UNDP to scale up project achievements.
- All in all, the request for UNDP regional office might be to think of designing similar kind of projects for healthcare waste management beyond 2020.

Hanitriniaina Randrianomenjanahary (Madagascar):

- Thanked all participants and informed that Madagascar volunteers to host the next regional project/board meeting, tentatively scheduled in September 2019.

Florence Kabinga Mwale (Zambia):

- The interest in MOH Zambia has been going to higher levels such as Minister and Permanent Secretary which are very much interested in this project. This is the only project that is being monitored for the climate change aspects of Permanent Secretary Sub-committee on Climate Change, so it has drawn a lot of interest.
- Zambia component seek support from UNDP in terms of support is to look at advocacy at higher levels so that most of these projects that are coming in to countries involving big donors should look at advertising healthcare waste management with the new component of non-incineration.

Etienne Gonin (MPU/Chemicals):

- It is good and important to see Zambia received interest from climate change angle and her point on advocacy at higher levels serves the idea that we should continue engaging national stakeholders but also the donor organization as well on this aspect of the waste management.

- Prior to requesting Ghana to respond Ekaterina's question, he thanked Ghana for hosting this meeting so efficiently and kindly.

Ernest Konadu Asiedu (Ghana):

- In reflecting from the last 2.5 days, Ghana, in terms of delegation of Ministries both MoH and MoE, issued a lot of commitment in order to have strong policy in line with project's objectives. With the establishment in HCFs, a lot of management unit which are leading the project implementation in the field, they see HCWM as a priority as far as policy of health and environment is a concern.
- In this meeting, we have also invited Director of Health of Cape Coast region. We actually have only one project pilot facility in this region, Cape Coast Teaching Hospital but the Director can also support the project when we expand the project to the other regions. For us in Ghana, we try to connect all the partners who could support HCWM activities, and we have promised that we can also move it to the municipality level for the environment friendly management of healthcare waste.

Etienne (MPU/Chemicals):

- Thanked Ghana and asked if project partners (WHO and HCWH) would like to compliment what has been said by the countries.

Ute Pieper (WHO):

- She is part of the project since its inception. As a result of this meeting, she said that this is a successful project and it is also confirmed by the presentation of Peder. Not only because of the project itself but also all the support and activity and motivation of each and every stakeholder in the room deserve to be highlighted.
- In this project, WHO has mainly supported the legal framework and policy development in the project countries. In general, this worked out really well and countries really took a big step towards sustainability for the future to improve the situation in terms of environmental health and occupation safety in all project countries.
- Thanked everyone and WHO looks forward to continuation of the successful collaboration.

Etienne (MPU/Chemicals):

- Project benefits a lot from the support and guidance from the WHO. Obviously, being a project focus on HCWM. WHO is a key actor and we indeed hopefully in the second part for collaboration continue.

Susan Wilburn (HCWH):

- Mentioned that this project, funded by GEF, is the second time that HCWH has worked together with UNDP and WHO on a healthcare waste management and mercury elimination programmes. They have observed during the midterm review process and also during the past 2.5 years of the project implementation that we have all learned from the experience of the first GEF funded (global) project that was in 7 countries. We have benefited from that experience and previous works in other regions and therefore advanced the work here in the African region.
- HCWH is continually happy to be a part of the project. They are pleased to see teamwork between and among the countries. What of the observation she has made this particular meeting compared to the previous meetings of the project is that there is great integration between the countries. In previous meetings, countries have sat segregated but, in this meeting, countries are integrated between and among another. During the break, there is a lot of exchange and country to country dialog which is really exciting to see.
- HCWH has great appreciation for the regional technical team from UNDP and WHO; and how well we work together and benefit from each other's unique contribution and skills; and enjoy working together. She indicated it is great pleasure to work with all project stakeholders and to be able to see this understanding and awareness of the bio-hazardous to help in the environment from healthcare waste and make progress that will be an example not only for your countries and region but also be example for others across the world. We did hear yesterday from one of the award-winning most improved hospital from the first GEF project which is in India and learned some lessons about the sustainability that project has been 5 years in closure, which she thinks we all have benefited from.
- This year, the part that HCWH has been most involved was the data collection and management and development of data systems collectively together. HCWH has been quite involved in mercury elimination in the support of education; and uniquely involved in implementation with Tanzania in bio-digester and now the gas being produced to heat water providing for warm baths for women and new born babies that did not exist in the hospital before this project. It is really exciting to see this innovation occurred in the region and we look forward to its expansion and interest from the other countries that implement this treatment technology. HCWH was also involved with UNDP in the project called SHiPP-The Sustainable Health Procurement that overlaps two of this project's countries, which are Tanzania and Zambia.
- HCWH looks forward to supporting the sustainability as countries move towards taking ownership of the procurement on not only what will happen in this next phase with mercury free devices but in the future also the more sustainable healthcare waste on treatment technologies; and all products and devices within the health system to integrate sustainable criteria and to achieve SDG 12 as well as other sustainable development goals.

Etienne (MPU/Chemicals):

- Thanked Susan for pointing out her observation on this South-South collaboration because it is indeed one of the benefits that we have seen in such regional approaches. It is nice to see this is happening both between the four countries but also countries keenly interested and following the development of this project, bringing their own experiences very actively from Uganda, Kenya and also Jordan who can enjoy this for the first time as they have very recently started their

HCWM project. Added, it is very nice to see this outreach and collaboration beyond the project countries itself.

6. Project Board recommendations and conclusions

Following considerations were presented to the project board and approved with a consensus:

- *The project progress reporting (May-December 2018) is approved.*
- *Project annual work plans and budgets for 2019-2020 are approved.*
- *The board may convene in Madagascar tentatively in September 2019.*
- *Findings from the draft MTR report have been acknowledged.*

Ekaterina Paniklova (Senior Programme Coordinator):


- Thanked every member of the board for very supportive feedback. She indicated that this is not just a great team that works for the implementation of the project but also has very enthusiastic and dedicated national partners in every country.
- Also thanked to the government of Ghana, especially to the Ministry of Health in particular, for hosting this regional project and board meeting.
- UNDP IRH looks forward to the next meeting in Madagascar which demonstrates physical and geographical parameters don't matter anymore.
- Highlighted the importance of the project and said it is very good practices and examples not only for the countries that participate in the project but also for the whole world. Added, UNDP IRH is very proud to have this opportunity to work together with such dedicated partners and teams.
- Thanked the participants and formally concluded the Project Board Meeting.

Prepared by: Zühre Güven (Project Assistant), Selimcan Azizoglu (Project Manager)



Cleared by: Etienne Gonin (Programme Analyst, MPU/Chemicals)

Approved by: Ekaterina Paniklova (Senior Programme Coordinator)



11 Feb 2019

Signature:

Date:

Prepared by: Zühre Güven (Project Assistant), Selimcan Azizoglu (Project Manager)



Cleared by: Etienne Gonin (Programme Analyst, MPU/Chemicals)



Approved by: Ekaterina Paniklova (Senior Programme Coordinator)

Signature:

Date:

