

## SBF Project Implementation Monitoring Report

### Maldives: COVID-19 Emergency Response and Health Systems Preparedness

#### 1. Project Information

|                               |  |                    |                      |
|-------------------------------|--|--------------------|----------------------|
| Project ID:                   | 000378   | Investment Number: | L0378A               |
| Member:                       | Maldives   | Region:            | Southern asia        |
| Sector:                       | Public Health  | Sub-sector:        | N/A                  |
| AIB Financing Type:           | Loan: 7.3 USD million  | Co-financier(s):   | World Bank           |
| E&S category:                 | C  | Borrower:          | Republic of Maldives |
| Red Flags Assigned:           | 0  | Monitoring Regime: | Regular Monitoring   |
| Implementing Agency:          | Ministry of Health   |                    |                      |
| Project Team Leader:          | Toshiaki Keicho  |                    |                      |
| Project Team Members:         | Jana Halida Uno, Sr. Operational Policy Specialist<br>Haiyan Wang, Sr. Finance Officer<br>Liu Yang, Counsel<br>Jurminla Jurminla, Procurement Specialist<br>Yangzom Yangzom, Procurement Specialist<br>Susrutha Goonasekera, Sr. Social Development Specialist<br>Zhixi Zhu, Environmental Specialist<br>Shonell Robinson, Financial Management Specialist |                    |                      |
| Completed Site Visits by AIB: | Apr, 2021<br>Interim mission was done on April 5th and April 6th, 2021   |                    |                      |
| Planned Site Visits by AIB:   | Jun, 2021<br>Full supervision mission is planned in June, 2021   |                    |                      |

#### 2. Project Summary and Objectives

This CRF project loan of USD 7.3million, co-financed with the World Bank, was approved by the BOD on June 30, 2020. The project's objective is to respond to and mitigate the threat posed by COVID-19 and strengthen national systems for public health preparedness in the Maldives. The project has the following four components:

Component 1 (Emergency Response for COVID-19 Prevention): Procurement of essential protective equipment and other essential items to protect healthcare workers and patients; risk communication, community engagement and behavior change, including social distancing measures and associated mitigation strategies.

Component 2 (Emergency Health System Capacity Strengthening for COVID-19 Case Management): Strengthening the centralized and decentralized health system capabilities for disease surveillance, case management and infection prevention and control.

Component 3 (Implementation Management and Monitoring and Evaluation): Strengthening of public institutions for the coordination and management of the project, including central and regional arrangements for coordination of activities, financial management, procurement and social and environmental management.

Component 4 (Contingent Emergency Response Component): Zero-dollar component to ensure additional flexibility in response to the current and any potential other emergency that might occur during the lifetime of this project.

The project's implementation period is July 01, 2020 to June 30, 2023.

The total project cost of USD14.6 million has been financed by AIB's loan of USD 7.3million and the World Bank's IDA Credit and Grant of SDR2.7 million (USD3.65 million equivalent) each. AIB's Special Fund Window has been used to buy down the interest rate by 100 bps (amounting to USD0.87 million). AIB's financing would support Component 1, Component 2 and Component 3 with an amount of USD0.35 million, USD6.5 million and USD0.45 million respectively.

#### 3. Key Dates

|                |               |                        |              |
|----------------|---------------|------------------------|--------------|
| Approval:      | Jun. 30, 2020 | Signing:               | Jul. 8, 2020 |
| Effective:     | Jul. 14, 2020 | Restructured (if any): |              |
| Orig. Closing: | Dec. 31, 2023 | Rev. Closing (if any): |              |

#### 4. Disbursement Summary (million)

|           |     |  |  |
|-----------|-----|--|--|
| Currency: | USD |  |  |
|-----------|-----|--|--|

|                 |      |   |                     |
|-----------------|------|---|---------------------|
| a) Committed:   | 7.3  | b) Cancellation (if any):                       |                     |
| c) Disbursed:   | 1.48 | d) Most recent disbursement:<br>(amount / date) | 0.353, Nov. 5, 2020 |
| e) Undisbursed: | 5.82 | f) Disbursement Ratio(%) <sup>1</sup> :         | 20.3                |

<sup>1</sup> Disbursement Ratio is defined as the volume (i.e. the dollar amount) of total disbursed amount as a percentage of the net committed volume, i.e.,  $f = c / (a - b)$

## 5. Project Implementation Update

The project is progressing well at this early stage of implementation. The project has contributed to successful implementation of GOM's strategy of early detection, contact tracing, quarantine/isolation and case management. Specific examples include: (i) the provision of personal protective equipment (PPE) for health care workers early in the outbreak; (ii) increased testing capacity in Male and the atolls (RT-PCR testing kits, consumables); and (iii) the provision of medical equipment to health facilities (e.g. chest x-ray machines). Other activities have also been launched (including on risk communication and community engagement, grievance redressal mechanisms, healthcare waste management), and pace of implementation is expected to accelerate over the next few months.

| Components   | Physical Progress  | Environmental & Social Compliance  | Procurement   |
|--|--|--|---|
| <p>Component 1-<br/>Emergency<br/>Response for<br/>COVID-19<br/>Prevention</p> <p>Total<br/>cost:USD3.35<br/>million<br/>AIIB financing:<br/>USD0.35<br/>million</p>   | <p>The project has already procured and delivered 16,785 sets of PPE that have been distributed to 168 health centers and 19 hospitals across the country, and the rapid response team (RRT) in Male. 55,000 PCR test kits were procured early September when the country faced critical shortage of test kits (only for 3-4 days in stock).</p> | <p>Environmental and social safeguards support had been seconded from other existing WB-financed projects. A qualified Environmental Specialist has been hired by the PMU, while recruitment of a Social Specialist has been delayed. Capacity building will be required through continuing support of the seconded staff. An Environmental and Social Implementation Plan is under development.</p> | <p>The contract for supply of medical equipment and drugs have been signed with UNOPS and M/s Philips and supply of critical items are happening but on slow rate. The Bank reviewed the performance of procurement during the first ISR mission and advised the PMU to adopt a more proactive approach with the UNOPS contract, with 48% of the contract still uncommitted, there needs to be closer follow up with UNOPS on the balance of the contract.</p> <p>On the Philips contract, the mission noted payment issues which is expected to be resolved shortly. Going forward, the mission advised PMU to be more strategic on the utilization of the remaining uncommitted portion of the fund and put in place plans to process the procurement.</p> <p>The World Bank rated procurement performance as "moderately satisfactory" and AIIB concurs to it.</p> |
| <p>Component 2-<br/>Emergency<br/>Health System<br/>Capacity<br/>Strengthening<br/>for COVID-19<br/>Case<br/>Management</p> <p>Total<br/>cost:USD10.6<br/>million<br/>AIIB financing:<br/>USD6.5 million</p> | <p>Isolation and ICU capacity for COVID-19 has significantly expanded. There are more than 400 beds for COVID-19 in Male and atolls, of which 130 are for ICU.</p>   | <p>Environmental and social safeguards support had been seconded from other existing WB-financed projects. A qualified Environmental Specialist has been hired by the PMU, while recruitment of a Social Specialist has been delayed. Capacity building will be required through continuing support of the seconded staff. An Environmental and Social Implementation Plan is under development.</p> | <p>The contract for supply of medical equipment and drugs have been signed with UNOPS and M/s Philips and supply of critical items are happening but on slow rate. The Bank reviewed the performance of procurement during the first ISR mission and advised the PMU to adopt a more proactive approach with the UNOPS contract, with 48% of the contract still uncommitted, there needs to be closer follow up with UNOPS on the balance of the contract.</p> <p>On the Philips contract, the mission noted payment issues which is expected to be resolved shortly. Going forward, the mission advised PMU to be more strategic on the utilization of the remaining uncommitted portion of the fund and put in place plans to process the procurement.</p> <p>The World Bank rated procurement performance as "moderately satisfactory" and AIIB concurs to it.</p> |
| <p>Component 3-<br/>Implementatio<br/>n<br/>Management<br/>and Monitoring<br/>and Evaluation</p> <p>Total<br/>cost:USD0.65</p>   | N/A  | N/A  | N/A   |

|  |  |  |  |
|--|--|--|--|
| million<br>AIIB financing:<br>USD0.45<br>million |  |  |  |
|--|--|--|--|

#### Financial Management:

The interim unaudited financial report for the quarter ended December 31, 2020 was submitted in a timely manner and deemed to be acceptable by the Bank. The PIU has been informed to adjust the future reports to properly capture receipts, expenditures and available cash balance per the sources of financing. This is to enable the ease in monitoring finances as per the individual loan agreements, and to understand cash needs from each Financier. There has been cost savings of approximately 2Mil USD under the UNOPS contract. This saving will be reallocated to activities to be determined and agreed on between the Government, AIIB and WB.

The draft financial statements to be audited has been submitted to the auditors to enable the commencement of the audit. It is expected that the audit report will be submitted by the due date of June 30, 2021.

### 6. Status of the Grievance Redress Mechanism (GRM)

A three-tier GRM has been established with a training program conducted for tier-1 members, i.e. Heads of the Health Care Facilities in the 5 Regions. The operationalizing of GRM has been expedited during the reporting period with a guidance note and grievance registry prepared and shared with the Bank.

### 7. Results Monitoring

As per World Bank, progress towards achievement of PDO and the overall Implementation progress is satisfactory.

Baseline Year: Mar. 22, 2020 End Target Year: Dec. 31, 2023

#### Project Objective Indicators #1

GOM has activated its public health National Emergency Operations Centre (NEOC) or other coordination mechanism for COVID-19

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Dec. 31, 2023 | Yes    | Yes    | Baseline: No   |

#### Project Objective Indicators #2

Number of designated laboratories with COVID-19 diagnostic equipment, test kits, and reagents

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Dec. 31, 2023 | 5      | 9      | Baseline: 1    |

#### Project Objective Indicators #3

GOM adopted personal and community non-pharmaceutical interventions (school closures, telework and remote meetings, reduce/cancel mass gatherings)

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Dec. 31, 2023 | Yes    | Yes    | Baseline: No   |

#### Intermediate Result Indicators #1

Component 1: Proportion of hospitals with adequate personal protective equipment within a given month month.

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Dec. 31, 2023 | 70%    | 70     | Baseline: 0    |

## Intermediate Result Indicators #2

Component 2: Number of regions with ICU capacity.

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Dec. 31, 2023 | 5      | 5      | Baseline: 1    |

## Intermediate Result Indicators #3

Proportion of health professionals trained in infection prevention and control per MOH-approved protocols.

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Dec. 31, 2023 | 70%    | 49     | Baseline: 0    |

## Intermediate Result Indicators #4

Number of designated laboratories with staff trained to conduct COVID-19 diagnosis.

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Jun. 30, 2023 | 5      | 9      | Baseline: 1    |

## Intermediate Result Indicators #5

Number of total daily testing capacity for SARS-CoV-2 in the country including five regional laboratories.

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Jun. 30, 2023 | 1500   | 3060   | Baseline: 350  |

## Intermediate Result Indicators #6

Average transport time for COVID-19 lab specimen from health facility to a regional testing center.

| Year          | Target | Actual         | Others, if any |
|---------------|--------|----------------|----------------|
| Jun. 30, 2023 | 12     | Not available. | Baseline: 30   |

## Intermediate Result Indicators #7

Component 3: Proportion of hospitals that have submitted complete monthly reports on the number of suspected cases identified, number of cases tested, number of contacts traced, the presence of personal protective equipment, and the presence of an isolation unit.

| Year          | Target | Actual | Others, if any |
|---------------|--------|--------|----------------|
| Jun. 30, 2023 | 80     | 90     | Baseline: 0    |

**Remarks:** Data as of the last reported date.