



Health Sector Development Support Project (P125229)

EASTERN AND SOUTHERN AFRICA | Zimbabwe | Health, Nutrition & Population Global Practice |
Recipient Executed Activities | Investment Project Financing | FY 2012 | Seq No: 22 | ARCHIVED on 06-Jun-2023 | ISR56337 |

Implementing Agencies: Republic of Zimbabwe, Stichting Cordaid

Key Dates

Key Project Dates

Bank Approval Date: 29-Sep-2011

Effectiveness Date: 08-Dec-2011

Planned Mid Term Review Date: 11-Feb-2013

Actual Mid-Term Review Date: 22-Feb-2013

Original Closing Date: 30-Apr-2023

Revised Closing Date: 31-Mar-2024

Project Development Objectives

Project Development Objective (from Project Appraisal Document)

The Project Development Objective (PDO) is to increase coverage of key maternal and child health interventions in targeted rural districts consistent with the Recipient's ongoing health initiatives.

Has the Project Development Objective been changed since Board Approval of the Project Objective?

Yes

Board Approved Revised Project Development Objective (If project is formally restructured)

The Project Development Objective is to increase coverage and quality of an integrated package of Reproductive, Maternal, Neonatal, Child, Adolescent health and nutrition (RMNCAH-N) services, as well as strengthen COVID-19 response and institutional capacity to manage performance-based contracts consistent with the Recipients' ongoing health initiatives.

Components Table

Name

Results Based Financing in Delivery of Packages of Key Maternal, Child, and Other Related Health Services (RMNCAH-N):(Cost \$40.26 M)
Management and Capacity Building:(Cost \$28.68 M)
Monitoring, Documentation, and Verification of Results under Performance-based Contracts:(Cost \$4.06 M)
COVID-19 Response:(Cost \$5.00 M)

Overall Ratings

Name	Previous Rating	Current Rating
Progress towards achievement of PDO	<input type="checkbox"/> Moderately Unsatisfactory	<input type="checkbox"/> Moderately Satisfactory
Overall Implementation Progress (IP)	<input type="checkbox"/> Moderately Satisfactory	<input type="checkbox"/> Moderately Satisfactory
Overall Risk Rating	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial

Implementation Status and Key Decisions

The total grant financing for the Health Sector Development Support (HSDS) Project is US\$78 million, made up of the original US\$15 million grant approved in September 2011 and US\$63 million through five additional grants approved between 2013 and 2020. The most recent, fifth additional



financing (AF V), approved in September 2020, became effective in December 2020. The project was restructured in April 2023 and now has a project end date of March 30, 2024.

The HSDS Project has made significant progress since 2011. To date, despite implementation challenges posed mainly by the COVID-19 pandemic and Zimbabwe's fiscal situation, the project has achieved one of its five project development indicators, namely, over 80 percent of close contacts of confirmed COVID-19 cases have been followed up based on national guidelines. Additionally, six out of the 19 intermediate results indicators have already met or surpassed their targets: over a million (1,028,678) children completing their primary course on immunization in participating districts; average availability of PPE commodities is 91% in health facilities; performance-based contracting of facilities scaled up to 78% of rural facilities; and 20 COVID treatment centers with oxygen therapy. Progress has also been made for seven intermediate results indicators, which either met their closing date targets or increased since December 2022.

While there have been notable achievements, several activities and RBF subsidy payments remain delayed. The Government and CORDAID (Project Implementation Entity) are taking steps to accelerate implementation.

Risks

Systematic Operations Risk-rating Tool

Risk Category	Rating at Approval	Previous Rating	Current Rating
Political and Governance	--	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial
Macroeconomic	--	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial
Sector Strategies and Policies	--	<input type="checkbox"/> Low	<input type="checkbox"/> Low
Technical Design of Project or Program	--	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate
Institutional Capacity for Implementation and Sustainability	--	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial
Fiduciary	--	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial
Environment and Social	--	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial
Stakeholders	--	<input type="checkbox"/> Moderate	<input type="checkbox"/> Moderate
Other	--	<input type="checkbox"/> Low	<input type="checkbox"/> Low
Overall	--	<input type="checkbox"/> Substantial	<input type="checkbox"/> Substantial

Results

PDO Indicators by Objectives / Outcomes

Increase coverage of key RMNCAH-N services in participating districts				
▶ Percentage of women who had their first ANC visit during the first 16 weeks of pregnancy in participating rural districts (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	10.00	22.00	22.00	32.00



Date	31-Dec-2012	31-Oct-2022	31-Mar-2023	31-Mar-2024
► Percentage of children 6 to 59 months with vitamin A supplementation in participating rural districts. (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	43.50	31.00	30.00	50.00
Date	31-Dec-2019	31-Oct-2022	31-Dec-2022	30-Apr-2023
Comments:	This indicator is reported bi-annually.			

Increase quality of key MCH services in participating districts				
► Percentage of participating district, provincial and central hospitals that have registered an increase in quality scores since last quarter (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	51.00	57.00	43.24	60.00
Date	31-Dec-2019	31-Oct-2022	31-Mar-2023	31-Mar-2024

Strengthen institutional capacity in RBF Contract Management				
► Percentage of health facilities managed under RBF contracts by the MOHCC in participating rural districts (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	71.00	78.00	80.00
Date	31-Dec-2012	31-Oct-2022	31-Mar-2023	31-Mar-2024
Comments:	MOHCC contracted facilities for the first time in 2018 and the denominator for this indicator is the total number of facilities in the 60 rural districts.			

Strengthen COVID-19 response				
► Percentage of close contacts of confirmed COVID-19 cases followed up based on national guidelines (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	82.00	82.00	80.00
Date	28-Feb-2020	31-Oct-2022	31-Mar-2023	31-Mar-2024
Comments:	End target surpassed.			



Intermediate Results Indicators by Components

Component 1: Delivery of Packages of RMNCAH-N and Other Related Health Services				
▶ Cumulative number of health facilities enrolled in RBF program in participating districts (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	1,387.00	1,481.00	1,190.00
Date	31-Dec-2012	31-Oct-2022	31-Mar-2023	31-Mar-2024
Comments:				
▶ People who have received essential health, nutrition, and population (HNP) services (Number, Corporate)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	4,925,782.00	5,242,654.00	4,847,512.00
Date	31-Dec-2012	31-Oct-2022	31-Mar-2023	31-Mar-2024
☐ People who have received essential health, nutrition, and population (HNP) services - Female (RMS requirement) (Number, Corporate Supplement)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	2,556,480.00	2,720,937.00	2,515,859.00
☐ Number of children immunized (Number, Corporate Breakdown)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	970,328.00	1,028,678.00	929,004.00
Date	31-Dec-2012	31-Oct-2022	31-Mar-2023	31-Mar-2024
☐ Number of women and children who have received basic nutrition services (Number, Corporate Breakdown)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	2,676,389.00	2,986,558.00	2,768,670.00
Date	31-Dec-2012	30-Jun-2022	31-Mar-2023	31-Mar-2024
☐ Number of deliveries attended by skilled health personnel (Number, Corporate Breakdown)				



	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	1,176,054.00	1,227,418.00	1,149,839.00
Date	31-Dec-2012	31-Oct-2022	31-Mar-2023	31-Mar-2024
► Cumulative number of children under 5 who had their Mid Upper Arm Circumference and Height measured by Community Health Workers (CHWs) as part of growth monitoring. (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	121,500.00
Date	27-Apr-2020	31-Mar-2024	31-Mar-2023	31-Mar-2024
Comments:	No change. Community-based RBF started in Feb 2023, reporting on this indicator will begin from April 2023.			
► Percentage of 15-49-year-old women who are new acceptors of long term, reversible family planning methods in participating districts (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	21.40	17.00	17.00	25.00
Date	31-Dec-2019	31-Oct-2022	31-Mar-2023	31-Mar-2024
Comments:	Indicator performance partly affected by attrition of trained manpower. Health workers from all health facilities in the 4 pilot districts implementing community RBF were trained on Long term reversible family planning method in March 2023. Improvement in this indicator is expected in Q2 2023. Like wise, VHWs in this districts will be referring women for long term FP method as part of community RBF.			

Component 2. Management and Capacity Building in RBF

► Number of health personnel and community health workers (CHWs) receiving training on RBF in participating districts (Number, Custom)

	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	5,424.00	6,024.00	5,792.00
Date	31-Dec-2012	31-Oct-2022	31-Mar-2023	31-Mar-2024
► Percentage of health facilities implementing Continuous Quality Improvement (CQI) model in the participating rural districts. (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	46.00	46.00	50.00
Date	01-Sep-2015	31-Oct-2022	31-Mar-2023	31-Mar-2024
► Number of health workers that received first time training or refresher training on Emergency Obstetrics and Neonatal Care using skill labs (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target



Value	0.00	0.00	0.00	280.00
Date	27-Apr-2020	31-Oct-2022	31-Mar-2023	31-Mar-2024
Comments:	No change since last ISR. The trainings will be given as part of the quality focused RBF pilot for central and provincial pilot which have been delayed due to COVID-19. Training expected to start in June 2023.			
► Percentage of MOHCC cost centers utilizing resource allocation formula in line with the whole Government Management Performance System (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	100.00
Date	01-Jan-2020	30-Jun-2022	31-Mar-2023	31-Mar-2024
Comments:	No change. Delays due to MOHCC's decision to coordinate this task with WHO.			

Component 3. Monitoring, Documentation, Verification of Results under Performance-based Financing				
► Number of District Health Executives (DHEs) in participating districts using updated quality checklist with the COVID-19 component for supervision of health facilities. (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	25.00	25.00	25.00
Date	27-Apr-2020	31-Oct-2022	31-Mar-2023	31-Mar-2024
Comments:	Target was revised at the last restructuring to 25.			
► Process evaluation to examine the institutionalization of RBF in the government system as a viable approach to sustainability of RBF (Yes/No, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	No	No	No	Yes
Date	27-Apr-2020	31-Oct-2023	31-Mar-2023	31-Mar-2024
Comments:	Process evaluation has been delayed by COVID-related restrictions and MOHCC's competing priorities.			
► Process evaluation to examine the effectiveness of quality focused RBF at provincial hospitals in improving the quality of maternal and neonatal care for improved outcomes. (Yes/No, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	No	No	No	Yes
Date	27-Apr-2020	31-Oct-2022	31-Mar-2023	31-Mar-2024
Comments:	Not yet due. Process for evaluation will start after the quality focused RBF pilot has been implemented for at least a year in Q3 2023			



► Percentage of project related grievances addressed within 4 weeks of initial complaint being recorded (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	80.95	84.75	100.00
Date	31-Jan-2020	31-Oct-2022	31-Mar-2023	31-Mar-2024
Comments:	Progress made since last ISR. It was agreed that this indicator will measure the Number of project related grievances addressed within the required terms /total number of project related grievances received.			

COVID-19 Response				
► Percentage of health facilities with PPE commodities (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	5.00	91.00	91.00	95.00
Date	31-Jan-2020	31-Aug-2022	31-Mar-2023	31-Mar-2024
Comments:	The Vital Medicines Availability and Health Services Survey has not been conducted since Q2 2022.			
► Percentage of affected people including health workers reached with clinical and psycho-social support (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	80.00
Date	28-Feb-2020	30-Jun-2022	31-Mar-2023	31-Dec-2020
Comments:	The annex call center will be operating from June 2023. Reporting on this indicator will begin in Q3 2023.			
► Number of isolation centers complying with infection prevention control (IPC) guidelines (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	3.00	6.00
Date	31-Jan-2020	30-Jun-2022	31-Mar-2023	31-Mar-2024
► Number of COVID treatment centers with oxygen therapy (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	20.00	20.00	30.00
Date	31-Jan-2020	31-Oct-2022	31-Mar-2023	31-Mar-2024

Performance-Based Conditions



Data on Financial Performance

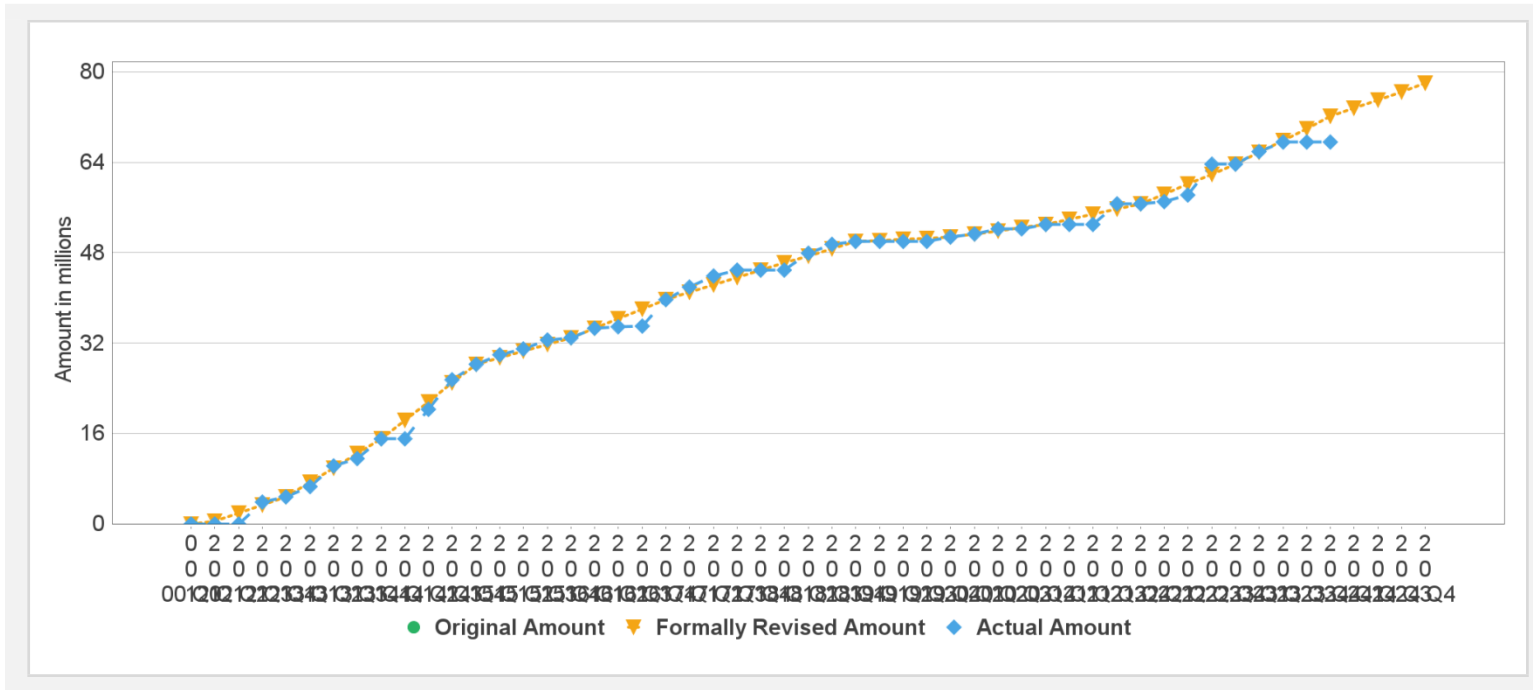
Disbursements (by loan)

Project	Loan/Credit/TF	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	% Disbursed
P125229	TF-10748	Closed	USD	15.00	15.00	0.00	15.00	0.00	100%
P125229	TF-15111	Closed	USD	20.00	20.00	0.00	20.00	0.00	100%
P125229	TF-A1598	Closed	USD	10.00	10.00	0.00	10.00	0.00	100%
P125229	TF-A5311	Closed	USD	5.00	5.00	0.00	5.00	0.00	100%
P125229	TF-A9037	Closed	USD	3.00	3.00	0.00	3.00	0.00	100%
P125229	TF-B3156	Effective	USD	25.00	25.00	0.00	14.58	10.42	58%

Key Dates (by loan)

Project	Loan/Credit/TF	Status	Approval Date	Signing Date	Effectiveness Date	Orig. Closing Date	Rev. Closing Date
P125229	TF-10748	Closed	27-Sep-2011	27-Sep-2011	08-Dec-2011	31-Jul-2014	31-Jul-2014
P125229	TF-15111	Closed	30-Jul-2013	30-Jul-2013	25-Sep-2013	30-Oct-2015	28-Feb-2017
P125229	TF-A1598	Closed	23-Dec-2015	12-Jan-2016	14-Mar-2016	28-Feb-2017	30-Jan-2018
P125229	TF-A5311	Closed	21-Jul-2017	26-Jul-2017	24-Oct-2017	30-Jun-2018	31-Dec-2019
P125229	TF-A9037	Closed	03-Nov-2018	20-Feb-2019	29-Mar-2019	31-Dec-2019	31-Dec-2020
P125229	TF-B3156	Effective	20-Sep-2020	01-Oct-2020	04-Dec-2020	30-Apr-2023	31-Mar-2024

Cumulative Disbursements



Restructuring History

Level 2 Approved on 01-Sep-2015 ,Level 2 Approved on 21-Feb-2017 ,Level 2 Approved on 27-Jun-2018 ,Level 2 Approved on 20-Dec-2018 ,Level 2 Approved on 06-Dec-2019 ,Level 2 Approved on 25-Jun-2020 ,Level 2 Approved on 31-Mar-2023

Related Project(s)

P144532-Additional Financing Health Sector Development Support Project ,P156879-Zimbabwe Health Sector Development Support Project AF II ,P163976-Zimbabwe Health Sector Development Support Project III - AF ,P168734-Zimbabwe Health Sector Development Support Project IV - AF ,P173132-Health Sector Development Support Project - Additional Financing V ,P175232-Health Sector Development Support