



Transforming Health Systems for Universal Care (P152394)

AFRICA EAST | Kenya | Health, Nutrition & Population Global Practice |
IBRD/IDA | Investment Project Financing | FY 2016 | Seq No: 11 | ARCHIVED on 26-Jul-2021 | ISR47419 |

Implementing Agencies: Republic of Kenya, Ministry of Health

Key Dates

Key Project Dates

Bank Approval Date: 15-Jun-2016

Effectiveness Date: 04-Jul-2016

Planned Mid Term Review Date: 11-Mar-2019

Actual Mid-Term Review Date: 25-Mar-2019

Original Closing Date: 30-Sep-2021

Revised Closing Date: 30-Sep-2023

Project Development Objectives

Project Development Objective (from Project Appraisal Document)

The project development objective is to improve utilization and quality of primary health care services with a focus on reproductive, maternal, newborn, child, and adolescent health services.

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 improve utilization and quality of primary health care services with a focus on reproductive, maternal, newborn, child and adolescent health services and to provide immediate and effective response to an eligible crisis or emergency .

Components Table

Name

Improving Primary Health Care Results:(Cost \$141.00 M)
Strengthening Institutional Capacity:(Cost \$28.70 M)
Contingency Emergency Response:(Cost \$10.00 M)
Cross-county and Intergovernmental Collaboration, and Project Management:(Cost \$11.40 M)

Overall Ratings

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

Implementation Status and Key Decisions

The Transforming Health Systems for Universal Care Project (THS-UCP) aims to improve utilization and quality of primary healthcare services with a focus on reproductive, maternal, newborn, child, and adolescent health (RMNCAH) services.

An implementation support mission conducted during May 31 – June 4, 2021 showed that overall implementation is progressing well including activities supported by the Policy and Human Resources Development grant. County governments are implementing activities prioritized in their



annual work plans. Procurement and distribution of RMNCAH strategic commodities is near complete. In response to the Government of Kenya's request to trigger the Contingency Emergency Response Component (CERC) to respond to the COVID-19 pandemic, the Bank allocated US\$ 10M to support the Kenya COVID-19 Contingency Plan. To address concerns that have been in the public domain on the usage of COVID-19 related funds, including under the Kenya COVID-19 Emergency Response Project, the World Bank is working closely with the relevant organs of government to strengthen the fiduciary functions and accountability systems for the Project. The complaint handling and redress mechanism has also been strengthened to further improve transparency and accountability.

Risks

Systematic Operations Risk-rating Tool

Risk Category	Rating at Approval	Previous Rating	Current Rating
Political and Governance	High	Substantial	Substantial
Macroeconomic	Moderate	Moderate	Moderate
Sector Strategies and Policies	Moderate	Substantial	Moderate
Technical Design of Project or Program	Substantial	Substantial	Substantial
Institutional Capacity for Implementation and Sustainability	High	High	High
Fiduciary	Substantial	Substantial	Substantial
Environment and Social	Low	Moderate	Moderate
Stakeholders	Substantial	High	Substantial
Other	--	--	--
Overall	Substantial	Substantial	Substantial

Results

PDO Indicators by Objectives / Outcomes

Improved utilization and quality of primary health care services				
► Children immunized with the third dose of Pentavalent (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	79.50	92.20	81.10	84.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023
► Pregnant women attending at least four ANC visits (Percentage, Custom)				



	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	39.70	57.70	45.00	52.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023
► Births attended by skilled health personnel (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	57.00	81.10	74.40	67.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023
► Women between the ages of 15-49 years currently using a modern FP method (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	47.80	49.80	35.30	52.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023
Comments:	There was a decline in this indicator which could have been linked to disruption in primary health care services in the COVID-19 context and a shortage of long-term FP commodities.			
► Inspected facilities meeting safety standards (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	34.90	33.00	50.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023
► Pregnant women attending ANC supplemented with IFA (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	31.00	79.00	78.00	73.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023
Provision of immediate and effective response to an eligible crisis or emergency				
► Reported suspected cases of COVID-19 cases investigated based on national guidelines (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	100.00	100.00	80.00
Date	18-Mar-2020	30-Sep-2020	31-Mar-2021	31-Dec-2021



Intermediate Results Indicators by Components

Component 1: Improved primary health care results				
▶ People who have received essential health, nutrition, and population (HNP) services (Number, Corporate)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	8,996,064.00	10,162,388.00	10,060,000.00
Date	29-Sep-2016	30-Sep-2020	31-Mar-2021	30-Sep-2023
Comments:	The baseline date corresponds the date at which the Project became effective. This is a corporate indicator capturing the cumulative number of people receiving essential health services over the Project lifecycle (# deliveries attended by skilled personnel and # children aged 0 to 5 who were immunized). No Nutrition services are supported by the Project.			
□ Number of children immunized (Number, Corporate Breakdown)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	4,322,214.00	4,925,604.00	5,400,000.00
Date	29-Sep-2016	30-Sep-2020	31-Mar-2021	30-Sep-2023
□ Number of deliveries attended by skilled health personnel (Number, Corporate Breakdown)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	4,670,155.00	5,236,784.00	4,660,000.00
Date	29-Sep-2016	30-Sep-2020	31-Mar-2021	30-Sep-2023
Component 2: Strengthened institutional capacity				
▶ Facilities inspected for safety standards (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	152.00	625.00	1,635.00
Date	11-Mar-2016	30-Sep-2020	31-Mar-2021	30-Sep-2023
▶ Reports submitted to DHIS in a timely manner. (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	88.80	96.30	96.60	98.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023



► Births registered within 6 months of occurrence (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	65.90	71.90	82.90	80.00
Date	31-Dec-2015	30-Sep-2020	31-Dec-2020	30-Sep-2023
Comments:	Actual achievement measures 2020 data (report not yet published).			
► RMNCAH related operations research completed to inform policy/strategy (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	2.00
Date	11-Mar-2016	15-Dec-2020	31-Mar-2021	30-Sep-2023
Comments:	<p>Kangaroo Mother Care: The Division of Child Health is undertaking an operation research on Kangaroo Mother Care to evaluate the implementation progress. Data collection was completed in 35 health facilities spread across six counties and analysis is ongoing.</p> <p>Iron and folic acid supplementation: The operation research on the uptake of iron and folic acid supplements among women of reproductive age planned by the Division of Nutrition has not progressed since the last mission. A consultant to deliver this study was contracted, but the contract expired before completion of the study due to challenges related to COVID-19. The MoH has initiated the process to procure the consultant to complete this exercise.</p>			
► A benefit package developed, costed, and disseminated (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	0.00	1.00
Date	11-Mar-2016	15-Dec-2020	31-Mar-2021	30-Sep-2023
Comments:	The benefit package has been developed and costed. This is subject to reviews and validation.			
► Lessons learned from UHC Phase I documented and disseminated (Yes/No, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	No	Yes	Yes	Yes
Date	20-Jun-2019	15-Dec-2020	15-Dec-2020	31-Dec-2019
Comments:	<p>This indicator was introduced after the mid term review of the project.</p> <p>The lessons learned from UHC Phase I were documented in a report and disseminated to key stakeholders.</p>			

Component 3: Cross-county/intergovernmental collaboration and project management



► Functional community units (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	302.00	6,500.00	8,442.00	5,331.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023
► Grievances registered related to delivery of project benefits that are addressed (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	100.00	80.00
Date	31-Dec-2015	30-Sep-2020	31-Mar-2021	30-Sep-2023
► Implementing entities submitting the annual FM and technical report on time (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	100.00	98.00	95.00
Date	11-Mar-2016	30-Sep-2020	31-Mar-2021	30-Sep-2023

Component 4: Contingency Emergency Response

► Designated laboratories with COVID diagnostic equipment (Number, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	2.00	41.00	41.00	8.00
Date	18-Mar-2020	30-Sep-2020	31-Mar-2021	31-Dec-2021
Comments:	When the COVID-19 Health Emergency Response Project (CHERP, P173820) and CERC were designed, there were only 8 designated laboratories for COVID-19 testing. The number of laboratories equipped with diagnostic equipment has since increased to 41 laboratories.			
► Vulnerable and marginalized communities reached in their indigenous language (Percentage, Custom)				
	Baseline	Actual (Previous)	Actual (Current)	End Target
Value	0.00	0.00	66.00	80.00
Date	18-Mar-2020	30-Sep-2020	31-Mar-2021	31-Dec-2021

Performance-Based Conditions

Data on Financial Performance



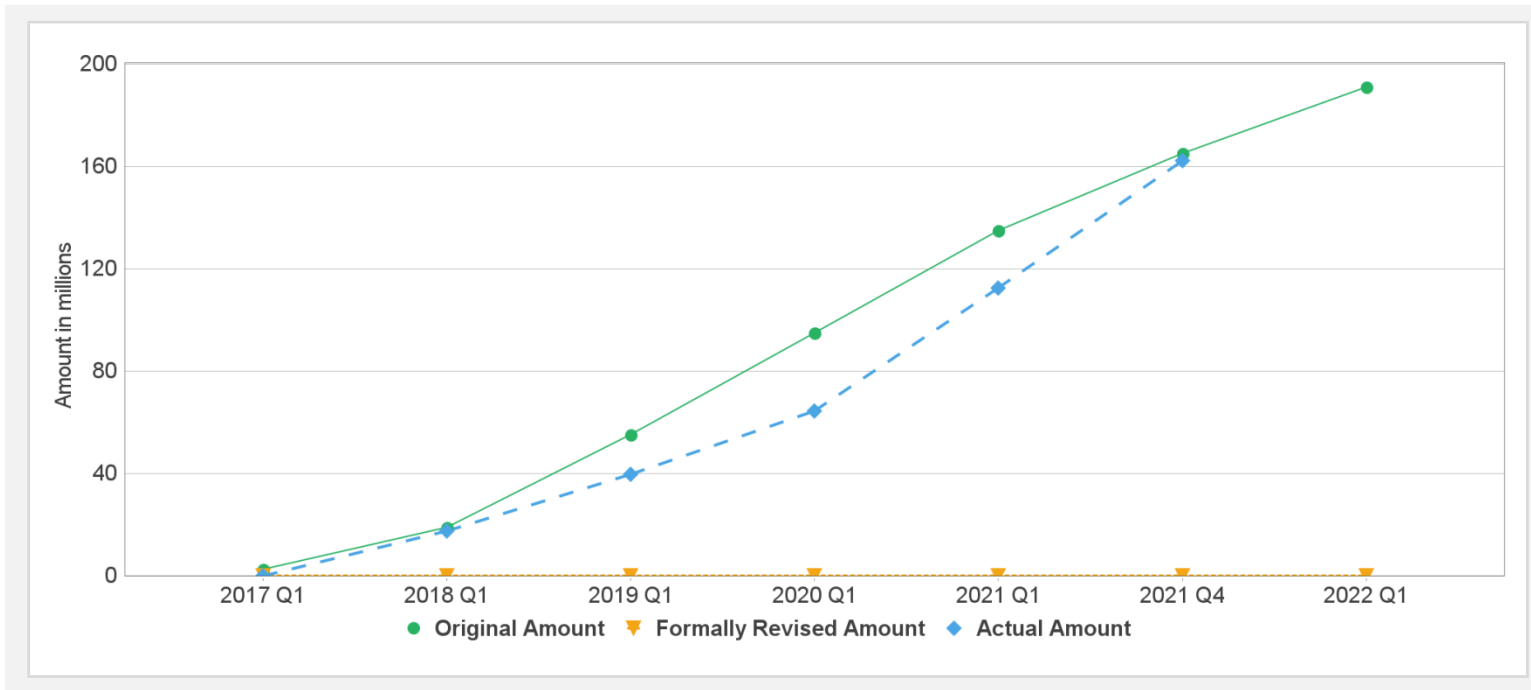
Disbursements (by loan)

Project	Loan/Credit/TF	Status	Currency	Original	Revised	Cancelled	Disbursed	Undisbursed	% Disbursed
P152394	IDA-58360	Effective	USD	150.00	150.00	0.00	132.25	15.93	89%
P152394	TF-A2561	Effective	USD	40.00	40.00	0.00	29.30	10.70	73%
P152394	TF-A2792	Effective	USD	1.10	1.10	0.00	0.71	0.39	64%

Key Dates (by loan)

Project	Loan/Credit/TF	Status	Approval Date	Signing Date	Effectiveness Date	Orig. Closing Date	Rev. Closing Date
P152394	IDA-58360	Effective	15-Jun-2016	04-Jul-2016	29-Sep-2016	30-Sep-2021	30-Sep-2023
P152394	TF-A2561	Effective	15-Jun-2016	04-Jul-2016	29-Sep-2016	30-Sep-2021	30-Sep-2021
P152394	TF-A2792	Effective	15-Jun-2016	04-Jul-2016	04-Jul-2016	30-Jun-2020	30-Sep-2021

Cumulative Disbursements



PBC Disbursement

PBC ID	PBC Type	Description	Coc	PBC Amount	Achievement Status	Disbursed amount in Coc	Disbursement % for PBC



Restructuring History

Level 2 Approved on 24-Jun-2019 ,Level 2 Approved on 31-Jan-2020 ,Level 2 Approved on 20-Oct-2020 ,Level 2 Approved on 26-Mar-2021

Related Project(s)

P174772-Additional Financing for THS-UCP
