

TC ABSTRACT

I. Basic Project Data

▪ Country/Region:	SURINAME/CCB - Caribbean Group
▪ TC Name:	Implementation Support for the Health Services Improvement Project
▪ TC Number:	SU-T1118
▪ Team Leader/Members:	Diana Pinto, Team Leader SCL/SPH); IAN Jo-A-Shu, Alternate Team Leader (SCL/SPH); Jennifer Nelson (SCL/SPH); Martha Guerra (SCL/SPH); Mario Ubertini (CDH/CHA)
▪ Taxonomy:	Operational Support
▪ Number and name of operation supported by the TC:	Health Services Improvement Project-SU-L1054 - Support for the Execution - Design and Implementation Support for Health Services Support Project-SU-T1100 - 3.Support for the Execution
▪ Date of TC Abstract:	23 Apr 2019
▪ Beneficiary:	Suriname
▪ Executing Agency:	Inter-American Development Bank
▪ IDB funding requested:	US\$250,000.00
▪ Disbursement period:	40 months
▪ Types of consultants:	Firms
▪ Prepared by Unit:	Social Protection and Health Division (SCL/SPH)
▪ Unit of Disbursement Responsibility:	Social Sector - Headquarters
▪ TC included in Country Strategy (y/n):	No
▪ TC included in CPD (y/n):	Yes
▪ Alignment to the Update to the Institutional Strategy 2010-2020:	Social inclusion and equality; Gender equality

II. Objective and Justification

- 2.1 The objective of this operation is to support the implementation of the operation SU-L1054. To achieve this this, TC will finance institutional strengthening activities focused on improving the execution capacity of the MOH to manage the implementation of the components of SU-L1054 program in a coordinated and integrated manner.
- 2.2 The Health Services Improvement Project operation SU-L054 seeks to contribute to the reduction of the burden of disease in Suriname by improving access to high quality, integrated primary care services and enhancing the effectiveness of the health sector to address priority epidemiological challenges. The program includes components for: (i) Institutional strengthening of the Ministry of Health (MOH) to exercise core policy and technical functions; (ii) Expansion of the Chronic Care Model to improve accessibility and quality of clinical pathways for non-communicable diseases; and (iii) Increase access to priority services for communicable diseases in at risk population. SU-L054 was approved in August 2018, the loan contract was signed in November 2018, and is now in the process of being declared eligible as the MOH is completing the fulfilment of conditions prior to first disbursement.
- 2.3 **Strengthening Learning Systems in Chronic Care Delivery.** To scale up of the CCM, it is critical to build a learning system to enable the MOH and care providers to continuously scan across its units and sub-units (e.g., national, regional and local levels), understand variations in performance, identify best practices, learn from them and actively spread them towards achieving overarching organizational improvement aims. Preliminary assessments of implementation of the CCM have detected capacity challenges regarding clinical processes as well as information and data issues which

point towards the need to provide technical assistance to develop Learning System in Suriname and a Quality Assurance (QA) and a Continuous Quality Improvement (CQI) Strategy.

- 2.4 **Information Systems for Health.** To better guide implementation, IDB, PAHO and the MOH are working together under PAHO's Information System for Health (IS4H) Framework to create one roadmap for digital transformation of the health sector. Preliminary results reveal that there are gaps in IS4H services and functions, which also may be duplicated across units/programs. IS4H activities and resources are not formally identified in program/unit budgets and in any operational plans and it's often challenging to identify resources for the improvement of activities. Addressing these gaps requires to have a national-level diagnostic for policy dialogue, in addition to creating a baseline to measure progress from the project. This may be achieved through application of existing standard instrument and methodology to measure the access and use of information and communication technologies in the health sector.
- 2.5 **Fiduciary and Procurement Capacity of the Ministry of Health.** The IDB assessed the potential of the Executing Agency (MOH) to fulfill the financial management and procurement responsibilities during the execution of the loan through application of the Platform for Assessment of Institutional Capacity-PACI. The results of the assessment of the fiduciary and procurement areas indicate deficiencies in these areas and therefore, a corresponding need to strengthen the MOH's FM and procurement capacity in order to sustain the sector transformations that will be brought about through the implementation of SU-L1054. Specifically, additional support is required in the procurement and technical supervision of the design and construction of the new administrative headquarters.

III. Description of Activities and Outputs

- 3.1 **Component 1: Institutional Strengthening of the Procurement Capacity of Ministry of Health.** This component will finance technical assistance to strengthen procurement capacity of the MOH. This component will therefore finance an international procurement coach and specific technical architectural and construction advisors to provide support to project procurement under SU-L1054.
- 3.2 **Component 2: Design of CCM Model as an organizational learning system.** This component will fund an international consultancy to design a Rapid System for Learning and Improvement to develop continuous quality improvement (CQI) strategies and processes. Standards, indicators and critical process will be created and mapped, and assistance will be provided to CCM implementers in: 1) selecting the right interventions to scale; 2) planning for scale; and 3) supervision/helping countries monitor scale. Deliverables include a draft report of the proposed Service Delivery Platform revised for the delivery of the integrated health package of primary health care /CCM for Suriname population, including Basic health benefits plan of health services defined; Roles and Functions to deliver health services defined; Functional Structure of the health network defined; Outreach, screening, and referral mechanisms defined; and Estimation of unitary costs defined and draft of the Quality Improvement Strategy for Chronic Care Model, including Standards, indicators and criteria for quality implementation of Chronic Care Model and draft flow-charts of critical clinical, management and support system processes mapped to be optimized, taking technology into account.
- 3.3 **Component 3. IS4H ICT Infrastructure and System Inventory Assessment.** This component will fund an international consultancy to: 1) create a detailed inventory of current information systems in use by the MOH; 2) conduct an assessment of the current state information and communications technology infrastructure and to estimate the cost of strengthening the infrastructure centrally and for targeted health services networks that will be the focus of facility, infrastructure and program strengthening under

the IDB investment loan. It will also support a firm to design the instrument for the National Level ICT eHealth Survey to establish a national baseline to track progress towards adoption of health technology and improvement in efficiencies.

IV. Budget

Indicative Budget (US\$)

Activity/Component	IDB/Fund Funding	Counterpart Funding	Total Funding
Component 1. Institutional Strengthening of the Procurement Capacity of Ministry of Health.	\$75,000.00	\$0.00	\$75,000.00
Design of CCM Model as an organizational learning system.	\$100,000.00	\$0.00	\$100,000.00
IS4H ICT Infrastructure and System Inventory Assessment.	\$75,000.00	\$0.00	\$75,000.00

V. Executing Agency and Execution Structure

- 5.1 **Executing Agency (EA).** The executing agency is the IDB through SCL/SPH. Procurement of consulting and non-consulting services will be carried out in accordance with the policies for the selection and contracting of consultants financed by the IDB (GN-2765-1) for firms, (AM-650 CWEs) for individuals and (GN-2303-20) for non-consulting services if required, as well as in keeping with the provisions established in the procurement plan. Through this TC, the Suriname MOH is receiving support to improve their capacity to implement the \$20M Health Services Improvement Project Loan (SU-L1054).
- 5.2 Procurement of consulting and non-consulting services will be carried out in accordance with IDB's Policy for the Selection and Contracting of Consulting Firms for Bank-executed Operational Work (GN-2765-1) and its corresponding Guidelines (OP-1155-4), the Complementary Workforce Policy (AM-650) for individuals and the Corporate Procurement Policy (GN-2303-20) for non-consulting services if required.
- 5.3 The IDB will monitor the quality and progress of the TC through the IDB's institutional systems, under the responsibility of the TC Project Team Leader. The final products will also be reviewed by the Project Team to ensure the quality of products and services funded under this TC.
- 5.4 In oversight of parallel institutional strengthening projects of this nature which coincide with the execution of a large-scale loan, the beneficiary of the Loan has agreed that the IDB is positioned more objectively to provide execution and oversight of the consultancies that will be carried out under this TC. The results of these consultancies are intended to bring large scale improvements to the operation of the MOH and with the oversight of these consultancies being independent from the MOH itself, the results are more likely to achieve higher impact.

VI. Project Risks and Issues

- 6.1 The main risk associated to the TC is related to the potential coordination challenges with other stakeholders, which may affect overall TC implementation. This risk will be mitigated by having the Bank as the executing agency. The TC will also closely coordinate with technical agencies such as PAHO to ensure synergies in project implementation support.

VII. Environmental and Social Classification

- 7.1 The ESG classification for this operation is "undefined".