GEF SECRETARIAT REVIEW FOR FULL/MEDIUM-SIZED PROJECTS*
THE GEF/LDCF/SCCF TRUST FUNDS

GEF ID:	**4611**		
Country/Region:	**Regional (Ghana, Madagascar, Tanzania)**		
Project Title:	**Reducing UPOPs and Mercury Releases from the Health Sector in Africa**		
GEF Agency:	**UNDP**	GEF Agency Project ID:	**4865 (UNDP)**
Type of Trust Fund:	**GEF Trust Fund**	GEF Focal Area (s):	**POPs**
GEF-5 Focal Area/ LDCF/SCCF Objective (s):		**CHEM-1; CHEM-1; CHEM-3; Project Mana;**	
Anticipated Financing PPG:	**$200,000**	Project Grant:	**$6,453,195**
Co-financing:	**$28,936,164**	Total Project Cost:	**$35,589,359**
PIF Approval:	**April 13, 2012**	Council Approval/Expected:	**June 07, 2012**
CEO Endorsement/Approval		Expected Project Start Date:	
Program Manager:	**Evelyn Swain**	Agency Contact Person:	**Mr. Jacques**

Review Criteria	Questions	Secretariat Comment at PIF (PFD)/Work Program Inclusion [1]	Secretariat Comment At CEO Endorsement(FSP)/Approval (MSP)
Eligibility	1. Is the participating country eligible?	Yes	Yes
	2. Has the operational focal point endorsed the project?	The endorsement letter for Rwanda is missing. Please submit letter. ES, January 10, 2012: Zambia replaced Rwanda in the project. Zambia's endorsement letter was provided. - Comment cleared	
Agency's Comparative Advantage	3. Is the Agency's comparative advantage for this project clearly described and supported?	Yes. UNDP is well positioned to implement POPs health-care waste management projects. UNDP has implemented a global health-care waste management project covering 7 countries with GEF funding.	Yes.

*Some questions here are to be answered only at PIF or CEO endorsement. No need to provide response in gray cells.

[1] Work Program Inclusion (WPI) applies to FSPs only . Submission of FSP PIFs will simultaneously be considered for WPI.

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	4. If there is a non-grant instrument in the project, is the GEF Agency capable of managing it?	N/A	NA
	5. Does the project fit into the Agency's program and staff capacity in the country?	Yes, the project matches UNDP thematic program and UNDP has staff capacity in the countries.	Yes.
Resource Availability	6. Is the proposed Grant (including the Agency fee) within the resources available from (mark all that apply):		
	• the STAR allocation?		
	• the focal area allocation?		Yes.
	• the LDCF under the principle of equitable access		
	• the SCCF (Adaptation or Technology Transfer)?		
	• Nagoya Protocol Investment Fund		
	• focal area set-aside?		
Project Consistency	7. Is the project aligned with the focal /multifocal areas/ LDCF/SCCF/NPIF results framework?	Yes	Yes.
	8. Are the relevant GEF 5 focal/ multifocal areas/LDCF/SCCF/NPIF objectives identified?	Yes	Yes.
	9. Is the project consistent with the recipient country's national strategies and plans or reports and assessments under relevant conventions, including NPFE, NAPA, NCSA, or NAP?	Yes. POPs management and health-care waste management is a priority set out in country NIPs.	Yes, this project is consistent with the NIP.
	10. Does the proposal clearly articulate how the capacities developed, if any, will contribute to the sustainability of project outcomes?	Yes. The project will build regional and country capacities through national policies, training, and favorable market conditions for affordable technologies that meet BAT guidelines.	Yes, sustainability and replicability are clearly laid out.

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Project Design	11. Is (are) the baseline project(s), including problem (s) that the baseline project(s) seek/s to address, sufficiently described and based on sound data and assumptions?	Yes. The baseline project is well defined. Baseline project consists of treatment of health-care waste using non-BAT/BEP incineration technologies. The baseline project will benefit from the GEF/UNDP global health care medical waste project.	Yes.
	12. Has the cost-effectiveness been sufficiently demonstrated, including the cost-effectiveness of the project design approach as compared to alternative approaches to achieve similar benefits?		Yes, cost effectiveness has been assessed and build from the UNDP global project.
	13. Are the activities that will be financed using GEF/LDCF/SCCF funding based on incremental/ additional reasoning?	Yes. The GEF will fund incremental activities to ensure Dioxin and Furan emissions additionally minimized using BAT.	Yes, the incremental reasoning is clear. With out the GEF project non-incineration and mercury free technologies would not be possible.
	14. Is the project framework sound and sufficiently clear?	The project framework is clear, however please clarify the following: Component 1- How will the technology allocation formula be developed? What criteria will be included in the formula? ES, January 10, 2012: Methodology provided. - Comment cleared Component 3- Is this all TA or is there actual investment in the purchasing BAT technologies and mercury free devices? Also, what type of recycling do you expect under this component? ES, January 10, 2012: Component 3 includes the purchasing of BAT technologies and mercury free devices. Description of recycling provided. -	Yes.

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		Comment cleared Component 4- Is this all TA or is there actual investment in the purchasing and distribution of technologies? How will HCWM systems be expanded to other facilities? ES, January 10, 2012: Component 4 includes a significant level of procurement and distribution of technologies. - Comment cleared Components 1, 2, 3, and 4- These 4 components all include training. How will training be streamlines to ensure that there is no duplication of effort? ES, January 10, 2012: Number of trained personnel provided for Tanzania how many trained in other countries? Will there be coordination between National and Regional training programs? ES, March 5, 2012: Synergies between the national and regional training programs will be maximized. -Comment cleared.	
	15. Are the applied methodology and assumptions for the description of the incremental/additional benefits sound and appropriate?	Yes. An accurate baseline will be developed during PPG phase, however for PIF phase an estimate of benefits was provided, resulting in reductions of UPOPs emissions by 131 g-TEQ/a and mercury emissions of 31 kg Hg/yr.	The benefits are significantly lower that what was in the PIF. PIF stage was estimated reductions of UPOPs emissions by 131 g-TEQ/a and mercury emissions of 31 kg Hg/yr. Now at CEO Endorsement the re are reductions of UPOPs emissions by only 31.8g-TEQ/a and mercury emissions of

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			25.3 kgHg/yr. Please explain the difference. ES, 8/11/14- An explanation was provided. Noting that both the PIF and CEO Endorsement have estimated benefits. This is a conservative estimate. -Comment cleared
	16. Is there a clear description of: a) the socio-economic benefits, including gender dimensions, to be delivered by the project, and b) how will the delivery of such benefits support the achievement of incremental/ additional benefits?	Yes. Benefits to healthcare workers such as nurses and cleaning staff, including women, as well as waste handlers will be achieved. PPG phase will assess gender aspects of healthcare waste management.	Yes, this is clear.
	17. Is public participation, including CSOs and indigeneous people, taken into consideration, their role identified and addressed properly?	There is a lack of public participation/identification in the current PIF. Please consider public participation in the current PIF, including participation of hospital staff, patients and visitors, and medical students. ES, January 10, 2012: Description provided. - Comment cleared	Yes, this is clear.
	18. Does the project take into account potential major risks, including the consequences of climate change and provides sufficient risk mitigation measures? (i.e., climate resilience)	Yes. Risks including stakeholder roles, implementation of national policies on healthcare waste, technology procurement delays, and insufficient number of technology suppliers have been identified.	Yes, risks are accounted for.
	19. Is the project consistent and properly coordinated with other related initiatives in the country or in the region?	The project is consistent with other related initiatives, however please describe how the project will compliment, not overlap the GEF funded healthcare waste projects in Tanzania.	Yes, the project is well coordinated.

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		ES, January 10, 2012: Coordination with Tanzania project provided. - Comment cleared	
	20. Is the project implementation/ execution arrangement adequate?	The role of relevant stakeholders in unclear. Please elaborate on the role of the two listed cooperating agencies, WHO and HCWH. ES, January 10, 2012: Roles of WHO and HCWH elaborated. - Comment cleared	Yes, WHO will execute the project.
	21. Is the project structure sufficiently close to what was presented at PIF, with clear justifications for changes?		There is a significant change in the GEBs expected. Please explain. ES, 8/11/14- Explanation provided. - Comment cleared.
	22. If there is a non-grant instrument in the project, is there a reasonable calendar of reflows included?		NA
Project Financing	23. Is funding level for project management cost appropriate?	No. Agencies were guided on a number of occasions that the level of project management costs applied to projects exceeding 2M in GEF funding should not exceed 5%. The project management costs are well above this level and we request that it be reduced to the threshold or lower or a detailed justification on the costs and the reasons for the costs be provided. The project management cost on the first page of the PIF appears in the wrong row. Please correct. ES, January 10, 2012: PMC has been decreased to 5%. However, PMC	Yes.

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		cofinancing ratio should equal the cofinancing ratio of the overall project. Please increase PMC cofinancing. ES, March 5, 2012: PMC cofinancing has been increased to an appropriate level. -Comment cleared.	
	24. Is the funding and co-financing per objective appropriate and adequate to achieve the expected outcomes and outputs?	No. The co-financing is below what is expected. There is strong concern that all of the co-financing is in-kind. Without cash the project cannot be implemented since the baseline project should form the bulk of the project. In this regard please indicate what the co-financing will be paying for. ES, January 18, 2012: The cost of the GEF funded portion is too high. Please reduce the GEF funding to no more than $7.5 million, with a focus on HCWM system procurement and demonstration using best practices. The co-financing has been increased to 1:3 however all cofinancing is in-kind. Due to the nature of this project and the procurement of HCWM systems, there is strong concern that in-kind co-financing will not meet the project needs. Cash co-financing is required for this type of project. ES, March 5, 2012: Project budget has been reduced to $7.5m. Cofinancing has been increased to 1:4. All cofinancing is either in-kind or unknown at this stage. Cash cofinancing will be pursued from the	This will be determined after the GEB reasoning is clarified. ES, 8/11/14- The estimated GEB's have been decreased significantly (approximately 100 g-TEQ/a and 6 kg Hg/yr) but the project cost has not decreased. Please decrease the cost accordingly or provide a justification on how the funding amount is still appropriate given the decrease in GEBs. ES, 9/24/14: Justification for the needed cost and reasons for the GEB reduction was provided. -Comment cleared

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		private sector during PPG. ES, April 10, 2012: Given the recent instability, Mali should be removed from the project and the budget should be reduced accordingly. ES, April 12, 2012: Mali has been removed and budget was reduced. - Comment cleared.	
	25. At PIF: comment on the indicated cofinancing; At CEO endorsement: indicate if confirmed co-financing is provided.	Low co-financing: 1:1.74. Agencies were guided on a number of occasions that the level of co-financing for GEF 5 projects is expected to be around 1:4. ES, January 10, 2012: See comment 24 ES, March 5, 2012: Cofinancing is 1:4. See comment 24.	There are no co-financing letters. Please confirm co-financing from all sources. ES, 8/11/14- Co-financing can not be confirmed. The way that Table c is organized is confusing. Typically each co-financing source is given it's own line with the corresponding amount and is not grouped together. In two of the letters the co-financing is not clear. One of those letter is only a chart with a stamp on it that reads Ministere de la sante et du planning fanciall, this letter has a total in USD as $275,250,181, this amount seems very high and incorrect. The other latter in question is the Zambia Ministry of Health. This letter has a total of 51,096,431, this total also seems incorrect seeing that the total co-financing for the project is only $28M. There are a lot of co-financing letters for this project it needs to be clear that we have accurate co-financing letters for each source. Please clarify the co-

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			financing situation in this project. ES, 9/24/14: Cofinancing letters have been organized and clarified. - Comment Cleared.
	26. Is the co-financing amount that the Agency is bringing to the project in line with its role?	Yes. UNDP is bringing 100,000 as in-kind co-financing to the project.	Please provide a co-financing letter from UNDP. ES, 9/24/14: UNDP's letter was provided. -Comment cleared
Project Monitoring and Evaluation	27. Have the appropriate Tracking Tools been included with information for all relevant indicators, as applicable?		Yes.
	28. Does the proposal include a budgeted M&E Plan that monitors and measures results with indicators and targets?		Yes.
Agency Responses	29. Has the Agency responded adequately to comments from:		
	• STAP?	None Received	STAP comments were received. Please explain if they have been addressed. ES, 9/24/14: STAP comments have been addressed. -Comment cleared.
	• Convention Secretariat?	None Received	None
	• Council comments?		None
	• Other GEF Agencies?	None Received	None
Secretariat Recommendation			
Recommendation at PIF Stage	**30. Is PIF clearance/approval being recommended?**	Pending response to questions above, including: 1. Missing endorsement letter from Rwanda. 2. High project management costs.	

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		3. Inappropriate co-financing ES, January 18, 2012: The following issues need to be addressed: PMC cofinancing ratio should match cofinancing ratio for overall project. Cofinancing ratio is 1:3 with 100% in-kind cofinancing. Project cost should be reduced to no more than $7.5 million ES, April 10, 2012: Mali should be removed from the project and the budget should be reduced accordingly. ES, April 12, 2012: Mali has been removed and the budget is adjusted accordingly. This project is recommended for clearance.	
	31. Items to consider at CEO endorsement/approval.		
Recommendation at CEO Endorsement/ Approval	32. At endorsement/approval, did Agency include the progress of PPG with clear information of commitment status of the PPG?		Please give a brief update on the PPG.
	33. Is CEO endorsement/approval being recommended?		Not at this time. Co-financing letters are missing and GEBs need clarification. Additionally there are questions on the STAP comments and PPG. ES, 8/11/14- Not at this time. There is a question about project funding and co-financing. ES, 9/24/14: All issues have been addressed. CEO Endorsement is recommended.

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Review Date (s)	First review*	September 20, 2011	May 22, 2014
	Additional review (as necessary)	January 18, 2012	August 11, 2014
	Additional review (as necessary)	March 05, 2012	September 24, 2014
	Additional review (as necessary)	April 10, 2012	
	Additional review (as necessary)	April 12, 2012	

* **This is the first time the Program Manager provides full comments for the project. Subsequent follow-up reviews should be recorded. For specific comments for each section, please insert a date after comments. Greyed areas in each section do not need comments.**

REQUEST FOR PPG APPROVAL

Review Criteria	Decision Points	Program Manager Comments
PPG Budget	1. Are the proposed activities for project preparation appropriate?	Yes, the proposed activities are appropriate.
	2. Is itemized budget justified?	Yes, the budget is justified.
Secretariat Recommendation	**3. Is PPG approval being recommended?**	PPG approval is recommended.
	4. Other comments	
Review Date (s)	First review*	July 19, 2012
	Additional review (as necessary)	

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