



Final Report

on the mid-term evaluation of the project:

“Consolidation of the blood system in selected rural areas of Laos”

Country of implementation: Laos

Assignment period: October – December 2019

Commissioner of the evaluation: German Red Cross (GRC)

Implementing Partner: Lao Red Cross (LRC) NBTC (National Blood Transfusion Centre)

Project Implementation Period: Phase 3: January 2018 – December 2020

Donor: German Federal Ministry for Economic Cooperation and Development (BMZ)

Evaluator: Volker Wiemann – Independent Consultant

December 2019

Abbreviations

BMZ	Federal Ministry for Economic Cooperation and Development
GRC	German Red Cross
GoL	Government of Laos
LDC	Least Developed Country
LRC	Lao Red Cross
MoH	Ministry of Health
MTE	Mid-term Evaluation
NBTC	National Blood Transfusion Centre
PPP	Power Point Presentation
RBM	Results-Based Management
SRC	Swiss Red Cross
SSF	Social Structural Funding
ToR	Terms of Reference
WHO	World Health Organisation

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1. Executive summary

The mid-term evaluation (MTE) report at hand describes the findings, conclusions and recommendations generated by the evaluator during the evaluation period in October and November 2019. The field phase took place between October 28th and November 12th. The project phase with the official title “**Consolidation of the blood system in selected rural areas of Laos**” is the **third three year phase** of a programme funded by the German Federal Ministry for Economic Cooperation and Development (BMZ) under the Social Structural Funding (SSF) line. Approved project implementation period is **January 2018 – December 2020**.

The **overall objective** is to “Contribute to the improvement of the health sector in selected areas of Laos”.

Project objective is that “The blood programme in Laos is improved and consolidated in terms of coverage, quantity and quality in line with national standards and WHO guidelines within three years”.

The BMZ SSF 3-level model was translated into the following main themes within the project:

MICRO: Voluntary donor motivation and recruitment

MESO: Technical and infrastructural capacities

MACRO: Advocacy and policy dialogue

The three respective results reflect the model and are defined as follows:

Project result 1 (Micro Level)

In the provinces and districts of the project area, effectiveness and efficiency of the blood donor management are improved and the readiness for voluntary blood donation is increased.

Project result 2 (Meso Level)

A tight infrastructure of blood donation institutions offers sufficient capacities, wide reach and reliable availability of services.

Project result 3 (Macro Level)

Latest by the end of the project, LRC Blood Donation Service, in keeping with the parallel development of wider health services, has an enhanced and relevant profile in the public and in government domains.

The MTE was initiated to ascertain progress towards expected results and assess related consequences for sustainability and connectedness in the circumstances of a handover.

The **primary purpose** of the evaluation was **to inform the forthcoming phase-out** from the current project at the end of 2020 **and conclusions for a handover to LRC** at the end of December 2020.

The data sets, that constitute the analysis in this report, were generated through the application of a mix of methodologies, namely a

- desk review of project documentation and other written sources such as national and institutional policies,
- key informant interviews,
- own observation.

The evaluation design was non-experimental with a purposive selection of key informants and sites to visit.

As the geographical coverage of the project was large, the evaluator would only visit a small selection of supported sites during the field visit. Thus for assessing progress, the evaluation relied on the provision of respective secondary data by GRC and LRC. Consequently, triangulation of those data through site visits was limited. At the end of the visit to Laos, the evaluator conducted a workshop with GRC and NBTC. The workshop served to present, discuss and validate preliminary findings, conclusions and recommendations formulated by the evaluator. Stakeholders were invited to comment and to formulate additional recommendations if necessary.

The evaluation concludes with the submission of the final report at hand.

The **evaluation questions** were answered as follows:

To what extent were the objectives achieved / are likely to be achieved?

For the Micro- and Meso-level and all related indicators, the project is on track to achieve its targets by project end in December 2020.

On Macro level, the NBTC has already succeeded in achieving the target under indicator 1: Long-term funding and HR plans are agreed between the LRC NBTC and the Government of Laos (GoL) to cover the basic ongoing operational requirements of the national blood service.

Furthermore significant developments in policy dialogue between the LRC NBTC and the Ministry of Health (MoH) have materialised, in which the roles and responsibilities of stakeholders, including the LRC NBTC, in relation to thalassaemia and healthcare waste management are clarified (indicator 2).

For a nationwide application of safe health care waste management, the system still lacks the technical infrastructure for sterilization of hazardous medical waste in many parts of the country.

The provision of the needed additional infrastructure is not yet safeguarded by any firm pledges from external donors or the GoL.

The same applies for the targeted strategy for further infrastructural investments in the blood service and respective firm pledges (indicator 3).

It remains beyond control and responsibility of the project and NBTC, whether sufficient funds will be available by end of 2020 and respective capital investments are done.

What were the major factors influencing the achievement or non-achievement of the objectives?

The project promises to reach its main targets and is praised by stakeholders as a success story. The MoH is very satisfied with the NBTC and the progress of extending outreach and service levels of the blood transfusion service in Laos.

Being asked about major supportive factors for the project, the NBTC itself highlighted three factors:

The project is a priority for the target population. There is a good combination of hardware (infrastructure & equipment) and software (capacity building). The project enjoys very high commitment of staff and authorities.

The evaluator observed the following factors as contributors to the success of the project:

A positive cooperation between the specialized service provider NBTC and parent health authorities in MoH fostered increased awareness and support of the GoL.

The approach to develop the blood transfusion system is well aligned to and embedded into a general development plan of the wider health system in Laos.

Over the past decade, the NBTC managed well to gradually advance its strategy and approach to develop the blood transfusion system countrywide while combining domestic budgets, external grants and external support into a comprehensive bundle to finance the progress.

While many international donors pulled out of Laos during the last years, GRC has supported the NBTC since a decade - since 8 years under BMZ SSF - and provided stability and commitment as a partner.

This history of cooperation translates into a trustful and productive working relationship between NBTC and GRC.

Thus GRCs support to NBTC with the BMZ SSF grant and a technical expert is well tailored to implement corner stones of the development plan of Lao blood services between 2018 and 2020. Consequently the project was planned realistically and based on sound assessments and strategies and now is well on track towards achieving its targets.

To what extent could the intended target group be reached?

The target group are people in need for blood or its products. As no data is available on those people that might need blood, but did not consult a doctor who would have recorded the need, the total demand is not measurable. Data is only available for people that consulted a doctor and that were prescribed blood or its products.

Overall in 2018 at the district level, 1671 units were requested and 1595 units were supplied, giving a ratio of demand vs. supply of 0.95 or 95%. In 2018, all MCH and dengue case blood requests could be fulfilled.

These data “suggest that blood was generally available at the district level, but that there were some issues with availability with stocked blood and emergency blood donors.”¹

That status dropped slightly to 87% for 2019. The drop might have been caused by the already mentioned major dengue outbreak and flooding in 2019: These events had led to a sudden and temporary sharp increase in requirements for blood that could not be fully covered, as supplies went down. The widespread floods prevented people from donating.

Although demand vs. supply is not specifically measured at the national/country level, the project has supported an increase in blood supply at all levels – including other districts, provincial and national. By implication, this responds to a demand, and is reaching towards the WHO target of annual donations representing 1% of the total population.

To what extent will the benefits of a programme or project continue after donor funding ceased?

The programme consisting of three BMZ project phases since 2012 provided a solid foundation to develop the blood transfusion service. Over the years, infrastructure was provided for 11 provinces. Equipment and software (training) for good standard was provided for all provinces.

The benefits and services of the current network will be sustained through the official operational budget provisions from the GoL and through cost recovery.

Replacement of aged or broken equipment or infrastructure is not covered by budgets yet and therefore not safeguarded.

In how far will the initiative be linked/connected to other future action and actors?

While expressing sincere satisfaction with the achievements of developing the blood service up to the current status and praising the contribution of the GRC BMZ SSF to the success, all stakeholders stress that further tasks and work that lie ahead to continue the process.

From this angle the multi-year external BMZ funding was productive but remains a **temporary external support to a continuous process or continuum**. A continuum, because it is characterized by being an ongoing and, by definition, permanent process of adapting public infrastructure and services to changing and evolving needs of citizens. In other words: Development as such is a continuum (or continuous process) and does not end with the exit of a programme or project.

¹ Annual project report 2018, table 2.3

The task to further develop the blood transfusion services in line with the development of the general health sector is a continuous process that will have to be pursued and adequately resourced for years to come.

The further development of the system implies necessary continuous extension (scale up), inputs (technical innovations, improved and replaced equipment) and capacity building (training) to match with the technical development in the blood sector, the wider development in Lao health sector in general, population growth and related need for blood that will further rise as a consequence of these developments. Thus sustainability is not only given by maintaining the status quo that is available now. Infrastructure will age, break down and will be outdated sometime in future. Sustainability also means to keep up with innovation to maintain the relative status quo.

The continuum implies further investments in capacity building, further capital investments into an extension of the network as well as investments in replacement and maintenance of current infrastructure and equipment. A coverage of these investments by domestic revenues and sources is not likely in the near future.

Thus for the continuation to succeed beyond the end of the BMZ funding 2020, the process will rely on new external funding, that is not yet ensured.

As no new donor is available yet to replace the outgoing GRC BMZ support, the evaluator recommended to use the remaining BMZ project period to develop and implement tools for fundraising to increase chances to attract new donors.

Which measures will be implemented to achieve sustainability?

As mentioned earlier, the sustainability of the programme implies continuous development and extension of service levels. The NBTC remains in close dialogue with the GoL health authorities in that regard. In addition, GRC and NBTC seem committed to address the recommendations of the evaluator to develop and implement tools for fundraising during the remaining project period to increase chances to attract new donors.

What major factors will influence the achievement or non-achievement of sustainability of the programme or project?

The technical and institutional base for sustainability is solid. Managerial capacity to sustain the system in future through continuous development is available. Thus the bottleneck remains the availability or non-availability of budgets for necessary capital investments, technical advisory and capacity building.

Impacts

Although the evaluation was not designed to analyse impacts comprehensively, the evaluator found strong indications for significant positive impacts on the Macro level as per BMZ SSF model:

The good performance and advocacy of the NBTC over the years led the GoL to nowadays acknowledge the programme as a crucial component of general health services. It became a proclaimed priority for the MoH to further improve effectiveness and efficiency of the blood programme to ensure targeted efficient use of blood units as a scarce resource². Joint planning of NBTC and MoH resulted in the incorporation of basic cost provisions for blood services in general governmental budget provisions for

² KII MoH

health. Thus after years of dependence on external grants even for operational costs, the blood programme's operational costs are now fully covered by cost recovery and domestic budgets³.

According to the stakeholders, this impact is attributable to the blood programme and its long-standing GRC BMZ support.

In addition the Lao blood programme was chosen by the "Global Advisory Panel on Corporate Governance and Risk Management of Blood Services in Red Cross and Red Crescent Societies" (GAP) in 2018 to be a pilot country for implementation of the AABB Fundamental Standards for Blood Collection and Transfusion⁴, to assess their potential use regionally for similarly resourced blood services⁵. This selection by technical experts shows appreciation of the readiness and openness of NBTC for cooperation with external actors and institutions towards advancing global standards.

Recommendations

As mentioned earlier, the project is well on track towards reaching its targets. Bottlenecks and risks pertain to external factors beyond direct control of the programme, namely the availability of new external funding after withdrawal of GRC BMZ funds at end of 2020.

To increase chances to attract new donors, the evaluator recommends to use the remaining BMZ project period to develop and implement tools for fundraising to increase chances to attract new donors.

Follow up on recommendations has started

During the final evaluation workshop, after the evaluator had presented his preliminary analysis, NBTC and GRC endorsed the findings, conclusions and recommendations and already started to operationalise the recommendations.

The partners used the final workshop to already find and formulate suggestions on how to address the recommendations of the evaluator to "develop and implement tools for fundraising to increase chances to attract new donors."

The suggestions that are described in detail in section 5 of the report find explicit consent of the evaluator.

³ that are still partly funded through ODA as indicated above.

⁴ Advancing Transfusion and Cellular Therapies Worldwide (AABB): "Fundamental Standards for Blood Collection and Transfusion", 2018, 31st edition.

⁵ GAP: „Annual Report 2018“, p.15.