



Reducing UPOPs and Mercury Releases from  
The Health Sector in Africa



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# Project Exit Strategy

- Republic of Madagascar-

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## **Abbreviations**

BAT	Best Available Technologies
BEP	Best Environmental Practices
GEF	Global Environment Facility
HCW	Healthcare Waste
HCWH	Health Care Without Harm
HCWM	Healthcare Waste Management
MoH	Ministry of Health
MTR	Mid-Term Review
NGO	Non-Governmental Organisation
ProDoc	Project Document
SOP	Standard Operating Procedure
TE	Terminal Evaluation
UNDP	United Nations Development Programme
UPOPs	Unintended Persistent Organic Pollutions
WHO	World Health Organisation

## 1 Goals and principles of this document

The **goals** of this Project Exit Strategy are to ensure the sustainability of impacts after finalisation of the UNDP GEF Project “Reducing UPOPs and Mercury Releases from the Health Sector in Africa” in the Republic of Madagascar and to leave a self-sufficient system behind, which is locally owned.

It could also be defined in a broader sense as a project’s ‘sustainability strategy’, which could be accomplished through staggered graduation from specific project areas and / or transitioning / upscaling to associated or new projects or programming in selected areas.

This Exit Strategy has been planned with relevant stakeholders in advance of closing of the project, as it has been proven to contribute to better project outcomes and encourage commitment of beneficiaries to commit to project sustainability. In addition, good Exit Strategies can:

- help resolve tension that may arise between the withdrawal of assistance and commitment to achieve project outcomes.
- help clarify and define a sponsor’s role to host communities and other partners as being time limited, reducing the potential for misunderstandings and future dependency.

**Note:** An exit strategy should not be confounded with the “finalisation of project activities” at the end of the project. The exit strategy is aiming on the smooth and sustainable handing over and carry on of activities initiated by the project AFTER the project ends. The taking over process (activities, responsibilities etc.) from the project team towards the relevant stakeholder needs to be planned and implemented in forehand parallel to the implementation of project activities. This is done by an exit strategy.

In general, the following principles have been considered<sup>1</sup>:

- plan for exit from the outset,
- think about sustainability early on,
- consult with partners and stakeholders regularly,
- communicate constantly.

In addition, three factors are critical to sustainability and have been kept in mind planning for project phasing out:

- ⇒ a sustained **source of resources**,
- ⇒ sustained **technical and managerial capacity**, so that service providers can operate independently of the project, and
- ⇒ sustained **motivation** (of beneficiaries and service providers) that does not rely on project inputs.

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<sup>1</sup> Intrac for civil society; Exit strategies and sustainability - Lessons for practitioners, 2016

## 2 Project Description

The overall objective of this full-size project: “Reducing UPOPs and Mercury Re-leases from the Health Sector in Africa”, implemented by UNDP Istanbul Regional Hub in partnership with WHO and the NGO Health Care Without Harm (HCWH), is to:

1. implement best environmental practices and introduce non-incineration healthcare waste treatment technologies and
2. mercury-free medical devices in four Sub-Saharan African countries to reduce harmful releases from the health sector.

The project was officially launched on 12 April 2016 and was scheduled for completion on 12 April 2020. Due to the COVID-19 outbreak the project activities were interrupted and adopted to COVID-19 response. Therefore, the project was extended to December 2020. This is a GEF funded project that has a budget of just above 6,5 million USD. The project is being implemented by the UNDP, in partnership with the WHO and the NGO Health Care Without Harm (HCWH). The objective is to implement Best Environmental Practices (BEP) and Best Available Technologies (BAT) to reduce harmful releases from the health sector. This has been achieved through the introduction of non-incineration healthcare waste treatment technologies and mercury-free medical devices at healthcare facilities in four Sub-Saharan African countries: **Ghana, Madagascar, Tanzania and Zambia**. The project intends to achieve these objectives through 6 main project interventions:

1. Build national capacity to enable the assessment, planning, and implementation of healthcare waste management (HCWM) systems.
2. Develop/improve the national policy and regulatory framework pertaining to HCWM.
3. Provide available affordable systems that conform to BAT and international standards:
  - a. non-incineration HCWM systems and
  - b. phasing out of mercury-containing devices
4. Demonstrate HCWM systems, recycling, mercury waste management and mercury reduction at project facilities.
5. Establish national HCWM training infrastructures.
6. Create awareness on HCWM

The project in Madagascar was implemented in 2 phases:

- 1) After 10 days master training on HCWM for relevant stakeholder from all target countries, in the first phase of the project, HCWM systems and mercury-free devices have been provided for 6 selected facilities, which are identified as “model facilities” for the countries. 3 of these facilities were equipped with autoclaves by the project during the first phase. The legal framework on HCWM has been strengthened.
- 2) Based on the outcome of the first project phase, 2 additional model HCF have been equipped with autoclaving systems. Furthermore, shredders and compactors have been delivered to ensure proper disposal of the decontaminated waste. The exchange of mercury containing thermometer and sphygmomanometer with mercury free devices has been extended.

Each country investigated specific topics, with the aim of gaining experience and sharing the conclusions with the other project countries (flagship projects). In Madagascar the following was implemented:

- A video on the autoclave operation and maintenance was shoot. The video was produced for both English and French speaking audiences.

Further detailed information about the project activities can be found in the official ProDoc, MTR and TE reports.

### 3 Exit Road Map for Madagascar

The following Road Map outlines the activities which are planned to implement the Project Exit Strategy for Madagascar.

#### Legend of below table:

- A. Component: Name of the project component.
- B. Area: Name the areas of the component which need to be followed up.
- C. Activity: What need to be done within the project frame to ensure that the project outcomes are followed up to become sustainable?
- D. Lead: Who is responsible (entity or person) to follow up / implement the mentioned Activity (C)?
- E. Timeline: When will the activity be implemented?
- F. Stakeholder: Who need to be involved?

A	B	C	D	E	F
Component	Area	Activities	Lead	Timeline	Stakeholder/ Comments
CAPACITY BUILDING	National/region level	Meetings with TWG, M&E committee: hand over preparation	Project, TWG, M&E committee	End of March 2020	Follow up by MOH, MOE, WHO and support if needed
	National level	Donation of the training materials of the national curricula training for in service (health workers): participant notebook, powerpoint booklet, pre and post-test sheets...to the Ministry of Public Health (Service Santé Environnement SSENV)	Project	October 2020	National trainers, SSENV MOH
	National level	Training in autoclave 450L for the pool technicians of MOH (including SEM (Service de Maintenance des équipements), SSENV, model hospitals CHU JRA, CHU JRB, CHU Analakininina, CHU Morafeno, DRSP (regional division of MOH) Atsinanana)	Project,	July 2020 (Completed)	IRH, Mediclave, MOH (pool of technicians expert on autoclave: SSENV, SEM, CHU JRA, CHU JRB, CHU Analakininina, CHU Morafeno), MOE
	Facility level	Continuous training in BEP HCWM at the model hospitals (training materials and	Management, focal points of	No end-autoclave functioning	For new care providers hired by the hospital, to be organized by the HCF

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A	B	C	D	E	F
Component	Area	Activities	Lead	Timeline	Stakeholder/ Comments
		<p>videos on autoclave provided by the project to each model HCF)</p> <p>Booklets on treatment without incineration of medical waste and mercury to be distributed to all services in the hospitals</p>	each model hospitals		and the national trainer (in each model hospital)
HCWM at model hospitals	HCWM plan	Support to the development of HCWM plan to new model hospitals	Project, focal points model, management, hospitals	December 2019- Completed	CHU Morafeno and CHU Analakininina available: activity completed
		Meetings with management, division MOH: Advocacy to ensure the continuation of the operation of the autoclave and BEP HCWM at the model hospitals	Project, focal points model, management, hospitals, MOH, MOE	Till the end of project December 2020	<p>Actions already completed: letter from UNDP to MOH, response letter from MOH to UNDP, current national strategic plan of HCWM with a component on BEP and autoclave at the model hospitals</p> <p>Actions to be continued by MOH and MOE beyond December 2020: follow up and support of the model hospitals on the availability of human and financial resources to operate the autoclave</p>
		To ensure continuous implementation of HCWM Plan and operation of the autoclaves	Model hospitals	No end	<p><u>Available:</u> pool of local technician experts on autoclave (MOH SEM, SSENV, CHU JRA, CHU JRB.), spare parts provided by the project, video on maintenance of the autoclave</p> <p>Actions: to set up a dynamic interaction between the pool of local technician experts on autoclave to</p>

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A	B	C	D	E	F
Component	Area	Activities	Lead	Timeline	Stakeholder/ Comments
				December 2020	help one another in the testing, maintenance preventive and corrective of the autoclave  Set up a WhatsApp group made up of MEDICLAVE technicians and technicians from each model hospital equipped with an autoclave, and technicians in charge of the Equipment Maintenance Department at MINSANP.
	Data monitoring	Regular monitoring by SSENV MOH/DRSP (regional division of public health) with standardized monitoring tool on the operation of the autoclave and follow up of the environmental commitment program (PREE programme d'engagement environnemental)	SSENV MOH	No end	SSENV MOH, Regularly done by the SSENV since 2018 involvement of MOE and specific division MOH if some issues occur
		Monitoring of the implementation of HCWM plan	MOH, MOE	No end	MOH, MOE
MERCURY MANAGEMENT	Preparation of the formal authorization and documentation for the transport of hazardous waste (mercury)	Meetings with local stakeholders: Convention Basel, Minamata, MOE and MOH, service providers	Project	End of December 2020	MOH, MOE <u>Actions completed:</u> support of IRH: first contact with the Remondis Germany company <u>Actions to be done:</u> 1- by the project: documentation on formal authorization of transport conforming to Basel Convention 2- Meetings with MOE and MOH for the formal authorization



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A	B	C	D	E	F
Component	Area	Activities	Lead	Timeline	Stakeholder/ Comments
	Exportation	Contract with service providers	Project, MOE, MOH	December 2020	<p>Ongoing action : Estimation of elimination cost of mercury by Remondis</p> <p>Government MOE, MOH have to ensure the exportation if not realized before December 2020</p> <p>Eventual integration of the disposal of mercury recovered during the project into a broader disposal project under the Minamata Convention.</p> <p>Contact of the service provider with the Minamata Convention Focal Point carried out.(September 2020)</p> <p>Budget to be found</p>
POLICY DEVELOPMENT	National strategic plan on HCWM	Workshops development of the strategic plan	WHO, MOH, MOE	Completed on December 2019	Led by WHO, MOH and other local partners The national strategic HCWM plan has a component specific on BEP on HCWM with autoclaving
PROPOSAL	Formal hand over	Meetings with national parties, partners: advocacy on the proposal, sharing the best	Project, TWG, M&E committee	December 2020	Funding Government and partners

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A	B	C	D	E	F
Component	Area	Activities	Lead	Timeline	Stakeholder/ Comments
		<p>practices/ lessons learnt of the UPOPs project to local stakeholders</p> <p>Booklets concerning best practices/lessons learnt of the UPOPs project available</p>			<p>Actions completed: Proposal available and already used by SSENV MOH</p> <p>Actions to be done until the end of the project: dissemination of communication tools (booklet, radio/TV broadcast,</p>
LIGHTHOUSE PROJECT	Promotional video	Produce the promotional video on the regional project UPOPs and mercury	Project	Juin 2020	5 min promotional video finalized 2 min video (en attente de validation)
<b>COVID-19 activities (examples – to be adopted)</b>	<p>Logistic supply</p> <p>Training</p> <p>BEP and BAT</p>	<p>Providing of labelled waste storage container, safety boxes, color coded waste liners, waste bins and PPE</p> <p>Training of frontline workers on hand washing techniques and correct use of PPE Specific HCWM training of clinical staff and cleaners Specific training of facility managers or operators managing quarantined patients (confirmed and suspected)</p>	<p>Project- MOH</p> <p>Focal Point in each model establishments</p> <p>MOH, Pool of trainers</p>	<p>April 2020</p> <p>In continuous</p>	All of the model establishments supported by the Project are directly involved in the response to COVID19 through the treatment of people suffering from the disease

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A	B	C	D	E	F
Component	Area	Activities	Lead	Timeline	Stakeholder/ Comments
	<p>Cleaning and disinfection practices</p>	<p>Additional support on enforcement of safe segregation, collection, transport and storage within the health facilities.</p> <p>Additional support on correct usage and maintenance of autoclaves and safe disposal.</p> <p>Additional support to satellite facilities to manage waste safely.</p> <p>Additional support on safe laundry procedures.</p> <p>Provide guidance on cleaning and disinfection of surfaces in all environments in which COVID-19 patients receive care (treatment units, community care centres).</p> <p>Provide extra guidance on cleaning of waste storage area by cleaners.</p> <p>Ensure that WHO’s recommended disinfectants for COVID-19 virus are used.</p> <p>Provide guidance in accordance with WHO recommendations to clean reusable gloves and plastic aprons.</p>	<p>Project, MOH</p> <p>Focal Point in each model hospital</p>	<p>October 2020</p> <p>In continuous</p>	

## 4 Way Forward

Madagascar has begun to initiate the exit strategy of the project in mid-2019 in developing the proposal of the extension and continuation of the innovations introduced by the project in the country. In close collaboration with the different members of the committees of the project (steering committee, technical working group and monitoring and evaluation) from ministries, technical international partners, public and private partners, the project held various meetings to prepare the hand over the best environmental practices on HCWM set up in the model hospitals. The technical resource composed of the key persons involved in health and environment area that are members of the committees of the project are aware of the key challenges to sustain and to extend the BEP in HCWM in the country and can provide continuously support to the model hospitals and specific division of ministries for the extension if needed.

The Ministry of Public Health and the President initiative are planning non incineration treatment of HCW with autoclave for all hospitals (13 district hospitals) and public health research institute under construction this year 2020.

The Gantt Chart below shows in detail the timeline to implement the priority activities in the exit strategy road map.

		2019	2020											
	Task	Sept - Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
1	Meetings with TWG, M&E committee	Completed												
2	Donation of the training materials of the national curricula training for in service (health workers) to the Ministry of Public Health SENV													
3	Training in autoclave 450L for the pool technicians of MOH													

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		2019	2020											
	Task	Sept - Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
4	Continuous training in BEP HCWM at the model hospitals													
5	Support to the development of HCWM plan to new model hospitals	Completed												
6	Meetings with management, division MOH: Advocacy to ensure the continuation of the operation of the autoclave and BEP HCWM at the model hospitals													
7	To ensure continuous implementation of HCWM Plan and operation of the autoclaves													
8	Regular monitoring by SSENV MOH/DRSP (regional division of public health) with standardized monitoring tool on the operation of the autoclave and follow up of the environmental commitment program													

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		2019	2020											
	Task	Sept - Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
	(PREE programme d'engagement environnemental)													
9	Monitoring of the implementation of HCWM plan													
10	Meetings with local stakeholders: Convention Basel, Minamata, MOE and MOH, service providers													
11	Contract with service providers													
12	Workshops development of the strategic plan	Completed												
13	Meetings with national parties, partners: advocacy on the proposal, sharing the best practices/ lessons learnt of the UPOPs project to local stakeholders													
14	Produce the promotional video on the regional project UPOPs and mercury													
15	COVID-19 response													