



ANNUAL REPORT 2014

BELGIAN – SOUTH AFRICAN STUDY AND CONSULTANCY FUND

INTERVENTION SAF0901711

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Acronyms

| Antwerp/Flanders Port Training Center |
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| Belgian Technical Cooperation, the Belgian Development Agency |
| Budget and Treasury Office |
| Department of Co-operative Governance and Traditional Affairs |
| Department of Health |
| Director-General |
| Department of the Public Service and Administration |
| Department of Health Eastern Cape |
| Emerging Voices |
| Financial Information Tool |
| Gross Domestic Product |
| Health Information Systems |
| Human Resources |
| Health Systems Global – South Africa |
| Health Systems Research |
| International Development Cooperation |
| International Development Research Centre |
| Institute of Tropical Medicine |
| Joint Local Consultative Body |
| Monitoring and Evaluation |
| Municipal Finance Management Act |
| Medical Research Council |
| National Department of Health |
| National Health Insurance |
| National Treasury |
| Operations Management Framework |
| Public Finance Management Act |
| Routine Health Information System |
| South Africa |
| Supply Chain Management |
| Standard Operating Procedures |
| Swedish International Development Cooperation |
| Transport Education and Training Authority |
| Terms of Reference |
| Universal Coverage |
| The United Nations Children's Fund |
| University of the Western Cape |
| World Health Organization |
| |

1 Intervention at a glance

1.1 Intervention form

| Intervention name | Belgian-South African Study and Consultancy Fund |
|-----------------------------|---|
| Intervention Code | SAF0901711 |
| Location | National Treasury |
| Budget | 2,092,207.33 EUR |
| Partner Institution | IDC |
| Date of Specific Agreement | 16 April 2010 |
| End date Specific Agreement | 15 April 2015 |
| Objective | Strengthen the capacity of public institutions of South Africa, on the one hand in support of the prioritised sectors of the Belgian cooperation and the preparation of a new indicative program of cooperation, and on the other hand through the implementation of the Paris Declaration on harmonisation and alignment of aid. |

1.2 Budget execution

BTC, Belgian development agency 10/03/2015

| Total Budget | Expenditure year N | Balance | Total Disbursement |
|----------------|--------------------|----------------|--------------------|
| | | | rate |
| € 2,092,207.33 | € 860,607.31 | € 1,231,600.02 | 41% |

| National execution official | BTC execution official |
|---------------------------------------|----------------------------|
| ROBIN TOLI | PAUL VAN IMPE |
| Fund Director | Fund Co-Director |
| Chief Director | Resident Representative |
| International Development Cooperation | Belgian Development Agency |
| Mhi | |
| | |

2 Context

2.1 General context

Consequent to discussion held in Brussels on 10 May 2012, where it was decided to terminate the agreement signed between South African Minister of Health and the Belgian Ambassador in South Africa, the National Treasury submitted a formal letter on the 25th June 2012 to the Development Counsellor at the Embassy of Belgium to officially request for the re-allocation of the balance to the Study and Consultancy Fund. The total requested amount to be re-allocated was €1,995,001.28.

However due to the slow progress made in the Study and Consultancy Fund during 2011-2013 the balance from the Health project was not officially allocated to the Study and Consultancy Fund.

In March 2014, a new request was put forward by the Development Counsellor to the National Treasury suggesting a re-allocation of € 1.100.000 from the balance of the Health project to the Scholarship Programme for 2014. The remaining balance of € 895,001.28 was proposed to be transferred to the Study and Consultancy Fund in accordance with the recommendations made by the evaluation team. This allocation was accepted by the National Treasury on 12 March 2014 and by the Partner Committee on 25 November 2014.

The exchange of letters needs to be prepared to effect these decisions before termination of the Specific Agreement in April 2015.

2.2 Management context: execution modalities

The key changes to the management of the fund from 2010 until 2013 were related to a low number of proposals considered for approval. Most of the proposals received had lacked the quality component leading to the rejection of some of the studies.

During 2014, the Study and Consultancy Fund has made tremendous progress approving 14 additional studies and committing a total of 93% of the overall budget. The current remaining budget was earmarked for proposals from Department of Land Reform.

Based on the excellent progress made within one year, the Steering Committee proposed a request for extension and replenishment of the fund. It was proposed that the outstanding funds initially allocated for the Consolidation phase of the Capacity Building project be transferred to the Study and Consultancy Fund.

The Steering Committee endorsed a programme evaluation in view of motivating the request for extension and budget increase. The evaluation was planned to take place before the end of 2014 however the appointment of the service provider could not be finalised before the end of December due to unsuccessful first round of procurement.

In addition the steering Committee endorsed an audit with the purpose of reviewing the financial compliance of the Fund as well as make recommendations on how to further improve the current processes and procedures to ensure a more efficient level of implementation. The audit took place in October 2014 in accordance with the Framework contract established by BTC.

The BTC has developed a template for proposals, which helped in guiding the requestor in the submission process. Furthermore BTC developed a detailed procedure manual and procurement check list, which were tabled and approved in the last Steering Committee (that took place on 29th July 2014).

2.3 Harmo-context

Most of the approved studies during 2014 have a harmonisation context. The studies approved within the context of the health sector have a component of interaction with Belgian Academic Institutions for knowledge sharing within specific context. The 3rd Global Symposium was co-supported by a number of partners, such as WHO, Medical Research Council (MRC), Academic Institutions and National Department of Health. 12 other partners are recognised as financial contributors to this massive event (e.g. SIDA, World Bank, UNICEF, IRDC as well as local and international foundations).

Further partnerships and networking relation are established with other donors and Institutes through the recently approved study for Capacity Building and Knowledge Exchange activities for the Chief Directorate Health and Social Development within the National Treasury, in their preparation for and implementation of the National Health Insurance scheme.

3 Analysis of progress made

3.1 Studies

31 study proposals have been approved from the beginning of the implementation of the Study and Consultancy Fund, out of which:

- a) 16 studies were completed and reported during the reporting period January December 2013.
- b) 1 study, approved in 2013, has been severely delayed due to the lack of finalisation of tender procedure.
- c) 14 were approved during 2014, out of which:
 - 1. 3 studies have started the implementation
 - 2. 2 studies were completed in 2014
 - 3. 3 studies are in the process of finalising the procurement of services and due to initiate the implementation in the first quarter of 2015
 - 4. 3 studies were approved at the end of 2014 and will initiate the tender procedure in the first guarter of 2015.
 - 5. 3 studies (all in the health sector) were approved mid of 2014 but unfortunately have not progressed at all. It is understood that the senior management at Province level was changed after elections and no follow up was made from their side to ensure progress.

3.1.1 Progress of studies

| | Progress of studies ¹ | Α | В | С | D | Comments (only if the value is C or D) |
|----|---|---|--|---|------------------------|--|
| 1 | Seed Funding for the appointment of a Provincial HR Specialist at the KwaZulu Natal Provincial Treasury | | | | × | Over a year delay due to: unsuccessful first round tender process; underestimation of budget; budget review and re-approval as well as recent cancellation of second round tender. |
| 2 | Matching citizens' expectations: Applied Policy Research Project | | | × | | The activity was three months delayed due to the bureaucratic process of approval of the deviation from the tender procedure. The contract was signed late in 2014 with implementation ready to start in January 2015. |
| 3 | Technical Expert to assist with the Establishment of a Technical Policy Unit, DOH EC Province | | | x | | Delays were experienced with regard to the initiation as well as the finalisation of the tender process. |
| 4 | Evaluate the Routine Health Information System (RHIS) in the North West Province | | | х | | Delays were experienced with regard to the contractual procedures, requiring the contract to be resigned. |
| 5 | Develop SOPs for Local Government in key internal control cycles | | х | | | |
| 6 | Emerging Voices for Global Health 2014 | Х | | | | |
| 7 | Final Evaluation of the Study Fund | | The state of the s | × | Transcore Constitution | The tender was advertised in August 2014. The first round was not successful. The second round has not yet been finalised. Awarding of the tender is expected in the first quarter of 2015 and the work should start soon thereafter. |
| 8 | Final Audit for the Study Fund | | Х | | | |
| 9 | Study Tour to different countries | | Х | | | |
| 10 | E-Health Concept Note for the Gauteng Province | | | | x | This study was severely delayed due to non- response form the beneficiary department. It is understood that after elections the senior management was changed and therefore no further follow up was made from their side. |
| 11 | Development of a Medical Device Assessment and Audit Tool for the Gauteng Health Department | | | | x | This study was severely delayed due to non- response form the beneficiary department. It is understood that after elections the senior management was changed and therefore no further follow up was made from their side. |
| 12 | Public Financial Management Workshops and Seminars | | Х | | | |
| 13 | Tracer Study of BTC funded SA candidates in Maritime Courses | | х | | | |
| 14 | E-Health Concept Note for the Northern Cape Province | | | | × | This study was severely delayed due to non- response form the beneficiary department. It is understood that after elections the senior management was changed and therefore no further follow up was made from their side. |
| 15 | Produce the audiovisual material and distribute to all departments to increase the OMF footprint within the current DPSA personnel and budget constraints | | х | | | |

A: B C D

Ahead of schedule
On schedule
Delayed, corrective measures are required.
Seriously delayed (more than 6 months). Substantial corrective measures are required.

3.1.2 Analysis of studies completed

| Title of study: | Seed Funding for the appointment of a Provincial HR Specialist at the KwaZulu Natal Provincial Treasury |
|---|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | This study was approved for KwaZulu Natal Provincial Treasury in support to conducting an analysis of the remuneration of the public service and identify whether this is in line with the productivity expectations. The study will be limited to 2 departments (education and health) and it aims in producing recommendations that will enable the Provincial Treasury to budget better and appropriately for HR line items. The envisaged duration for the implementation is 4 months. |
| Have the studies been used as intended? | Even though this study was approved in September 2013 no progress has been made as yet due to the unexpected delay in procuring the services of a suitable HR Specialist. |
| To what did the study contribute? | This is to be determined once the procurement of services is finalised and the implementation is completed. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How | After the first round of procurement, it was noted that the budget was underestimated hereby resulting in not receiving any proposals to conduct the study. This was communicated by the interested service providers. |
| did they impact the study or the use of the study? | This process resulted into a request for increase in budget. The official request was submitted in the beginning of June 2014 and approved at the end of July 2014. |
| | An open tender process was initiated thereafter and was closed in December 2014 without success. This was due to the fact that the responses received were not in line with the requirements of the tender clearly demonstrating misunderstanding of the technical content of the TOR. The Supply Chain Management recommended reviewing the TOR and re-advertising the tender. |

| Title of study: | Matching citizens' expectations: Applied Policy Research Project |
|--|---|
| Describe, in a few sentences, for who the study was organised, and what it was about | This study was approved for the Department of Co-operative Governance and Traditional Affairs (COGTA). The study will focus on matching citizen's expectations of service delivery with local government capacity to deliver. It seeks to generate research and evidence based data which will be of assistance in identifying factors that inhibit effective citizen participation and service delivery. |
| Have the studies been used as intended? | The study was approved in August 2014 and the contract was signed with the service provider at the end of November 2014. The implementation will start with field visits for the next four months. A draft report is expected in June 2015. |
| To what did the study contribute? | The implementation is planned to start in January 2015. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | The approval of the deviation from the tender process took very long hereby delaying the formal approval of the study. The study was officially introduced in March 2014 and formally approved in August 2014. There were delays noted at the level of project inception as well as finalisation of the terms of the contract. |

| Title of study: | Technical Expert to assist with the Establishment of a Technical Policy Unit, DOH EC Province |
|--|---|
| Describe, in a few sentences, for who the study was organised, and what it was about | This study was approved for the Eastern Cape Provincial Department of Health to provide assistance in establishing a technical policy unit possibly based at Walter Sisulu University. This Unit is expected, once established, to provide timely and strategic technical assistance on evidence-based policy development and implementation. The study seeks to conduct an assessment of current skills and recommend a mix of skills required for the establishment of such unit. |
| Have the studies been used as intended? | This study was approved in May 2014 however the tender process was only concluded in December 2014. The implementation will start in January 2015. |
| To what did the study contribute? | Not yet determined. Implementation underway. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | No major factors arose – except for the lengthy tender process and its finalisation. |

| Title of study: | Evaluate the Routine Health Information System (RHIS) in the North West Province |
|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | This study was approved for the North West Provincial Department of Health. The department's Health Information Systems (HIS) general performance, along with the Auditor General's disclaimer opinion on the HIS motivated the development of a study proposal to appropriately study the department's RHIS, with the aim to inform targeted corrective measures and to ensure an effective RHIS which would enhance and support service delivery. The objective of the study is to provide better understanding of the existing capacity and to integrate data collection, processing, reporting, and use of information management at all levels of public health systems to improve patient outcomes. The focus will be on quality, affordability, accessibility and sustainability of processes and systems. |
| Have the studies been used as intended? | The contract with the successful service provider was signed in November 2014. The implementation and reporting will be initiated in the first quarter on 2015. |
| To what did the study contribute? | Not yet determined. Implementation underway. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | A major delay was the finalization of the contract. The Service provider was approved in July 2014 however the contract could only be concluded in November 2014. This was initially due to the different parties input required in the contract and the endorsement required from different legal departments (service provider, North West DoH, National Treasury and BTC). It was agreed that, due to extensive delays and taking into consideration the recommendation from the audit conducted in October, the contract will be signed between the North West Department of Health and North West University with oversight from National Treasury and BTC. |

| Title of study: | Develop SOPs for Local Government in key internal control cycles |
|--|---|
| Describe, in a few sentences, for who the study was organised, and what it was about | The study was approved for the Accountant-General within the National Treasury. The purpose is to stablish a basic, foundation for good financial management through developing SOPs for Local Government in key internal control cycles. |
| Have the studies been used as intended? | The final outcome of the selection process is still to be approved by the Director-General. The contract with the successful service provider is still to be signed once approval from the DG is received. |
| To what did the study contribute? | Not yet determined. Implementation not yet started. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | None. |

| Title of study: | Emerging Voices for Global Health 2014 |
|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | The symposium was approved for the National Department of Health The symposium had the following objectives: • Share cutting-edge research, addressing the development of people-centred health systems (including both conceptual work and the findings of primary and secondary research); • Identify and discuss approaches to research, strengthening the rigour of this research; • Build the capacities of researchers, policy-makers, practitioners, activists and civil society organisations to conduct and use health systems research related to the theme; • Strengthen learning communities and knowledge-translation platforms working to support people-centred health systems across disciplines, sectors and countries and, particularly, bridging practitioner, activist and researcher communities. |
| Have the studies been used as intended? | This grant was provide to support the Third Global Symposium on Health Systems Research, which was held in Cape Town 30 September – 3 October, with associated satellite sessions held on 29-30 September and the Emerging Voices programme. The study was implemented in accordance with the approved proposal. |
| To what did the study contribute? | The theme of the symposium was the science and practice of people-centred health systems, chosen to enable participants to address current and critical concerns of relevance across countries in all parts of the world. Over 1800 researchers, policy-makers, funders, implementers and other stakeholders, from all regions and all socio-economic levels, worked together on the challenge of how to make health systems more responsive to the needs of individuals, families and communities. The Symposium represents the first international event held in Africa specifically focussed on health systems research (HSR). Plenary and concurrent sessions presented new research, innovative research methods, experience of capacity development in this field, and experience of bringing |

| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | researchers and policy makers together to learn from each other. Posters were also presented, and a marketplace allowed organisations to share experience and information in other formats. Social media and other multi-media interactions were also used to enrich aspects of the Symposium and encourage active and lively debate before, during and after the Symposium. Post-Symposium webinars will also support continued debate on the themes and issues raised amongst the global HSR community. The Emerging Voices programme specifically recognises the importance of actively engaging young researchers from the Global South to raise their voice in scientific debates. The Emerging Voices initiative began in 2009, originally as an initiative from the Institute of Tropical Medicine (ITM) Antwerp, Belgium. In 2014, however, it was a joint venture involving the School of Public Health of the University of Western Cape, South Africa; the University of Cape Town, South Africa; Peking University Health Science Centre, China and the Institute of Public Health, Bengaluru (India). The Emerging Voices training uses a blended learning approach, a combination of distance learning and intensive face-to-face coaching, leading to participation with oral presentation in a scientific conference, communication on social media, induction into a community of scholarship and practice and publication in a scientific journal. None. |
|--|--|
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| Title of study: | Final Evaluation of the Study Fund | | | | |
|--|--|--|--|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | In accordance with the Specific Agreement the Steering Committee can order an evaluation of the Study and Consultancy fund to determine the impact of the funding. The Steering Committee agreed to conduct an evaluation of the Fund in order to: To assess the implementation of Fund activities with respect to the Specific Agreement and formulate recommendation to improve it for further studies. To assess the impact of completed studies. | | | | |
| | Provide recommendations to the IDC, DGD and BTC regarding a possible extension of the Fund to 2017. | | | | |
| Have the studies been used as intended? | The final outcome of the selection process is still to be approved by the Director-General. The contract with the successful service provider is still to be signed once approval from the DG is received. | | | | |
| To what did the study contribute? | Not yet determined. Implementation not yet started. | | | | |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | The tender process was the major delay in initiating the implementation of the evaluation. This was due to the fact that the first round of tenders was not successful. The second round was delayed due to unavailability of key stakeholders to meet for the evaluation session. The second round was only concluded in November 2014. | | | | |

| Title of study: | Final Audit for the Study Fund | | | |
|--|--|--|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | In accordance with the Specific Agreement the Steering Committee can order an audit of the Study and Consultancy fund to determine the financial compliance of the Fund. The Steering Committee agreed to conduct an audit of the Fund in order to: | | | |
| | Analyse thoroughly the compliance of the tenders awarding process with the applicable law on public tenders, in this case the South African regulations, and with the execution modalities foreseen in the specific agreement, in this case the BTC's internal rules for comanaged funds; Examine the procedure manual developed by the project (including its check-list and templates) to facilitate the tender awarding process, check its compliance with the rules applicable and give suggestion for improvements if necessary. | | | |
| Have the studies been used as intended? | A report was produced indicating the points of attention and recommendations for improvement of the internal manual and templates. | | | |
| To what did the study contribute? | In depth analysis of the fund's procedures and points of improvement to implement the proposals in a more efficient way. | | | |

Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study?

Major delays in reporting and finalising the audit report and produce the final invoice for payment.

| Title of study: | Study Tour to different countries The study was approved for the Chief Directorate Health and Social Development within the National Treasury. The study was organised with the objective to build capacity and conduct knowledge exchange activities for the Chief Directorate Health and Social Development, in their preparation for and implementation of the National Health Insurance Scheme. | | | | |
|--|--|--|--|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | | | | | |
| Have the studies been used as intended? | The study is currently being implemented. It has been reported that so far a substantial number of significant research projects were undertaken with leading global organisations and experts with a number of significant products, including several articles for publication. Useful collaborative links and good working relationships have been built with a range of leading international partners based on practical work on joint projects and meetings. | | | | |
| To what did the study contribute? | The visits and learning from other institutions and partner resulted in documented funding trends in each country, amongst others looking at levels of health funding in public and private sectors and in total, in absolute terms and as a proportion of GDP, along with fiscal indicators including country GDP, revenue and expenditure to GDP ratios, health as a share of the total budget. For each country possibilities for forward growth were modelled. Two papers were drafted for publication from the Thai work (in addition to background papers). The first is a collaborative opinion piece with around six leading Thai co-authors from different institutions and our own Department of Health. This deals with lessons from the Thai UC system for the SA NHI. The second is a longer review of the lessons from the Thai health system for SA. This has been drafted but is being tightened up for publication. There has been a lot of interest in this work and a detailed presentation (attached as an annexure) has been made to several audiences including the World Health Organisation (Geneva) and the Global Fund. | | | | |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | None. | | | | |

| Title of study: | E-Health Concept Note for the Gauteng Province | | | | | |
|--|--|--|--|--|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | This proposal was approved for the Gauteng Department of Health. The main objective is to analyse and assess current data management processes (collection, transmission, processing, analysis, display, quality checking of data, sharing and exchange and feedback) in order to plan and implement appropriate interventions to improve the system. Produce a concept note based on the assessment results to serve as a starting point in implementing the e-health in Gauteng Province in accordance with the e-health Strategy. | | | | | |
| Have the studies been used as intended? | This study has not yet been initiated. | | | | | |
| To what did the study contribute? | Not yet established. | | | | | |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | The tender procedure hasn't been initiated despite the approval of the study being received in July 2014. The senior management seems to have been replaced and no further engagements could be established with the Province in this regard. A meeting with the Director-General of the National Department of Health was held at the end of October to discuss potential bottlenecks and a way forward. Consequent to the meeting no further reaction was received form the province with regard to this proposal. The province will be provided with a deadline in indicating whether or not this study is still of interest to be implemented by the Province. There is a possibility that funds will be cancelled and redirected to other studies. | | | | | |

| Title of study: | Development of a Medical Device Assessment and Audit Tool for the Gauteng Health Department | | | | |
|--|--|--|--|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | This proposal was approved for the Gauteng Department of Health. The overall objective of this project is to evaluate the Gauteng Health Department's existing medical device audit and procurement processes for appropriate and effective medical devices aimed at achieving positive health outcomes. | | | | |
| Have the studies been used as intended? | This study has not yet been initiated. | | | | |
| To what did the study contribute? | Not yet established. | | | | |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | The tender procedure hasn't been initiated despite the approval of the study being received in July 2014. The senior management seems to have been replaced and no further engagements could be established with the Province in this regard. A meeting with the Director-General of the National Department of Health was held at the end of October to discuss potential bottlenecks and a way forward. Consequent to the meeting no further reaction was received form the province with regard to this proposal. The province will be provided with a deadline in indicating whether or not this study is still of interest to be implemented by the Province. There is a possibility that funds will be cancelled and redirected to other studies. | | | | |

| Title of study: | Public Financial Management Workshops and Seminars | | | | | |
|--|---|--|--|--|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | This study was approved for the Accountant-General Office within the National Treasury. The main objective is to facilitate the enhancement of financial management skills for finance staff in the Provincial Departments and to support the implementation of the capacity development learning solutions developed by National Treasury in order to improve financial management in the Gauteng province. | | | | | |
| Have the studies been used as intended? | The study was approved in November 2014 and therefore the implementation is pending to successfully finalise the tender procedure. | | | | | |
| To what did the study contribute? | Not yet determined. | | | | | |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | None. | | | | | |

| Title of study: | Tracer Study of BTC funded SA candidates in Maritime Courses | | | | | |
|--|--|--|--|--|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | | | | | | |
| Have the studies been used as intended? | The study was approved in November 2014 and therefore the implementation is pending to successfully finalise the tender procedure. | | | | | |
| To what did the study contribute? | Not yet determined. | | | | | |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use | None. | | | | | |

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| of the study? | |
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| Title of study: | E-Health Concept Note for the Northern Cape Province |
|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | This proposal was approved for the Northern Cape Department of Health. Same as the Gauteng proposal, the main objective is to analyse and assess current data management processes (collection, transmission, processing, analysis, display, quality checking of data, sharing and exchange and feedback) in order to plan and implement appropriate interventions to improve the system. Produce a concept note based on the assessment results to serve as a starting point in implementing the e-health in Northern Cape Province in accordance with the e-health Strategy. The proposal was approved for an additional province, despite the indication on Gauteng proposal that this can be replicable in other provinces, based on the following reasons: The Northern Cape is very rural with very little urbanisation. They also have scares human and facility resources. Distances between the different tiers of hospital services are vast, so in terms of their e-health strategy they will be looking more at solutions that facilitate information and communication sharing in that environment. They also would rely on more of the lower level health worker than Gauteng due to the poor human resource situation and rely more on community based facilities than Gauteng. They have one "centre of excellence" or given their limited resources they will have to rely on a single provincial hospital for all major referrals. They share this profile with the North West, Mpumalanga and Limpopo (all have one or two centers for referral). In contrast Gauteng and Western Cape have a different profile. Facilities are much closer together in Gauteng and Western Cape and they are much better equipped and staffed. They have a different challenge of information management and disbursement. These provinces are significantly urban and have significant hospital based services and therefore will require different solutions to the more rural based ones. |
| Have the studies been used as intended? | The two studies will produce both rural and urban settings and offer the opportunity to present and share findings with their other provincial counterparts as well as at the technical committee of the National Health Council to stimulate replicability. This study has not yet been initiated. |
| To what did the study contribute? | Not yet established. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | The tender procedure hasn't been initiated despite the approval of the study being received in July 2014. The senior management seems to have been replaced and no further engagements could be established with the Province in this regard. A meeting with the Director-General of the National Department of Health was held at the end of October to discuss potential bottlenecks and a way forward. Consequent to the meeting no further reaction was received form the province with regard to this proposal. The province will be provided with a deadline in indicating whether or not this study is still of interest to be implemented by the Province. There is a possibility that funds will be cancelled and redirected to other studies. |

| Title of study: | Produce the audiovisual material and distribute to all departments to increase the OMF footprint within the current DPSA personnel and budget constraints | | |
|--|---|--|--|
| Describe, in a few sentences, for who the study was organised, and what it was about | The study was approved for the Department of Public Service and Administration (DPSA). The main objective is the production and distribution of a set of audio-visual materials that would elucidate the content of the Operations Management Framework (OMF) and would be a much more cost efficient way of sharing the OMF with national and provincial departments. | | |
| Have the studies been used as intended? | The study was approved in November 2014 and therefore the implementation is pending to successfully finalise the tender procedure. | | |
| To what did the study contribute? | Not yet determined. | | |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did they impact the study or the use of the study? | None. | | |

3.2 Expertise

3.2.1 Progress of expertise

| | Progress of expertise ² | Α | В | С | D | Comments (only if the value is C or D) |
|----|---|--|--|---|---|---|
| 1 | Seed Funding for the appointment of a Provincial HR Specialist at the KwaZulu Natal Provincial Treasury | | | | X | Over a year delay due to: unsuccessful first round tender process; underestimation of budget; budget review and reapproval as well as recent cancellation of second round tender. |
| 2 | Matching citizens' expectations: Applied Policy Research Project | | LONG AND | X | | The activity was three months delayed due to the bureaucratic process of approval of the deviation from the tender procedure. The contract was signed late in 2014 with implementation ready to start in January 2015. |
| 3 | Technical Expert to assist with the Establishment of a Technical Policy Unit, DOH EC Province | | | X | | Delays were experienced with regard to the initiation as well as the finalisation of the tender process. |
| 4 | Evaluate the Routine Health Information System (RHIS) in the North West Province | | | x | | Delays were experienced with regard to the contractual procedures, requiring the contract to be resigned. |
| 5 | Develop SOPs for Local Government in key internal control cycles | | х | | | |
| 6 | Emerging Voices for Global Health 2014 | х | | | | |
| 7 | Final Evaluation of the Study Fund | ALLEANING AND THE WAY OF THE PROPERTY OF THE P | | X | | The tender was advertised in August 2014. The first round was not successful. The second round has not yet been finalised. Awarding of the tender is expected in the first quarter of 2015 and the work should start soon thereafter. |
| 8 | Final Audit for the Study Fund | | Х | | | |
| 9 | Study Tour to different countries | | х | | | |
| 10 | E-Health Concept Note for the Gauteng Province | ************************************** | | | X | This study was severely delayed due to non-response form the beneficiary department. It is understood that after elections the senior management was changed and therefore no further follow up was made from their side. |
| 11 | Development of a Medical Device Assessment and Audit Tool for the Gauteng Health Department | | | | X | This study was severely delayed due to non-response form the beneficiary department. It is understood that after elections the senior management was changed and therefore no further follow up was made from their side. |
| 12 | Public Financial Management Workshops and Seminars | | х | | | |
| 13 | Tracer Study of BTC funded SA candidates in Maritime Courses | | х | | | |
| 14 | E-Health Concept Note for the Northern Cape Province | | | | х | This study was severely delayed due to non-response form the beneficiary department. It is understood that after elections the senior management was changed and therefore no further follow up was made from their side. |
| 15 | Produce the audiovisual material and distribute to all departments to increase the OMF footprint within the current DPSA personnel and budget constraints | THE PLANT AND | × | | | |

3.2.2 Analysis of expertise

A: B C D Expertise completed in year N

Expertise ongoing
Expertise in preparatory phase: preparation going as planned (writing ToR, procurement procedure, etc.)
Expertise planned but delayed

| Title of expertise – name of expert: | Provincial Human Resource Specialist – Not yet appointed |
|---|---|
| Describe, in a few sentences, what the expertise is/was about | The Provincial Treasury would require the appointment of a HR Specialist to support them with recommendation that will enable the Treasury to budget better for HR line item. |
| | The expertise aims at conducting a review of the remuneration of public service officials and to determine if it is in line with the productivity expectations and performance targets. The expert will also be required to produce advice regarding the alignment of the departmental personnel structures with core mandates. |
| To what extent is the expertise delivering results? | Not yet appointed. |
| To what has the expertise contributed? | To be determined once the implementation is ongoing. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | Delays in finalising the tender procedures as explained in section 3.1.2 |

| Title of expertise – name of expert: | Applied Policy Research – Western Cape University |
|---|--|
| Describe, in a few sentences, what the expertise is/was about | The purpose of the expertise is to conduct an applied policy research on behalf of the Department of Cooperative Governance and Traditional Affairs (CoGTA) with a special focus on "Matching Citizens' expectations of service delivery with local government capacity to deliver". |
| To what extent is the expertise delivering results? | The contract was signed in December 2014 and the actual implementation is envisaged to start in the first quarter of 2015. |
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None. |

| Title of expertise – name of expert: | Appointment of a Technical Expert to assist with the establishment of a technical unit – Impela Alliances cc |
|---|---|
| Describe, in a few sentences, what the expertise is/was about | The expertise required is research related. The successful service provider will be appointed to conduct an assessment of current skills and recommend a mix of skills required for the establishment of such a Unit. |
| To what extent is the expertise delivering results? | The contract is due to be signed in the first quarter of 2015. |
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

| Title of expertise – name of expert: | Evaluate the Routine Health Information System (RHIS) in the North West Province –North West University |
|---|--|
| Describe, in a few sentences, what the expertise is/was about | The scope of the work is to conduct a DHIS assessment to provide better understanding of the existing capacity and to integrate data collection, processing, reporting, and use of information |

| | management at all levels of public health systems to improve patient outcomes. The focus will be on quality, affordability, accessibility and sustainability of processes and systems. |
|---|--|
| | The assessment will be conducted in two districts: Dr. Kenneth Kaunda District and the Bojanala Platinum District in the North West. |
| To what extent is the expertise delivering results? | The contract has been recently signed and meetings and field visits are expected to be initiated in the first guarter of 2015. |
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

| Title of expertise – name of expert: | The development of standard operating procedures for the implementation of the MFMA in municipalities - Mubesko Africa CC |
|---|---|
| Describe, in a few sentences, what the expertise is/was about | The purpose of the assignment is to develop the SOPs for the local government context to support Budget and Treasury Office (BTO) staff and managers to have a thorough understanding of basic controls that are required to be in place within key internal control cycles. This will assist in ensuring that there is a basis for BTO staff to fulfil their roles and ensure efficient, transparent financial management is in place for service delivery and accountability in the management of public funds. |
| To what extent is the expertise delivering results? | The signature of the contract is still pending at National Treasury. It is expected that the contract will be signed in the first quarter of 2015. |
| To what has the expertise contributed? | To be determined once the implementation is ongoing. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

| Title of expertise – name of expert: | Global Symposium on Health Systems Research and the Emerging Voices programme – Health Systems Global |
|---|---|
| Describe, in a few sentences, what the expertise is/was about | This was a grant agreement to partially support the logistical arrangements for the international speakers and the emerging voices programme. |
| To what extent is the expertise delivering results? | This support was extremely successful and was commended by the Director-General of the National Department of Health at the meeting in October 2014. |
| | As this grant includes two main components, namely support for the symposium (managed by Health Systems Global – South Africa / HSG-SA) and the Emerging Voices (EV) programme (managed by the University of the Western Cape - UWC), an agreement was concluded between HSG-SA and UWC. HSG-SA is managing the overall project, including preparing and submitting narrative and financial reports, with UWC providing inputs on the EV component of the project. |
| To what has the expertise contributed? | The funds were used to support the participation of the plenary speakers to the symposium. A total of 27 delegates from low-or middle-income countries and/or full-time students, as well as 10 plenary speakers, were fully or partially funded to participate in the symposium. A total of R1,254,193 has been expended on the Emerging Voices (EV) programme. This includes flights, accommodation, ground transportation and registration and membership fees for some of the Emerging Voices; and catering, printing, venue and equipment, co-ordination and administrative personnel and other costs related to the EV programme. The fund was used to support expenses in relation to the marketplace stalls as well as for social and other multi-media activities as approved. |

| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |
|---|------|
|---|------|

| Title of expertise – name of expert: | Evaluation of the Study and Consultancy Fund – Julia Du Pisani |
|---|---|
| Describe, in a few sentences, what the expertise is/was about | In accordance with the Specific Agreement the Steering Committee can order an evaluation of the Study and Consultancy fund to determine the impact of the funding. The Steering Committee agreed to conduct an evaluation of the Fund in order to: • To assess the implementation of Fund activities with respect to the Specific Agreement and formulate recommendation to improve it for further studies. • To assess the impact of completed studies. • Provide recommendations to the IDC, DGD and BTC regarding a possible extension of the Fund to 2017. |
| To what extent is the expertise delivering results? | Not yet determined. The evaluation has not yet started as it is pending finalisation of the tender process. |
| To what has the expertise contributed? | To be determined once the implementation is ongoing. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None. |

| Title of expertise – name of expert: | Audit services: Belgian-South African Study and Consultancy Fund – Moore Stephens |
|---|---|
| Describe, in a few sentences, what the expertise is/was about | The expertise required was to conduct a financial and system audit for the programme and provide recommendation for improvement consequent to review of the procedure manual and project templates. |
| To what extent is the expertise delivering results? | A first draft report was produced by the auditors. However the submission of the reports is not in line with the agreed timeline. |
| To what has the expertise contributed? | Suggestions and recommendations to improve the programme efficiencies. Final report is still expected in the first quarter of 2015. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None. |

| Title of expertise – name of expert: | Study Tour to different countries – None |
|---|--|
| Describe, in a few sentences, what the expertise is/was about | This was a grant to the National Treasury – Chief Directorate for Health and Social Development in support to budgeting for NHI. |
| To what extent is the expertise delivering results? | Refer to the progress reported in section 3.1.2 |
| To what has the expertise contributed? | Refer to the progress reported in section 3.1.2 |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How | None |

| To what extent is the expertise delivering results? | The tender process is currently being initiated by the beneficiary institution. |
|---|---|
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

| Title of expertise – name of expert: | E-Health Concept Note for the Northern Cape Province – Not yet appointed |
|---|--|
| Describe, in a few sentences, what the expertise is/was about | The TOR are still to be finalised – the main objective of the study is reported in section 3.1.2 above |
| To what extent is the expertise delivering results? | The tender process hasn't yet been initiated by the Provincial Department. |
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

| Title of expertise – name of expert: | Produce the audiovisual material and distribute to all departments to increase the OMF footprint within the current DPSA personnel and budget constraints – Not yet appointed |
|---|---|
| Describe, in a few sentences, what the expertise is/was about | The TOR are still to be finalised – the main objective of the study is reported in section 3.1.2 above |
| To what extent is the expertise delivering results? | The tender process is currently being initiated by the beneficiary institution. |
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

3.3 Budget execution

The Programme has made tremendous progress with regard to approval of new studies. During 2014 a total of 14 new proposals in different sectors have been approved, for a total of \leqslant 1,270,071, and some have already started implementation attaining expenditure. The study reached a total of \leqslant 1,937,301 of budget spent and committed through approved studies, which represents 93% of the total budget.

As some of the approved studies have already started implementation a total of €

| did these impact the expertise and | |
|------------------------------------|--|
| did those impact the expertise and | |
| the result of this expertise | |
| the regalit of this expertise | |

| Title of expertise – name of expert: | E-Health Concept Note for the Gauteng Province – Not yet appointed |
|---|--|
| Describe, in a few sentences, what the expertise is/was about | The TOR are still to be finalised – the main objective of the study is reported in section 3.1.2 above |
| To what extent is the expertise delivering results? | The tender process hasn't yet been initiated by the Provincial Department. |
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

| Title of expertise – name of expert: | Development of a Medical Device Assessment and Audit Tool for the Gauteng Health Department – Not yet appointed |
|---|---|
| Describe, in a few sentences, what the expertise is/was about | The TOR are still to be finalised – the main objective of the study is reported in section 3.1.2 above |
| To what extent is the expertise delivering results? | The tender process hasn't yet been initiated by the Provincial Department. |
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

| Title of expertise – name of expert: | Public Financial Management Workshops and Seminars – Not yet appointed |
|---|--|
| Describe, in a few sentences, what the expertise is/was about | The TOR are still to be finalised – the main objective of the study is reported in section 3.1.2 above |
| To what extent is the expertise delivering results? | The tender process is currently being initiated by the beneficiary institution. |
| To what has the expertise contributed? | Not yet determined. |
| Issues that arose, influencing factors (positive or negative)? Unexpected results (positive or negative)? How did these impact the expertise and the result of this expertise | None |

| Title of expertise – name of expert: | Tracer Study of BTC funded SA candidates in Maritime Courses – Not yet appointed |
|---|--|
| Describe, in a few sentences, what the expertise is/was about | The TOR are still to be finalised – the main objective of the study is reported in section 3.1.2 above |

206,195 has been spent in 2014 hereby reaching 41% disbursement rate at the end of 2014.

3.4 Quality criteria

On the basis of the elements above, attribute a simple A, B, C or D score³ to the following criteria

Relevance: The degree to which studies and expertise are in line with local and national priorities

<u>Efficiency</u>: Degree to which studies and expertise have been executed on time and on budget.

<u>Effectiveness</u>: Degree to which studies and expertise actually contribute to their intended objectives

| Criteria | Score |
|---------------|-------|
| Relevance | . A |
| Efficiency | С |
| Effectiveness | А |

A: Very good performance

B: Good performance

Performing with problems, measures should be taken

D: Not performing/ having major difficulties: measures are necessary

If a criterion cannot be assessed (e.g. because the intervention has only just started), attribute the criteria with an 'X' score.

Explain why the criterion has not been assessed.

s.s. Risk management

| Nsk dentifection | | | Risk anelysis | a. A. | | THE STATES | | | Follow-up of risks | |
|---|--------------------------|------------------|---------------|---------------------|--------|--|------------------|----------|---|----------------|
| Description of Risk | Period of identification | Risk category | Probability | Potential Impact | Total | Action(s) | Resp. | Deadline | Progress | Status |
| Limited time frame for implementation | Q1 2014 | Z L | Medium | High | · O | Commit the remaining funds and request for additional budget. With additional budget request, a time line extension needs to be proposed | BTC and NT | Apr-15 | The meetings for different projects were used as platforms to increase awareness of the existence of the fund. This resulted in a high inflow of proposals and 100% commitment of the funds. The 5th Steering Committee took place on 29 July, where the project evaluation was approved to be conducted before the end of September 2014. The report will inform the decision of requesting for replenishment of the fund. | In progress |
| Commitment of the Beneficiary institution in delivering the approved studies - Could result in cancelations of approved studies | Q3 2014 | SHO | Medium | Medium | Ω | it was observed that some of the beneficiary departments have not responded at all to the approval notice and have taken no initiative to start up the implementation. This posesed a very big risk in delivering the financial planning for this year | BTC and NT | Nov-14 | A meeting with the Director-General of DOH was held on 28 Oct 2014 to discuss the interventions and the possible actions to ensure start-up of the implementation. No actions were taken from NDOH consequent to the meeting. Further engagement will be undertaken in 2015. | In progress |

| ۵ | U | 8 | High | |
|------|--------|------|--------|-------------|
| Ü | 8 | Y | Medium | Probability |
| 8 | Y | ٧ | Low | Proba |
| High | Medium | Low | | |
| toa | dw | leid | นอา | од |

BTC, Belgian development agency 10/03/2015

| अही व्यवस्था है। | | | Riskanalysis | | | | | | SALEMENT OF SERVICE | |
|--|----------------------------|------------------|--------------|---------------------|--------------------|---|-------|----------|---|----------------|
| Description of Risk Ir | Period of dentification | Risk category | Probability | Potential Impact | Total ⁵ | Action(s) | Resp. | Deadline | Progress | Status |
| Delays in implementation due to Beneficiary Institution Tender processes | Q3 2014 | Z L | High | Medium | U | The tender processes at Beneficiary Institutional level are very slow - sometimes due to lack of understanding of the necessary steps. This is the highest risk of not attaining the financial planning for the year. | втс | Jul-14 | BTC has developed a tender check list to inform those responsible of the necessary processes to undertake the tender. The check list was shared with all responsible however no visible progress has been made. | In progress |

| (A) | ပ | 8 | High | |
|------------|--------|--------|--------|-------------|
| ن | - 8 | Α | Medium | Probability |
| В | Α | ٧ | MoT | Probe |
| High | Medium | Low | | |
| зоt | dw | i leit | ren. | ОЧ |
| | | | | |

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4 Steering and Learning

4.1 Recommendations

| Recommendations | Source | Actor | Deadline |
|--|---|---|----------|
| Description of the recommendation | The sub-chapter to which the recommendation refers (e.g. 3.2.3) | The person responsible for recommendation | |
| Procurement processes are very lengthy and put a strain on the disbursement rate. This needs to be carefully planned and continuously followed up on to ensure as little deviation from initial planning as possible. | 3.1.1 Progress of | Project Team | Q2 2015 |
| A better programme marketing of the fund and its rules needs to be established once the extension is approved. This will ensure a better coverage of potential interested partners that could make use of the fund as well as a better competition with regard to interesting study topics. | N/A | Project Team | Q2 2015 |
| Monitoring and Evaluation needs to be strengthened to ensure a more feasible and result orientated outcome of studies. Indicators and concrete achievement targets need to be in place for each study approved. The TOR template needs to be reviewed to ensure inclusion of this requirement. | N/A | Project Team | Q2 2015 |

4.2 Lessons Learned

Capture important Lessons Learned from the intervention's experience. Lessons Learned are new insights that must remain in the institutional memory of BTC and partners.

| Lessons learned | Target audience |
|--|-----------------------------|
| It is noted that most of the reports produced by different partners and different programmes are not widely shared for the benefit of othe Institutions. A platform of sharing such reports is advisable to be used especially for the Study Fund since the learning from these interventions could be very beneficial to other departments in other sectors. This will contribute to decrease the potential of duplicating interventions and inform on specific strategies. | Beneficiary Institutions |

5.1 "Budget versus current (y - m)" Report

| Project Tible Constition of a Biolog South African Fund for Transfer of Know-How, Studies and Consultancies | | | | | | | | | | |
|--|---|---------------------------|-------------------|-------------|-------------|-------------------|------------|------------|---|----------|
| ELNA Report includes all valid transactions, registered up to today Enth Report includes all valid transactions, registered up to today Expenses Start to | | uth African Fund for Tra | nsfer of Know | How, Studie | s and Consu | Itancies | | | *************************************** | |
| State to | s Version : | iid transactions, registe | red up to toda | æ | | | | | | |
| 13 13 13 13 13 13 13 13 | on agents. | | 21 FE | 2042 | 2000 | | Experience | 7 | ; ; | ä |
| sight 149 60 300 -345 57 -770 45 -72 64 45 -241 63 688 -159 50 30 SSE 50 30 sight 100 30 30 -345 77 -770 45 -72 64 45 -241 63 9.88 -159 50 30 SSE 50 30 clusted 100 30 30 30 30 30 30 30 30 30 30 30 30 3 | | | 365 | 210.45 | \$19877 | 24163 | 863 | 130627 | 32,662.00 | ş |
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| COGEST | 01 Workshop on Future Davelopment | | | | 22(5,42 | | 85 | 2,918,42 | -516,42 | 影響 |
| COGEST 35 000 00 1414707 8.00 1414707 2.500000 COGEST 3714300 1414707 8.00 1414707 8.00 1414707 2.200550 SS 21450 | 02 KwaZulu Natal Provincial Treasury | 38,020,00 | | | | | 300 | 86 | 35,000,00 | %2) |
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| 18214.03 | 01 Marching officens' expectations: Applied | | | | | 14,147,07 | 9,00 | 14.147.07 | 22,895,53 | |
| COGEST 3821430 COGEST 05.71430 COGEST 05.7 | 04 Establishment of a Technical Unit that | 58.214,00 | | | | | 8 | 0.00 | 38.214.00 | % |
| 100 | Of Technical Expert to essist with the | | | | | | 8,88 | 300 | 35.214.00 | É |
| COGEST 56374.03 64 | 05 Assess data quality and performance of | 68,714,00 | | | | | 4,00 | 0.00 | 68,714,00 | 368 |
| COGEST 200.000.00 179.340.32 9.66 9.00 200.003.03 | 01 Evaluate the Routine Health Information | | - | | | | 9,00 | 900 | 65,714,00 | 8 |
| COGEST 1000000 17934032 8.66 9.00 20000000 17934032 8.66 9.00 20000000 17934032 8.66 9.00 20000000 17934032 8.66 9.00 20000000 17934032 8.66 9.00 20000000 17934032 8.66 9.00 17934032 20684868 9.00 9 | 08 Development of Standing Operating | 200,000,002 | | | | | 80.9 | 800 | 202 000 00 | Ž. |
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| 179 340,52 0.00 CGEST 703.00 CO CGEST 703.00 CO CGEST 120.00 CGE | 07 The third global symposium on health | 100,000,000 | | | | 179.340,32 | 8 | 178 340.32 | 20.659,63 | 34.06 |
| 20 000 00 The Study COGEST 15 000 00 The Study COGEST 2022 00 THE Study COGEST 2022 00 THE STUDY STREET STATES | 01 Errerging Voices for Global Health 2014 | | | | | 179 340,32 | 868 | 179.340,32 | 20,658,63 | 20% |
| COGEST 15.000.00 REGIE REGIE COGEST 2.002.00 228.188.24 232.188.54 3322.18.56 57.002.25 305.185.77 6.06 550.57.31 1.231.595.58 | 08 Evaluation of the Study Fund | 30.000,00 | | | | | 8,8 | 800 | 30.030.00 | 366 |
| ### CONSEST 15,000 00 15,000 1 | 01 Technical Evaluation of the Study Fund | | | | | | 8 | 88 | 15,000,00 | *60 |
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| 046479,99 054657,07 1.201599,09 054657,07 1.201599,09 | | 3ru : | 239.189,34 | 328.218.96 | 67,003.25 | 235.195,77 | 8 | 881677,31 | 1,231,599,59 | * |
| | | | Andrew Political | | CT New LED | 7 / CRO 1 CRO / / | 200 | 0.740.000 | EG*880*10*** | 8 × |

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| ► Budget Execution last 4 Years | | | | | | | | | | |
|--|--------------|--------------|--|--|-------------|--|----------|------------|--------------|--|
| Budge | vs Acfu | als (Ye | ar to Dat | Budget vs Actuals (Year to Date, Last 5 years) of SAF0901711 | (ears) of | SAF0901 | Ę | | | |
| Project Title: Creation of a Belgo South African Fund for Transfer of Know-How, Studies and Consultancies | h African Fu | nd for Trai | 1sfer of Kno | w-How, Studi | es and Cons | ıftancies | | | | and depth in the last |
| Rudget Version: D1 Cumancy: EUR YID: Report includes all valid transactions, registered up to today | ftransaction | is, registe | ned up to tod | , sy | | | | | | |
| | | | og mage | | | The second secon | | | | |
| KANA KANA | Fr Mode | Amount | N. N. | C C | 22 | *20 | 200 | Total | | 74 |
| 02 Final Technical evaluation of the Study | COGEST | 15,000,00 | | | | | 90% | 800 | 15,000,00 | 85 |
| 09 Financial Evaluation of the Study Fund | | 10.000,00 | | | | | 900 | 90/0 | 10,000,00 | 34.0 |
| 01 Financial Audits | COGEST | 10,000,00 | | | | | 999 | 600 | 10,000,00 | S. |
| 19 Capacity building and knowledge | | 22,929,00 | | | | 12.250.01 | 8 | 12,850,01 | 9.978,99 | ** |
| 81 Study Tour to different countries | 55000 | 22929 | | | | 12.950,01 | 00° | 12,850,01 | 897839 | 8 |
| 11 Analyse and assess current data | | 69.071.00 | | | | | 95.4 | 808 | 00,170.68 | W.13 |
| 21 E-Health Concept Note for the Gauters | COGEST | 88 57 S | | | | | | 200 | 827728 | 6 |
| 12 Evaluate the Gauteng Health | | 67.887.00 | | | | | 86 | 8 | 67 587 69 | 560 |
| 01 Development of a Medical Device | COGEST | 67.887.00 | | | | | 900 | 88 | 67,867,00 | Š |
| 13 Capacity devalopment learning solutions | | 202 000,00 | | | | | 8,80 | 8 | 200,000,000 | * |
| Of Public Financial Management Workshops | COGEST | 200,000,000 | | | | | 900 | හිත | 200,000,000 | #10 0 |
| 44 Analysis of existing delivery model, | | 00,387,00 | | | | | | 800 | 100 JAT 001 | % |
| St Tracer Study of BTC funded SA | COGEST | 100.057,00 | | | | | | 88 | 101337.00 | 杏 |
| Z ALLOCATED FINOS | | 654219.00 | ZD \$25.603 | 115153 | E8118 | | 9979 | 62(3)(63 | 59 Ze- | 100% |
| 01 Department of Higher Education & | | 22,750,00 | 32,749,65 | | | | 600 | 報事には | 0.34 | 100% |
| 21 FET College Lecturer Development | COREST | 32,750,08 | 32749,66 | | | | 900 | 22,749,65 | ä | 100% |
| 02 National Department of Health | | 7,355,90 | 1,335,00 | | | | 970 | 7,350,08 | 87 | 200 |
| Of Servinas-Lean Methodology, to Public | COREST | 1,500,00 | 7,553,00 | | | | 977 | 7,353,03 | 89 | 108% |
| 03 National Treasury - SCOA | | 20,227,27 | 73.721,72 | | | | <i>W</i> | 27,227,22 | 0.23 | *81 |
| 01 Development of Standard chart of | COGEST | 73,722,00 | 73.721,72 | | | | 6.00 | 2,122 | 0.25 | 100% |
| M. Mational Treasury - GRAP | | 53,510,00 | 63,610,33 | | | | | E161138 | N.S. | 75,001 |
| | | 2.092.227,06 | 239.129.34 | 328.215,95 | 87,005,25 | 275.195,77 | 55 | 80,607.34 | 1.231.589,69 | ** |
| | TOTAL 2 | 2.050,200,00 | 233,139,34 | 328 212,96 | 27.00.75 | XX6.195.77 | 8 | 350,607,31 | 1 221 599,69 | 뫲 |
| Forgon as Amenda (Vanor to Coste, Casa) & Yeards) of 1 April 174 (pro- | 1.1.1.100 | 10 6 3 8 C | The second secon | NA. | | | | | ř. | 25 S S S S S S S S S S S S S S S S S S S |
| IMILAC Browse | | | | | | | | | | |

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| Budget Execution last |

Budget vs Actuals (Year to Date, Last 5 years) of SAF0901711

Creation of a Belgo South African Fund for Transfer of Know-How, Studies and Consultancies Project Title:

Budget Version: DA Currency:

| 12.950.01 12.950 | THE CONTRACT OF THE CONTRACT O | THE PERSON OF THE PROPERTY OF | | Start 10 | | | | Expenses | | 0000 V (A 444 444 444 A | *************************************** |
|--|--|---|-------------|------------|------------|-----------|------------|----------|------------|---|---|
| Study Fund | Status | | | 2014 | 2812 | 22.22 | 2014 | 2005 | Total | Calance | 34 |
| 1000000 10000000 1000000 1000000 1000000 1000000 1000000 1000000 1000000 10000000 10000000 10000000 10000000 100000000 | 02 Final Technical evaluation of the Study | COGEST | 15,000,00 | | | | | 200 | 000 | 15,000,00 | ğ |
| COGEST 10000000 100000000 | 09 Financial Evaluation of the Study Fund | | 10,000,01 | | | | | 200 | 88 | 10,000,00 | %.0 |
| ountries COGEST 229203 | 01 Financial Audits | COGEST | 10.000,00 | | | | | 92'6 | 600 | 10,000,00 | ğ |
| outsides COGEST 222220 9 27000 12550.01 9.2550.01 9.27320 12550.01 9.27320 12550.01 9.2750.01 9.27320 12550.01 9.2750.01 9.27520 9.971.00 9 | 10 Capacity building and knowledge | | 22 929 00 | | | | 12.950.01 | 80.0 | 12.950.01 | 9.978.99 | %35 |
| Inth Cartering COGEST 6907100 Hth Cautering COGEST 755700 Hth Cautering Solutions COGEST 755700 Hth Cautering Solutions COGEST 755700 Htm Salabation & 200 00000 Htm Salabation & 200 0 | 01 Study Your to different countries | COGEST | 22,929,00 | | | | 12.950,01 | 88 | 12.980,01 | 9,978,99 | 88 |
| Hith Hith Geutleng COGEST 62071.00 Hith Hith Geutleng COGEST 67287.00 Hith Hith Geutleng COGEST 67287.00 Hith Geotherge COGEST 67287.00 Hith Geotherge COGEST 7000000 Hith Geotherge Hith | 11 Analyse and assess current data | | 68,071,00 | | | | | 8 | 88 | 69,071,00 | %.0 |
| House COGEST F1857.00 COGEST F1857.0 | 01 E-Health Concept Note for the Gauteng | COGEST | 99,170,99 | | | | | 6,53 | 6,00 | 69,071,00 | 350 |
| Parkips COGEST COGEST COGOST COGEST COGOST | 12 Evaluate the Gauteng Health | | 67.887.00 | | | | | 80 | 800 | 67.887.00 | Z. |
| rent Workshops COGEST 200 000.00 400 400 600 200 000.00 ry model, | 01 Development of a Medical Device | COGEST | 67,585,160 | | | | | 200 | 86 | 57,337,333 | 8 |
| Fry model, 103.357.00 103.00 25.00 2 | 13 Capacity development learning solutions | | 200,000,00 | | | | | 90'6 | 0.00 | 200,000,00 | \$ |
| edg SA COGEST 100.387.00 36,46.24 6,40.9 6,00.9 100.387.00 < | 01 Fubbo Financial Management Workshops | COGEST | 200,000,002 | | | | | 976 | 800 | 202,000,00 | Š |
| COGEST 103.357.03 COGEST 224.633.04 234.642.43 S6.346.24 S6.346. | 14 Analysis of existing delivery model, | | 100,387,00 | | | | | 8.0 | 800 | 50,587,500 | ** |
| Section R | 01 Tracer Study of BTC funded SA | COGESI | 100,387,00 | | | | | 800 | 000 | 100,357,00 | 25 |
| Feating Residence of COGEST 3279303 3274966 034 | Z ALLOCATED FUIDS | | 664,219,00 | 239,853,02 | 328428.41 | 86,349,28 | | 90'0 | 664,311,69 | 9975 | 1604 |
| velopment COGEST 32749,66 32749,66 434 434 velopment COGEST 7383,00 7383,09 7383,09 7383,09 7353,09 40.00 py to Public COGEST 7383,00 7372,172 7372,172 7372,172 40.00 7373,172 40.00 d chart of Chart of Total Confidence COGEST 7372,172 7372,172 7372,172 40.00 7372,172 40.00 A MEGNE | 01 Department of Higher Education & | | 32,750,00 | N 74966 | | | | 86 | 32.748.66 | 750 | 100% |
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| 13,72,00 73,72,172 13,00 73,72,172 1 | 01 Seminar-Lean Methodology to Public | COGEST | 7,353,00 | 7,355,09 | | | | | 7.85.85 | 800 | 100% |
| COGEST 73,72,00 73,72,72 COGEST 73,72,00 73,721,72 COGEST C | 03 National Treasury - SCOA | | 73,722,00 | 73,721,72 | | | | 2013 | 21.22.22 | 07.0 | 180% |
| RHEGHE | 01 Development of Standard chart of | COGEST | 73,722,00 | RITH | | | | 86 | 73,721,72 | 0.33 | 100% |
| REGENE REGINE REGENE REGINE R | '' | | 63,610,00 | 63.610.38 | | | | 88 | 63,610,38 | -0.38 | 1004% |
| | | Şiron Kata | 1052.207,00 | 7581.883 | 325.215.35 | 87.003.25 | 735.195,77 | 8 | 360,607,31 | 1231.599,59 | #1.5 1.5 |
| Control of Charles and the Control of Contro | | | 062.207,00 | 239,188,34 | 328.218,96 | 67,003,25 | 205,195,77 | 0.00 | 350,507,31 | 1231,288,59 | ** |
| | | 23 V 3 V 2 2 Control | AG MANGE | | * * | | | | | f . | 85. |
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| Project Title: Creation of a Belgo South African Fund for Transfer of Know-How, Studies and Consultancies Budget Version: D1 Currency: EUR YED: Report includes all Valid transactions, registered up to today | | | | | oruget va Actuals (1981) to pate, take of peats of partyon (1) | | | | |
|--|---------------|---|--------------------------|-------------|--|--|--|---|----------------|
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| | offons, regis | bat at the forb | à | 2000 | and the second s | and the second s | - The state of the | | |
| Status Fig. Mode | lonie Amount | e in | 6.3 809 8.4 8.4 | | 4800 | 23.50 23.50 | Total | 東は高質な | 減 |
| | 103 | A-60-27 | 27. 24.1 W. | 4 755 88 | | 50 e | 55 FSC 50 | 2,45 | 1000 |
| W. SOCIET ACTION I DOMINION OF DESIGNATION OF THE WASHINGTON OF TH | | | | 00 43E H | | | 20,000 | 3 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | 400 |
| 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | | # 8 8 | | | | 35 | . C. | 100% |
| Of Establishment of the Presidential State COGEST | | | 100 M | | | 6,50 | 46,150,85 | 2,75 | |
| 08 Free State Provincial Treasury | 61,688,00 | \$5.000 pt | 52,332,30 | | | 80.0 | 61,659,34 | 45.64 | 100% |
| 11 Technical Assistance for the Public Sector | ST STEED | S C C C C C C C C C C C C C C C C C C C | 20,300,30 | | | 900 | 51,559,34 | 70 | 100 |
| 10 Gauteng Provincial Treasury | S III S | 9.357,05 | 40 STR 30 | | | 9876 | # 20 m | 0,11 | 400 |
| 01 Technical Assistance to strengthen PFM COGEST | ST MANOR | 9.357,05 | SEC. | | | 0000 a | 30,000 | a | 100% |
| | 671.8 | | | 37,870,74 | | 92.0 | 57.872.74 | 7.843.76 | 200 |
| 01 Establishment of a Competency COGEST | ST 4574.83 | | | 37.870,74 | | 800 | 37.878.78 | 10 mm | 67.00 67.00 |
| 12 DARDLA-MPU | 66,403,00 | | 40,104,95 | 6.302.43 | | 80.0 | 46.407.37 | 9 | 1997% |
| 01 Feasibility Study for the Dev of a | ST 454000 | | 45.154.95 | 637243 | | 600 | 46.407.37 | 90 | 102% |
| 12 GRAP_Hattonal Treasury | 34,349,33 | | 54.542.55 | | | 8 | 54,242,53 | er er | ****** |
| 81 Expert in the Development of | ST State on | | 54.040.55 54.040.55 | | | 0,000 | 55 Sept. 55 | est di | 103% |
| 14 National Treasury-Health sector | 16 964 33 | | 57,285,61 | 17.425.32 | | 80'0 | 54,711,42 | 7.75.12 | 1 |
| 21 Expert in Riek Management for the South COGEST | 15T 45.94.00 | | 高層に | 17.422.22 | | 6,00 | 52711,42 | 7747.22 | 110% |
| 15 National Health Insurance Reform | 30,000,00 | | 1,180,67 | 29,007,31 | | 96.0 | 32,192,93 | E E . | 神经 |
| 01 Supporting South Africa's National Health COGEST | ST MANUAL | | 1.00 | 29,007,31 | | 6,00 | 30,190,93 | -190,98 | 10438 |
| 98 Conversion rate adjustment | 8 | | | | | 4.00 | 86 | 80 | ž |
| 99 Conversion rate adjustment | set one | | | | | 6,00 | 000 | 999 | K |
| REGRE TO COGEST | 2 092.237,00 | 花香红色 | 322.218.96 | 87,003,25 | 206.195,77 | 69 | 662.50T.31 | 1.07,8969 | K\$4 |
| TOTAL | 2 09/2 207 00 | 239.189,34 | 323 213 95 | 57,025,25 | 206.195,77 | 06/6 | 850.BUT.31 | 127 188 18 | 2017 |

5.2 Decisions taken by the JLCB and follow-up

Provide an overview of the important strategic decisions taken by the JLCB and the follow-up of those decisions since the beginning of the intervention.

| | Status | ONGOING | OPEN | CLOSED | ONGOING | CLOSED |
|------------------|--------------------------|--|--|---|--|---|
| Follow-up | Progress | NT to initiate the follow up with relevant requestors | NT to initiate the request for extension by means of exchange letters: 1. Extension of time for implementation 2. Extension of budget, requesting the transfer from the cancelled Health project | The manual was endorsed and signed together with the SA Procurement check list (endorsed by NT SCM) as well as all its proposed attachments | TOR was endorsed by the JLCB. The procurement process will follow the SA rules and regulations. The final report will be used as motivation for budget and time frame extension. | The audit will be conducted in line with the BTC framework contract and at the same time with the evaluation of the Land reform project |
| | Deadline | 30 Jul 2014 | 30 Oct 2014 | 30 Jul 2014 | 30 Jul 2014 | 30 Jul 2014 |
| | Resp. | LN | Z | NT & BTC | L L | втс |
| Aution | Action(s) | Follow up on the procurement processes to ensure prompt implementation of activities | A request for extension of 3 years would be required | The Procedure Manual was discussed during the meeting | The JLCB endorsed the TOR of the planned technical evaluation | The JLCB endorsed the TOR of the planned audit |
| | Actor | NT and BTC | NT and BTC | NT and BTC | NT and BTC | NT and BTC |
| | Source | JLCB minutes | JLCB minutes | JLCB | JLCB minutes | JLCB minutes |
| | Timing | | | | | |
| | Period of identification | Jul-14 | Jul-14 | 2014/07/29 | 2014/07/29 | |
| Decision to take | Decision to take | Approval of new proposals and budgets | Extension (budget and time frame) of the Fund | Revised Procedure Manual | Study Fund technical and financial evaluation | |

| ONGOING |
|---|
| This will be reflected into FIT |
| 30 Oct 2014 |
| F Z |
| This additional activity was approved to be included under the Financial Evaluation budget line |
| NT and BTC |
| JLCB minutes |
| |
| 2014/07/29 |
| Legal advice to assess the tender process to be included in the activity plan |