## I. Project Outline

| Country Name | The Project for Improvement of Health Supply Center (CEASS)  
(El Proyecto de Mejoramiento de la Central de Abastecimiento y Suministros de Salud) |

### Project Outline

| Project Cost | E/N Grant Limit: 761 million yen  
Contract Amount: 761 million yen |
| E/N Date | August, 2006 |
| Completion Date | March, 2008 |
| Implementing Agency | Health Supply Center (CEASS) under jurisdiction of Ministry of Health and Sports |
| Contracted Agencies | Consultant: Matsuda Consultants  
Contractor: HAZAMA Corporation  
Supplier: Ogawa Seiki Corporation |

**Related Projects (if any)**

- Technical Cooperation: Project of Strengthening Rural Networks of Maternal Health and Child with Focus on Rights, Intercultural and Gender in the Cochabamba Department (FORSA Cochabamba) (2007 - 2011); Project of Strengthening the Network of Health Rural N°4 Achacachi (Omasuyos Larecaya Andina) with Approach of Maternal and Child Health in the Department of La Paz (FORSA La Paz) (2010 - 2014); Integral health Communitarian outreach project (PSIEC); Study on Enhancement of District Health System for Beni Prefecture in the Republic of Bolivia (2001 - 2003); Project for Strengthening the Regional Health Network for the Santa Cruz Department (FORSA) (2001 - 2006).  
- Grant Aid: The Project for the Improvement of Health Facilities in Southern Beni Prefecture  
- Other donors’ assistance: UNFPA Global Program to Enhance Reproductive Health Commodity Security including technical assistance to CEASS with marketing consultants and condoms donation.

**Background**

In Bolivia, 25% of population does not have access to medical supplies (drugs) due to economic and geographical reasons. CEASS, the only non-profit (public) institution that procures and reserves all types of essential drugs that are generic and supplies them to public health institutions nationwide at lower prices than market prices, has a significant role towards equal access to medical supplies among poor population. However, drugs delivered by CEASS accounted for only 10% of supply of essential drugs designated by Universal Security for Mother and Child (SUMI) - medical insurance to provide free medical services to all under-five children, pregnant women and women during the first six months after delivery - in 2004, due to the CEASS's low capacity in preservation/delivery of drugs, and it was an obstacle to supply of drugs to poor population. Given this situation, the government of Bolivia requested the government of Japan for grant aid to improve medical supply through CEASS by construction/renovation of buildings and development of equipment at central and local levels.

**Project Objectives**

**Outcome**

To stably and safely provide the medical supplies to the covered medical facilities by construction of CEASS and improvement of equipment related to pharmaceutical preservation/delivery/packaging at both central and local levels.

**Outputs**

| Japanese Side | Construction of National Center of CEASS  
Procurement of equipment to National Center (forklifts, rack, blister machine, refrigerators, vehicles, etc)  
Procurement of equipment to eleven (11) local centers (refrigerators, vehicles, etc) |
| Bolivia Side | Construction/Repair of the local centers of CEASS |

## II. Result of the Evaluation

**Summary of the Evaluation**
Although the role of CEASS as the public institution that procures, reserves, supplies and sells essential drugs at low cost was important particularly towards equal access to drugs by poor population, it was suffering from its low capacity of preservation/delivery of drugs, and improvement of facilities and equipment of CEASS at both central and local levels was considered urgent at the time of ex-ante evaluation.

This project has partially achieved its objectives of stable and safe provision the medical supplies to medical facilities covered by CEASS; At the local center in La Paz, sorting was found an issue at the time of ex-post evaluation although other centers achieved its expected level.

As for sustainability, some problems have been observed in terms of structural, technical and financial aspects due to frequent change of management personnel, insufficient allocation of professional staff, and insufficient execution of annual maintenance budget, while those problems do not seriously affect the status of operation and maintenance of CEASS, which is mostly well functioning at both central and local levels. For relevance, the project has been highly relevant with Bolivian development policy, needs as well as Japan’s ODA policy at the time of both ex-ante and ex-post evaluation. For efficiency, project cost was as planned but project period slightly exceeded the plan.

In the light of above, this project is evaluated to be partially satisfactory.
1 Relevance

This project has been highly relevant with the Bolivian development plan (such as National Health Policy and National Policy on Medicine), development needs (equal access to medical service of quality through CEASS network), as well as Japan’s ODA policy at the time of both ex-ante and ex-post evaluation. Therefore, its relevance is high.

2 Effectiveness / Impact

This project has partially achieved its objectives of stable and safe provision the medical supplies to medical facilities covered by CEASS at the time of ex-post evaluation as most indicators set at the ex-ante evaluation, such as percentage of drugs that are sorted, preserved and managed (except at the local center in La Paz), percentage of drugs delivered in adequate conditions, and losses and damages through delivery, have achieved considerably. On the other hand, time spent for delivery “length of delivery (number of days) of drugs” to some CEASS Local Centers had not been reduced until November 2011 because of insufficient stock of drugs at CEASS Central (In November 2011, this problem was solved as National Vaccine Programs started utilizing CEASS as delivery institution).

In addition, it should be noted that the increased percentage of blistered drugs was not brought by this project because the blistered drugs not produced by this project but produced by private company of which has brought to rapid transformation (currently more than 80% of drugs are packaged in blisters).

Besides those indicators, it was found that CEASS has been utilized by some national vaccine programs as stock. Also, according to the interview and observation in the CEASS Central and Local Centers (La Paz, Santa Cruz, Potosi, Sucre), local centers of CEASS are generally satisfied with the project equipment as well as the quality, presentation and quantity of medicine. Furthermore, from those interviews it is considered that the improvement of drug distribution through CEASS, together with other interventions including JICA technical cooperation projects, has contributed to better access of the poor to essential drugs related to SUM.

As shown above, the project has partially achieved the expected outcomes; therefore its effectiveness/impact is fair.

Quantitative Effects

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<tbody>
<tr>
<td>1) Sorting, preservation and management of drugs</td>
<td>0</td>
<td>Increased</td>
<td>-</td>
<td>More than 70% of drugs are sorted, preserved and managed adequately in Santa Cruz (SCZ), Sucre and Potosi local centers but in La Paz, sorting has not reached the expected level due to inadequate capacity of staffs and deficiencies in infrastructure and equipment.</td>
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<tr>
<td>2) Length of delivery (number of days) of drugs from National Center to Local Center</td>
<td>Max 20 days</td>
<td>Decreased</td>
<td>-</td>
<td>Last Length of delivery to SCZ was 7 days, to Potosi and Sucre 30 days; this problem was generated by CEASS Central which did not have sufficient stock of drugs and thus could not compete with prices of national providers; In November 2011 that problem was solved as National Vaccine Programs started utilizing CEASS as delivery institution. The length of delivery was reduced to within 20 days. The reason has been an important acquisition of drugs in December 2011 and January 2012 which did gives it sufficient inventory of products to respond to the demand.</td>
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<td>3) Percentage of drugs delivered in adequate conditions</td>
<td>20%</td>
<td>Improved</td>
<td>-</td>
<td>80%</td>
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<tr>
<td>4) Loss and damage through delivery</td>
<td>10%</td>
<td>Decreased</td>
<td>-</td>
<td>2%</td>
</tr>
<tr>
<td>5) Percentage of blistered drugs</td>
<td>10%</td>
<td>Increased</td>
<td>-</td>
<td>95%, but not by blister machine procured by this project (the machine is not used, and now more than 80% of medicines in tablets are packaged and sold in blisters by most of providers)</td>
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Sources: Interview and Site visit of CEASS central and four local centers, information on all local centers of CEASS central

3 Efficiency

Although the project cost was as planned (ratio against plan: 100%), the project period slightly exceeded the plan (ratio against plan: 114%). Outputs of the Japanese side were produced mostly as planned, but as for the outputs of the Bolivian side, renovation of some local centers were not completed due to discontinuity of policy decisions on construction works with frequent turnover of personnel. Therefore, efficiency of the project is fair.
4 Sustainability

Some problems have been observed in structural, technical, and financial aspects. In the structural aspect, although the structure of CEASS was sustained in the similar manner to the implementation period, it has some problems due to its frequent changes of high level officers and insufficient allocation of professional staff. In the technical aspect, technical level of staffs is not sufficient to handle some equipment. As for the financial aspect, the execution rate of annual maintenance budget had been decreasing until 2010 mainly due to frequent turnover of CEASS authorities without takeover of plans that their predecessors had prepared, which had resulted in non-execution of the budget ensured for such plans. However, no serious problem has been observed in current status of operation and maintenance aspects as CEASS Central and Local Centers are mostly well functioning due to local staff’s effort to elaborate rules to minimize risks for operating the facility. Therefore, sustainability of this project is fair.

III. Recommendations & Lessons Learned

Recommendations for Implementing agency:
Ministry of Health and Sports and CEASS are recommended:
• To stably allocate the professional staffs of CEASS both at central and local centers to increase total capability.
• To disburse the budget for maintenance properly.
• To have a focus also on acquisitions of medical products with low demand in the market (e.g.: High-cost and low-demand drugs but critical such as the treatment of cancer ) as recommended by “Situational diagnosis of the CEASS and restructuring proposal- 2011”

Lessons Learned for JICA
• At the planning stage of a project to improve pharmaceutical affairs, provision of blister machines should be examined carefully by checking technical capacity and feasibility of maintenance at local level, as well as with comparison of cost benefit between buying medicine in hospital bottles for blistering and buying blistered medicines.