

PROJECT DOCUMENT

Project Title: Renewable Energy for All: Photo Voltaic Cells for Gaza hospitals

Project Number: Project Atlas Number 91323, Output Number 109381

Implementing Partner: Ministry of Health (MoH), Palestinian Energy and Natural Resources Authority (PENRA) and Japan International Cooperation Agency - JICA

Start Date: March 2018

End Date: March 2019

PAC Meeting date:

Brief Description

For the past decade, the Gaza Strip has suffered from a chronic electricity deficit, which undermined already fragile living conditions. The ongoing power shortage to around 75% has severely impacted the availability of essential services including health care services. The power supplies are usually interrupted during emergencies or hostilities, leaving functioning of health facilities overwhelmed by increased demand and inadequate resources which undermines access to health services. The Project responds to the deteriorated situation that health sector is passing through with the electricity crisis. It supports resilience of the health system in the Gaza Strip to cope with frequent shocks. The Project is implemented by UNDP/PAPP in close coordination with JICA and Ministry of Health (MoH) and Palestinian Energy and Natural Resources (PENRA).

Programme Outcome: Increased resilience and improved wellbeing of the Palestinian citizens through providing renewable source of energy for vital healthcare units to ensure equitable access to adequate health services in the Gaza Strip hospitals.

Output 1: Four vital healthcare units are supplied with sustainable source of energy utilizing photovoltaic solar system across the Gaza Strip

Output 2: Energy efficiency in the targeted healthcare units is applied for essential loads to enhance sustainability and cost-efficiency

This Project will support the sustainability and continuity of critical health services provision through providing continuous access to power supply. Photovoltaic solar systems offer a cost-effective and environmentally friendly solutions. Solar power improves people's lives by providing energy to schools and better healthcare services, using modern technologies.

Contributing Outcome (UNDAF/CPD, RPD or GPD):

UNDAF Strategic priority 4: Leaving No One Behind: social development and protection: By 2022, all Palestinians, especially the most vulnerable who are often left behind, have access to quality services, including health and education and social protection systems.

UNDP/PAPP CP Outcome 2: Inclusive, viable and equitable delivery of sustainable basic and social services, community-based infrastructure, contributing to spatial growth and productivity, economic development, people resilience, and anchored in a sustainable management of national resources

Indicative Output(s):



Output 2.4: Natural resources are sustainably managed, answering both needs for basic services and environment protection

Output 2.5: Early recovery and reconstruction efforts in Gaza reinforced and supported

Gender marker: GEN2 (Gender equality as a significant objective)

Total resources required:	USD 500,000	
Total resources allocated:	UNDP TRAC:	
	Donor:	USD 500,000
	Government:	Japan
	In-Kind:	
Unfunded:	0	

Agreed by (signatures):

UNDP
 
Print Name: Roberto Valent Special Representative of the Administrator
Date: 29.03.2018

I. DEVELOPMENT CHALLENGE

- Situational analysis

The health sector has been severely affected during the 2014 hostilities on Gaza. Damages to medical facilities, along with shortages of medicine, equipment and power supplies, caused the near collapse of the health sector. During the hostilities, nearly half of all health facilities were unable to provide services due to damage or danger, leaving functioning facilities overwhelmed by increased demand and inadequate resources. These hospitals serve around 500,000 people in the Middle Area and Rafah communities.

For the past decade, the Gaza Strip has suffered from a chronic electricity deficit that has undermined its already fragile living conditions. The electricity deficit has required a rationing system entailing regular rolling blackouts of 12-16 hours per day, occasionally increasing to up to 22 hours. The longer blackouts have a pervasive impact on all aspects of life, undermining basic services and generating serious public health concerns. Hospitals are postponing elective surgeries, discharging patients prematurely, and reducing cleaning and sterilizing of medical facilities. Despite the longer power shortages, 189 critical facilities providing health, water and sanitation, and solid waste collection services can hardly maintain a minimum level of operation, with emergency fuel provided by humanitarian agencies to run backup generators and vehicles. However, even this current minimal level of service provision is at risk due to the shortage of funds to maintain emergency fuel deliveries beyond August 2017.

There is an electricity deficit is 75% of 450 Megawatt (MW), which is the current demand, due to increased restrictions on the energy supply in 2017. In April 2017, the Gaza Power Plant (GPP) shut down completely due to the lack of fuel. Gaza thus lost 60 Megawatt (MW) of electricity or roughly thirty per cent of the energy normally available in the Strip. In May 2017, the Palestinian government decided to cut its payments for electricity provided to Gaza by Israel. As a result, Israel reduced its supply from 120 MW to 70 MW. Also, the supply of Egyptian 27 MW line faces frequent disruption.

UNDP carried out an assessment of health facilities in the Gaza Strip, guided by WHO, in 2010 that revealed weak infrastructure in some of the hospitals and clinics and bad physical infrastructure to suit the purpose of carrying out safe health care services. According to the energy sector strategy, by 2020 the Palestinian state must cover at least 50% of power demand with national production. This power capacity growth will be achieved by diversifying the generation mix, aiming, by 2020 to reach 10% of locally generated energy to be generated from renewable energy (Task I report: Assessment of renewable energy source- final report, PEA & WB).

- Urgency

The health sector is at a high-risk due to the instability and unpredictability of the political situation, which jeopardizes the lives of thousands of civilians, especially women, children and patients of chronic diseases, who are the most vulnerable groups. The issue of electricity is crucial for the proper functioning of health service provision in the Gaza Strip. Thus, the Project will provide renewable energy sources as a sustainable solution to the current crisis.

- Necessity:

Gaza hospitals have been badly affected due to electricity crisis where many health facilities have been subject to suspension of operations, which has critical consequences on the safety and

wellbeing of the Gaza population. In April 2017, the MoH threatened to suspend the operations of many hospitals and health centres due severe electricity crisis and lack of fuel to operate the power generators at the health facilities. Humanitarian actors have repeatedly identified such urgent intervention in the health sector as top priority life-saving interventions, especially during emergencies.

- **Unpredictability**

A recent political decision indicated that around 3,740 health professionals and admin of the Palestinian Authority employees, including 957 doctors and 866 nurses will be at risk of early retirement in the Gaza Strip. Thus, around 70% of the total number of health employees working in the health sector might be subject to laying off. This means that 49 functional health centres could not be able to sustain their functions if this decision is implemented. According to WHO, health services in Gaza will be partially or completely affected in most hospitals.

Thus, this Project will support the sustainability and continuity of critical health service provision through providing continuous access to power supply, and reducing operating costs.

- **Humanitarian Perspective:**

The Humanitarian Response Plan-2017 highlighted the health sector is a top priority in 2017. The Health and Nutrition Cluster has deemed Gaza Strip acutely vulnerable and thus proposed the main response priorities including:

- Providing access to quality and affordable primary health care and nutrition services in the West Bank, namely in Area C, in East Jerusalem and in the Gaza Strip in areas or to groups where access is lacking.
- Providing access to emergency and lifesaving services, particularly during crises.
- Strengthening emergency preparedness, coping capacity and the resilience of communities to potential future conflicts in Gaza and the West Bank.

II. STRATEGY

Renewable Energy for All aims at addressing the urgent needs of the energy in the health sector in the Gaza Strip. UNDP initiative will provide renewable energy source as a sustainable solution to the current crisis. Based on its past experiences, mainstreaming renewable energy is the public and social infrastructure proved to be effective and efficient strategy to ensure the delivery and access to quality services. UNDP intervention in the health and education systems applied PV solar systems as a renewable source of energy. In a context like Gaza that has been suffering a chronic electricity crisis in the past ten years, the solar energy is an effective, efficient and environment friendly solution, that would not only solve the problems at the public health and education facilities, but also reduce load on the public electricity network.

Different research studies constituted empirical evidence on the prospects of using photovoltaic solar systems as a penitential solution for energy crisis in Palestine. A report about "Renewable Energy in the Middle East"¹ by the NATO Science for Peace and Security Programme, stated that "Palestine has a

¹ Mason M. and Mor A., (2009) "Renewable Energy in the Middle East, The NATO Science for Peace and Security Programme.

high solar energy potential. It has about 3,000 sunshine hours per year and high annual average of solar radiation to 5.4 kWh/m²/day on horizontal surface. The lowest solar radiation is in December as it amounts to 2.63 kWh/m²/day while this reaches 8.4 kWh/m²/day in June. These figures are encouraging to exploit the solar energy for different applications such as water heating, water pumping and electrification. A research study about "The solar energy potential of Gaza Strip"² investigated the high resolution, real time solar radiation data over the years (1989-2002) concluded that the average annual global horizontal radiation in Gaza was found to be 2017 kWh/m²/year which is feasible to generate solar energy. Also, Palestinian Energy and Environment Research Centre stated that "the utilization of renewable energies is one of the strongest alternatives in Palestine due to absence of fossil fuel resources and several years of occupation. Palestine has to import all its needs of petroleum products and about 92% of electrical energy from Israeli market, a yearly energy bill of more than US\$ 500 Million."³

III. RESULTS AND PARTNERSHIPS

- *Expected Results*

This Project corresponds to the National Priority 10 "Resilient Communities" of the National Policy Agenda (2017–2022). The Project contributes to "meeting the basic needs of the Palestinian Community" through expanding community access to clean water and sanitation. Also, it is aligned with the UNDAF/Country Programme Results and Resource Framework, under Strategic Priority 4, the UN will work to ensure that by 2022, all Palestinians, especially the most vulnerable who are often left behind, have access to quality services, including health and education and social protection systems. The Project is designed in accordance with UNDP/PAPP's Country Programme Document (2016-2020), particularly the second priority: Viable and equitable delivery of basic and social services, contributing to economic development, social justice, and anchored in a sustainable management of national resources. Output 2.2: Reduced gap in access to basic and social services, in particular for underserved and un-deserved communities, through enhancement of infrastructure within national urban development and land resource management.

The Project aims to achieve the following outcomes:

Programme Outcome: Increased resilience and improved wellbeing of the Palestinian citizens through providing renewable source of energy for vital healthcare units to ensure equitable access to adequate health services in the Gaza Strip hospitals.

Output 1: Four vital healthcare units are supplied with sustainable source of energy utilizing photovoltaic solar system across the Gaza Strip

The Project will provide a sustainable source of green energy utilizing photovoltaic solar system in four healthcare units in four hospitals across the Gaza Strip. This will enhance the quality of health services provided for the population served by these hospitals. A total of 85 KWp will be provided to

² Al Alaydi J.Y. (2011) "The Solar Energy Potential of Gaza", Volume 11 Issue 7 Version 1.0 Global Journals Inc. (USA) Available at https://www.researchgate.net/publication/266720830_The_solar_energy_potential_of_Gaza

³ Yasin, B. (2007) "Renewable Energy Applications in Palestine" Palestinian Energy and Environment Research Center (PEC) – Energy Authority Technical Department Director (PEC), Palestine. Available at <https://scholar.najah.edu/sites/default/files/conference-paper/renewable-energy-applications-palestine.pdf>

these hospitals based on the needs assessment undertaken by JICA for the MoH hospitals in the Gaza Strip. Main activities will be:

Activity 1.1: Providing detailed design of the targeted hospitals in cooperation with MoH and PENRA

Activity 1.2: Construction of battery rooms on top of targeted hospital for solar system

Activity 1.3: Supply and installation of PV panels, batteries, inverters, cables and circuit breakers.

Activity 1.4: Commissioning and operation of the solar system.

Output 2: Energy efficiency in the targeted healthcare units is applied for essential loads to enhance sustainability and cost-efficiency

In parallel to the installation of the solar systems in the targeted hospitals, the Project will include the application of energy efficiency in the targeted health units. The required essential loads including lighting lux level survey will be carried out to determine the quality of lighting on workspaces in the hospitals' sections. Using LED lamps is more efficient than fluorescent lamps with less power consumption, therefore, old fluorescent lamps will be replaced with new LED lamps.

Key Activities:

Activity 2.1: Carry out the required lighting lux level survey to determine the required quality of lighting.

Activity 2.2: Install new LED lamps instead of the existing fluorescent lamps.

List of targeted hospitals and healthcare units:

#	MOH Hospitals	Targeted Units	Capacity(KW)
1	Beit Hanoun hospital	Laboratory	20
2	Al-Aqsa hospital	Laboratory	25
3	Najjar hospital	Laboratory	20
4	Emirati RC maternity hospital	Laboratory	20

- Resources Required to Achieve the Expected Results

A total budget of USD 500,000 is required to fully implement the proposed Project activities and achieve the desired results. UNDP will utilize its expertise and resources for the optimal implementation of the Project activities. A detailed budget breakdown is shown below:

Expected outputs	Activities	Proposed budget (USD)
OUTPUT 1: Provision of sustainable electricity supply through installation of photovoltaic systems serving four health care units in four hospitals across the Gaza Strip	1.1 Activity: Providing detailed design of the targeted hospitals in cooperation with MoH and PENRA	5,000
	1.2 Activity: Construction of battery rooms on top of targeted hospital for solar system	335,750
	1.3 Activity: Supply and installation of PV panels, batteries, inverters, cables and circuit breakers.	

	1.4 Activity: Commissioning and operation of the solar system.	
OUTPUT 2: Applying energy efficiency for the essential loads in the targeted units within targeted hospitals	2.1 Activity: Carry out the required lighting lux level survey to determine the required quality of lighting.	22,590
	2.2 Activity: Installing new LED lamps instead of the existing fluorescent lamps.	
Workshop and media		5,000
Communication		5,000
Advocacy and Visibility		5,000
UNDP Direct Implementation Cost including Administration Operation cost		67,523
Financial Audit		5,000
General Operation Expenses		12,100
Total Inputs		462,963
GMS (8%)		37,037
TOTAL		500,000

Partnerships

In collaboration with JICA, UNDP/PAPP technical team will be working in close cooperation with the concerned national stakeholders, namely, Ministry of Health (MoH) and Palestinian Energy and Natural Resources (PENRA). The programme is centered on community and governmental support; thus, the activities design will be based on consultations and inclusion of adequate range of stakeholders at the community level as well as the private sector. The programme constitutes a necessary complement to the other UNDP programs in Gaza in connection with energy programmes.

Risks and Assumptions

The Programme's proposed intervention responds to the basic humanitarian and needs and early recovery response for the Health sector. This intervention demonstrates two important considerations. First, that the basic approach of the Programme is indeed highly viable in this very challenging context, and the implementing partners, as well as the beneficiaries, are highly resilient and committed. Second that it is critical that all partners understand the volatility of the context and are prepared to make concessions and adjust expectations if the operating environment should change during implementation. The two basic assumptions necessary for Programme implementation are as follows:

- Security environment is sufficiently stable for the health institutions to operate;
- Border crossings are open and available for materials access as well for personnel traveling.

- Risk Register

The volatile political situation in the Gaza Strip is the major potential risk for the implementation of the programme. There are other factors with less significance to be considered in this regard.

The entry of materials is currently from Israeli crossing only and needs access coordination through the current established UNDP mechanism and the capacity of borders for entry of materials for reconstruction activities. On the other hand, the capacity of the local contractors to carry out different contracts needs to be assessed. Below is the risk log:

Risk	Probability	Impact	Risk Response
Environmental/Political:			

Resumption of hostilities or Internal fight / disputes	Moderate	High	<p>Careful monitoring of the situation to avoid incurring any losses to the Project.</p> <p>If major hostilities or internal fighting occurred and could put the safety and security of Project personnel, contractors or activities at risk, UNDP will:</p> <ul style="list-style-type: none"> - Suspend the activities until the risk is removed. - Precautionary secure the work sites and materials. - Inform all parties with the GPS coordinates of the sites. - inform the local authorities about the active Projects and assets seek assistance to safeguard the assets and operations. - Make revision of the budget and work plan.
Financial Risks			
Increase in cost pertaining to building materials.	Moderate	Moderate	The length of contracts does not increase beyond one year and packages are distributed to cover geographical areas decreasing the contractors' overheads. The contracts thus do not allow covering any fluctuation in prices.
Depreciation in the value of US\$.	Moderate	Moderate	<p>Effective and efficient management and use of financial resources are well maintained through monitoring and evaluation scheme established in UNDP at the local and global level.</p> <p>In procurement, contractors are asked to provide their prices in either USD or local currency (ILS) where all currencies of the received bids are converted to USD based on the UNDP prevailing rate of exchange at date of bid opening. Resulted contract with winning contractor will reflect the currency originally quoted by the contractor.</p>
Reputational Risks			
Contractors not abiding by the contract conditions and providing low quality work and equipment.	Moderate	High	The specifications will be reflected clearly in the contract conditions, the quality assurance specialist will be approving all materials used, and all mitigating and monitoring steps will be set as Standard Operating Procedures.
Incomplete interventions to the target health entity.	Low	Moderate	The designs will be well reviewed and scope of works to cover full reinstatement of costs so that the renovation activities would

			result in having efficient operational premises.
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Stakeholder Engagement

One of the UNDP’s approaches is to strengthen social networks, community ties, and build social organization to increase communities’ access to external resources and power, with the objective of increasing the community’s sense of ownership for public Projects. UNDP’s contractors listen to community members’ concerns and share the implementation problems related to the community. When communities accept that it is "their" problem, then they are more likely to work together to develop a solution, and the solution will be better than one provided solely by an external expert’s view of the contractor.

Women’s empowerment:

The Project design has adequately considered gender responsiveness and women empowerment. Women are among the main beneficiaries from the services of health units that will be targeted both health workers and recipients of health services by the Project. Also, Project will target some female fresh graduate engineers through a training seminars to strengthen their practical skills in the design and implementation of solar system. This will enhance their participation in the labour market, especially because there are very few females are engaged in the electrical engineering sector.

Knowledge

Knowledge, good practices and lessons should be captured and shared, as well as actively sourced from other Projects and partners, and integrated back into the Project. If a Project evaluation is required (e.g., when mandated by partnership principles, or due to the complexity or innovative aspects of the Project), it should be conducted in accordance with the evaluation standards and criteria.

Sustainability and Scaling Up

Addressed through developmental strategy, the provision of renewable source of energy to the health sector is expected to guarantee provision of an effective and efficient solution to the electricity crisis in Gaza. The materials used in in the installation of the solar systems are European-made of top quality to ensure durability, where the estimated life-time of the system components (solar panels, inverters, batteries) is from 10 to 15 years. The planned solar system is hybrid that comprises on-grid and back-up batteries to ensure sustainable operation of the system during day and night. In addition, the technical teams of the MoH will be trained on proper operation and trouble-shooting of solar systems. Also, an online monitoring system will be center established for easy detection and handling the functioning of the solar systems at each health.

IV. RESULTS FRAMEWORK

Intended Outcome as stated in the UNDAF/Country [or Global/Regional] Programme Results and Resource Framework:							
By 2022, all Palestinians, especially the most vulnerable who are often left behind, have access to quality services, including health and education and social protection systems.							
Outcome indicators:							
Percentage of districts (or similar administrative units) with health care facilities providing standard early intervention services to children U3 with special needs. Baseline = 0 % Target = 15 %							
Applicable Output(s) from the UNDP Strategic Plan:							
Output 2.2: Reduced gap in access to basic and social services, in particular for underserved and un-deserved communities, through enhancement of infrastructure within national urban development and land resource management							
Project title and Atlas Project Number: Renewable Energy for All: Photo Voltaic Cells for Gaza hospitals							
EXPECTED OUTPUTS	OUTPUT INDICATORS ⁴	DATA SOURCE	BASELINE		TARGETS		DATA COLLECTION METHODS & RISKS
			Value	Year	Value	Year	
OUTPUT 1: Four vital healthcare units are supplied with sustainable source of energy utilizing photovoltaic solar system across the Gaza Strip	1.1 Number of Kilowatts of electricity generated at Peak through green sources.	<i>Ministry of Health (MoH)</i>	90 Kw	2018	85 Kw additional	2019	<i>Technical reports Assessment Report Risk: Access of PV solar system materials.</i>
	1.2 Number of vital healthcare units operating utilizing the green energy of the solar system without cut off.	<i>MoH Hospitals</i>	<i>5 health units operating with solar system.</i>	2018	<i>4 additional health Units operating utilizing the green energy</i>	2019	<i>MoH Planning Records Technical Reports</i>
	1.3 Number of hospital in the Gaza Strip supplied with green energy. Baseline: 4 hospitals; Target: 4 additional hospitals	<i>MoH</i>	<i>5 hospitals</i>	2018	<i>4 additional hospitals</i>	2019	<i>MoH Records; Technical Reports; Field visits and spot check.</i>

⁴ It is recommended that Projects use output indicators from the Strategic Plan IRRF, as relevant, in addition to Project-specific results indicators. Indicators should be disaggregated by sex or for other targeted groups where relevant.

OUTPUT 2: Energy efficiency in the targeted healthcare units is applied for essential loads to enhance sustainability and cost-efficiency	2.1 Number of vital healthcare units provided with energy efficiency lamps.	<i>Targeted Hospital Units</i>	<i>4 healthcare units</i>	2018	<i>4 additional healthcare units</i>	2019	<i>Technical reports Field visits and spot check.</i>
	2.2 load of energy consumption of targeted healthcare units from clean renewable source of energy increased.	<i>Targeted Hospital Units</i>	<i>0</i>	Jan. 2018	<i>85 KW utilized directly from clean renewable source of energy.</i>	March 2019	<i>Reading of electricity meters. Monthly Electricity Bills</i>

V. MONITORING AND EVALUATION

The formal performance measurement of the Project will involve the application of the Programme Measurement Framework (PMF), and the collection of data specific to each of the applicable PMF indicators, at regular intervals and in line with Project reporting.

The indicators will be assessed annually and output indicators at regular intervals. While the monitoring of outcomes is carried out as a formal process in line with the PMF, the ongoing monitoring and evaluation at the level of outputs and activities are also essential for effective implementation and management decision-making.

The Project's PMF is presented on the pages which follow, providing an overview of the outcomes, their respective indicators, as well as information pertaining to the process and schedule for monitoring them.

In accordance with UNDP's programming policies and procedures, the Project will be monitored through the following:

Within the annual cycle

- **Track Progress.** Following the frequency cited in the monitoring plan, progress data against the results indicators will be collected and analyzed to assess the progress of the Project in achieving the agreed outputs. National data sources should be used whenever possible. Slower than expected progress will be addressed by the Project management. Beneficiary feedback will be part of regular data collection and performance assessment.
- **Monitor and Manage Risk.** Based on the initial risk analysis submitted (see annex 2), a risk log shall be actively maintained, including by reviewing the external environment that may affect the Project implementation. Risk management actions will be identified and monitored using a risk log. This includes monitoring social and environmental management measures and plans that may have been required as per UNDP's Standards. Audits will be conducted in accordance with UNDP's audit policy to manage financial risk.
- **Evaluate and Learn.** Evaluations shall be conducted in accordance with the evaluation plan. Knowledge, good practices and lessons should be captured and shared, as well as actively sourced from other Projects and partners, and integrated back into the Project. If a Project evaluation is required (e.g., when mandated by partnership principles, or due to the

complexity or innovative aspects of the Project), it should be conducted in accordance with the Project's evaluation plan.

- **Review and Make Course Corrections.** The Project management will review the data and evidence collected (through all of the above) on a regular basis within the annual cycle, and make course corrections as needed. The frequency of review depends on the needs of the Project, but an internal review of the available progress data against the results indicators is required at least quarterly. Any significant course corrections that require a decision by the Project Board should be raised at the next Project Board meeting.

Annually

- **Annual Project Quality Rating.** On an annual basis and at the end of the Project, the quality of the Project will be rated by the QA Assessor against the quality criteria identified in UNDP's Project Quality Assurance System. Any quality concerns flagged by the process must be addressed by Project management.
- **Annual Project Review and Report.** The Project Board shall hold a Project review at least once per year to assess the performance of the Project and appraise the Annual Work Plan for the following year. An annual report will be presented to the Project Board for the review, consisting of progress data showing the results achieved against pre-defined annual targets at the output level, the annual Project quality rating summary, an updated risk long with mitigation measures, and any evaluation or review reports prepared over the period. Any concerns on the quality or progress of the project should be discussed by the Project Board where any necessary management actions should be taken to address such issues. This review is driven by the Project Board and may involve other stakeholders as required.

Closure

- In the Project's final year, the Project Board shall hold an end-of Project review to capture lessons learned and discuss opportunities for scaling up.

VI. ANNUAL WORK PLAN

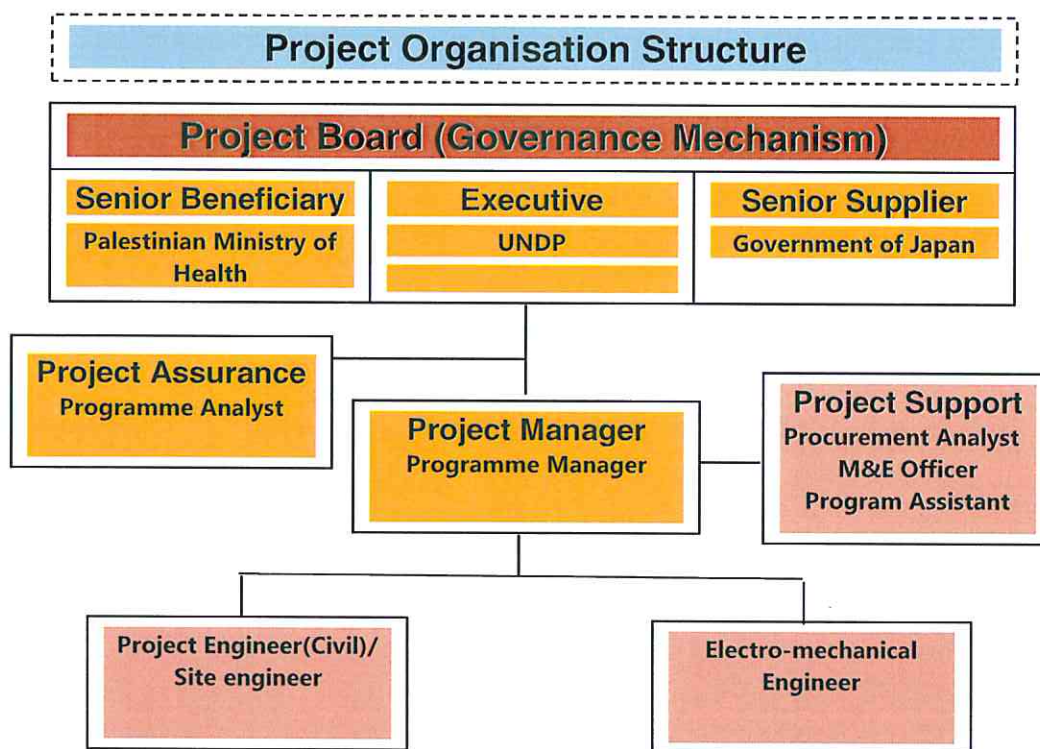
EXPECTED OUTPUTS	PLANNED ACTIVITIES	Planned Activities Timeframe				RESPONSIBLE PARTY
		Q2	Q3	Q4	Q1	
		2018	2018	2018	2019	
Output 1: Provision of sustainable electricity supply through installation of Photovoltaic systems for 5 vital health services	1.1 Providing detailed design of the targeted hospitals in cooperation with MoH and PENRA	x				UNDP/PAPP
	1.2 Construction of battery rooms on top of targeted hospital for solar system		x			UNDP/PAPP

units in 5 hospitals across the Gaza Strip. <i>Gender marker:</i> GEN2	1.3 Supply and installation of PV panels, batteries, inverters, cables and circuit breakers			x	x	UNDP/PAPP
	1.4 Commissioning and operation of the solar system				x	UNDP/PAPP
Output 2: Applying energy efficiency for the lighting system in the targeted units within hospitals. <i>Gender marker:</i> GEN2	2.1 Carry out the required lighting lux level survey to determine the required quality of lighting.			x		UNDP/PAPP
	2.2 Installing new LED lamps instead of the existing fluorescent lamps.				x	UNDP/PAPP

VII. GOVERNANCE AND MANAGEMENT ARRANGEMENTS

UNDP will assign a Programme Analyst from its staff to follow up on all managerial, including administrative and financial issues related to the Project. In addition, UNDP will assign an Engineering Analyst, who will take on the role of a Technical Quality Assurance, to manage and assess the daily technical monitoring of the Project. The UNDP will also assign an Electro-Mechanical Engineer who manages and handles all technical electrical and mechanical related issues of the Project. The day to day Management (Project Manager) will be handled by the Programme Manager, whereas the UNDP Programme Analyst will be responsible for the overall Project assurance.

A Project board will be established to follow up the works implemented by UNDP. The members of the board will include the Government of Japan as the donor, a representative of the Ministry of Health as the end beneficiary and owner and that coordinates the Project with other PA counterparts, and UNDP/PAPP as the implementing partner. This board will meet every 3 months or exceptionally upon request by Board members, to review priorities and progress towards expected results.



The UNDP will utilize its standard Management, Procurement, Contracting, and Financial procedures in the implementation of the Project. The Project will be tendered locally and through the UNDP procurement web site portal. A public tender opening will occur in which all relevant parties may be present. UNDP's procurement unit will evaluate the tender and only upon approval from UNDP Contracts, Assets, and Procurement Committee will a contract be awarded to the winning contractor. Based upon the Japan International Cooperation Agency's (JICA) technical assessment of priorities and needs of health facilities, UNDP and MoH will coordinate the technical specifications and works to ensure that the results are in line with the PA Palestine National Policy Agenda for 2017 – 2022 Plan. UNDP will monitor and supervise all construction works on a daily basis and will be responsible for verifying all works and the issuance of payments to contractors based upon actual works performed. Through this mechanism UNDP will directly execute all Project activities. The Project

budget would cover the costs of the Project Implementation Unit, all Project-based expenses, and UNDP's General Management Services.

VIII. VISIBILITY PLAN

UNDP is considering the importance of the communication and visibility, and therefore, includes a line for this purpose. The Project Team in close coordination with UNDP/PAPP Communication Unit will develop a communication plan that includes the following:

- a) Full participation of the initial inauguration and handover of the Project
- b) Production of press releases to cover Project news and events
- c) Production of Project fact sheets which will be published in UNDP/PAPP official website.
- d) Highlighting the funding source for the Project in all announced activities
- e) Signing and Closing Ceremonies
- f) Maintaining the proper logos and all related materials during the Project lifecycle that includes tendering, construction plaques, inauguration plaques, etc.
- g) Standard UNDP communication branding for donors' visibility

Effective communication with all stakeholders (Palestinian institutions, UN agencies, donors, media and beneficiaries), is fundamental to the Project's success. Information and communication needs of the stakeholders' relative to the progress of the Project will be determined and highlighted as a communications plan/matrix. It will play an essential role in mitigating expected risks in ensuring advocacy.

IX. LEGAL CONTEXT

The Project document shall be the instrument envisaged and defined in the [Supplemental Provisions](#) to the Project Document, attached hereto and forming an integral part hereof, as "the Project Document".

This Project will be implemented by UNDP/PAPP in accordance with its financial regulations, rules, practices and procedures only to the extent that they do not contravene the principles of the Financial Regulations and Rules of UNDP. Where the financial governance of an Implementing Partner does not provide the required guidance to ensure best value for money, fairness, integrity, transparency, and effective international competition, the financial governance of UNDP shall apply.

X. RISK MANAGEMENT

1. UNDP as the Implementing Partner will comply with the policies, procedures and practices of the United Nations Security Management System (UNSMS.)
2. UNDP as the Implementing Partner will undertake all reasonable efforts to ensure that none of the [Project funds]⁵ [UNDP funds received pursuant to the Project Document]⁶ are used to provide support to individuals or entities associated with terrorism and that the recipients of any amounts provided by UNDP hereunder do not appear on the list maintained by the Security Council Committee established pursuant to resolution 1267 (1999). The list can be accessed via

⁵ To be used where UNDP is the Implementing Partner

⁶ To be used where the UN, a UN fund/programme or a specialized agency is the Implementing Partner

http://www.un.org/sc/committees/1267/aq_sanctions_list.shtml. This provision must be included in all sub-contracts or sub-agreements entered into under this Project Document.

3. Social and environmental sustainability will be enhanced through application of the UNDP Social and Environmental Standards (<http://www.undp.org/ses>) and related Accountability Mechanism (<http://www.undp.org/secu-srm>).
4. UNDP as the Implementing Partner will: (a) conduct Project and programme-related activities in a manner consistent with the UNDP Social and Environmental Standards, (b) implement any management or mitigation plan prepared for the Project or programme to comply with such standards, and (c) engage in a constructive and timely manner to address any concerns and complaints raised through the Accountability Mechanism. UNDP will seek to ensure that communities and other Project stakeholders are informed of and have access to the Accountability Mechanism.
5. All signatories to the Project Document shall cooperate in good faith with any exercise to evaluate any programme or Project-related commitments or compliance with the UNDP Social and Environmental Standards. This includes providing access to Project sites, relevant personnel, information, and documentation.
6. UNDP as the Implementing Partner will ensure that the following obligations are binding on each responsible party, subcontractor and sub-recipient:
 - a. Consistent with the Article III of the SBAA [*for the Supplemental Provisions to the Project Document*], the responsibility for the safety and security of each responsible party, subcontractor and sub-recipient and its personnel and property, and of UNDP's property in such responsible party's, subcontractor's and sub-recipient's custody, rests with such responsible party, subcontractor and sub-recipient. To this end, each responsible party, subcontractor and sub-recipient shall:
 - i. put in place an appropriate security plan and maintain the security plan, taking into account the security situation in the country where the Project is being carried;
 - ii. assume all risks and liabilities related to such responsible party's, subcontractor's and sub-recipient's security, and the full implementation of the security plan.
 - b. UNDP reserves the right to verify whether such a plan is in place, and to suggest modifications to the plan when necessary. Failure to maintain and implement an appropriate security plan as required hereunder shall be deemed a breach of the responsible party's, subcontractor's and sub-recipient's obligations under this Project Document.
 - c. Each responsible party, subcontractor and sub-recipient will take appropriate steps to prevent misuse of funds, fraud or corruption, by its officials, consultants, subcontractors and sub-recipients in implementing the Project or programme or using the UNDP funds. It will ensure that its financial management, anti-corruption and anti-fraud policies are in place and enforced for all funding received from or through UNDP.
 - d. The requirements of the following documents, then in force at the time of signature of the Project Document, apply to each responsible party, subcontractor and sub-recipient: (a) UNDP Policy on Fraud and other Corrupt Practices and (b) UNDP Office

of Audit and Investigations Investigation Guidelines. Each responsible party, subcontractor and sub-recipient agrees to the requirements of the above documents, which are an integral part of this Project Document and are available online at www.undp.org.

- e. In the event that an investigation is required, UNDP will conduct investigations relating to any aspect of UNDP programmes and Projects. Each responsible party, subcontractor and sub-recipient will provide its full cooperation, including making available personnel, relevant documentation, and granting access to its (and its consultants', subcontractors' and sub-recipients') premises, for such purposes at reasonable times and on reasonable conditions as may be required for the purpose of an investigation. Should there be a limitation in meeting this obligation, UNDP shall consult with it to find a solution.
- f. Each responsible party, subcontractor and sub-recipient will promptly inform UNDP as the Implementing Partner in case of any incidence of inappropriate use of funds, or credible allegation of fraud or corruption with due confidentiality.

Where it becomes aware that a UNDP Project or activity, in whole or in part, is the focus of investigation for alleged fraud/corruption, each responsible party, subcontractor and sub-recipient will inform the UNDP Resident Representative/Head of Office, who will promptly inform UNDP's Office of Audit and Investigations (OAI). It will provide regular updates to the head of UNDP in the country and OAI of the status of, and actions relating to, such investigation.

- g. UNDP will be entitled to a refund from the responsible party, subcontractor or sub-recipient of any funds provided that have been used inappropriately, including through fraud or corruption, or otherwise paid other than in accordance with the terms and conditions of this Project Document. Such amount may be deducted by UNDP from any payment due to the responsible party, subcontractor or sub-recipient under this or any other agreement. Recovery of such amount by UNDP shall not diminish or curtail any responsible party's, subcontractor's or sub-recipient's obligations under this Project Document.

Where such funds have not been refunded to UNDP, the responsible party, subcontractor or sub-recipient agrees that donors to UNDP (including the Government) whose funding is the source, in whole or in part, of the funds for the activities under this Project Document, may seek recourse to such responsible party, subcontractor or sub-recipient for the recovery of any funds determined by UNDP to have been used inappropriately, including through fraud or corruption, or otherwise paid other than in accordance with the terms and conditions of the Project Document.

Note: The term "Project Document" as used in this clause shall be deemed to include any relevant subsidiary agreement further to the Project Document, including those with responsible parties, subcontractors and sub-recipients.

- h. Each contract issued by the responsible party, subcontractor or sub-recipient in connection with this Project Document shall include a provision representing that no fees, gratuities, rebates, gifts, commissions or other payments, other than those shown in the proposal, have been given, received, or promised in connection with the

selection process or in contract execution, and that the recipient of funds from it shall cooperate with any and all investigations and post-payment audits.

- i. Should UNDP refer to the relevant national authorities for appropriate legal action any alleged wrongdoing relating to the Project or programme, the Government will ensure that the relevant national authorities shall actively investigate the same and take appropriate legal action against all individuals found to have participated in the wrongdoing, recover and return any recovered funds to UNDP.
- j. Each responsible party, subcontractor and sub-recipient shall ensure that all of its obligations set forth under this section entitled "Risk Management" are passed on to its subcontractors and sub-recipients and that all the clauses under this section entitled "Risk Management Standard Clauses" are adequately reflected, *mutatis mutandis*, in all its sub-contracts or sub-agreements entered into further to this Project Document.