**Results Matrix**

**Expected Impacts**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Indicators** | **Unit** | **Baseline** | | **Goals** | | **Means of verification** | **Observations** |
| **Value** | **Year** | **Value** | **Year** |
| **Objective: Contribute to the reduction of maternal, perinatal, and neonatal deaths in Guyana by 2021** | | | | | | | |
| Maternal Mortality Ratio (MMR). | Maternal deaths x 100,000 | 121.7 | 2014 | 87.9 | 2021 | Chief Medical Officer (CMO) Report | MMR at the national level estimated using preliminary data from the CMO Report. |
| Neonatal Mortality Rate (NMR). | Neonatal deaths x 1,000 | 21.7 | 2014 | 15.2 | 2021 | CMO Report | NMR at the national level estimated using preliminary data from the CMO Report. |

**Expected Results**

| **Indicator** | **Unit** | **Baseline** | | **Goals** | | **Means of verification** | **Observations** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Value** | **Year** | **Value** | **Year** |
| **Component 1. StrengthenING reproductive, maternal, and neonatal health services** | | | | | | | |
| **Sub-Component 1.1. Objective: Increase access and use of reproductive, maternal, and neonatal health services** | | | | | | | |
| First time users of family planning methods for the year. | Number of clients | 5,799 | 2014 | 9,799 | 2021 | MCH Report,  Clinic Summary Report (CSR) | Calculated for intervention areas. |
| Pregnant women with anemia at first antenatal visit (hemoglobin under 11 g/dl). | % | 21.1% | 2014 | 11.1% | 2021 | MCH Report, CSR | Calculated for intervention areas. Excludes “result not known”. |
| Births from adolescent mothers (19 years and younger). | % | 19.1% | 2012 | 15.1% | 2021 | Vital Statistics,  Ministry of Health Statistical Bulletin | Calculated for intervention areas. |
| Women who receive antenatal care before 12 weeks pregnant. | % | 23.9% | 2014 | 30.9% | 2021 | MCH Report, CSR | Calculated for intervention areas. Excludes “unknown”. |
| Women who gave birth in a health facility in the rural interior. | % | 15.8% | 2014 | 25.8% | 2021 | MCH Report, CSR | Calculated for region 9. Numerator considers “hospital” and “health center” deliveries. |
| **Sub-Component 1.2. Objective: Improve quality of reproductive, maternal, and neonatal health services** | | | | | | | |
| Pregnant women receiving quality antenatal care according to best practices. | % | (1) | 2017 | +15PP | 2021 | Health Facility Surveys (HFS),  Medical Record Review (MRR) module | Calculated for health facilities in intervention areas that provide antenatal care. |
| Deliveries for which the partograph was used according to best practices. | % | (1) | 2017 | +20PP | 2021 | HFS, MRR | Calculated for health facilities in intervention areas that provide routine birth services. |
| Institutional deliveries for which oxytocin was administered immediately following birth as part of Active Management of the Third Stage of Labor. | % | (1) | 2017 | 85% | 2021 | HFS, MRR | Calculated for health facilities in intervention areas that provide routine birth services. |
| Institutional deliveries for which immediate neonatal care was provided to the infant according to the norms | % | (1) | 2017 | 85% | 2021 | HFS, MRR | Calculated for health facilities in intervention areas that provide routine birth services. |
| Neonates with complications (prematurity, low birth weight, asphyxia and sepsis) managed according to norms. | % | (1) | 2017 | +20PP | 2021 | HFS, MRR | Calculated for health facilities in intervention areas that provide routine birth services. |
| Obstetric complications (sepsis, hemorrhage, severe pre-eclampsia and eclampsia) managed according to norms. | % | (1) | 2017 | +20PP | 2021 | HFS, MRR | Calculated for health facilities in intervention areas that provide routine birth services. |
| Women that received immediate postpartum care according to best practices (every 15 minutes in the first hour and every 30 minutes in the second hour). | % | (1) | 2017 | 85% | 2021 | HFS, MRR | Calculated for health facilities in intervention areas that provide routine birth services. |
| **Component 2. Strengthening the healthcare network** | | | | | | | |
| **Objective: Increase the effectiveness of the maternal and neonatal healthcare network** | | | | | | | |
| Women that are referred to the national hospital for obstetric conditions that could have been resolved at another level of care. | % | (1) | 2017 | Decrease by 50PP | 2021 | HFS, MRR | Calculated for health facilities in intervention areas. |
| Health facilities with continuous availability of inputs and equipment to provide essential and emergency obstetric and neonatal care. | % | (1) | 2017 | 85% | 2021 | HFS, MRR | Calculated for health facilities in intervention areas that provide routine birth services. |
| Health facilities with continuous availability of inputs and equipment to provide quality antenatal and post-natal care. | % | (1) | 2017 | 85% | 2021 | HFS, MRR | Calculated for health facilities in intervention areas that provide antenatal and postnatal care. |

(1) Data will be updated with the baseline Health Facility Survey results.

PP: Percentage Points to increase over baseline value.

**Products**

| **Products** | **Estimated Cost (US$)** | **Unit** | **Baseline** | **Y1** | | **Y2** | | **Y3** | **Y4** | | | | **Y5** | | | | **Final goal** | **Means of verification** | **Observations** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Component 1. Strengthening reproductive, maternal, and neonatal health services** | | | | | | | | | | | | | | | | | | |  |
| **Sub-Component 1.1. Access and use of reproductive, maternal, and neonatal health services** | | | | | | | | | | | | | | | | | | |  |
| Community health workers (CHWs) trained and equipped to provide reproductive, maternal, and neonatal services. | 470.000 | CHWs | 0 | 00 | 200 | | 225 | | | 0 | | | | 0 | | 425 | | Report from technical assistance with documental evidence that CHWs have been trained and equipped | Calculated for CHWs in intervention areas. |
| Communities with plans for institutional birth implemented. | 225.000 | Communities | 0 | 0 | 50 | | 38 | | | 0 | | | | 0 | | 88 | | Report from technical assistance with documental evidence that plans have been implemented | Calculated for communities in region 9. “Implemented” refers to communities that have designed and operationalized plans for institutional birth. |
| Communities with communication strategy for behavior change implemented. | 535.000 | Communities | 0 | 0 | 50 | | 100 | | | 75 | | | | 0 | | 225 | | Report from technical assistance with documental evidence that the communication strategy was aired in each community | ”Implemented” refers to communities that have received the messages/spots aired by the communication strategy by radio, television, social media, printed media or others. |
| **Sub-Component 1.2. Quality of reproductive, maternal, and neonatal health services** | | | | | | | | | | | | | | | | | | |  |
| Health facilities with integrated health care strategy for women of reproductive age implemented. | 255.000 | Health facilities | 0 | 0 | 50 | | 50 | | | 43 | | 0 | | | | 143 | | Report from technical assistance with documental evidence that guidelines and procedures have been implemented | Calculated for health centers in intervention areas that provide primary care. “Implemented” refers to health facilities that have updated and operationalized guidelines and procedures on the health of women of reproductive age. |
| Health facilities with new family planning strategy implemented. | 170.000 | Health facilities | 0 | 0 | 50 | | 50 | | | 43 | | 0 | | | | 143 | | Report from technical assistance with documental evidence that guidelines and procedures have been implemented | Calculated for health centers in intervention areas that provide primary care. “Implemented” refers to health facilities that have updated and operationalized guidelines and procedures for family planning. |
| Health facilities with updated model for prenatal, birth, postnatal, and post-partum care implemented. | 125.000 | Health facilities | 0 | 0 | 100 | | 50 | | | 0 | | 0 | | | | 150 | | Report from technical assistance with documental evidence that guidelines and procedures have been implemented. | Calculated for health facilities in intervention areas. “Implemented” refers to health facilities that have updated and operationalized guidelines and procedures for prenatal, birth, postnatal, and post-partum care. |
| Hospitals with Quality Improvement Strategy (QIS) for maternal and neonatal health implemented. | 455.000 | Hospitals | 0 | 0 | 1 | | 3 | | | 3 | | 0 | | | | 7 | | Report from technical assistance with documental evidence that processes have been mapped and optimized | Calculated for hospitals in intervention areas. “Implemented” refers to hospitals that have mapped and optimized key clinical, management, and support processes. |
| Health facilities with supply chain management improved. | 100.000 | Health facilities | 0 | 0 | 0 | | 90 | | | 60 | | 0 | | | | 150 | | Report from technical assistance with documental evidence that supply chain have improved | Calculated for health facilities in intervention areas. “Improved” refers to health facilities that have adopted best practices in estimating need, planning, requesting, storing, and distributing critical supplies to the population |
| Health workforce trained to provide quality reproductive, maternal, and neonatal care. | 235.000 | Health staff | 0 | 0 | 120 | | 90 | | | 46 | | 0 | | | | 256 | | Report from technical assistance with documental evidence that workers have been trained | Calculated for health facilities in intervention areas. |
| Health facilities with health information system strengthened. | 350.000 | Health facilities | 0 | 0 | 0 | | 60 | | | 60 | | 30 | | | | 150 | | Report from technical assistance with documental evidence that health facilities have strengthened health information system | Calculated for health facilities in intervention areas. “Strengthened” refers to health facilities that collect and report key statistics on a routine basis. |
| **Component 2. Strengthening the healthcare network** | | | | | | | | | | | | | | | | | | |  |
| Integrated healthcare network for reproductive, maternal, and neonatal health enabled. | 759.000 | Network | 0 | 0 | 1 | | 2 | | | 0 | | 0 | | | | 3 | | Report from technical assistance with documental evidence that network has been enabled | Calculated for intervention areas. “Enabled” refers to regions that have revised and adjusted the service and referral and counter-referral networks |
| Health facilities with infrastructure improved to provide reproductive, maternal, and neonatal services. | 500.000 | Health facilities | 0 | 0 | 0 | | 1 | | | 0 | | 0 | | | | 1 | | Project’s semi-annual monitoring reports with documental evidence that infrastructure improvements have been concluded and that the health facility is in operation | Calculated for health facility in region 4. |
| Health facilities with equipment improved to provide reproductive, maternal, and neonatal services. | 2.250.000 | Health facilities | 0 | 0 | 0 | | 2 | | | 2 | | 0 | | | | 4 | | Project’s semi-annual monitoring reports with documental evidence that the new equipment is operating | Calculated for health facilities in intervention areas. |
| Ambulances equipped for emergency obstetric and newborn care delivered. | 225.000 | Ambulances | 0 | 0 | 3 | | 0 | | | 0 | | 0 | | | | 3 | | Project’s semi-annual monitoring reports with documental evidence that ambulances are operating | Calculated for health facilities in intervention areas. |
| **Component 3. Administration and Evaluation** | | | | | | | | | | | | | | | | | | |  |
| Final evaluation conducted. | 20.000 | Evaluation | 0 | 0 | | 0 | | 0 | 0 | | 1 | | | | 1 | | | Evaluation completed and published in the Ministry’s webpage |  |
| Health facility survey conducted. | 100.000 | Survey | 0 | 1 | | 0 | | 0 | 0 | | 1 | | | | 2 | | | Survey completed and published in the Ministry’s webpage |  |