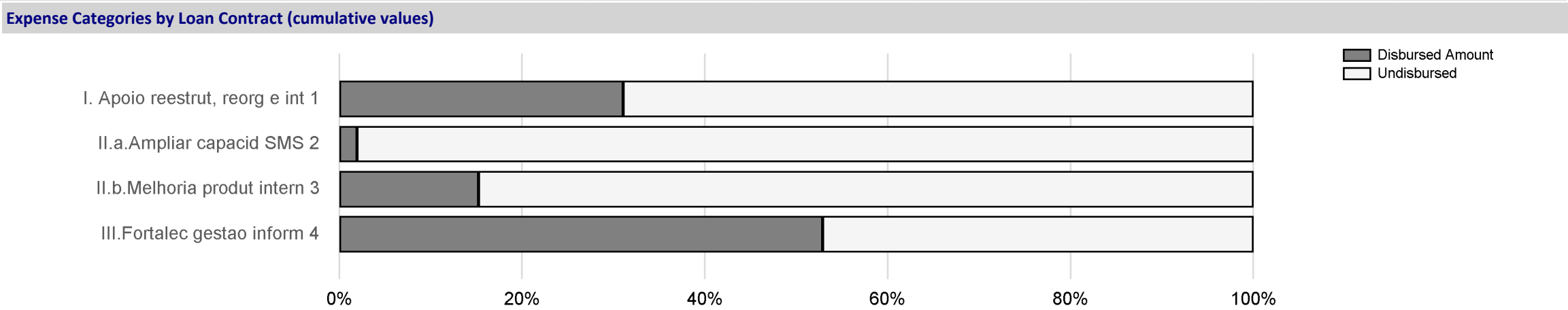


PMR Public Report

Operation Number	BR-L1429	Chief of Operations Validation Date	10/18/22
Year- PMR Cycle	First period Jan-Jun 2022	Division Chief Validation Date	
Last Update	09/30/22	Country Representative Validation Date	
PMR Validation Stage	Validated by Chief of Operations		

Basic Data			
Operation Profile			
Operation Name	CITY OF SÃO PAULO HEALTH CARE NETWORKS RESTRUCTURING AND QUALITY CERTIFICATION PROJECT – AVANÇA SAÚDE SP	Loan Number	4641/OC-BR
Executing Agency	SECRETARIA MUNICIPAL DE SAÚDE DE SÃO PAULO	Sector/Subsector	HEALTH-HEALTH SYSTEM STRENGTHENING
Team Leader	ROCHA, MARCIA GOMES	Overall Stage	Disbursing (From eligibility until all the Operations are closed)
Operation Type	Loan Operation	Country	Brazil
Lending Instrument	Investment Loan	Convergence related Operation(s)	
Borrower	PREFEITURA DO MUNICIPIO DE SAO PAULO		
Environmental and Social Safeguards			
Impacts Category	B	Was/Were the objective(s) of this operation reformulated?	NO
Safeguard Performance Rating		Date of approval	
Safeguard Performance Rating - Rationale			

Financial Data									
	Total Cost and Source					Available Funds (US\$)			
Operations	Original IDB	Current IDB	Local Counterpart	Co-Financing / Country	Total Original Cost	Current IDB	Disb. Amount to Date	% Disbursed	Undisbursed Amount
BR-L1429	100,000,000	100,000,000	100,000,000	0	200,000,000	100,000,000	54,694,743.28	54.69%	45,305,256.72
Aggregated	100,000,000	100,000,000	100,000,000	0	200,000,000	100,000,000	54,694,743.28	54.69%	45,305,256.72



Please note that inactive indicators and outputs are not displayed; totals in the actual cost table may not match the sum of the cost of the outputs displayed, due to the cost of inactive outputs.

RESULTS MATRIX

General Development Objectives

General Development Objectives Nbr. 1: Tasas mejoradas

Observation:

Indicator		Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement	EOP 2024	
1.0	Tasa de mortalidad prematura por accidentes cerebro vasculares (ACV) - MUJERES	/100000 habitantes	19.2	2016	2024	P	18.3
						A	-
Details							

Means of Verification: DATASUS

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator				Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement	EOP 2024	
1.2	Tasa de mortalidad prematura por accidentes cerebro vasculares (ACV) - HOMBRES			/100000 habitantes	28.3	2016	2024	P	26.9
								A	-
Details									

Means of Verification: DATASUS

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator				Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement	EOP 2024	
1.3	Tasa de internaciones por condiciones sensibles a la atención básica - MUJERES			/10000 habitantes	39.4	2016	2024	P	34.5
								A	-
Details									

Means of Verification: DATASUS

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator				Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement	EOP 2024	
1.4	Tasa de internaciones por condiciones sensibles a la atención básica - HOMBRES			/10000 habitantes	45.3	2016	2024	P	39
								A	-
Details									

Means of Verification: DATASUS

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

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Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator				Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement	EOP 2024	
1.5	Tasa de mortalidad prematura por Diabetes Mellitus (DM) - MUJERES			/100000 habitantes	5.9	2016	2024	P	5.6
								A	-
Details									

Means of Verification: DATASUS

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator				Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement	EOP 2024	
1.6	Tasa de mortalidad prematura por Diabetes Mellitus (DM) - HOMBRES			/100000 habitantes	9.6	2016	2024	P	9.1
								A	-
Details									

Means of Verification: DATASUS

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator				Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement	EOP 2024	
1.6	Tasa de mortalidad prematura por doencas coronariana - MUJERES			/100000 Hab	23.6	2016	2024	P	22.4
								A	-
Details									

Means of Verification: dados oficiais DATASUS

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator				Unit of Measure	Baseline	Baseline Year	Expected Year of Achievement	EOP 2024	
1.7	Tasa de mortalidad prematura por doencas coronariana - HOMBRES			/100000 Hab	61.8	2016	2024	P	58.7
								A	-
Details									

Means of Verification: dados oficiais DATASUS

Observations:

The General Development Objective indicator target is expected to be observed by the operation's "Fully Justified" date in Convergence (CO): No

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator			
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RESULTS MATRIX

Specific Development Objectives

Specific Development Objectives Nbr. 1: Tiempos de permanencia en los hospitales mejorado

Observation:

	Indicator	Unit of Measure	Baseline	Baseline Year		2024	EOP 2024
1.0	Tiempo promedio de permanencia de usuarios por séqueles de enfermedades cerebrovasculares e de consecuencias externas en hospitales generales SUS	día	51	2017	P	48	48
					A	-	-

Details

Means of Verification: SIH-SUS

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	

	Indicator	Unit of Measure	Baseline	Baseline Year		2024	EOP 2024
1.2	Tiempo promedio de permanencia en hospitales generales da rede SUS de la ciudad de São Paulo	dia	4.8	2017	P	4.5	4.5
					A	-	-

Details

Means of Verification: SIH-SUS

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	

	Indicator	Unit of Measure	Baseline	Baseline Year		2024	EOP 2024
1.3	Proporción de internación en carácter de urgencia en los hospitales estratégicos	%	87.4	2017	P	74.5	74.5
					A	-	-

Details

Means of Verification: SIH-SUS

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	

	Indicator	Unit of Measure	Baseline	Baseline Year		2024	EOP 2024
1.4	Tasa de mortalidad por enfermedades coronarianas	/10000 habitantes	74.5	2016	P	65	65
					A	-	-

Details

Means of Verification: SIM-SUS / SEADE

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator	

Indicator		Unit of Measure	Baseline	Baseline Year	2024		EOP 2024
1.4	Tasa de hospitalización por Diabetes Mellitus y sus complicaciones	/10000 habitantes	4	2017	P	3.7	3.7
					A	-	-
Details							
Means of Verification: SIH-SUS / SEADE							
Observations:							
Evaluation Methodology: -							
Pro-Gender	No	Pro-Ethnicity	No	CRF indicator			
Indicator		Unit of Measure	Baseline	Baseline Year	2024		EOP 2024
1.5	Porcentaje de todas las embarazadas diagnosticadas con sífilis con el diagnóstico y tratamiento	%	28.5	2017	P	27	27
					A	-	-
Details							
Means of Verification: Sistema de Monitoreo de la SMSSP							
Observations:							
Evaluation Methodology: -							
Pro-Gender	No	Pro-Ethnicity	No	CRF indicator			
Indicator		Unit of Measure	Baseline	Baseline Year	2024		EOP 2024
1.7	Tasa de atenciones de UE clasificadas por riesgo en los servicios de la RUE	%	53.4	2017	P	90	90
					A	-	-
Details							
Means of Verification: DATASUS							
Observations:							
Evaluation Methodology: -							
Pro-Gender	No	Pro-Ethnicity	No	CRF indicator			
Indicator		Unit of Measure	Baseline	Baseline Year	2024		EOP 2024
1.8	Ratio de consultas médicas básicas programadas/ población	/100 habitantes	80.6	2017	P	90	90
					A	-	-
Details							
Means of Verification: SIA-SUS / SEADE							
Observations:							
Evaluation Methodology: -							
Pro-Gender	No	Pro-Ethnicity	No	CRF indicator			
Indicator		Unit of Measure	Baseline	Baseline Year	2024		EOP 2024
1.9	Porcentaje de pacientes residentes la región norte atendidos en hospitales de la misma región (media complejidad)	%	80	2015	P	80	80
					A	-	-
Details							
Means of Verification: SIH-SUS / SEADE							
Observations:							
Evaluation Methodology: -							

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator		Unit of Measure			Baseline	Baseline Year	2024	EOP 2024	
1.10	Cobertura estimada de Atención Primaria			%	63.3	2017	P	70	70
							A	-	-
Details									

Means of Verification: CNES / SEADE

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator		Unit of Measure		Baseline	Baseline Year		2024	EOP 2024	
1.10	Numero de personas que reciben servicios de salud			Personas	7874680	2017	P	7,996,838	7,996,838
							A	-	-
Details									

Means of Verification: dados oficiais DATASUS

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					

Means of Verification: FONTE DE DADO EDIF-SIURB

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator					
Indicator		Unit of Measure			Baseline	Baseline Year	2024		EOP 2024
1.12	Coeficiente de incidencia de Sífilis Congenita			/1000NV	6.4	2017	P	6	6
							A	-	-
Details									

Means of Verification: dados oficiais DATASUS

Observations:

Evaluation Methodology: -

Pro-Gender	No	Pro-Ethnicity	No	CRF indicator			

RESULTS MATRIX

OUTPUTS: ANNUAL PHYSICAL AND FINANCIAL PROGRESS

Component Nbr. 1 1 - Apoyo a la reestructuración, reorganización e integración de las redes locales de atención a salud

				PHYSICAL PROGRESS		FINANCIAL PROGRESS	
	Output	Unit of Measure		2022	EOP 2024	2022	EOP 2024
1.01	Proyectos arquitectónicos y ejecutivos de las obras	Proyecto	P	-	119	1,881,051.9	5,409,066.79
			P (a)	12	123	391,197.13	1,805,192.46
			A	3	114	230,281.05	1,644,276.38
1.02	Hospital de Brasilandia construído y equipado	Hospital	P	-	1	-	53,248,766.47
			P (a)	-	1	-	49,156,958.76
			A	-	1	-	47,941,844.62
1.03	Unidades Básicas de Salud (UBS) construidas y equipadas	Unidade Basica de Saude	P	13	25	8,340,252.08	22,046,212.26
			P (a)	3	18	10,409,441.87	15,950,533.91
			A	-	-	419,786.49	1,169,140.27
1.04	Unidades Básicas de Salud (UBS) reformadas y equipadas	Unidade Basica de Saude	P	4	77	-	15,721,631.21
			P (a)	17	77	820,828.57	24,488,675.5
			A	14	62	5,242,185.15	28,910,032.08
1.05	Unidades de Pronto Atención (UPA) construidas y equipadas	Unidade Basica de Saude	P	3	14	2,304,844.24	23,237,518.26
			P (a)	1	12	11,678,214.39	20,934,420.37
			A	1	6	146,963.16	9,403,169.14
1.06	Unidades de Pronto Atención (UPA) reformadas y equipadas	Unidade Basica de Saude	P	8	15	100,089.23	18,189,320.22
			P (a)	4	15	4,270,814	17,998,856.56
			A	1	2	767,045.16	5,153,459.72
1.07	Centros de Cuidados Integrados (CCI) reformados y equipados	Centro de Cuidado Integrado	P	-	3	-	6,642,377.98
			P (a)	1	1	874,923.4	1,579,257.97
			A	-	-	159,953.2	586,518.76
1.08	Supervision de las obras nuevas y reformadas	Informe	P	-	-	-	-
			P (a)	12	48	1,071,966.93	2,672,091.32
			A	6	24	565,473.8	1,723,962.5
1.09	Hospital de Parelheiros equipado	Hospital	P	-	1	-	10,695,576
			P (a)	-	1	-	9,462,485.87
			A	-	1	-	9,462,485.87

Component Nbr. 2 2-A - Mejora de la eficiencia y de la calidad del sistema sanitario - Instrumentos para ampliar las capacidades institucionales de la SMS

				PHYSICAL PROGRESS		FINANCIAL PROGRESS	
	Output	Unit of Measure		2022	EOP 2024	2022	EOP 2024
2.01	Consultoría para la evaluación e implementación del centro de salud	informes	P	-	1	-	1,373,333.33
			P (a)	1	2	1,097,335.85	1,097,335.85
			A	1	1	-	-
2.02	Adquisición de una solución analítica para la Gestión de Acuerdos y Contratos	Sistema	P	-	1	398,925.96	606,060.62
			P (a)	-	1	-	484,261.25
			A	-	-	-	-
2.03	Sistemas de gestión de suministros contratados e implementados	Informes de impementación	P	1	3	2,382,437.01	4,391,588.95
			P (a)	-	2	886,026.44	3,509,015.53
			A	-	-	1,594,773.75	1,594,773.75
2.04	Núcleo Estratégico de la SMSSP implementado	Núcleo	P	1	3	418,049.39	916,492.87
			P (a)	-	1	179,864.67	732,306.16
			A	1	1	-	-
2.05	Sistemas de gestión de contratos administrativos contratados e implementados	Sistema	P	1	1	-	484,848.48
			P (a)	1	1	387,408.95	387,408.95
			A	-	-	-	-
2.06	Apoyo a la implementación y capacitación del sistema de almacenamiento de las Unidades de Salud	lformes	P	1	1	55,000	100,000
			P (a)	1	1	97,790.77	97,790.77
			A	-	-	-	-
2.07	Líderes Gestores de las redes capacitados	Gestores	P	50	150	327,192.19	757,575.76
			P (a)	50	150	226,453.06	563,519.74
			A	-	-	-	-
2.08	Profesionales de las redes capacitados	Profesionales	P	1,000	3,500	988,750.99	3,411,190.9
			P (a)	500	2,196	2,031,369.72	4,762,603.43
			A	-	696	-	-
2.09	Consultoría de sostenibilidad	Consultoria	P	-	1	-	200,000
			P (a)	-	1	-	159,589.26
			A	-	1	-	157,788.76
2.10	Consultoría para la evaluación e implementación del sistema de gestión de suministros y contratos administrativos	Consultoria	P	-	1	-	227,272.73
			P (a)	1	1	181,597.95	181,597.95
			A	1	1	-	-

Component Nbr. 3 2-B - Mejora de la eficiencia y de la calidad del sistema sanitario - Mejora continua de la productividad interna y de la calidad del sector salud

				PHYSICAL PROGRESS		FINANCIAL PROGRESS	
	Output	Unit of Measure		2022	EOP 2024	2022	EOP 2024
3.01	Clasificación integrada de riesgos y gestión de articulación de redes	Unida de Salud	P	7	61	825,119.16	5,361,747.54
			P (a)	5	53	1,265,487.26	4,880,151.93
			A	5	53	773,097.43	2,498,631.3
3.02	Integración de los centros de regulación SAMU y Urgencia e Emergencia	Produto	P	1	1	211,075.28	998,838.35
			P (a)	1	1	-	-
			A	1	1	-	-
3.03	Certificación de Unidades de Salud y auditoría de mantenimiento (externo)	informes	P	100	340	260,655.09	892,242.39
			P (a)	40	230	1,398,103.82	3,680,869.25
			A	-	-	-	-

Component Nbr. 43 - Fortalecimiento de la gestión de la información e impulso a la innovación y al uso de nuevas tecnologías en salud

				PHYSICAL PROGRESS		FINANCIAL PROGRESS	
	Output	Unit of Measure		2022	EOP 2024	2022	EOP 2024
4.01	Consultoría y modelos tecnológicos digitales	informes	P	1	3	94,090.9	599,999.99
			P (a)	1	2	-	-
			A	-	1	-	-
4.02	Solución para consolidar y compartir datos clínicos con fines de atención y telemedicina	modulo	P	1	4	1,963,651.05	4,675,000.01
			P (a)	-	7	-	7,400,000
			A	-	7	1,714,180.44	9,996,679.79

Component Nbr. 54 - Administración y Evaluación del programa

				PHYSICAL PROGRESS		FINANCIAL PROGRESS	
	Output	Unit of Measure		2022	EOP 2024	2022	EOP 2024
5.01	Apoyo a la gestión del programa	informes	P	1	5	1,159,569.2	5,079,805.11
			P (a)	1	5	1,262,080.02	4,928,178.24
			A	1	3	520,498.71	2,098,978.27
5.02	Consultoría individual para apoyar UCP en el área de Obras	informes	P	1	5	62,329.05	260,583.37
			P (a)	1	5	48,497.25	215,107.07
			A	1	3	20,955.9	107,611.69
5.03	Consultoría individual para apoyar a UCP en el área de Adquisiciones	informes	P	1	5	65,906.3	260,583.38
			P (a)	1	3	62,828.91	180,401.73
			A	1	2	20,955.9	32,411.79
5.04	Consultoría individual para apoyar UCP en el área Financiera	informes	P	1	5	61,313.74	260,583.38
			P (a)	1	5	47,866.92	215,257
			A	1	3	25,147.08	113,709.75
5.05	Contratación de auditoría	informes	P	1	4	78,787.88	249,999.99
			P (a)	1	4	24,712.37	123,561.83
			A	1	2	26,371.89	51,084.26
5.06	Análisis de impacto	informes	P	1	4	62,540.17	198,444.77
			P (a)	1	2	47,763.54	143,200.62
			A	-	-	-	-
5.07	Evaluaciones intermedias y finales	informes	P	1	4	56,521.74	150,000
			P (a)	1	2	150,000	300,000
			A	-	-	-	-

Total Cost				
	Total Cost	P	28,360,290.83	200,000,000
		P (a)	38,912,573.79	178,090,629.28
		A	12,227,669.11	122,646,558.7

CHANGES TO THE MATRIX					
Section	Name	Type of Change	Sub type	Modified By	Entered in System
Output	Centros de Cuidados Integrados (CCI) reformados y equipados	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ARTHURDO	9/27/2022
	Núcleo Estratégico de la SMSSP implementado	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ARTHURDO	9/27/2022
	Solución para consolidar y compartir datos clínicos con fines de atención y telemedicina	Modify Output	Modify Physical EOP P(a) value - caused by a change in the Physical P(a).	ARTHURDO	9/27/2022

RISKS AND PLANNED RESPONSES

Risk ID	Risk Status		Risk Taxonomy
3	Inactive		Institutional Environment
	Response Actions		
	3.0	Management Strategy	Status
		-	

Risk ID	Risk Status		Risk Taxonomy
6	Inactive		Institutional Environment
	Response Actions		
	6.0	Management Strategy	Status
		-	

Risk ID	Risk Status		Risk Taxonomy
9	Active		Political Environment
	Response Actions		
	9.0	Management Strategy	Status
		-	

Risk ID	Risk Status		Risk Taxonomy
12	Active		Economic and Financial Environment
	Response Actions		
	12.0	Management Strategy	Status
		-	

Risk ID	Risk Status		Risk Taxonomy
15	Active		Legal Environment
	Response Actions		
	15.0	Management Strategy	Status
		-	

Risk ID	Risk Status		Risk Taxonomy
18	Active		Institutional Environment
	Response Actions		
	18.0	Management Strategy	Status
		-	

Risk ID	Risk Status		Risk Taxonomy	
21	Active		Social Environment	
	Response Actions			
	21.1	Management Strategy	Status	
		AVOID	COMPLETE	
	21.2	Management Strategy	Status	
		MITIGATE	COMPLETE	

Risk ID	Risk Status		Risk Taxonomy
24	Active		Economic and Financial Environment
	Response Actions		
	24.0	Management Strategy	Status
		-	

Risk ID	Risk Status		Risk Taxonomy
27	Inactive		Organizational Structure
	Response Actions		
	27.0	Management Strategy	Status
		-	

Risk ID	Risk Status		Risk Taxonomy		
30	Active		Social Environment		
	Response Actions				
	30.1	Management Strategy		Status	
		MITIGATE		COMPLETE	
	30.2	Management Strategy		Status	
		AVOID		COMPLETE	

Risk ID	Risk Status		Risk Taxonomy
33	Inactive		Institutional Environment
	Response Actions		
	33.0	Management Strategy	Status
		-	

IMPLEMENTATION STATUS AND LEARNING

Lesson Learned - Categories
Others - Dimensions Related to Public Processes/ Actors
Others - Fiduciary Dimensions