

Template 2.1: Information that can be collected in desk review

Qualitative Data *(both published and grey literature)*

- Potential sources to review:
 - Health Systems in Transition country report
 - Reports on service delivery and/or human resources
 - Studies previously conducted on health system challenges
 - Strategic plans for health sector
 - Investment cases
 - Government documents
 - Grant submissions
 - External evaluations

Quantitative Data *(collected at both the system and programme level if available)*

- **Overall macroeconomic indicators:** GDP growth rate, GDP per capita, poverty rate, employment rate, inequality, income status, HDI breakdown (World Bank, World Development Indicators), data in the past 5-10 years
- **Health financing** (Source: World Health Organization)
 - Key health financing indicators: current health expenditure per capita, domestic government, out-of-pocket, external as share of current health expenditure
 - SDG 3.8: Coverage of essential health services (3.8.1), proportion of population with large (10 or 25%) household expenditures on health as a share of total household expenditure or income, % of population experiencing impoverishing health expenditure
 - Distribution of health expenditure between disease programmes (WHO Health accounts)
 - Ministry of Health budget/budget execution overview, largest external financing sources and what they are financing, on-budget and off-budget health spending, fiscal space, strategies to increase fiscal space, donor harmonization and donor planning systems
 - Overview of insurance schemes in the health sector: insurance schemes, their target populations, risk adjustment, co-financing/contributory schemes
 - Overview of purchasing in the health sector: procurement policies, benefits package/free services, how services are paid, public good versus personal service financing, financing for health systems components
 - Comparative analysis: comparison of health spending and life expectancy with other similar countries (regional or economically similar)
- **Service delivery and health outcomes**
 - Overall health outcomes: population size, population growth rate, total fertility rate, life expectancy, infant mortality, U5 mortality, maternal mortality, disease burden distribution/snapshot, effective coverage for key communicable and non-communicable diseases, vaccination rates, % of population getting treatment for key diseases (HIV, TB, malaria, hypertension, diabetes, others based on country disease burden), service use by socioeconomic status
 - Service use and provision: % public/private, % primary/secondary/tertiary, service use by socioeconomic status, reasons for not seeking care, inpatient and outpatient service use data,

- Service readiness/quality of care: availability of services, patient satisfaction, adherence to protocols, availability of essential medicines, responsiveness indicators
- SDG monitoring and results
- **Generation of human and physical resources/inputs**
 - Supply chains and procurement: which financing sources procure which commodities, supply chain organization and mapping, essential drug lists, spending patterns on pharmaceuticals)
 - Human resources for health: overview on HR planning and distribution, HR payment, HR policies
 - Infrastructure: capital investments, review of capital investment plans, funding levels for capital expenditures, access (% of population living <5km from a health centre), bed occupancy rates, questions on medical equipment
 - # of information systems
- **Governance**
 - Key governing and managing actors/agencies in the health system, and how they fit in with each other
 - Overall organogram of the health system
 - Decentralized governance structures
 - Responsibility for planning for the sector
 - Overview of important policy documents (health sector strategic plan, disease plans) and how they overlap with each other
 - Overview of planning cycles and monitoring and evaluation processes
- **Efficiencies**
 - Focus on resource allocation across levels, look at administrative efficiency (administrative costs as a share of total health expenditure, vertical programmes and their role in the health system), prices of inputs and how they compare to other countries and prices, over or under-utilization evidence