Day 3 Session 3
Meeting recap & next steps

22-24 June 2022
Victoria Falls, Zimbabwe
Technical session 1 - HFPM overview

• Synthesizes “what works” into “desirable attributes”

• Moves from descriptive to normative/causal

• An instrument (intelligent user who learns how to “play” it) – capacity building dividend

• Provides “close to real-time” information on “how to move the dial”

• Parsimonious - no primary analysis required – depends on other assessments e.g. Ifakara, SPARC, HFSA, AU Tracker, CPEA
Technical session 2: Stage 1

• Landscaping of significant schemes & programmes, including supply side funding, which make up health system

• Note the value of a thorough description – not always straightforward

• Highlights structural fragmentation, overlap, duplication, which is a “drag” on health system performance

• A discussion is required on which to include – long list short list...
Sierra Leone Lessons learned
Abdul N’jai

• Scheme not having clear policy documentation in line with HF
• Use the ongoing health financing strategy process to align different vertical programs under
• Ensure they use the same financial policies and processes as general government financing.
• Align budgeting processes of the different vertical programs with the government budgeting cycle.
Looking at the “big picture” of the budget helps identify the most important programmes.

Smaller programmes/schemes are often sufficiently similar to allow grouping.

At Stage 1, you can already think about what to include to be useful for Stage 2.

You can always dive into more specific details in Stage 2, referring to the descriptions in Stage 1.
CONDUCTING STAGE 2 OF THE HFPM

- Bring quantitative data to strengthen the assessment
- Each question represents a mini maturity model built around 4 progress levels
- Each question is mapped to one or more desirable attributes
- 33 questions distributed across seven assessment areas & mapped to one or more desirable attribute
- Each question is also mapped to one or more objective/goal. Here lies the causality

A closer look at the desirable attributes
Data or Information for HPFM assessment

Areas where we found no good information for assessing progress

- NHIF has some form of periodic assessment but we could not find any such assessment to other schemes included in the assessment.
- DHIS 2 data - shows utilisation of service but does not show which scheme or payment modality the patients uses to enable analysis.
- Health and Management Information system - some schemes have and some does not have.
- Routine analysis for making purchasing decisions - NHIF carry out Prices assessment to inform pricing exercise.
- Weak provider monitoring.
Caribbean reflections –
Stanley Lalta UWI

The HFPM Process is Important

• Process Linked to Expected Outcomes:

  ➢ Contribution to guiding national health financing policy changes i.e. enhancing areas of ‘strength’ & confronting areas of ‘weaknesses (gaps)

  ➢ Developing local capacity to take charge of these.
Implementation session 1

PHASE 1
PREPARATION

PHASE 2
CONDUCTING THE ASSESSMENT

PHASE 3
EXTERNAL REVIEW

PHASE 4
REPORT FINALIZATION & PUBLICATION
PHASE 1: PREPARATION

1.1 Initial briefings & HFPM overview with MoH

1.2 Identification of PI and core team. Also Oversight Team.

1.3 Training and in-depth briefing of PI & core team. *Training course developed*

1.4 Timeline & milestones developed to align with country processes

PHASE 2: CONDUCTING THE ASSESSMENT

PHASE 3: EXTERNAL REVIEW

PHASE 4: REPORT FINALIZATION & PUBLICATION
Explicit capacity-building objective

PHASE 1
PREPARATION

PHASE 2
CONDUCTING THE ASSESSMENT

PHASE 3
EXTERNAL REVIEW

PHASE 4
REPORT FINALIZATION & PUBLICATION

2.1 HFPM Launch Event

2.2 Data / info compilation and template completion

2.3 Review / feedback by Oversight Team

2.4 Assessment considered ready for external review
3.1 Two experts independently review and discuss areas of divergence on rating scale

3.2 External reviewer comments discussed with PI and country team

3.3 Final adjustments to assessment based on consensus score

3.4 Cross-country validation review
4.1 Draft report prepared: key findings & recommendations

4.2 Final report prepared following review & agreement

4.3 Publication of HFPM report (at least three options)

4.4 Event to disseminate findings with key stakeholders
Mauritius external review
Nirmala Ravishankar
Ethiopia challenges and lessons learnt
Ermias Dessie

The different levels can be a distraction – facilitators need to manage discussion

Importance of involving stakeholders – given the complex nature health financing issues

For large & decentralized countries – difficult to arrive at overall, system-level conclusions
Uganda – Conclusions
Elizabeth Ekirapa-Kiracho (Uni Makerere)

- HFPM assessment allows you to appreciate key actions that need to be taken to advance health financing functions - more effective implementation and evaluation of HF
- The assessment needs to be done by a technically competent team.
- The HFPM can inform development, implementation and evaluation of HFS.
# Strategic session 1: Alignment

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<thead>
<tr>
<th>Time</th>
<th>Topic</th>
<th>Presenter/Role</th>
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<tbody>
<tr>
<td>1305 – 1325</td>
<td>AU ALM Agenda &amp; Health Financing Tracker</td>
<td>Paul Booth, Consultant to the ALM</td>
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<tr>
<td>1325 – 1335</td>
<td>Participant Q&amp;A</td>
<td>Moderator</td>
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<td>1335 – 1420</td>
<td>Panel discussion</td>
<td>Panel discussion</td>
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<td>- SADC pilot of AU Health Financing Tracker</td>
<td>Dr. Lamboly Kumboneki, SADC</td>
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<td>- ECSA and HF; potential use of HFPM</td>
<td>Edward Kataika, ECSA</td>
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<td></td>
<td>- AfDB and HF; potential use of HFPM</td>
<td>Robinah Luwango, AfDB</td>
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<td></td>
<td>- Alignment through unified M&amp;E frameworks</td>
<td>Anurag Kumar WB/GFF</td>
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<td>- HF alignment processes in Zimbabwe</td>
<td>Chenjerai Sisimayi, WB Zimbabwe</td>
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<tr>
<td>1420 – 1430</td>
<td>Emerging actions &amp; summary</td>
<td>Moderator with Rapporteur</td>
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## Progress made thus far

**General**
- 2021: SADC Ministers approved the establishment of SADC Regional Hub
- Decision to pilot Tracker in the region
- June 2022: MoU with Global Fund
- 2 consultants recruited

**Tracker**
- SADC-led development of Tracker
- Tracker to be piloted in 3 countries: Malawi, South Africa, Zambia
- Next: Country training
- Timeline: Complete by end-September 2022
- Coordinating with WHO on Matrix

**National HF dialogues**
- Malawi – advanced
- South Africa – preliminary
- Zimbabwe – preliminary
- Early 2023 (exploratory)

**Hubs**
- SADC health financing Hub launch in August 2022
Strategic session 2: Capacity building, evidence to policy & the research agenda

Think in terms of the ToC, and the HFPM value chain from assessment to validation.

All reforms are context-specific – what are the necessary conditions for desirable attributes to hold true?

Need to set up HFPM assessment with high-level commitment, to maximize political commitment.
Strategic session 3: Institutionalization

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<tr>
<td>0830 – 0805</td>
<td>Overview of the session</td>
<td>ADDAI FRIMPONG, Kingsley- WHO AFRO</td>
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<td></td>
<td></td>
<td>2. Justice Nonvignon-Africa CDC</td>
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<td>3. John, Ataguba-AfHEA/Canda</td>
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<td>4. Gordon ABEKAH-NKRUAMA-Univ of Ghana Business School</td>
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<td>5. Gwati Gwati – Ministry of Health, Zimbabwe</td>
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<td>6. Edwine Barasa- keni-welcome</td>
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<td>0845 - 0905</td>
<td>Partner/In-country Academia Reflections on Institutionalization</td>
<td>Moderator</td>
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<td>0905 - 0915</td>
<td>AFRO National Health Account Institutionalization – Approach &amp; Lessons Learnt</td>
<td>Brenda KWESIGA- WHO-Kenya</td>
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<td>0915 – 0945</td>
<td>Country Team Table Discussion</td>
<td>Moderator</td>
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<td>0945 – 1000</td>
<td>General/ Open Feedback/Closing</td>
<td>Moderator</td>
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Co- conceptualize, co-create, co-build. Generate, broker, & translate knowledge

Think in terms of attributes of institutionalization
- Homogeneity
- Compliance
- Permanence
- Determinism

Think in terms of an ecosystem of users and doers:
- Awareness & demand
- Develop capacity

Local adaptation, & possible revision, of the attributes
Health Financing Progress Matrix Country Training 22-24 June 2022, Victoria Falls, Zimbabwe
Thank You