

GAVI Secretariat management response to the GAVI Health Systems Strengthening Support (HSS) Evaluation 2009

10 November 2009

Introduction

This paper provides the Secretariat's response to HLSP's "GAVI Health Systems Strengthening Support Evaluation 2009" of 8 October 2009.

In 2009, the GAVI Alliance Board commissioned an evaluation of GAVI HSS to:

- i) inform the GAVI Board decision in 2010 about whether or not to increase the funding available to the GAVI HSS window;
- ii) improve current and future implementation of GAVI HSS; and
- iii) enhance the quality of the GAVI HSS evaluation planned for 2012.

It was understood that GAVI HSS mechanisms and investments have only been in place for a relatively short time and it is therefore not possible to evaluate outcomes or impact yet. The evaluation necessarily focused on the first few countries that received HSS funding. The period evaluated was December 2005 – December 2008.

The GAVI Secretariat welcomes the evaluation which forms part of our learning process on health systems strengthening. We are pleased that the evaluation identifies a number of successes in our existing HSS support. It provides helpful feedback on HSS support to date, and offers useful recommendations as to how the Secretariat and the Alliance can improve processes. The Secretariat recommends taking stock of necessary improvements, particularly on monitoring. We need to ensure that issues are adequately addressed in any new applications for support and for ongoing programmes. Further, the recommendations provided by the consultants will help shape the introduction of the joint Global Fund for AIDS, TB and Malaria (GFATM), World Bank and GAVI HSS platform.

This response concentrates on areas for improvement and issues for the Secretariat to consider. In some instances, the recommendations have already been addressed. In others, they are matters for the Alliance rather than the Secretariat alone, and consideration needs to be given by the Alliance as to how these should be taken forward. Finally, it is anticipated that most remaining issues will be addressed in 2010, largely as a result of the joint platform.

Summary of Findings

The Secretariat is pleased that the evaluation conveyed several positive findings, which will be built upon and strengthened in any future support.

Of note, the evaluation concludes that, 'GAVI HSS funding has generated tremendous demand from many low-income countries because it can be used for priorities they identify, is delivered through a relatively straightforward and non-competitive application process, and is predictable. It has been launched with considerable speed, and in less than 3 years \$524 million has been committed to 44 countries, and \$255 million disbursed to 36. Although it is early days, indications are that countries are beginning to get relevant activities underway, and that GAVI HSS funding has resulted in a greater focus on needed health systems improvements and on innovations that might not have received funding otherwise. GAVI should build on its strengths make improvements to the business model, and invest further in HSS, as there is real potential to improve outcomes in immunisation, child, maternal services and other areas'.

Other positive findings include:

- Bottlenecks were well identified, and countries set sensible objectives to overcome these;
- Programmes were quite well aligned, were very country driven, and support found to be predictable, therefore complying with key Paris Principles;
- GAVI support addressed real needs, and was not determined by externally driven priorities;
- Countries are beginning to achieve results, but tracking results needs strengthening.

Main areas for improvement:

For countries to maximise the opportunities offered by HSS funding and for HSS funding to be performance based the GAVI business model needs to be adapted to the specific features of HSS interventions. This evaluation has identified issues in three main areas where swift action by the GAVI Alliance and its Secretariat is needed:

- i) insufficient technical support is being provided to HSS grants.
- ii) proposal assessment is not identifying resulting problems.
- iii) weak annual review and reporting are hindering the results-oriented ambitions of the GAVI HSS model.

The issues, followed by a summary of the consultants recommendations are provided below. These are addressed in turn by a Secretariat response.

➤ **Insufficient technical support is being provided to HSS grants**

Issue: *'GAVI HSS operates through a partnership model based, on a distribution of tasks among Alliance partners that, in the case of the Alliance —technical partners'(WHO, UNICEF and World Bank), are outlined in work plans. In practice, this arrangement is not resulting in the high quality technical support for the GAVI HSS process that is needed. The relevance and quality of HSS technical support that partners provide to countries are variable and concentrate on the proposal design and pre-review stages, while it was found to be insufficient or weak for start up and implementation, and for ensuring monitoring mechanisms are in place that produce adequate information for country programme management and for external assessment.'*ⁱ

Consultant Recommendation: *Additional in-house HSS capacity is needed in the Secretariat to assess a country's needs for technical support. This needs to be commissioned appropriately and in consultation with countries. In order to minimise in-house staffing, this could be done in the Secretariat by combining the development of a small HSS unit with strengthening HSS support across relevant departments. Arrangements for contracting technical expertise should be made to ensure that this is the best available. This enhanced capacity and country-differentiated approach should focus on improving programme design, and especially on incorporating stronger specification and costing of plans for monitoring and reporting, start up and implementation, and financial management and accountability.*

Secretariat Response: Since the High Level Task Force on Innovative Financing (HLTF) process started (in March/April) an internal task team on HSS ⁱⁱ has been set up. It has been meeting weekly, to look more systematically at coordination issues internally, and externally. We do not feel that building up a separate unit is the best way to address the weaknesses identified. This is partly because understanding of HSS is important across the Secretariat, and partly because we need to manage the Secretariat's costs carefully. It is preferable to strengthen HSS capacity with use of existing staff; to ensure that new hires, particularly in the Programme Delivery Unit have relevant HSS expertise, and to continue with a cross Secretariat HSS team. In developing the new strategy, and looking at the workplan, there should be a review of how resources passed to Alliance partners are spent, and what the results are from this. In future, these resources might be better deployed through a variety of contracting and in-house arrangements. The joint platform will also produce some efficiencies and economies of scale.

The report recommends a more direct Secretariat involvement with countries including country presence. This is inconsistent with the current GAVI model, with a light touch secretariat. The study recommendation would move GAVI towards a

more traditional donor model. This is neither consistent with current GAVI principles nor aid effectiveness principles and would involve a significant change in the way the Alliance works.

The joint platform will provide the capacity to engage more directly with countries given the technical and financial management capacity provided by the WB and the GFATM in the countries.

The Secretariat will focus technical support on existing grants to ensuring that more output and outcomes measures are built into the monitoring and evaluation frameworks. Some work needs to be done to identify what technical resources are available from within workplan budgets, and to open a dialogue about refocusing these resources on monitoring and evaluation.

➤ **Proposal assessment is not identifying resulting problems**

Issue: *'A second area for improvement in the current GAVI HSS process concerns the assessment of proposals for grants. Though perhaps providing a degree of impartiality, the Independent Review Committee (IRC) process requires redesign. In its current form it is too distant and removed from country realities to provide a realistic evaluation of proposals, and is unable to provide much useful support to countries to improve programme design.'*ⁱⁱⁱ

Consultant Recommendation: *Modify the process so that it takes place more in country. GAVI might need to subcontract the process to an intermediary, as it would be too unwieldy to redeploy the IRC.*

Secretariat Response: We agree with these recommendations and they will be taken forward through the joint platform. The joint platform proposals envisage that much more of the process takes place in country and is much lighter touch. In countries with more robust IHP+ processes or using IHP+ principles, it is anticipated that IRC (and Technical Review Panel (TRP), GFATM members) could join the joint assessment process in country, and make a recommendation to the Secretariat to put forward to the Board. The preference will be to use existing processes and expertise, but if adequate expertise is not available on the existing IRC/TRP, some consideration could be given to outsourcing.

The Secretariat has started a review of the IRC, which will assess the strengths and weaknesses of the current procedures and provide recommendations on a possible restructuring of the roles and responsibilities, including options for better harmonising and aligning the IRC process with countries' planning and budget cycles. This will also increase GAVI's compliance with aid effectiveness principles.

One option would be a modified process that takes place more in countries. As deployment of IRCs at country level would be unwieldy and expensive GAVI might

consider to contract this function to an intermediary able to provide and quality control a team of experts, one or two of who would assess proposals in country, working supportively with country teams to improve programme design, but ultimately be responsible for providing an objective assessment to the GAVI Secretariat.

➤ **Weak annual review and reporting**

Issue: *‘There is room for improving the performance review. There are not adequate opportunities for validating data, or for contributing meaningfully to the monitoring and reporting capacity and process.*

Despite worthy efforts by committee members, the IRCs assembled annually in Geneva are unable to interrogate countries on the Annual Progress Reviews (APRs) submitted, to validate the data these reports contain (data should be more thoroughly validated in country, but is not), or to contribute meaningfully to improving the monitoring and reporting capacity and process.’^{iv}

Consultant Recommendation: *Undertake the performance review more at country level, as is done with grant assessment. Since, it is not possible to convene IRCs in each and every country on an annual basis, it may be advisable to contract the performance review function to an intermediary able to supply one or two HSS experts to undertake this in country and tailor it to country planning, review and budgeting cycles.*

The costs of implementing these recommendations are estimated to be roughly similar or even less than those currently paid by GAVI to technical partners and for convening the IRCs.

Consultant Recommendation: *Modify the process to take place more at country level. Consider contracting independent expertise to participate in review processes in line with the country cycle.*

Consultant Recommendation: *Require countries (and those providing technical support) to adopt indicators that measure HSS outputs not just immunisation and health outcomes/impact. These should link objectives to activities and outputs e.g. increased service uptake, more regular supervision visits, reduced attrition rates in remote facilities. They should be programme-specific and realistically within individual country capacity to monitor rather than an indicator set common to all GAVI HSS funded programmes. This will improve programme monitoring and therefore programme performance, and allow better attribution of results to GAVI HSS inputs.*

Consultant Recommendation: *Provide technical support to work retroactively with countries with current grants to achieve these improvements in indicators and monitoring arrangements.*

Secretariat Response: The joint platform has, to some extent, anticipated this recommendation. GAVI was moving to explore how to line up with IHP+ type processes at country level. GAVI has participated in the IHP+ monitoring group to ensure that immunisation outputs and outcomes are adequately reflected in the overall recommended indicators. In countries where annual review processes are in place, GAVI already either participates directly, or Alliance partners do. As noted above, a review of the monitoring IRC has already been commissioned. It is recognised that this is one part of the GAVI business model that is at variance with other funding agencies models (e.g. GFATM or the World Bank). Also, the evaluation identifies mutual accountability and management for results as the aid effectiveness principles GAVI is weakest on, and implementing these recommendations strengthens GAVI performance in these areas.

The joint HSS platform would ensure the needed capacity to engage more directly with countries in developing and reporting on more comprehensive monitoring frameworks, which provide a clear link between activities, outputs, outcomes and impact.

The GAVI model involves learning by doing. The Board was aware of some risks when it approved investment in HSS. We have learnt that simplicity and flexibility are important elements of GAVI's approach. There is still room for improvement, including more alignment with country planning and budgeting cycles. The Joint HSS platform provides an opportunity to improve in these areas.

Global vs. country level review – The Board/EC had initially considered both options but decided to accept a global level review of country proposals. The evaluation identifies some issues with the IRC approach, and global level review. It may well be that some countries will indeed benefit from a country level review, especially in countries with a mature SWAp and regular annual sector reviews. Fragile countries may benefit from alternate approaches.

HSS Reporting – The guidelines on monitoring encourage countries to report on implementation using the annual sector review report. The challenge has been that it is not always clear from the report how GAVI HSS is impacting on country progress. Again the joint platform offers the opportunity for GAVI to be engaged in the health sector from planning to implementation, monitoring and evaluation.

There was a review of the annual progress report and monitoring processes in early 2009 and the monitoring IRC in 2009 made various recommendations on the ongoing implementation and support required on a country by country basis. GAVI secretariat will continue to work with the monitoring IRC to ensure recommendations are taken into account and adopted.

Additional areas for improvement:

➤ Rounds based approach

Issue: 'Programmes are very much country-driven, and most are aligned with national policies and sector strategies (if not so much with country processes and planning cycles).'^v

Consultant Recommendation: *Ensure that consideration is given to more continuous funding in line with country planning and budgeting cycles.*

Secretariat Response: The Secretariat agrees with this recommendation and with the possible support for the joint platform that focuses on national health plans aligning support with country budget cycles, this issue should be resolved (See also response to 2.2).

➤ Stronger links between objectives and outputs and outcomes and indicators

Issue: 'Current core GAVI HSS outcome/impact indicators are affected by too many confounding variables or too removed from the downstream interventions that the GAVI HSS typically supports.'^{vi}

Consultant Recommendation: *Countries need to focus more on outputs and outcomes and link objectives to these measures. This needs to be more tailored to the country context.*

Secretariat Response: The Secretariat agrees with this recommendation, which will strengthen GAVI's management for results. It has been closely involved in developing monitoring and evaluation frameworks in the IHP+ context, and has also started work on a more in depth look at what performance based financing for HSS would mean.

➤ Future of HSS task team

Issue: 'The Task Team was established to advise the Secretariat, although in practice its reporting structure is not clear. In the early days of GAVI HSS, the task team played a major role in initiating and getting things done, with members happy to assist where they could and in the absence of a real GAVI HSS staffing.'^{vii}

Consultant Recommendation: *Replace the HSS Task Team with a small HSS advisory team, chaired by GAVI and with clear reporting lines to GAVI. WHO, UNICEF and World Bank representatives should be present only as members to offer advice and to retain communication channels with their agencies.*

Secretariat Response: The Secretariat agrees with this recommendation. The HSS Task Team provided valuable support in the early days of HSS implementation, and

provided access to a range of technical resources that were not available in the Secretariat. The Task Team has also taken a forward look, in the new programming and funding environment, which will inform the future of GAVI HSS. For the future, in relation to the joint platform work, and taking account the different governance arrangements that are now in place, something different is needed. An advisory team which has clear accountability lines, and could also be drawn from a pool of different advisers for different needs, would be one possible way forward.

➤ **Financial management and risk mitigation**

Issue: 'Neither the financial nor the programmatic risks are being controlled adequately through the partnership model and it is clear that GAVI cannot rely solely on other institutions within the partnership to control its HSS-related risk.'^{viii}

Consultant Recommendation: *The Secretariat needs to take more control of financial and programmatic aspects of HSS support to reduce risk, to ensure effective investments, and to achieve more accountability whilst retaining its flexibility for countries. A more pro-active and differentiated engagement with countries is required throughout all stages of the HSS process.*

Secretariat Response: The GAVI Alliance has already, through the implementation of a Transparency and Accountability Policy, started tightening up considerably in the area of fiduciary risk by improving financial reporting and monitoring from countries and undertaking Financial Management Assessments (FMAs) of all new cash based applications prior to the release of the funding. GAVI aims to conduct FMAs in all countries within a defined period.

The joint platform would facilitate a harmonised and country driven approach to the provision of technical support and improving programme design, monitoring and reporting, implementation start up, and financial management. There would be real benefits in being able to draw on the expertise of the World Bank, and others with a country presence.

➤ **Delay any new HSS submissions and approvals until proposed changes are put in place**

Consultant Recommendation: *Engage proactively with countries on addressing all the issues above and consider delaying approval of new HSS submissions whilst these proposed changes are put in place. Existing grants should continue (barring major misuse, etc) and be strengthened and all second generation HSS grants should incorporate the changes proposed here to benefit from the learning gained from this evaluation and from other sources.*

Secretariat Response: The Secretariat agrees with this recommendation. This is a timely recommendation as the board has an opportunity to give direction for the strengthening of GAVI Alliance systems support that takes into consideration the evaluation, the tracking study and lessons learnt from the task team. This may be included in the joint platform. Depending on the Board decision in November 2009, any new funding should be programmed in line with country cycles, but following a rigorous joint assessment process, and confirmation that the monitoring and evaluation framework is sufficiently robust to provide information on performance.

ⁱ HLSP HSS Support Evaluation 2009, Vol 1 Key Findings and Recommendations, p6

ⁱⁱ Including Programme Delivery, Policy and Performance, Legal, Executive Office, External Relations and Finance

ⁱⁱⁱ HLSP HSS Support Evaluation 2009, Vol 1 Key Findings and Recommendations, p7

^{iv} Ibid, p7

^v Ibid, p5

^{vi} Ibid, p7

^{vii} HLSP HSS Support Evaluation 2009, Vol 2, Full Evaluation Report, p85

^{viii} HLSP HSS Support Evaluation 2009, Vol 1 Key Findings and Recommendations, p6