

HSS REVIEW MANAGEMENT RESPONSE					
Business Owner		HSIS Team			
Evaluation Title		Health System Strengthening (HSS) Review			
Evaluation Year		2018			
Evaluation Purpose		To review available information to demonstrate results of Gavi HSS support, identify challenges and inform future implementation			
Evaluation Objectives		Show results on how Gavi HSS support contributes to (a) increasing immunisation coverage and equity, (b) strengthening health systems to deliver integrated primary health care and (c) improving sustainability of national immunisation programmes			
Overall Response to the Evaluation		The HSS review has provided us with an insightful synthesis of Gavi's HSS support over time, including interesting findings around HSS design, implementation and results, supported through both quantitative and qualitative analysis. Most importantly, these findings will help to inform the ongoing funding policy review which will determine what changes are needed to Gavi's HSS support within the context of the wider Gavi 5.0 Strategy for 2021 - 2025. The quantitative findings have been based on an analysis of 77 countries receiving Gavi disbursements since 2000, including HSS disbursements since 2007 and looked in detail at 15 HSS grants approved from 2014 - 2016. As a result, it is important to note in this management response that some of the findings do not reflect the latest tools or approaches that have since been developed to support HSS grant design, implementation and measurement of results as part of Gavi's 2016-2020 strategy.			
KEY FINDINGS, RECOMMENDATIONS and ACTIONS					
Finding 1		<p>- The design of HSS grants is country-driven which fosters ownership and investments into country priority areas. However, it also creates uncertainties about the catalytic role of investments to support improvements in the health system such that they can increase coverage and equity in a sustainable way.</p> <p>- Overall, countries include objectives and activities related to coverage and equity in HSS grant design. However, they often lack a logical framework/pathway showing the process by which they would actually translate into better coverage and equity.</p>			
Recommendation		<p><b>(1) Immunisation coverage and equity</b></p> <p>- Require countries to strengthen documentation about how they will increase coverage and improve multiple dimensions of equity. The assumptions subjacent to the choice of proposed activities and the intermediate results leading to coverage and equity should be more clearly delineated in HSS proposals.</p> <p>- Provide additional guidance to countries about evidence-based decision-making, using the most updated knowledge about cost effectiveness and feasibility of Health Immunization System Strengthening interventions.</p>			
Management Response ( <i>Agree, Partially Agree, Reject</i> )		Agree			
If recommendation is rejected/partially accepted, indicate reasons:		Gavi's HSS support is necessarily intended to be catalytic, targeted at key bottlenecks to achieving equity in immunisation. Given the size of Gavi's HSS grants, this means a robust and strategic theory			
Actions planned	Gavi Lead Team	Partner Agency (if applicable)	Expected Completion (MM/YY)	Implementation status	Comments
1. Gavi Secretariat is exploring the use of a Theory of Change or Results Framework to better link objectives and activities to intermediate results indicators in the Gavi Grant Performance Framework (GPF)	Health Systems & Immunisation Strengthening		01/12/2019	Ongoing	To strengthen the linkage between HSS proposals and the GPF, both M&E and HSIS teams will undergo a joint review of grant design as well as the monitoring framework. Actions plans will be developed with expected implementation in Q3 and Q4 2019. Concurrently, efforts are underway to support Country Teams in the documentation of theories of change. This process will allow the Gavi Alliance to see if current investments are addressing identified bottlenecks and if the logical pathway holds.
2. Programming Guidance has been developed in different technical areas (data, supply chain, demand generation, etc.) to provide guidance to countries on investments expected to lead to improvements in coverage and equity	Health Systems & Immunisation Strengthening		Completed	Completed	Programming Guidance has been made available on the Gavi website to aid countries with design of HSS support. Guidance is updated periodically with changes to Gavi policy or additional evidence on high impact investments in HSS.
3. The Funding Policy Review will review and update the current HSIS Support Framework to improve Gavi's non-vaccine funding model, including its implementation in the next Gavi strategic period (2021 - 2025)	Policy		01/12/2020	Ongoing	The Funding Policy Review will review programming of HSS support and targeting towards coverage and equity. According to recent guidance from the Board Retreat (3/2019), there should be a focus on targeting underimmunised populations and zero-dose children. The Funding Policy Review will also consider how to use non-vaccine support to catalyse domestic funding to strengthen health and immunisation systems.
4. The Gavi Secretariat is planning to increase the quality requirements around workplans and enforce their requirement as a condition of the HSS proposal, to understand how grant objectives will be achieved	Health Systems & Immunisation Strengthening		01/12/2019	Ongoing	This work will build on the WHO and UNICEF led workstream to strengthen EPI annual operational workplans and multi-year national plans. These will ideally serve as the basis for the Gavi HSS grant workplan.

<p>5. The HSIS team is updating their Coverage &amp; Equity assessment guide to have a better understanding of HSS grant logical flow from identified bottlenecks to objectives, to activities and to indicators for measuring results.</p>	<p>Health Systems &amp; Immunisation Strengthening</p>		<p>01/12/2019</p>	<p>Ongoing</p>	<p>The HSS grant and GPF quality assessment tool is being finalised with input from the M&amp;E team, and will be used to assess ongoing HSS grants active in 2019. There is also an ongoing effort to better plan coverage and equity assessments for countries with an upcoming Full Portfolio Planning (FPP)</p>
<p><b>Finding 2</b></p>	<p>- Gavi HSS grants do not have the capacity nor the intention to drive the integration of Primary Health Care (PHC) services, and Gavi's contribution to HSS is highly dependent on the opportunities provided by the planning and funding of wider initiatives. - Gavi is well positioned in the landscape of external financing for health when the full weight of its total contribution is considered. On their own, HSS grants do not constitute a substantial portion of country financing for health or routine immunization.</p>				
<p><b>Recommendation</b></p>	<p><b>(2) Integrated PHC</b> Provide further guidance to countries and country teams about the benefits and the potential opportunities to foster the integration of immunization programs with other PHC services</p>				
<p><b>Management Response (Agree, Partially Agree, Reject)</b></p>	<p>Partially agree</p>				
<p><b>If recommendation is rejected/partially accepted, indicate reasons:</b></p>	<p>The Gavi Board has historically indicated that HSS funds should not fund integration, but instead leverage immunisation delivery as a platform for strengthening overall PHC. Currently, this is encouraged in the 2019 Gavi application guidelines which emphasise the importance of integration of immunisation with other health interventions, which is relevant for both HSS support planning as well as Vaccine introduction grants (VIG) and Operational support for campaigns (OPS) (see p. 4 - 5 of Application Guidelines for all Types of Gavi Support).</p>				
<p><b>Actions planned</b></p>	<p><b>Gavi Lead Team</b></p>	<p><b>Partner Agency (if applicable)</b></p>	<p><b>Expected Completion (MM/YY)</b></p>	<p><b>Implementation status</b></p>	<p><b>Comments</b></p>
<p>1. Gavi is working to further align HSS grant processes and content with Global Fund support in order to leverage other donor funding for additional disease specific and PHC related investments</p>	<p>Health Systems &amp; Immunisation Strengthening</p>	<p>Expanded Partner</p>		<p>Ongoing</p>	<p>Ongoing work to strengthen Gavi and Global Fund collaboration for Full Portfolio Planning process, joint use of Resilient and Sustainable Systems for Health (RSSH) Dashboard, and priority countries for dialogue on integration of health services. Gavi and GF are currently collaborating in a number of countries and efforts are underway is to make this more systematic across countries. In cases where it is relevant, we join other partners in pool fund mechanisms, which help better integration of donor support. Gavi is also exploring how to strengthen collaboration and alignment with Global Financing Facility.</p>
<p>2. The Funding Policy Review will review and update the current HSIS Support Framework to improve Gavi's non-vaccine funding model, including its implementation in the next Gavi strategic period (2021 - 2025)</p>	<p>Policy</p>		<p>01/12/2020</p>	<p>Ongoing</p>	<p>The Funding Policy Review will review the focus of non-vaccine support, including HSS, and consider how to best leverage this funding to drive integration of immunisation with other PHC services and investments, and strengthen immunisation services as a platform for broader PHC delivery. The guidance from the Board Retreat (March 2019) is to focus on extending services to zero-dose communities in Gavi 5.0, which will require further thinking on how to achieve in an integrated manner during operationalisation of the new funding policy.</p>
<p>3. Gavi is involved in the implementation of the Global Action Plan (GAP) for the achievement of health related Sustainable Development Goals.</p>				<p>Ongoing</p>	<p>Gavi is one of the signatories to the Global Action Plan and actively engaged in discussions on how to strengthen collaboration between agencies including as part of the PHC accelerator. We are currently discussing how to better to align planning processes to develop a more coordinated approach to PHC strengthening.</p>
<p><b>Finding 3</b></p>	<p>- This review suggests that Gavi HSS support contributes to a slight increase in immunization coverage rates, independently of country contextual circumstances. The strength of the association increases with time from the point of HSS fund disbursement. - HSS grants' contribution to sustainability is constrained by the "project-cycle" logic, often addressing immediate bottle-necks, rather than long term interventions for sustainable system changes across the transition phases.</p>				

	<b>(3) Sustainability of national immunization programmes</b>				
	<ul style="list-style-type: none"> <li>- Approaching HSS investments with a longer term perspective as it is difficult to identify or even measure health system change on a project cycle timeline.</li> <li>- Encouraging the design of Gavi-funded HSS grants as a continuum across transition phases, with commitments and objectives beyond the life of grant, and in alignment with country multi-annual planning cycles.</li> <li>- Adopting time bound milestones for the development of key programmatic and financial management capacities on the part of Governments.</li> <li>- Refining the transition policy by adopting criteria to identify up-front countries requiring not only an extended transition, but also specific interventions to ensure sustainable management of their immunization programs after graduation.</li> <li>- Fostering milestones for the domestic contribution to Routine Immunization expenditures of medium and long term milestones planning.</li> </ul>				
<b>Recommendation</b>					
<b>Management Response (Agree, Partially Agree, Reject)</b>	Agree				
<b>If recommendation is rejected/partially accepted, indicate reasons:</b>	Gavi HSS support is designed to align with national health plans/strategies which are typically five years in duration. The HSS grant timeline is not dependent on Gavi funding cycles or windows, and often country HSS grants will bridge the five year Gavi Alliance strategic period.				
<b>Actions planned</b>	<b>Gavi Lead Team</b>	<b>Partner Agency (if applicable)</b>	<b>Expected Completion (MM/YY)</b>	<b>Implementation status</b>	<b>Comments</b>
1. Sustainability tracers have been developed between the HSIS and IF&S teams in order to better measure country programmatic and financial sustainability for a successful transition. As a next step, the visibility, reporting and use of these tracers needs to become streamlined within CP to inform decision making and grant management	Immunisation Financing & Sustainability			Ongoing	The HSIS and IF&S teams are working to better define programmatic sustainability (PS) and use to support countries. This includes finalising a common definition of PS, developing tracer metrics to measure and define various levels of performance in strategic areas, and outlining an approach for engaging countries that do not meet various levels of PS. This work will be integrated into wider discussions and planning for Gavi 5.0.
2. WHO and UNICEF are leading ongoing work in the redesign of country multi year plans for immunisation (cMYP) as well as the strengthening of EPI annual operational plans (AOP), in collaboration with Gavi	Immunisation Financing & Sustainability	WHO		Ongoing	Having strong national plans for immunisation, and high quality EPI annual operational plans will improve country ability to better design and implement Gavi HSS support, will move away from donor supported project-cycles towards national planning cycles, and will promote longer term financial and programmatic sustainability
3. The Funding Policy Review will review and update the current HSIS Support Framework to improve Gavi's non-vaccine funding model, including its implementation in the next Gavi strategic period (2021 - 2025)	Policy		01/12/2020	Ongoing	The Funding Policy Review will review grant architecture, project cycle timelines and programming, exploring: the possibility of modifying the current 3-5 year project cycle approach; considering ways in which non-vaccine support can be used to build programmatic sustainability; progressively moving from funding system 'support' to 'strengthening' over time; and as above, the review will also look at how to use non-vaccine support to catalyse domestic funding to strengthen health and immunisation systems. Recent guidance from the Board Retreat (3/2019) also recognised that reaching under-immunised populations will take a longer timeframe to achieve impact. The Eligibility and Transition Policy is also in scope in the Funding Policy Review, and as an example, will explicitly look at whether to extend transition timelines for countries in accelerated transition with major gaps in their programmatic sustainability. Given that the Funding Policy Review is part of broader Gavi 5.0 operationalisation work, grant management processes and tools will also be reviewed in line with 5.0 directions and policy changes.
4. Gavi has implemented a stream of work on Leadership, Management and Capacity (LMC) as a deliberate approach to build management capacity at the country level to help improve implementation of Gavi support and promote longer term programmatic and financial sustainability.	Country Programmes			Ongoing	There is a high demand for Leadership, Management and Capacity support and to date implementation is ongoing in 36 countries within two years. Based on documentation of early learning conducted in Q4 2018, we are currently refining the approach for better impact. These include scaling sub-nationally, identifying local/regional institutions for partnerships in order to ensure sustainability, developing dashboards based on grant performance framework for better monitoring of programme and linking with capacity building efforts in financial management at the country level.

<b>Finding 4</b>	Multiple dimensions of fragility are associated with vaccine coverage, suggesting that stronger states tend to have higher coverage. Additionally, an inverse association was found between vaccine coverage and the indicator that relates to "Citizen Participation in selecting Government", and "Freedom of expression".				
<b>Recommendation</b>	<b>(4) Fragile countries</b> Provide additional guidance to countries and Gavi's secretariat for addressing health system weaknesses frequently encountered in contexts of fragility. This guidance may include topics as sub-national approaches to address imbalances in access to immunisation services, investment in commodities and operational for humanitarian and development assistance settings, and articulation of immunisation strategy during and post conflict.				
<b>Management Response (Agree, Partially Agree, Reject)</b>	Agree				
<b>If recommendation is rejected/partially accepted, indicate reasons:</b>	Updated Fragility, Emergencies, Refugees Policy approved in 2017 which addresses some of these recommendations				
<b>Actions planned</b>	<b>Gavi Lead Team</b>	<b>Partner Agency (if applicable)</b>	<b>Expected Completion (MM/YY)</b>	<b>Implementation status</b>	<b>Comments</b>
1. Gavi Fragility, Emergencies and Refugees (FER) Policy approved in June 2017	Policy		Completed	Completed	Gavi's FER Policy provides a range of flexibilities for countries facing fragility (based on relevant data sources) - that are explored pro-actively with the country, but can include for example: additional HSS support above the country allocation; alternative use of funding (outside of the guidance provided in the HSIS framework); or a bridge grant to meet immediate needs between two HSS grants.
2. The Funding Policy Review will review and update the current HSIS Support Framework to improve Gavi's non-vaccine funding model, including its implementation in the next Gavi strategic period (2021 - 2025)	Policy		01/12/2020	Ongoing	The Funding Policy Review will consider elements of the FER Policy impacted by Gavi 5.0, such as options to mainstream approaches to countries facing fragility. The review will also consider HSIS programming, such as targeting of support to sub-national areas, and the balance of funding system 'support' to 'strengthening' over time for countries in different contexts, including fragility. The Board has also highlighted the focus on zero-dose communities and emphasised the need for tailored approaches to different contexts including fragile settings.
3. Programming Guidance to be developed for Fragile Countries, which will complement existing programming guidance in different technical areas (data, supply chain, demand generation, etc.)	Health Systems & Immunisation Strengthening		01/12/2019	Ongoing	Programming guidance to be developed for fragile countries in order to assist them in designing new HSS support, or reprogramming existing HSS support, to better address health systems constraints within each specific country context.
<b>Finding 5</b>	<p>- The best available information about the HSS grants is in the grant proposal and table of planned activities. These are well aligned with Gavi's strategic focus areas.</p> <p>- Whereas no specific guidance is available to identify immunization program under-achievement, the country teams have sufficient flexibility to reallocate Gavi HSS budgets in case of need.</p> <p>- Gavi has successfully implemented the Grant Performance Framework as a tool for country-specific monitoring. However, it lacks standardisation of indicators, specifically on processes and intermediate results and thus does not support a comparison across countries at these levels.</p>				
<b>Recommendation</b>	<b>(5) Information to monitor HSS results</b> - Require that grant proposals identify indicators for processes and intermediate results that are linked to key objectives/activities. These links should be consistent with the theory of change adopted. Considering the currently high number of tailored indicators reported to the GPF, this improvement is unlikely to increase the reporting burden for countries. - Engaging in a technical discussion with countries to accelerate the use of well-established standards, including but not limited to definition of indicators and data sources, predefined analytical approaches and routines to assess data quality. The adoption of standards will enable a wider discussion and cross-country learning.				
<b>Management Response (Agree, Partially Agree, Reject)</b>	Partially Agree				
<b>If recommendation is rejected/partially accepted, indicate reasons:</b>	Programming guidance on Data does exist to guide countries on well-established standards, indicator definitions, and data sources, to be used in HSS grant development. Current guidance to countries already does require them to link indicators to specific HSS grant objectives in the GPF.				
<b>Actions planned</b>	<b>Gavi Lead Team</b>	<b>Partner Agency (if applicable)</b>	<b>Expected Completion (MM/YY)</b>	<b>Implementation status</b>	<b>Comments</b>

<p><b>1. The Monitoring, Data Systems and Strategic Information team (MDS) has worked with the HSIS team to develop an HSIS metrics catalogue to help standardise intermediate results indicators across Gavi supported grants</b></p>	<p>Country Monitoring and Measurement</p>		<p>Complete</p>	<p>Ongoing</p>	<p>The HSIS metrics catalogue has been finalised and is available now in French and in English (publication on the Gavi website is forthcoming). Revisions to the GPF guidelines have been made; countries are strongly encouraged to use the HSIS metrics catalogue to guide the selection of tailored indicators. Rationale will need to be provided if indicators outside of this menu are proposed. Annual revisions are expected to be made on the catalogue based on available new guidance.</p>
<p><b>2. Data programming guidance is provided online as a reference tool for HSS grant development</b></p>	<p>Health Systems &amp; Immunisation Strengthening</p>		<p>Complete</p>	<p>Completed</p>	<p>Data programming guidance includes potential investment areas for improving data quality, availability and use, illustrative intermediate results indicators, and suggested data sources</p>
<p><b>3.</b></p>					