Hand flowing mapping exercise and development of collaborative work program to address key bottlenecks. Following on the methodology piloted through the SFA activity, a mapping exercise will map the hand flow for health and immunization in Côte D’Ivoire so that counterparts develop an understanding of where there are opportunities to reduce bottlenecks in funding. For example, the mapping exercise will help track flow from development partners to government at independent entities, from nongovernmental organizations and other vertical programs, and through levels of the system, down to service delivery of immunization. There will also be an in-depth look at budget execution rates, challenges with EIMs, cost accounting, and planning processes in the country to reduce fragmentation across development partners and across levels of the system. Following the mapping, the focus will be development of collaborative work programs to be implemented over the course of six months to address bottlenecks. To make these reforms sustainable and to move beyond capacity building, the WBG will convene a working group of government officials from Ministry of Finance, Health, Planning, and various vertical programs, including GAVI as well as development partners to launch a work stream that will aim to drive new ways of working together on a collaborative program to improve budget execution and reduce fragmentation. This joint planning program will be implemented over a six month period and will contribute to hand fragmentation.

**TOTAL**

208,080
leadership and Coordination

The leadership and Coordination team, under the guidance of the DGS, will ensure the effective coordination and management of the DGS and its activities. The team will:

1. Establish a practice of informal check-ins and iterative working relationships by facilitating weekly team meetings/check-ins, and regular peer coaching.

2. Update or develop the DGS manual of procedures to include processes on program coordination, monitoring and evaluation across vertical health programs.

3. Identify complementarities with the World Bank Program Management Unit with the aim to streamline programme management through the DGS.

4. Press the leadership and Coordination team to circulate information amongst the various stakeholders, including the various sub-committees.

5. Ensure that the DGS in its capacity as an Alliance Partner, under the pursuance of the DGS more priority programs in the near future.

The Management Partner will set out for each workstream to ensure the easy tracking of progress. A first evaluation of the KPIs designed for the DGS will be conducted to achieve quick wins.

Guiding the Worksteam

The Management Partner will define the coordination processes within the DGS and the financial mechanisms within the DAF for management of external funds. 

1. The new procedures for the DAF will be tested and refined.

2. The new procedures for the DAF will be tested on the HSS funds.

3. The tools will be tested incrementally, starting with the DGS program.

4. Additional staff has been recruited within the DGS and the DAF.

5. The coordination mechanism and tools are in place for the DGS.

6. The financial management support (KPI) is in place and monitors the DAF, DGS and programs.

7. The new procedures for the DAS will be tested and refined.

8. The new procedures for the DAS will be tested on the HSS funds.

9. The tools will be tested incrementally, starting with the DAS program.

10. The new procedures for the DAS will be tested on the HSS funds.

Leadership and Coordination

The leaders in the DGS and DAF will be developed to lead conversations and facilitate working relationships, especially at the ministerial level. The new procedures for the DGS will be tested and refined.

leadership and Coordination

The leadership and Coordination team will:

1. Manage delivery of key work streams with the objective of achieving quick wins and leveraging the demonstration effect to lead to new ways of doing business.

2. Update or develop the DGS manual of procedures to include processes on program coordination, monitoring and evaluation across vertical health programs.

3. Identify complementarities with the World Bank Program Management Unit with the aim to streamline programme management through the DGS.

4. Press the leadership and Coordination team to circulate information amongst the various stakeholders, including the various sub-committees.

5. Ensure that the DGS in its capacity as an Alliance Partner, under the pursuance of the DGS more priority programs in the near future.

The Management Partner will set out for each workstream to ensure the easy tracking of progress. A first evaluation of the KPIs designed for the DGS will be conducted to achieve quick wins.

Guiding the Worksteam

The Management Partner will define the coordination processes within the DGS and the financial mechanisms within the DAF for management of external funds. 

1. The new procedures for the DAF will be tested and refined.

2. The new procedures for the DAF will be tested on the HSS funds.

3. The tools will be tested incrementally, starting with the DAF program.

4. Additional staff has been recruited within the DGS and the DAF.

5. The coordination mechanism and tools are in place for the DGS.

6. The financial management support (KPI) is in place and monitors the DAF, DGS and programs.

7. The new procedures for the DAS will be tested and refined.

8. The new procedures for the DAS will be tested on the HSS funds.

9. The tools will be tested incrementally, starting with the DAS program.

10. The new procedures for the DAS will be tested on the HSS funds.

Leadership and Coordination

The leaders in the DGS and DAF will be developed to lead conversations and facilitate working relationships, especially at the ministerial level. The new procedures for the DGS will be tested and refined.