Participants
GAVI, EC, Sudan, Civil Society North & South, DFID, UNICEF, WB, WHO.

ACTIONS:
- Core Team to draft a short communications piece about IHP+ to global health leaders.
- 4th Country Health Teams Meeting (CHTM): Core Team to circulate a first draft agenda within 2 weeks, for feedback, and to have a mature draft ready for October ET meeting.
- ET to email feedback on FM harmonization (including proposal for members of the technical FM working group) to Iraj Talai, italai@worldbank.org (copied Phyllida and Finn), by October 12.
- Iraj Talai to provide update on FM harmonization at next ET meeting.

Agenda

1. Meeting of Agencies at UNGA, and Implications for IHP+: update from Nicole Klingen, Acting Director, Health, Nutrition and Population, World Bank
Global leaders from major development agencies (including UNFPA, UNICEF, GAVI, USAID, UNAIDS, SIDA, DFID, Gates Foundation, World Bank, WHO) met during UNGA to discuss how to accelerate progress towards the health MDGs. Participants agreed that instead of creating a new mechanism for harmonization and accelerating progress, health organizations should rely on an existing one and re-invigorate the IHP+.

- **Key points:** IHP+ has made significant progress at country level, but some leaders were unaware of this. IHP+ needs to be “re-invigorated” in order to achieve better results, and change institutional behaviour.
  - Leaders are keen to (i) receive an update on IHP+ progress and challenges; and (ii) understand what needs to be done concretely to resolve bottlenecks at the institutional level to improve progress at the country level.
  - *What is meant by “re-invigorating” IHP+?* Although all partners signed the Global Compact in 2007, some did not take it very seriously. A broad institutional recommitment to the principles of IHP+ will give a positive signal to accelerate momentum for collaboration, followed by a focus on achieving results through country-led national health strategies.
  - *A new funding mechanism for MDGs 4 & 5* (leveraging IDA) is to be developed by the World Bank. More detailed information will be available after IDA deputies meet.
- **Next steps:** The ET welcomed the resurgence of interest in and commitment to the IHP+ from global institutions. It emphasized the importance of informing leaders about IHP+ progress and agreed to explore ways to more effectively disseminate information.

2. 4th Country Health Teams Meeting (CHTM), 12-14 December, Safari Park Hotel, Nairobi
Preparation for the CHTM includes four background papers that will guide discussions: (i) review of different stakeholder needs in relation to IANS; (ii) update on the 2010 paper on experience with country compacts; (iii) review of experience with Joint Annual Reviews (JARs) in 10 countries (not all IHP+); (iv) analysis of health aid effectiveness results – what’s working, and why.

- **Discussion of CHTM Concept Note:**
  - The outcome of the heads of agencies meeting at UNGA emphasizes the opportunity to use the CHTM as a platform to identify bottlenecks and define actions to accelerate progress. This can be done by: (i) sharing information on challenges and opportunities that can be addressed by global health leaders; (ii) discussing incentives for development agencies to fully commit to IHP+ objectives; (iii) identifying missed opportunities where IHP+ can contribute to improved aid effectiveness;
  - the third objective for the CHTM—to agree to future IHP+ approaches to strengthen mutual accountability for commitment and results—is especially critical;
  - the need to ground the meeting at country level, with plenty of time for exchange of lessons learned between countries;
  - set the scene with an update on what has been changing in the global health architecture/initiatives, so that participants can use the meeting to translate these changes into more effective action at the country level.
  - possible discussion of how IHP+ can facilitate ways for countries to harness the private sector behind their health sector priorities;
  - Plan how to get concrete decisions and results from the meeting, and how to communicate the outcomes of the meeting effectively in different fora.
• **Next Steps:** Core Team to circulate a first draft agenda within 2 weeks, for feedback, and to have a mature draft ready for October ET meeting. Encourage ET volunteers to participate in planning CHTM sessions.

3. **Harmonizing Financial Management (FM): Update and Proposed Next Steps**

Iraj Talai (World Bank) provided background (attached) on four primary areas where improved FM harmonization among DPs could take place—Financial Management Assessments (FMAs), the design of FM and fiduciary systems, supervision/monitoring, and the MoU for Joint Fiduciary Arrangement. Two deliverables related to future FM harmonization work were presented for ET feedback:

(i) the final draft of “Harmonization and Simplification of Financial Management” (reference exposure draft Nov 2011) to be revised by the already established working group of WB, GAVI, GF and WHO and presented at the CHTM. This document will not present new guidelines for FMA, but will draw on existing technical documents to present guidance on how FMA work can be done jointly; and

(ii) the formation of a broader FM technical working group that will deliver a document with agreed language for standard elements of a MoU for harmonized FM arrangements and options for harmonized FM supervision. This exercise would establish standard elements for a MoU and allow countries and their partners to save valuable time and effort. It will focus on aspects that remain fairly standard across all MOUs and present options for those aspects of the document which cannot be standardized.

ET colleagues are invited to provide written comments and contributions towards both deliverables.

• **Key questions and comments:**
  - **How does the tool for conducting FMAs jointly take into account the existing PEFA tool, and what is the added value of another tool?** Response: It is not proposed to create a new tool, but guidance on conducting FMA jointly using existing FM tools. PEFA is primarily used for general budget support decisions, and it does not identify which areas are weak and need to be strengthened.
  - **Is the MoU document only applicable to pooled funding?** Response: No, the document with agreed language for standard elements of a MoU would allow for both pooled and non-pooled funding. For example, the draft MoU in Sierra Leone provides options for those aspects of the document which cannot be standardized.

• **Next Steps:**
  - all feedback on the proposed FM harmonization should be sent via email directly to Iraj (italai@worldbank.org), copied to Finn and Phyllida, prior to next ET meeting.
  - establish a larger technical working group as proposed and to propose members.
  - Iraj will present an update at the next ET meeting.

4. **Strengthening CSO Platforms in Africa:**

Finn Schleimann provided an update from the September 20 Conference call between agencies on increasing collaboration between actors to strengthen a health CSO platform in Africa. Participants agreed on the need for this, but that any further collaboration should take place from the bottom-up.

• **Next Steps:** Coordinate as much as possible among CSOs and determine if we can reach a general agreement about how to move forward in strengthening country CSO platforms.

5. **Any other business:**

• GAVI, GF and World Bank, with support from WHO, recently completed a joint FM assessment of the health sector in Sierra Leone. Country stakeholders expressed a sincere interest moving forward with the recommended action plan, but support from donors will likely be required during implementation of the plan.

• The attached matrix with an overview of countries and activities can be utilized as a basis for communication with global leaders and development agencies (attached).