

TENTH IHP+ FM TECHNICAL WORKING GROUP MEETING
MEETING MINUTES, FEB. 15, 2017

Attendance: Adda Faye, GF; Lamin N’jai, GF, Pamela Rao, USAID; Jacob Hughes, USAID; Helene Barroy, WHO; Renaud Seligmann, WB; Max Dapaah, WB/IHP+ Core Team

Regrets/Unable to join due to connection challenges : Sorie Kamara, Sierra Leone ; Mona Khurdok, UNFPA ; Patrick Rudolph, GIZ,

The meeting started at 10:10am. After brief remarks the Chair introduced the Agenda for the meeting:

1. Feedback on scope of PFM work under UHC2030
2. Update on on-going work, bottlenecks and discussion on new areas/countries for collaboration
3. Any Other business

Feedback on scope of PFM work under UHC2030 2017 Work Plan

Feedback on the scope of the PFM TWG as received from the UHC2030 Transitional Steering Committee (SC) meeting in December 2016, and the UHC2030 Core Team-organized retreat was presented. The SC endorsed the revised PFM TWG Terms of Reference (ToR). In addition to the EDC agenda on FM harmonization and alignment, the ToR covers two new key areas aimed at addressing systemic PFM bottlenecks in mobilizing domestic resources for health financing and service delivery.

The two new areas of work are considered vital to addressing issues involving funding adequacy, funding sustainability and predictability, efficiency, value for money, governance, transparency and accountability for the use of funds the lack of which could undermine successful implementation of UHC using country systems and domestic financing. These themes are relevant in MICs who in most cases fund or are expected to fund a larger share of the health budget from domestic sources.

In terms of prioritization however, members concurred with the conclusions of the UHC2030 Core Team retreat that followed up on the recommendations of the December 2016 SC meeting. Consistent with the SC’s goals for 2017 that focus on gaining traction on deliverables that are congruent with the unfinished EDC agenda under IHP+, the PFM TWG will focus on supporting two countries (Liberia and Sudan) where JFMAs have already been conducted to implement the recommendations of the assessments. Opportunities to take forward the new areas of work, referred to above, could be explored or exploited but are not priority for 2017.

Other deliverables for 2017 include finalizing work on the study of the costs and benefits of unharmonized and unaligned implementation arrangements, exploring ways of sharing knowledge on PFM links with UHC, and updating guidelines on conducting JFMAs.

In support of developing the new stream of PFM work, most members were of the view that since EDC is dependent on strong PFM systems, addressing PFM bottlenecks in service delivery and health financing as articulated in the ToR of the TWG is not at variance with the priorities of the 2017 Work Plan. Members therefore opined the need to ensure cross-fertilization of lessons learned under the two work streams (i.e. FM harmonization & alignment and PFM in service delivery & health financing) in a mutually reinforcing way. Also, policy dialogue between ministries of finance and health will be supported by evidence generated regarding PFM links with service delivery and health financing.

The meeting resolved to focus on the following in 2017:

1. Support implementation of the JFMA recommendations work started in Sudan and Liberia (both are fragile states)
2. Take an inventory of PFM in health knowledge activities, and explore the how knowledge can be shared,
3. Update JFMA assessment guidelines
4. Explore possibilities of doing a study on PFM and service delivery or health financing in one country – possible countries include Thailand, Estonia, Nigeria, Gabon, Senegal

Update on on-going work, bottlenecks and discussion on new areas/countries for collaboration

An update on ongoing work in-country was provided. Summary table is provided below:

IHP+ FMTWG UPDATE				
Country	Description of work	Participating DPs	Deliverable(s)	Status
Burundi	JFMA conducted in September 2014	AfDB, EU, GF, WB	Harmonize fiduciary implementation arrangements for participating donors	English and French versions of the report has been completed. A workshop to disseminate the report, agree on an FM improvement action plan, and to draft Joint Fiduciary Arrangements (JFA) is on hold due to the political situation in the country.
Senegal	Discussions ongoing on FM harmonization and alignment. Aim is to leverage the subsisting harmonization between WB and USAID on the Senegal PBF program	USAID, WB, GF	Use of country FM systems in health sector	GF now uses the country system, along with the WB and USAID, for part of its HSS grant support to Senegal.

DR Congo	Discussions held on FM harmonization and alignment	GF, WB	Aligned implementation arrangements of projects financed by participating donors	Draft manual of joint donor and government procedures for the health sector has been completed. Launch of the manual has been delayed by political situation.
Sierra Leone	JFMA conducted in 2012	GAVI, GF, WB	Harmonize fiduciary implementation arrangements for participating donors through creation and operationalization of IHPAU	IHPAU is operational as of June 2016
Sudan	Expressed interest in support from IHP+ on harmonization and alignment	GF, GAVI, JICA, WB, WHO, UNICEF, DfID, UNDP	Conduct JFMA	In-country stakeholder planning in progress
Liberia	Gov't has expressed interest in joining IHP+, and also to have a joint assessment	UNICEF, UNFPA, EU, USAID, GAVI, GF, Irish AID & WB	Conduct JFMA	JFMA report finalized and submitted to Health Ministry. Ministry has constituted a team to review recommendations and agree on an action plan for implementation
POTENTIAL OPPORTUNITIES				
Thailand	Study of PFM drivers for success of UHC			
Estonia	Study of PFM enablers in health financing reforms			
Senegal	PFM study			
Nigeria	PFM study			
Gabon	PFM study			
UPDATE ON PFM STUDY				
Description of work				Status
Develop a conceptual framework of PFM in Health and a tool for testing the framework in countries				Conceptual framework and tool kit completed pending management clearance
Analyse the cost and benefits unharmonized and unaligned implementation arrangements				Kenya and Uganda reports, as well as synthesis report ready pending management clearance

The main highlights on this Agenda for 2017 was to advance work on facilitating action plans development in Sudan and Liberia following the JFMAs conducted in both countries in 2016, and completion the joint FM procedures manual in DRC.

It was also acknowledged that there are capacity constraints in these countries that required significant effort to achieve progress on implementation of recommendations. Members were encouraged to use their channels or country offices to urge action by the Ministry of Health on the deliverables in these countries. USAID offered to help with the Liberia case.

Other matters

Lastly, members were requested to share opportunities for collaborative work on broader health sector PFM issues as PFM bottlenecks in service delivery and health financing studies in MICs given the shift in emphasis on domestic resources under UHC was also emphasized. The World Bank conceptual framework when completed could form the basis for joint country studies in a variety of countries for example. WHO and USAID expressed interest in jointly with other partners in Gabon and Senegal, and Nigeria.

The following were agreed as agenda items for the next meeting:

- Update on the World Bank's conceptual framework on PFM and service delivery;
- Update on the study of the cost and benefits of unharmonized and unaligned FM implementation arrangements
- Spotlight on Sudan and Liberia on taking forward the JFMA recommendations
- Explore face-to-face to meeting at the WHO collaborative agenda on PFM and health financing event in October.

The next meeting will be held in April on a date to be agreed by email.