

Notes for the record

Online meeting, 2 July 2018, 15.30-17.00 CET

Participants: see list attached

Objectives of the meeting:

The main objectives of the meeting were to:

- Update on the work progression from the last November 2018 face to face meeting
- Present the draft template and the approach from HSA to HSPA: functions to outcomes
- Rapid overview of three functions draft background papers: Health Financing, Resource Generation and Governance Function
- Uptake and dissemination of the final product

Action points and next steps:

- The HSA TWG participants will provide written comments and feedback on the three background papers which were shared and presented during the meeting.
- Finalise the background papers for all the functions, and the narrative to the final annotated template which will be all presented and discussed in the next face to face meeting in November.

Key issues discussed:

The online meeting was chaired by Mr. Richard Gregory, UHC2030 Senior Health Advisor and Dr. Dheepa Rajan, Health Systems Advisor at HGF WHO, facilitated the discussions.

1. Brief recall of the November 2018 face to face meeting: Conclusions and update on work undertaken since then

- In the last face to face meeting the TWG discussed functions as an entry point from HSA to HSPA approach and for each function proposed a list of sub functions. More details can be found in the November [meeting report](#).
- Subsequently to that we prepared the draft background papers for the three health systems functions (Health Financing, Governance and Resource Generation), which incorporates an in-depth analysis (including a cross check with the agreed criteria) of the list of some of the sub functions proposed in the November meeting.
- The content included in each draft background paper, reflects information of the existing HSA tools from the [HSA tool review](#); information from a subset of country health systems assessments reports and a series of existing global databases¹ and include also some suggestions of potential quantitative and/or qualitative assessment questions for each sub function to link with the performance dimensions.

2. HSA to HSPA: functions to outcomes

- A draft approach which brings together all the health systems functions (Financing, Resource Generation, Governance and Service Delivery) and tries to highlight how they fit in a larger framework linking them to intermediate and final outcomes has been developed. One key emphasis of this framework is also looking at the performance of the functions and different indicators and the overall influence in the performance of the system.
- The first illustrative draft of the framework which was presented during the meeting, builds upon the existing frameworks that are already in place^{2 3} and outlines a conceptual, and practical approach, that provides a means to link existing HSA and HSPA tools and approaches, such that the structural elements of the health system, or health system functions, can be linked to the intermediate and intrinsic objectives of the health system.
- The new overarching HSA-to-HSPA framework will provide a starting point to conceptually, and practically, link health system functions key to? health system outcomes, and thus provides a common approach to HSPA.
- The framework is still under progress and it will be the illustrative version of the UHC2030 annotated template. The background papers are the narrative to this illustration which will be brought together in a book.

¹ For more information please refer to the draft background documents

² World Health Organization (WHO). (2007) Everybody's business: Strengthening health systems to improve health outcomes

³ World Health Organization (WHO). (2000) The World Health Report. Health Systems: Improving Performance

3. Rapid overview of three functions draft background papers: Health Financing, Resource Generation and Governance Function

- The background papers have been prepared considering what the functions are and how we can assess the performance of the function itself
- For each function, a set of sub functions have been identified followed by an indicative list of indicators and qualitative questions for each sub function, which aim to assess the performance of each sub function and finally to measure the performance of each function itself.
- Governance was considered as a function itself but also a cross cutting issue which is present in all other functions, so it was decided to highlight in each function elements of the Governance function that will also influence the performance of the other function.
- The draft background papers which have been shared with the TWG members provide more information on the methodology and the proposed lists of sub functions and quantitative and/or qualitative Matrix.

Discussion:

The presentations were followed by a general discussion focused on the framework and the approach. Overall there was a good feedback on the framework in terms of the clarity it provides on how the functions are linked and its usefulness as a potential planning tool for coming up with a comprehensive health system reform plan. The discussions highlighted some key elements to be considered while further progressing towards the finalized product:

- PFM is a major element which contributes to the performance of the health system. It could be added as part of the governance of the Financing Function and governance of the Resource Generation Function.
- In the current approach financial protection has been considered as an outcome rather than a sub function.
- Elements such as insurance, procurement and supply chain design will be more likely split across different functions and sub functions.
- In the Service delivery function, promotion and prevention have been included into the public health sub function, however it was suggested to have them as two separate sub functions.
- Align the HSPA framework with other processes such as the GAP PHC accelerator and synergise with PHCPI classifications and pilots in some EMRO countries. The Secretariat will follow up and make sure that the tools are framed in a similar way.

4. Dissemination, uptake and use of the framework

- The end goal of the finalised product which is in line with the UHC2030 perspective, is to have a framework that can help with the alignment of different existing HSA tools in a more harmonised way, linking to health system performance as a more policy-relevant outcome vis à vis a descriptive HSA snapshot. Countries are then equipped to assess their national health system and use evidence-based data to inform policy decision-making.
- As a UHC2030 HSA TWG it is very important to reiterate the attention on the following key elements for product dissemination:

- How the final product will be presented;
- How it will be promoted;
- What is needed to make sure that the product is taken up and used

Next steps:

- The TWG participants will send inputs on the 3 draft background papers, which were discussed and shared in the meeting.
- Finalizing the quantitative and qualitative indicators for each function. This will be a cross check between the available information and data and existing health systems assessments and the existing knowledge on what information is already collected in countries.
- The draft background papers for each function, including the one on Service Delivery will be finalised in August.
- The finalised draft background papers will be brought together in one document, which will include also, the narrative that will explain the indicators in detail, and the narrative for the performance dimensions and how they fit in together with the health systems functions.
- All this will provide in a nutshell the annotated template and the narrative to it, which will be presented and discussed in the next HSA TWG face to face meeting in November (most likely 13-14 Nov) later this year.



UHC2030 Technical Working Group on Health Systems Assessments

Online Meeting:

HSA to HSPA: functions to outcomes

2nd July 2019

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