

## **IHP+ DRAFT WORK PROGRAMME 2014/15, TO BE REVISED AFTER THE STEERING COMMITTEE DRAFT 7 JANUARY 2014**

### **INTRODUCTION**

This work plan is based on the priorities outlined in 'Aligning for Better Results', the IHP+ strategy for 2014/15 and needs to be read in conjunction with it. It builds on IHP+'s achievements, and sets out ways in which IHP+ will intensify action on development cooperation and results as agreed in the IHP+ Global Compact. It also considers the roles of different IHP+ partners, and links to other institutions, especially the Global Partnership for Effective Development Cooperation and OECD DAC.

The work plan has six sections. The first three outline planned actions under each of the core elements of the strategic agenda, indicating deliverables and timing. These are followed by sections on IHP+ oversight, operations and communications and the indicative budget for 2014/15.

### **A. POLITICAL AND ORGANIZATIONAL ACTION**

#### **1. Intensified action among global agencies**

##### *Actions*

- IHP+ Steering Committee reviews progress on agency self-assessments on the seven behaviours, as well as collective action on single issues, and agrees next steps to accelerate more harmonized and aligned agency ways of working
- Agencies follow-up on next steps agreed in the Steering Committee
- IHP+ participation in relevant international meetings
- Updated global review of trends in the number and nature of new global health initiatives, and implications for countries, in collaboration with OECD DAC

##### *Milestones*

Modified approach to agency action agreed      January 2014

Review of progress on agency action by IHP+ Steering Committee  
Twice yearly

Meeting of the Global Partnership for Effective Development Cooperation, Mexico (IHP+ to contribute sectoral experience)      15-16 April 2014

Review of trends in new global health initiatives 3<sup>rd</sup> quarter 2014

## 2. Intensified action and lesson learning in selected countries

*Actions* (see also Steering Committee issues note).

- IHP+ Steering Committee discusses approaches to strengthening follow-up of country intensified action plans, and ensuring links to HQ action where needed
- Continued engagement with Senegal, Myanmar and Sierra Leone, plus with 2 more countries committed to intensified action. More systematic follow-up with agency HQs and documentation of lessons learned (linked to work plan item C2).

*Milestones*

Modified approach to follow-up rolled out	First quarter 2014
Review of progress on country action by Steering Committee	Twice yearly

## **B. APPROACHES AND TOOLS**

### 1. Approaches needing intensified effort

#### 1.1 *One country platform for monitoring and accountability*

*Actions*

Actions will reinforce other efforts, including Accountability for Women's and Children's Health, and collective action by 19 development agencies to harmonize agency reporting requirements:

- Country M&E platforms: progress with One M&E platform, and the contributions of different global initiatives to support this, will be reviewed in the IHP+ Steering Committee
- Joint annual reviews: a guidance paper with options on ways to conduct Joint Annual Reviews to strengthen accountability for results, for use by staff in governments and development agencies. Commissioned through IHP+ with key partners agreeing TORs.
- Domestic systems for mutual accountability for results: IHP+ will facilitate support to countries to develop mechanisms to hold partners to account for commitments to align with national health priorities, plans and systems.

*Milestones*

Progress on One M&E platform shared with Steering Committee	1 <sup>st</sup> and 3 <sup>rd</sup> quarter 2014
Approach to more harmonised global agency reporting requirements shared with all IHP+ signatories	2 <sup>nd</sup> quarter 2014
Paper on options for Joint Annual Reviews completed	3 <sup>rd</sup> quarter 2014
Support for national monitoring of progress on aid effectiveness commitments facilitated through Core Team	2014 / 15

#### 1.2 *Financial management harmonization and alignment*

*Actions* (see also Steering Committee issues note).

- Develop a template with agreed standard language of Memorandum of Understanding for Joint Fiduciary Arrangements.
- Encourage agencies and countries to adopt Joint Financial Management Assessments as their preferred option for such assessments.
- Facilitate support to countries on strengthening their FM systems, primarily through staff in partner agencies and resource institutions.
- Mobilise agencies to provide more harmonized support for strengthening national Financial Management systems

An IHP+ Working Group will be established to take forward the technical aspects of this work.

*Milestones*

FM Working Group convened by World Bank	1 <sup>st</sup> quarter 2014
Approach to promote joint FMA agreed	2 <sup>nd</sup> quarter 2014
Standardised MOU for Joint Fiduciary Arrangements	1 <sup>st</sup> quarter 2015
Country support facilitated by Core Team	2014/15

## **2. Consolidation and continuation of established approaches**

### **2.1 JANS and Compacts**

*Actions*

- Review extent to which joint rather than separate assessments of national health strategies have been adopted as the norm by agencies; and obstacles and opportunities in 2014 to increase this. Links to item A1 (agency self-reviews on 7 behaviours)

Support to national plan development, joint assessment and compact development will be taken forward primarily through staff in partner agencies, using IHP+ guidance as needed.

*Milestones*

Agency adoption of joint approaches to assessing national health plans, and reduction in separate exercises	2014
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## **2.2 Improved CSO engagement in national policy, monitoring and accountability processes**

### *Actions*

- Strategic modifications to the current approach to country CSO small grants programme discussed, based on the recent review, and options for future CSO support developed; temporary extension to current programme while new approach developed
- Strategy for documenting and disseminating experience with improving CS engagement developed, for example through the CS Consultative Group and other routes that will reach a wider range of southern and northern CSOs

### *Milestones*

Options for future support to national CSOs shared for consultation

1<sup>st</sup> quarter 2014

Proposed future support presented to 2<sup>nd</sup> Steering Committee meeting

Strategy for more systematic dissemination of experience

1<sup>st</sup> quarter 2014

## **3. Exploratory work on new approaches**

### **3.1 South-South and triangular co-operation for health development**

#### *Actions*

- Complete diagnosis of issues and current practice in south-south (SSC) and triangular cooperation (TrC) in health, through a desk review of initiatives and current literature on SSC/TrC, plus key informant interviews.
- Review of ways in which development partner rules and practices facilitate or hamper SSC
- Expert consultation leading to agreement on future role for IHP+ in supporting SSC / TrC.

#### *Milestones*

Summary reports on main conclusions from the inventory, key informant interviews and review

of DP rules and practices completed and shared widely

End 1<sup>st</sup> quarter 2014

Expert consultation

2<sup>nd</sup> quarter 2014

IHP+ actions in SSC / TrC implemented

3<sup>rd</sup> quarter 2014 onwards

### **3.2 Strategically planned and well-coordinated technical assistance**

#### *Actions*

- 1 day preliminary meeting of international experts, leading to discussion paper for a larger consultation, including possible indicators for tracking progress
- Consultation with countries and development agencies
- Issues paper commissioned on delivering effective and better aligned TA in today's changing development assistance environment, aimed to inform senior policy makers from government, development agencies and NGOs.

#### *Milestones*

Discussion paper, based on preliminary meeting	1 <sup>st</sup> quarter 2014
Consultation with countries and development agencies	2 <sup>nd</sup> quarter 2014
Issues paper on trends TA	3rd quarter 2014

#### **4. Country grants**

##### *Action*

- Review of IHP+ country grants commissioned by Core Team, to examine whether these remain a useful and effective instrument to accelerate progress on development co-operation in health, and if so how they can best support current IHP+ priorities, including action on the seven behaviours. Conclusions to be shared with Steering Committee.

##### *Milestone*

Review completed	mid 2014
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### **C. ACCOUNTABILITY FOR PROGRESS AND RESULTS**

The priorities set out in this document reflect the main messages from the 2012 meeting in Nairobi, and subsequent developments in 2013. In the next two years all IHP+ partners - governments, international development agencies, CSOs and others - have major roles to play in accelerating alignment for better results, through the agenda outlined here. The activities and outputs are designed to improve several critical areas of effective development co-operation at country level.

Accountability for progress and results from this programme of work will be done as follows:

#### **1. IHP+ partners' progress on commitments to effective development cooperation in health periodically monitored**

All signatories will be invited to participate in the next round of monitoring of progress on commitments to effective development co-operation in health. As agreed in the 2012 IHP+ meeting in Nairobi, this will provide sector specific data for a small set of indicators adapted from the Global Partnership for Effective Development Cooperation. The previous rounds of monitoring were done by an independent consortium. A modified – more country-based - approach has been developed and is now out to tender. Progress will be reported in the following areas.

- Improved mutual accountability for results
- Country financial management systems strengthened and used
- Increased proportion of health aid is on budget, and more predictable
- Agreement on priorities that are reflected in a single national strategy and underpinning sub-sector strategies, through a process of inclusive development and joint assessment, and a reduction in separate exercises
- Improved civil society engagement in health development processes

### *Actions*

- Contractor for next global report on progress on IHP+ partners' commitments selected
- Support for country based reporting, as needed
- In two other areas, support for more systematic learning between countries, and strategically planned and well- coordinated technical support, indicators will be developed as part of the 2014/15 programme of work (see link to items 3.1 and 3.2) .

### *Milestones*

Contractor selected by review panel including IHP+ partners	February 2014
Global report on progress on commitments to effective development co-operation in health	October 2014

## **2. Qualitative documentation of progress, results and lessons learned on behaviour change**

### *Actions*

- Twice yearly documentation of progress, results and lessons from countries supporting intensified action on the seven behaviours, based on locally agreed activities, targets and timeframes, and on a common set of questions, including how change has been managed. More work is needed to define how this is best done in individual countries. Links to item A2.
- Analysis of emerging patterns across countries regarding health development co-operation in general, and the seven behaviours in particular, based on relevant experience from both countries collaborating in IHP+ intensified action as well as others. Evidence from a broader-based analysis is expected to give greater strength to any global level recommendations made by IHP+.

## **3. Fifth Country Health Teams Meeting, early December 2014**

### *Action*

- Preparation for the next IHP+ Country Health Teams Meeting, to which all IHP+ partners are invited by Core Team in consultation with Reference Group.

## D. IHP+ OVERSIGHT, OPERATIONS AND COMMUNICATIONS

### IHP+ Steering Committee and other IHP+ bodies

In 2014 IHP+ is introducing some changes to its arrangements for oversight and operations. These are summarized in Box 1. Detailed Terms of Reference are on the IHP+ website.

#### Box 1 Overview of IHP+ oversight and operational arrangements

**IHP+ Steering Committee** is responsible for setting overall strategic directions and oversight of IHP+. It approves the IHP+ work plan and budget. It approves IHP+ Working Groups, reviews their recommendations and agrees on actions to be taken. It has 16 members – 6 countries, 4 multilaterals, 4 bilaterals and 2 CSOs. It will meet twice a year.

**The Country Health Teams Meeting** A meeting of all IHP+ signatories at least once every two years. This reviews progress in improving development effectiveness in health; and serves as a forum to share lessons from experience and debate new issues.

**IHP+ Reference Group** This supports the IHP+ Core Team in implementing the IHP+ work-plan. It serves as a forum for information exchange and collaboration. Members are senior technical staff from the institutions on the Steering Committee, with the option of additional participation when needed. Teleconferences to be held alternate months.

**IHP+ Working Groups** are time limited groups of technical experts, drawn from countries, agencies and CSOs, that are brought together to develop collective guidance and/or recommendations on specific topics related to development effectiveness in health. Working Groups report to the Steering Committee.

**IHP+ Core Team** is co-hosted by WHO and the World Bank. It manages the IHP+ work plan, budget and communications, under the oversight of the Steering Committee. It takes forward Steering Committee decisions; organizes Steering Committee, Reference Group and Country Health Teams Meetings, and facilitates Working Group meetings.

#### Additional points

- **Steering Committee** The question of including the private sector in the IHP+ Steering Committee has been raised. This concern will be put on the agenda of a future Steering Committee meeting. Another issue to be discussed by the Steering Committee is IHP+'s role in encouraging effective private sector engagement in health development.
- **Working Groups** Currently the only active Working Group is on Mutual Accountability. It is been chaired by Tim Martineau, UNAIDS. A new Working Group on Financial Management is planned.
- **CSO Consultative Group** IHP+ CS representatives have a consultative group to discuss IHP+ issues, and to convey key messages to a larger CSO audience. It meets face to face once a year. It is currently reviewing priorities for CSO action to reflect IHP+ strategic directions 2014/15.

#### Advocacy and communications

Steps to maintain and improve communications include: agreement on up to date set of key messages for different IHP+ constituencies; maintenance of IHP+ website; quarterly newsletter; annual core team report; more active gathering of stories from the field; more regular sharing and commentary on hot topics in development cooperation in health.

#### Core Team monitoring of progress on agreed deliverables

Core Team will monitor progress on work plan deliverables and report to Steering Committee meetings.

### **IHP+ Core Team operations**

This responsibility is shared between World Bank and WHO staff. Core team capacity to deliver on this ambitious programme of work is being reviewed. Once the strategy and work plan are final, capacity for facilitating, managing and monitoring implementation by the core team needs to be reviewed and most probably increased.

## **F. WORK PLAN WITH BUDGET**

<b>Area</b>		<b>\$</b>
<b>A</b>	<b>Political and organizational action</b> 1.1 Intensified action among global agencies 1.2 Intensified action and lesson learning in selected countries	1,150,000
<b>B</b>	<b>Approaches and tools</b> 1.1 One country platform for monitoring and accountability 1.2 Financial management harmonization and alignment 2.1 JANS and compacts 2.2 CSO engagement in national monitoring and accountability processes 3.1 South-south cooperation for health development 3.2 Strategically planned and well-coordinated technical assistance 4 Country grants to support policy dialogue, partnership management, performance monitoring	3,500,000
<b>C</b>	<b>Accountability for progress and results</b> C.1 Core team tracking of deliverables C.2 Country based documentation of progress, results and lessons learned C.3 4 <sup>th</sup> round of monitoring of all IHP+ partners commitments to effective development cooperation in health C.4 Fifth IHP+ Partners and Country Teams Meeting; CSCG meetings	1,850,000
<b>D</b>	<b>IHP+ oversight, operations and communications</b> D.1 Steering committee and other IHP+ management body meetings D.2 IHP+ core team operations D.3 Communications and advocacy	3,000,000
<b>TOTAL</b>		9,500,000