

Governance

“The leadership and governance of health systems, also called stewardship, is arguably the most complex but critical building block of any health system” (WHO 2007)

TRF has supported this essential function, in the pre- and post- devolution period, through policy guidance, system design, and assistance on regulatory issues.

Policy guidance

Developing costed health sector strategies

TRF assisted the Health Departments of Sindh, Punjab, Khyber Pakhtunkhwa, AJK, Gilgit Baltistan and Balochistan in the preparation of their Health Sector Strategies (all preceded by situation analyses). The provincial strategies provide the base for the development of a National Health Sector Framework.

- The strategies have been approved by the provincial governments of KP, Sindh, Punjab and GB. In AJK and Balochistan they are under approval.
- The approved strategies have not only aligned provincial government financing with agreed priorities but have also helped to mobilise donor financing for the reforms.

Developing operational plans

TRF supported the health departments of KP and Sindh in developing operational plans based on the strategic areas and targets identified in the health strategy.

- This TA addresses the strategic need to align the health sector strategies with the Medium Term Budgetary Framework along with development of a M&E plan and results framework.

Punjab Health Foundation (PHF)

TRF facilitated the restructuring and reform of PHF by realigning its roles and responsibilities and scope of work. It outlined options for revitalising the PHF, and the roadmap for restructuring covering legal, institutional/structural and financial implications.

- Implementation of this TA will strengthen the PHF, helping it to resolve gaps in health service provision to the poor and marginalized. This includes providing the management structure for the Social Health Insurance initiative envisioned by the Punjab Government.
- DoH has approved the recommendations of this TA.

Guidance to Health Sector Reforms Unit (HSRU)

Health Sector Reforms Unit (HSRUs) guide the translation of policy into practice. The TRF technical team works in close contact with senior health officers and policy makers in provincial HSRUs providing strategic and ad-hoc technical advice. TRF steps in to address issues and respond to immediate needs. In Balochistan, TRF reviewed the temporary HSRU arrangement within the DoH, and developed a three-year PC1 leading to the establishment of a permanent Unit.

- The Balochistan HSRU has been established. The PC-1 is under approval.
- The regular dialogue between provincial HSRUs and TRF provides effective resolution of emerging issues and needs, and consistent high quality advice.

System design

Integration of vertical programmes and DoH organisational restructuring

TRF assisted the provincial government of Khyber Pakhtunkhwa in the integration of vertical programmes (MNCH, LHW, EPI and Nutrition) in line with the new Health Sector Strategy. This involved reviewing all relevant laws, Acts and Ordinances and make recommendations in the post-devolution scenario.

- The PC-1 for the integration of vertical programmes has been approved. It brings in cost efficiencies and cost effectiveness, and reflects the Primary Level Essential Health Service Package in its totality. Through the Integrated PC-1, coverage of primary health care services is expected to increase from 53% to 80%

Hospital management reform

TRF is reviewing the existing governance and management arrangements (general, financial and clinical management) for the Medical Institutions and Allied Tertiary Care Hospitals in Punjab. This TA is ongoing.

Performance based contracting-in models with contract management capacities

The health sector strategy envisions the outsourcing of service delivery. TRF supported the Punjab health department in developing a contracting-in model giving maximum administrative and financial autonomy at the district level. This model brings better performance in management and service delivery, based on incentives to health managers and service providers for delivery of the essential package at primary and secondary level.

- This TA provides the basic models for outsourcing service delivery, including the requisite procedures, guidelines and legal matrix for contracting in.

Knowledge Management strategy

TRF has assisted in developing a national knowledge management strategy for MDGs 4 and 5 and is providing support for the establishment of a Knowledge Management Unit in the Department of Health Punjab. The Unit will analyse secondary data from routine information systems, research studies, technical assistance and other documents and develop analytical briefs for evidence based decision making at policy and programme implementation levels.

- The knowledge management strategy is being implemented at national level.

Regulation

Punjab Health Care Commission

TRF supported the development of tertiary health care standards and reference manuals, registration and licensing of public and private health facilities and their accreditation.

- The recommendations of the TA were adopted by the Provincial Health Departments and Programmes.

National Health Policy Council

TRF assisted the Federal Ministry of Health in the transitional phase towards full devolution. It supported the provision of guidance to provinces in strategy implementation and of financial and technical resources, and in monitor progress on policy implementation.

- The recommendations of the TA were adopted by the Provincial Health Departments and Programmes.

Accountability

Responsiveness and accountability in the health sector

TRF analysis made recommendations on: a) Creating synergy among politicians, media, and civil society to raise public awareness about the state of the nation's health sector; b) Incorporating responsiveness and accountability strategies in provincial health sector plans; c) Managing non-state provision of primary health through competitively tendered performance-based contracts linked to the involvement of local communities in accountability systems; and d) Pilot testing a model of district health management that would increase the powers of executive district and health officers.

- The recommendations are being used in establishing mechanisms for voice and accountability through DFID support.