

Sector wide Resource Mapping

Tracking financial flows in the health sector

Introduction

Purpose

- To improve governance of health systems in terms of transparency and accountability at all levels of the health sector by understanding available resources for the sector and how these resources flow into MTEF and other strategic plans

Scope

- Collect plan and budgets data from both government and donors
- Analyze which cost categories are these budgets allocated to
- Institutionalize the process of resource mapping and monitoring

Integration with other exercises

- Integrate and harmonize this exercise with other exercises such as NHA which aims to understand where health investment is happening and see the feasibility of integrating with this resource mapping.

Problem Statement

- Over the years, there has been investments in the implementation of the HSSP but it has not been possible to understand the resource gap in the operationalization of this plan.
- This has resulted from limited visibility of budgetary data (forward looking) within different health sector pillars, thematic areas, geographies etc.

Resource Mapping collects detailed investment information to support joint planning and coordination in the health sector

Who is providing and implementing resources for health programs?

- Financing source

What are available funds being spent on or budgeted for?

- What activities are being funded?
- Which programmatic areas do these activities fall under?
- Which strategy/objective of the Health Sector Strategic Plan do these activities contribute to?
- How does funding align to the interventions in the MTEF and different health strategies?
- Which cost categories do these activities cover?

Where are the resources being spent or budgeted for?

- How are funds allocated geographically?
- What populations are funds targeting?
- How are funds allocated across cost categories (e.g. drugs, training, system strengthening)?

Because RM is a planning exercise it focuses on budget data

Use-cases: RM has been used to both mobilize more funding as well as better spend existing funds

Mobilizing additional resources

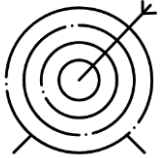
- **E.g. Global Financing Facility:** Resource Mapping used to inform GFF investment case for RMNCAH-One Plan II

Aligning and coordinating existing resources

- **Allocation of pooled funds:** These can be directed into interventions that are under funded.
- **Annual budgeting and joint donor and government planning:** Resource Mapping integrated into annual government planning & budgeting at national and is used for coordination of government and donor resources and avoid any potential duplications in resources allocation
- **National Strategic plans (NSP):** Results from resource mapping have been used to inform strategic plan development.

- Improved coordination and alignment of resources to country plans improve efficiency in budgeting and spending, reduces chances of duplications in resources allocations. Budgets can be linked and directed to areas of priority within country plans

Key drivers of successful resource mapping implementation



Clear definition of use-cases (e.g. aid coordination or a particular source mobilization opportunity); The design of exercise tailored to how the data will be used (what, when, how often)



Integration with existing process and systems. In countries where RM has been successfully institutionalized, RM was integrated into the budgeting, planning and aid coordination process.

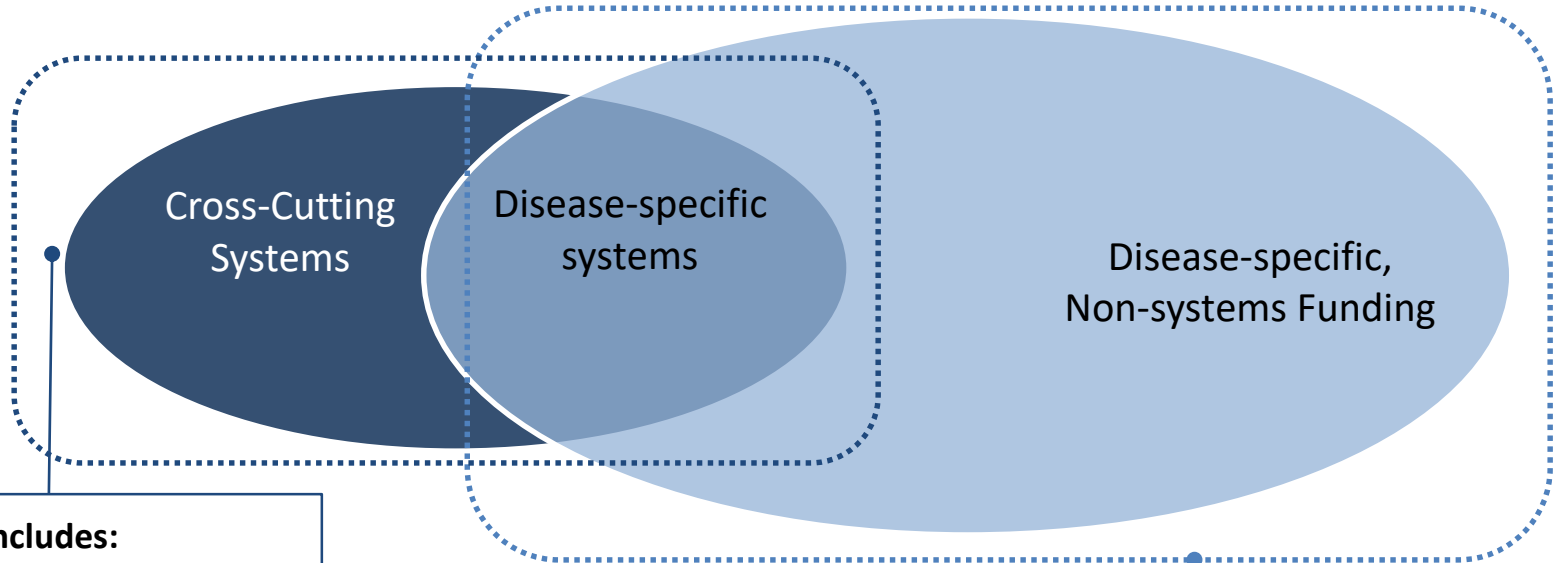


Strong government commitment to use data in planning. Government buy-in is also key to ensure donor willingness to participate.

How much is invested in disease programs vs. systems strengthening?

Systems Funding:

Disease Program Funding:



Includes:

- Capital medical equipment
- Health worker salaries
- Health worker training
- Infrastructure
- Service Level Agreements
- Supply Chain Management

Other Cross-Cutting,
Non-Systems Funding

includes:

Technical Assistance
Living Support
Community Outreach Events

Includes:

- Admin & Management
- Communication Costs
- Drugs / Commodities
- Planning & Policy Meetings

NHAs and Resource Mapping: powerful exercises for understanding health investments that answer fundamentally different questions

Resource Mapping

- **How are resources planned and spent against programmatic, geographic, beneficiary, and cost areas?**
- Includes forwarding looking data (budget) and expenditure
- Aligned to each specific country context
- Can provide annual programmatic and intervention level gap analyses
- Breakdown investments to sub-national level

NHA

- **How do health investments flow through the health system?**
- Expenditure tracking
- Include private and out of pocket expenditure
- Standardized globally
- Measure source of revenues for health financing
- Answer questions around health financing sustainability and long term planning

- If RM expenditure collected, potential for overlap in years collected, or eventually overlap with previous RM exercises (given it is annual)
- How resources are spent (cost categories/ factors of health care provision)
- Measure concentration/fragmentation of health investments

Existing opportunity

- MoH is willingness to conduct sector wide resources mapping (RM)
- Existence of Development cooperation framework which guides partnership between the GoT and its Development partners
- Presence of existing mechanisms e.g NHA, other RM exercise and capacity to conduct this exercise
- Presence of GoT owned Platforms e.g., Wadau Portal which can be improved to conduct and sustain this exercise

Methodology

- The team will work with MoH and DPs to agree on data points, expected outputs, required system enhancement (Wadau Portal) etc.
- A list of indicators and system output specifications will be developed with complete list of output mock ups.
- A system development firm will be identified then contracted to develop a module within the Wadau Portal that will enable resource tracking as per agreed expected outputs
- This will then be followed by Donor identification and training of stakeholders who will be responsible for filling in budgetary information
 - *A module can be developed to link donor budgets and implementation of different interventions by Implementing Partners*

Expected System Contents

Home Page

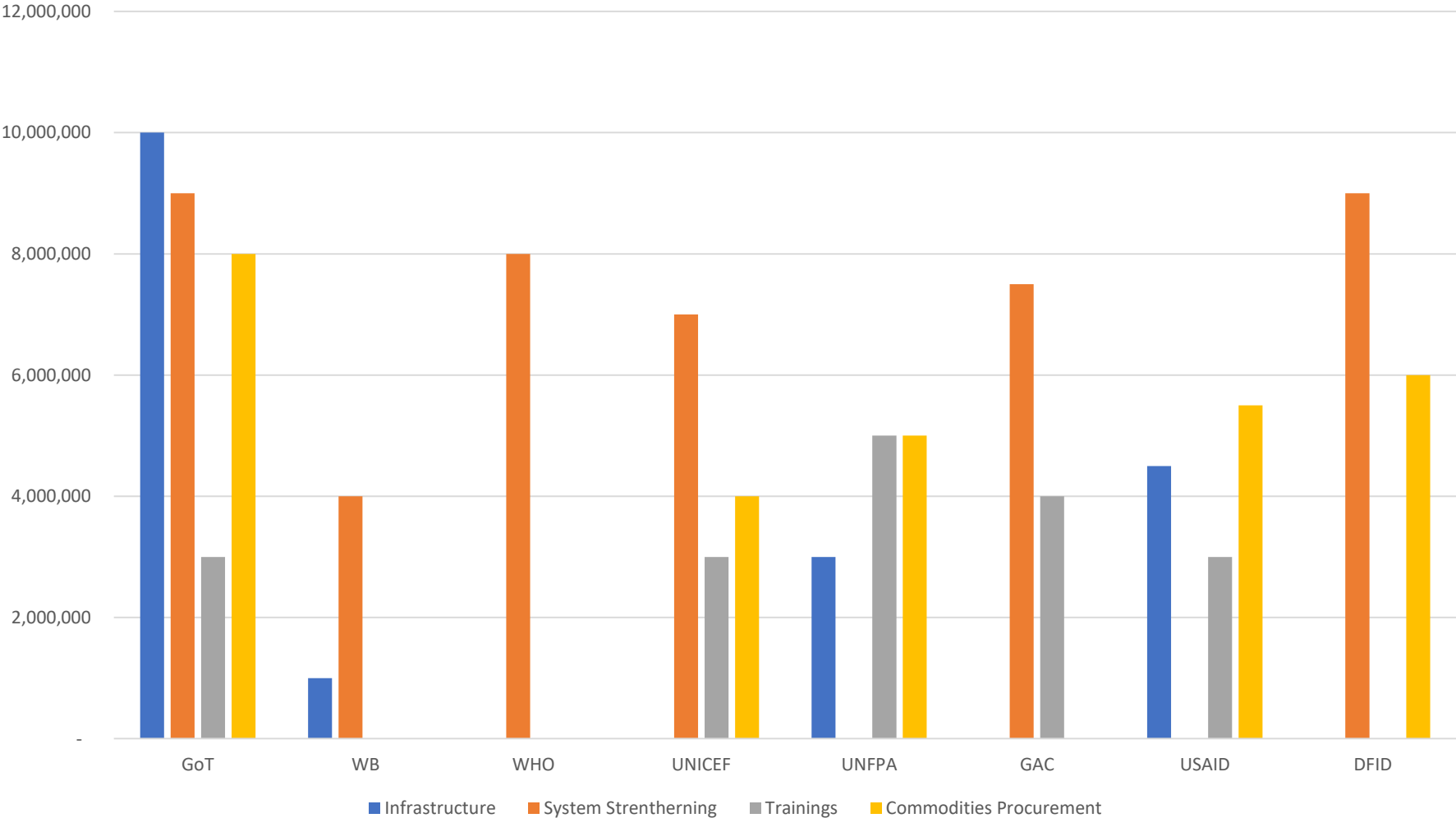
- This will provide a national overview and a high level summary of the current budgetary status per different cost categories as reflected in the HSSP. They will be displayed as charts. More information on the content of this page will be provided in the indicators document.

Reports Page

- This will provide detailed budgetary reports in terms of financing agent, cost categories, geographies etc.
- This information will be displayed in the form of charts and tables
- The outputs of these charts can be displayed in the time frame that can be quarterly, bi annually or annual depending on the need of the users
- Reports will be able to be exported into different file formats for further analysis and use depending on the needs of a user
- There will be an 'I' tab which will provide detailed indicator definition for easy interpretation of charts and tables

Sample Mock up Output

Contributions to Different Health Blocks



Next Steps

- Timelines setting and resource mobilization
- Meeting with ICT teams (MoH and PoLARG)
- Development of requirements and specification for system developments including mock ups of charts, tables and report outputs.
- Costing for system development
- WADAU portal enhancement in collaboration with PoLARG
- Map key stakeholders
- Orientation of key stakeholders
- Data collection/inputs
- Generate report