

TERMS OF REFERENCE
PUBLIC PRIVATE PARTNERSHIP TECHNICAL WORKING GROUP
Of the Health Sector Technical Committee

1. Background and Rationale

The Ministry of Health Community Development, Gender, Elderly and Children through its Health Policy (2007) and the Health Sector Strategic Plan 2015–2020 (HSSP IV) aims to promote a healthy society, with improved social wellbeing that will contribute effectively to personal and national development. Whilst the mission is to provide basic health services, it also specifically seeks to improve partnerships between public and private sectors in the provision of health services. The HSSP IV recognizing the progress undertaken in HSSP III in implementing public private partnership and suggests steps to accelerate progress in public private partnerships. The Government’s priorities for Public-Private Partnership in HSSP IV is to directly support *‘the health and social welfare sector [to] achieve a higher rate of return on investment by applying modern management methods and innovative partnerships’*.

To achieve this objective, a PPP sub-unit within the MOHCDGEC will promote the understanding and implementation of PPP at all levels in the health sector. The PPP sub-unit will support coordination mechanisms and participation of private and public health service providers, facilitate that all stakeholders can deliver quality, effective, affordable, reliable, and equitable distribution of health services. In addition the PPP sub-unit will promote the compliance of policy guidelines and legal arrangements for PPP in health service delivery. Furthermore the PPP sub-unit will facilitate to strengthen the functioning and feedback mechanism of Public Private Health Forum at all levels and the participation of all those engaged in PPP including government authorities, umbrella organizations of non-governmental health providers, private-for-profit/self-sustaining health providers, civil society organizations, academic institutions, employees, non-health companies.

The National Public Private Health Forum (PPHF) and its Executive Board created in 2014 will be a major contributor to improving the dialogue and collaboration between the public and the private sectors in the provision of health services. The dialogue mechanism between the public and the private sectors should be further strengthened for effective collaboration. The PPHF facilitates interactions amongst key national, regional and Council, ward and village stakeholders in PPP. The PPHF will be actively supported by the public sector (MOHCDGEC-PPP sub-unit, PORALG, PMO and Ministry of Finance and Planning) and the private sector (Umbrella organizations and development partners). In addition, to expedite implementation of PPP in support of achieving the HSSP IV targets, the MOHCDGEC, PORALG in collaboration with partners participate in a PPP Technical Working Group, under the oversight of the Health Sector Technical Committee (HSTC) of the health sector wide approach (SWAp).

2.0 Objectives

2.1 The main objective of the PPP Technical Working Group is:

- The health and social welfare sector will achieve a higher rate of return on investment by applying **modern management methods and innovative partnerships**

2.2 Specific Objectives are to:

- Promote operationalization and implementation of PPP through effective innovative models of private sector engagement at all levels;
- Increase the collaboration and participation of public and private health sectors for the delivery of quality and equitable health services;
- Strengthen functioning and feedback mechanism of Public Private Health Forum at all levels;

- Promote compliance of the available policy guidelines and legal arrangements for Public Private Partnership and service delivery.

3.0 Tasks of the PPP Technical Working Group

- 3.1 Promote compliance with policy guidelines and legal arrangements necessary for advancing and enhancing Public Private Partnerships;
- 3.2 Promote operationalisation of PPP through effective comprehensive service level agreements and other innovative models of private sector engagement;
- 3.3 Coordinate and act as a link between the Health Sector Technical Committee, the MOHCDGEC, PORALG and other partners supporting PPP activities , through development of synthesize reports and sharing of meeting minutes and submit to the Health Sector Reform Secretariat;
- 3.4 Ensure that the planning of PPP activities meets health sector priorities and are in line with the HSSP IV strategic objectives, specifically number four;
- 3.5 Support and encourage annual joint planning, supportive supervision, monitoring, reviews at all levels and forums of the health sector addressing issues pertinent to PPP;
- 3.6 Review the monitoring framework for public and private sectors activities and track the implementation of PPP activities in the health sector at national, regional and council levels;
- 3.7 Review available agreements/templates and MOU between the public and private providers of health services;
- 3.8 Support annual joint reviews and forums of the health sector, including monitoring the implementation, financing and expenditure practices of PPP projects, service agreements and other contractual arrangements between the government and the private sector at all levels;
- 3.9 Identify tasks that need to be tackled through special assignments or forming sub-working groups and making necessary adjustments based on informed analyses;
- 3.10 Facilitate the re-organization of the private sector and have inbuilt mechanisms for self-regulation;
- 3.11 Promote integrated solutions that effectively address public sector needs in the provision of health services, especially rural and urban underserved populations;
- 3.12 Encourage public private partnerships that address health service delivery and human resources challenges in the health sector and facilitate creative and innovative models of private sector engagement;
- 3.13 Facilitate the strengthening and coordination of National, Regional and Council PPHF committees and support their inputs at all levels;
- 3.14 Mobilise financial resources for the implementation of the PPP strategic plan II of 2015-2020;
- 3.15 Encourage health service users' participation in planning and governance of service delivery at facility level;
- 3.16 Facilitate the coordination of Zonal, Regional and District PPP capacity building and work to coordinate inputs for support at all levels including the national level.

4.0 Expected Output

- 4.1 Technical Working Group Meetings held regularly and minutes available.
- 4.2 Briefing and various reports prepared and shared with Health SWAp HSTC and MOHCDGEC management when required.

5.0 Expected outcome

- 5.1 Better information available and the understanding of the concepts of PPP among the public and private providers of health services enhanced.

- 5.2 Improved collaboration amongst the public and the private sectors with policy guidelines and regulations developed and coordination at all levels functioning.
- 5.3 Increased number of Comprehensive Council Health Plans incorporating private sector participation in planning and monitoring
- 5.4 Increased number of PPP projects and signed service agreements at all levels in the health sector when needed.
- 5.5 Well organised private health sector and providers of health services with inbuilt self-regulating mechanism.
- 5.6 Increased transparency and accountability in the disbursement and use of public funds in public private partnership projects and health service agreements
- 5.7 Improved access and quality of health services for the urban and rural underserved populations through public private partnerships
- 5.8 Increased citizen voice and governance of health services delivery

6.0 Membership

- 6.1 The PPP Technical Working Group will have 15 members as follows:

Constituent	Organisation/Group	Number
Government	MOHCDGEC – PPP sub-unit	2
	PO RALG	2
	MOFP – PPP Division	1
Development Partners	USAID	1
	DANIDA	1
	GIZ	1
	UNICEF	1
	WHO	1
Private Sector	APHFTA	1
Rep. Professional Associations	TPHA	1
Faith Based Organisations	CSSC	1
	BAKWATA	1
Non-government Organisation	PSI	1
	MST	1
Civil Society	To be nominated	1
		17

Additional stakeholders may be invited to be members or on observer status as necessary.

- 6.2 All invited members should confirm their commitment to the work of the PPP Technical Working Group and willingness to participate.
- 6.3 The PPP Technical Working Group will be led by a chairperson and a deputy chairperson and will be supported by a secretariat to take minutes of the meetings and to share relevant documents.
- 6.4 The HSRS will solicit the names of nominations of members from the Government and Development Partners, private sector and FBO umbrella organisations. Members of the TWG will need to identify and advocate for representation of other constituent members.

7.0 Frequency of Meetings

- 7.1 It is expected that the Committee will have a fixed date within each month for standing meetings (the second Wednesday of each month) and will meet bimonthly (every 2 months). Extraordinary meetings may be convened as required.
- 7.2 Given the many issues that are to be addressed, the PPP Technical Working Group may decide to form smaller sub-groups or task teams that can focus on specific issues/topics and these may define their own meeting schedules.