

### **Guideline for Application to Strengthen National HIS Under GAVI/HSS Funding**

The purpose of this guideline is to provide countries with information on how to apply for GAVI support to strengthen their national HIS as part of the proposal for Health Systems Strengthening (HSS). The *GAVI/HSS window* is a recently introduced type of funding offered to all GAVI eligible countries in addition to Immunization Services Support (ISS). Between 2006 and June 2008 GAVI has approved and awarded HSS funding for 39 out of the 72 eligible countries<sup>1, 2</sup>. The two deadlines for applications for this year are 1 May 2009 and 11 September 2009.

**Objectives.** The objective of GAVI/HSS is to achieve and sustain increased immunization coverage through strengthening the capacity of the health system to provide immunization and other health services with a focus on child and maternal health.

**Conditions.** GAVI/HSS support is available to all GAVI-eligible countries<sup>3</sup>, who have completed a multi-Year Plan for Immunization (cMYP) or its equivalent which spans the duration of the GAVI HSS proposal. Only national governments can apply (Exceptions would be countries in complex emergency situations). Countries with recent data of equal to or less than US\$ 1,000 GNI/capita can apply. Countries with GNI <\$365 will be eligible to receive up to a maximum of \$5 per child per year spread over the planned period. Countries with GNI \$365 or more will be eligible to receive up to \$2.50 per child per year. For details refer to [www.gavialliance.org](http://www.gavialliance.org).

**Themes for GAVI HSS support.** Countries will need to identify the health system functions they want to improve with GAVI HSS funding. Several conditions have to be met:

- The plan needs to be developed out of the functions defined in the overall national health sector plan.
- The national health sector strategy or equivalent must have identified HIS as its priority, and
- There is documentation and evidence on the funding gaps.

**HMN Framework helps justify proposals.** The HMN framework and guidelines for assessment of national HIS emphasize the need for wider stakeholder consultation and national ownership of the process and the outputs. If both the assessment and HIS strategic plans were done strictly in the same manner as in the guidelines, then the assessment report and the national HIS strategic plan can in fact be considered the HIS chapter (or detailed work of the HIS) of the health sector and/or the national development plan. Therefore these documents can strongly justify the HIS components of the GAVI HSS proposals.

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<sup>1</sup> GAVI Alliance. Revised Guidelines for GAVI Alliance Health Systems Strengthening Applications, March 2007.

<sup>2</sup> GAVI Alliance and Fund Board Meeting, 25-26 June 2008.Doc #1. CEO Report to the Board.

<sup>3</sup> 72 countries currently eligible see: <http://www.gavialliance.org/support/who/eligible/index.php>

**Relationship between HSS and child health.** With the proposed HSS functions countries need to justify increased and sustained improvements in the coverage of immunization and other health services. GAVI identified three main priority areas (but not exclusive) for support, all focussing on strengthening specific health systems functions at the district level and below. The themes for GAVI HSS Support are:-

1. **Health workforce**
2. **Organization and management of health services**
3. **Supply, distribution and maintenance systems**

*Note that these areas are not exclusive - GAVI HSS can support other critical health systems functions, as long as the country application shows how the GAVI HSS activities will improve and/or help sustain immunization coverage in the country.*

It is advisable to refer to WHO publication: *"Every Body's Business: Strengthening Health Systems to improve health outcomes, WHO's Framework for Action, 2007"* to guide the description of HSS gaps and justifications.

**Rationale for HIS in HSS proposals.** HIS fits most in the second theme "organization and management of health services" of the HSS priorities identified by GAVI and to some extent and with strong justification in the other two themes.

As indicated in the GAVI guideline, HIS can by its own come out as theme of HSS strengthening as far as:

- It is country priority demonstrated by health sector strategic plan,
- HIS reviews including national HIS assessment is in place and is discussed and endorsed at wider consultative forum and
- The HIS assessment is approved by the country sector coordination mechanism.

The following **guidance** can help justify the HIS components as part of the theme "*organization and management of health services*" in HSS proposal with further work on the country context.

- The basis for effective health services management is evidence based decision making at all levels of the health system.
- Generation and use of information, intelligence and research on health and health related systems is an integral part of leadership and governance.
- Without reliable and timely information it is not possible to identify problems and needs, track progress, evaluate impact and make evidence-based decisions at all levels including program design and resource allocation<sup>4,5</sup> for immunization programs and other health services.
- A well functioning HIS ensures production, analysis, dissemination and use of reliable and timely health information on immunization and other health services.
  - This requires capacity building to generate data, to detect, investigate, communicate and contain events including epidemics of vaccine preventable diseases and to analyse, disseminate and use information to guide availability of services, supplies and interventions.
- In line with the health sector reform and with major decentralization of management and delivery of health services the generation and use of information is more and more managed at district and health facility level<sup>2</sup>. Strong HIS enables districts to timely detect and track own progress, and report or seek support and feedback timely. It is generally believed that data quality and validity is maintained when optimal use of this is made at frontline.
- There is more and more demand for improved accountability, and evidence-based decision making. This becomes more important in settings demanding better use of limited resources, where also the ability to report on progress towards the specific targets is important for performance based funding.

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<sup>4</sup> WHO, Every Body's Business: Strengthening Health Systems to improve health outcomes, WHO's Framework for Action, 2007

<sup>5</sup> WHO, HMN, Health Metrics Network, Framework and Standards for Country Health Information Systems, Second Edition, 2008.

HIS can also be considered in line with the theme of "work force" in that;

- Training and deployment of HIS staff alleviates the health workers burden of HIS functions and thus allow them spend more time in immunization and other maternal and child health services.
- Strong HIS including human resources information system is justified to support proper/ informed planning for deployment, distribution and administration of HRH and tracking of human resources in the system. The same applies to logistics supply system too.

Besides these countries proposing HIS need to show the degree of priority given to HIS in the national health sector plan, indicate the gaps and justify how the support will improve and/or sustain immunization coverage and other health services in the country context.

It is emphasized that GAVI HSS themes focus on local service delivery (district and below). However, the GAVI HSS guideline (2006 and 2007) state that not all GAVI HSS funded activities have to take place at the district level or below.

*"National support functions such as procurement, storage and distribution systems and **health information systems** are essential for the provision of services at the sub-national level. Thus proposals for support in these areas will therefore also be accepted, if the application clearly shows how the support will eventually lead to increased and sustained coverage of immunization services".*

Also the GAVI guideline (March 2007) has listed; improved HIS including strengthening Monitoring and Evaluation, Publication of district level performance data, and Improved use of data for action at local level, among the list of areas that can be considered under the theme of organization and management.

The other option for strengthening HIS with the GAVI HSS funds is to include HIS as part of monitoring and evaluation of the GAVI HSS supported activity itself.

The conceptual framework for GAVI HSS support (outlined by GAVI in the guideline 2006 and summarized in 2007) is put below (left column) and can be used to justify HIS as part of HSS as put in the corresponding right column of Fig 1 below.

#### **Time frame.**

GAVI HSS support will last the duration of the submitted comprehensive Multi-Year Plan for Immunization and the National Health Sector Strategic Plan. Countries can re-apply for the support as often as a new cMYP or Health Sector Strategic Plan is developed<sup>6,7</sup>. Countries mid-way through their national health sector plan can apply for period that covers until the end of the current plan cycle.

GAVI HSS support is not suited for countries with less than a year before the end of the current planning cycle<sup>8</sup>. Countries with more than a year remaining to end their current plan period are encouraged to apply. This time frame needs to take in to consideration of the time for review of the proposal and disbursement.

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<sup>6</sup> The GAVI Board has approved the funds for all countries to receive GAVI HSS support up to 2010, with a possible extension to 2015. The extension will depend on the outcome of an evaluation due to take place in 2009.

<sup>7</sup> Application Form for: GAVI Alliance Health System Strengthening (HSS) Applications, March 2007

<sup>8</sup> <http://www.gavialliance.org/support/how/guidelines/index.php>

**Fig.1. GAVI HSS framework (2006 and 2007) as applies to HIS/HSS strengthening.**

