



BACKGROUND PAPER:

GFF results approach

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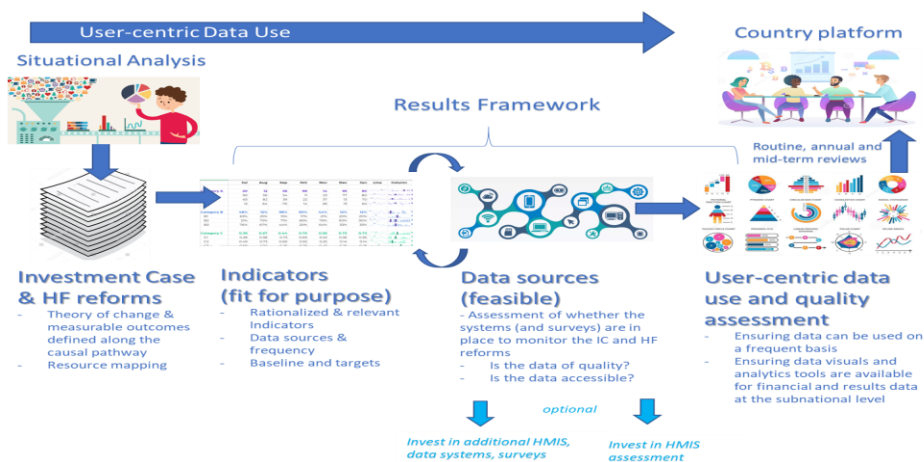
Ten strategic shifts for the GFF results agenda

Background

The purpose of this paper is to describe how the GFF manages for results, including how the results function is operationalized through the GFF governance and administrative mechanisms, notably the country platform, the Investors Group, the Trust Fund Committee and the GFF Secretariat. The paper is being prepared to inform the GFF strategy refresh process. It takes stock of the evolution of the GFF results function in the first five years of the GFF's existence, assesses remaining gaps in the approach based on internal analysis as well as feedback from key stakeholders and proposes key strategic shifts to sharpen the results focus going forward.

The results function is a central element of the overall GFF model (Figure 1). This model is country-driven and enabled by a country platform that facilitates alignment of all stakeholders – external financiers, national and international technical agencies, civil society and the private sector – around an investment case which is itself aligned to a national strategy or plan and is anchored in the national budgetary process. The alignment is facilitated through an annual process of resource mapping and expenditure tracking (RMET) that is facilitated by the GFF Secretariat. The process of preparation and regular updating of the investment case enables the prioritization of a package of services and a select number of reforms to promote the increase in domestic resources and greater efficiency of utilization of all resources allocated to health in order to maximize health and nutrition outcomes from available resources. In the last two years the GFF has intensified its support to countries to produce high quality investment cases and this support will continue.

Figure 1. Data is at the core of the GFF model



The entire GFF process is data-driven (Figure 1), starting with evidence and data required to prepare a quality investment case. The GFF Secretariat and other partners ensure that countries are well supported with the analysis that is required to prepare evidence-based investment cases. This analysis – which is funded by the GFF trust fund as well as other partners – includes reviews of current landscape of existing RMNCAH-N programs, reviews of policy environment, public expenditure reviews, governance reviews, benefit incidence analysis where it exists, poverty assessments, bottleneck analysis, fiscal space analysis, etc. Each country also conducts a resource mapping exercise as part of the preparation of the investment case and annually thereafter.

The macro-fiscal and health financing context at the time of joining the GFF is crucial in defining its value add and the objectives of the Investment Case. Countries with positive economic growth prospects should be thinking about how to use the GFF process and IC to best advocate for more domestic resources for the health sectors key priorities. Highly donor dependent countries might want to consider using the IC as a tool to align donors. While the GFF was initially very focused on supporting the development of Health Financing Strategies, focus has shifted to supporting the implementation of key health financing reforms. To this end, it is important to consider existing financing strategies or reform plans and analyze what have been the bottlenecks to their implementation.

As the GFF is primarily channeling financing towards the IC through government systems, it hinges on well-functioning Public Financial Management (PFM) systems. Many countries however still rely on input-based financing mechanisms (salary and non salary budget-lines) which limits the linking of funding to priorities and results. The resource mapping exercises supported by GFF are often a first entry point to these broader discussions on PFM reforms and resource allocation decisions.

An important part of the investment case development process is to assess the routine data systems available for monitoring service delivery, health systems strengthening plans and health financing reforms in order to be deliberate about ensuring there are no data gaps. The gaps identified in these information systems should be a priority for financing in the investment case (e.g., complementing DHIS2 with surveys as needed). Investment cases also should include specific evaluations and implementation research. Challenges to the monitoring of health financing reforms are typically more related to political economy than to data systems. Careful stakeholder mapping and assessments of the relevant platforms for monitoring health financing reform is crucial.

The country-driven nature of the GFF model manifests itself in several ways, one of which has been the iterative nature of the approach in the initial three to four years of implementation. While the GFF Business Plan developed in 2015 outlined a clear vision for the model, the stakeholders at the time made an explicit decision to ground truth the approach in an initial four Front-runner countries which eventually grew to a group of 16 First Wave countries. The lessons learned from the operational experience in these 16 countries in the early years of implementation has been foundational to defining the current GFF model. The richness of the model has grown from the variety of approaches adopted by countries because they had significant flexibility in deciding how they would implement the model, including how the results function was operationalized. However, this flexibility, while useful in the early years, also made it more challenging to provide systematic guidance to countries.

Over the last two years, the GFF Secretariat has been consolidating its guidance and technical assistance to countries. While the model remains country-driven, more specific guidance and tools are now provided to countries by the GFF Secretariat and its partners. In the results function, this has meant providing technical assistance to countries specifically to define clear theories of change, to improve the quality of the investment case results frameworks, to define monitoring strategies that are realistic given available data and to support processes which enable effective use of data to manage proactively the implementation of the investment case. The consolidation process has also involved providing greater clarity on the key results – outputs, medium- and long-term outcomes and impact – which the GFF aims to achieve. It also has involved clarifying how results are achieved and – crucially – what is required both from GFF partnership country governments and from their partners to achieve these results. In this period,

the GFF Secretariat has also consolidated its own internal systems which facilitate the provision of technical assistance to countries related to the results function as well as the systems to collect, analyze and report data on results. It is anticipated that the strategy refresh will bring additional refinements to the results function.

While the results function has been consolidated considerably in recent years, this review has also identified ten key gaps that would need to be addressed going forward as part of the GFF Strategy Refresh. These are outlined in this paper and summarized in the last section, notably: i) improving the quality of the investment cases; ii) monitoring quality, efficiency and sustainability; iii) monitoring equity, including gender, more systematically; iv) strengthening national information systems and processes; v) addressing in-country capacity gaps for data use; vi) fostering greater alignment of external financing to national priorities; vii) clarifying GFF value add and roles of GFF partners; viii) strengthening capacity of the GFF Secretariat; ix) improving results reporting; and x) initiating global monitoring.

What results the GFF is aiming to achieve

The GFF aims to improve RMNCAH-N outcomes through a series of country-specific health financing and health system strengthening reforms. The GFF's value proposition lies in its ability to bring together complementary approaches essential to delivering sustainable RMNCAH-N results by grounding each investment case in the existing country health strategy. This is done by convening investors and the country platform to align resources to the prioritized reforms and interventions from the health strategy and health financing workplan, and by facilitating the development of a data use strategy to strengthen programmatic and budget planning. The GFF seeks to create the enabling environment necessary to sustain an innovative approach to data use for decision making.

Core to the GFF agenda is a data-driven approach to enable routine monitoring of both available resources and the implementation of the prioritized reforms to accelerate progress on reproductive, maternal, newborn, child and adolescent health and nutrition, and strengthen financing and health systems for universal health coverage (UHC). This unique approach to monitoring is realized through a GFF-led resource mapping exercise, the development of a prioritized and funded investment case (IC), and a country-specific data use strategy implemented by a country platform under whose remit the IC development and implementation monitoring fall. The GFF approach to a data use strategy aims to increase allocative and technical efficiency through better coordinated implementation, both by supporting evidence-based strategies and interventions and by routinely course-correcting through continued monitoring of both available resources and results.

The **GFF Global Results Framework**, approved in April of 2018 (Figure 2), promotes a monitoring approach that examines the status of core GFF-led activities (e.g. resource mapping, IC development), as well as the implementation of investment case activities (country-specific indicators) that lead to the expected impact (core programmatic and health financing indicators). One of the added values of the GFF is the ability to support countries to bring financial data and routine monitoring data together - and to review financing data as a potential enabler or bottleneck for achieving sustainable results.

Figure 2: GFF global results framework

Investment Case

- Investment case for RMNCAH-N or equivalent
- Set of evidence based priorities financed
- In country liaison or point of contact
- Inclusive process with CSO engagement

Health financing

- Health financing reforms
- IDA/IBRD/ GFF TF- Bank financing in support of the IC

Monitoring Implementation

- M&E strategy and framework in support of IC
- Country-led multi stakeholder platform (e.g., new or established from an existing platform)
- Disbursement of IDA/ GFF TF funds

Core programmatic indicators

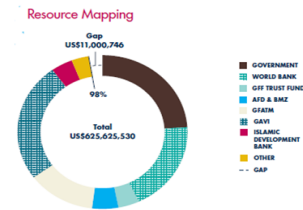
- Maternal mortality ratio
- Under 5 mortality rate
- Neonatal mortality rate
- Adolescent birth rate
- Proportion of the most recent children age 0-23 months who were born at least 24 months after preceding birth
- Prevalence of stunting among children under 5 years of age
- Prevalence of wasting among children under 5 years of age (added later)
- Proportion of children who are developmentally on track

Core health financing indicators

- Health expenditure per capita financed from domestic sources
- Ratio of government health expenditure to total government expenditures
- Percent of current health expenditures on primary health care
- Incidence of financial catastrophe due to out of pocket payments

Country tailored set of indicators

- Investment case specific prioritized indicators linked to scaleup of services and catalytic interventions in health systems strengthening, especially health financing
- Based on the Investment case, results framework and available quality data each country will have a set of defined indicators to report from routine and survey data
- Data sharing agreements and country verification process will be important to ensure this work can be substantiated.



Approved April 2018

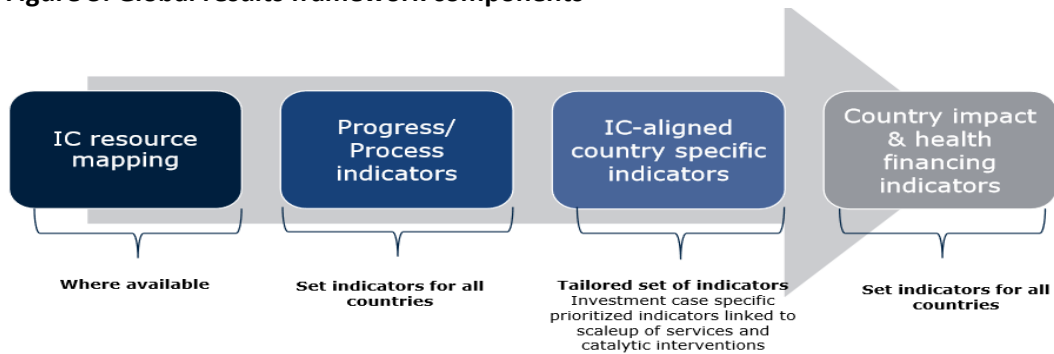
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GFF results approach – Bringing it all together

The combination of GFF-led approaches to finding efficiencies and country-led approaches to implementation are summarized in the GFF Global Results Framework by core components: monitoring; resource mapping; process indicators linked to the GFF model; IC-aligned country-specific indicators; and a set of indicators for all GFF countries to monitor impact.

While more complex to manage at the global level, the GFF made a deliberate decision to establish a results approach that is country driven. This means that, while there is a common “backbone” to the results approach across all GFF partnership countries, the specifics differ in each country based on the priorities they set through the IC process. The GFF purposely did not choose a list of mandatory RMNCAH-N indicators (like GAVI and GF have done for immunization, malaria, TB and HIV). This distinction is important to recognize because it explains why each IC differs substantially, each country collects different data, each country has its own set of health system strengthening reforms, etc. This variation in approaches creates a more complex monitoring system for the GFF Secretariat but – importantly – has made it easier for the countries themselves by shifting the transaction costs from the countries to the partners.

Figure 3. Global results framework components



IC resource mapping

Annual in-country resource mapping exercises provide country stakeholders with information on the sources of financing from the government, the private sector, and donors. Resource mapping and expenditure tracking (RMET) is a key component of the GFF approach. It maps budget and expenditure data to provide a comprehensive picture of funding gaps and alignment of donor and government funding to the investment case and/ or national health strategy priorities. RMET helps the health sector in low- and middle-income countries mobilize additional resources, improve allocative efficiency, and better coordinate planning efforts between donors and governments. RMET is complementary to the National Health Accounts (NHA) process supported by WHO. The NHA are the source data for GFF core health financing indicators and the support of WHO to facilitate their production in every GFF country will be critical to the GFF results agenda. However, the NHA are available only with a two-year delay and not always for all countries. RMET is using more real-time expenditure tracking that is aligned to the IC or the national health plan. The data collected through RMET is not sufficient to complete a NHA, but can help as a starting point and could help speed up the NHA process and improve quality. It is important to recognize that RMET is not just an accountancy tool of the IC; the analysis provides an entry point for efficiency and PFM discussions, increases donor alignment.

Progress/Process indicators

The GFF has identified a number of process indicators that capture components of the GFF model of engagement to document progress on GFF-led activities including, but not limited to the convening of investors and establishment of a multi-stakeholder country platform, development of an investment case, results framework and data use.

IC-aligned country specific indicators

The investment case introduces—often for the first time—the rigor of prioritization based on available resources (which are estimated through resource mapping) and a monitoring strategy to track progress against those priorities. The investment case results framework is country-specific and establishes the baselines and targets the country aims to achieve during the period of the investment case. The results framework should include routinely available output and outcome indicators that reflect the implementation of funded activities related to the health system and health financing reform work plans. The results framework section of an investment case should also include the data use strategy which considers not only the available data but highlights gaps in both data availability and capacity building needs to strengthen data use for decision making. The IC also includes a section that assesses data systems and surveys that are missing and would be required to monitor the implementation of the IC.

The GFF global results framework consists of the GFF core RMNCAH-N impact indicators as well as the core health financing indicators. The GFF has identified eight core RMNCAH-N impact indicators, which are collected by governments and development partners using existing surveys and reporting systems (Demographic Health Surveys—DHSs, Multiple Indicator Cluster Surveys—MICS and other surveys as appropriate).

GFF Core Impact Indicators:

- Maternal mortality ratio
- Under-5 mortality rate
- Newborn mortality rate
- Adolescent birth rate
- Birth spacing (proportion of the most recent children age 0–23 months who were born less than 24 months after preceding birth)
- Prevalence of stunting among children under 5
- Prevalence of moderate to severe wasting among children under 5
- Proportion of children who are developmentally on track

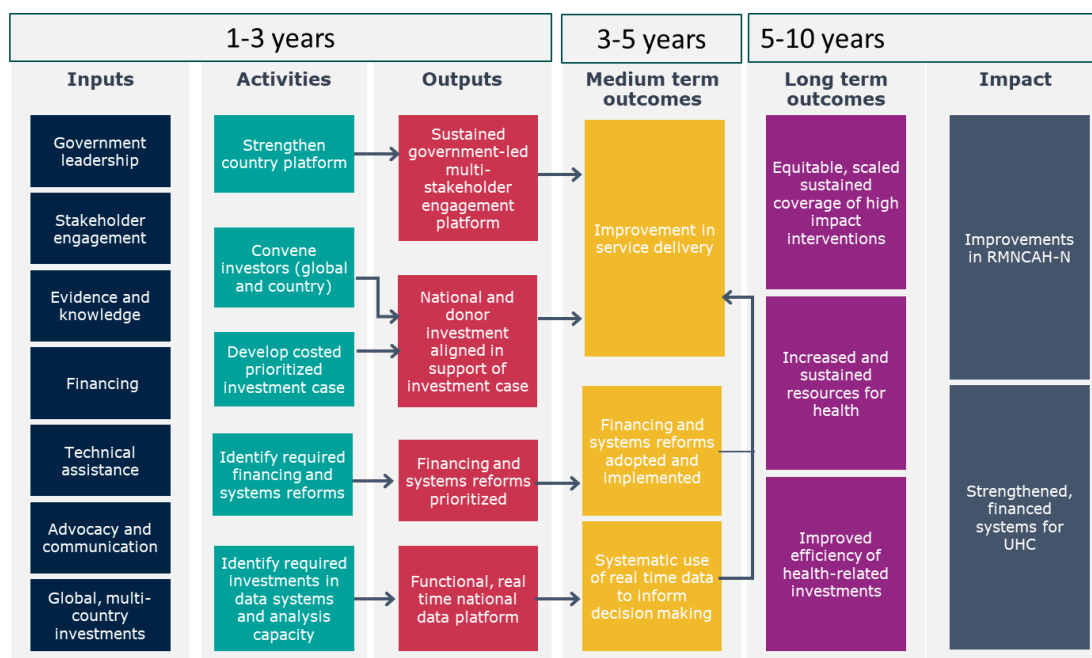
The health financing agenda focuses on increasing efficiency and, where feasible given fiscal space considerations, on domestic resource mobilization. Monitoring of progress to achieve health-financing reforms will be measured through a set of four core health financing indicators:

- Health expenditure per capita financed from domestic sources
- Ratio of government health expenditure to total government expenditure
- Percent of current health expenditure devoted to primary health care
- Incidence of financial catastrophe due to out-of-pocket payments

GFF logic model

The **GFF logic model** serves as the framework upon which centralized data collection, review and analysis is built. The GFF **logic model** documents a clear theory of change with linkages between the core inputs from the GFF to the country-led processes and to the outcomes and impact GFF supported countries expect to attain (Figure 4). The logic model outlines the causal relationship between the GFF inputs and the expected outcomes. This model operates in an environment that includes contributions from the government and a range of partners – the GFF Secretariat and trust fund thus claim contribution to the movement to the right in the diagram (to outcomes and impact) rather than attribution. As the process progresses towards outcomes and impact, the GFF also has less direct control/relation than on the activities and outputs. The GFF logic model summarizes the core business model across countries and establishes a framework to monitor progress during implementation. Importantly, it documents how key components of the GFF model, stakeholder engagement, and the convening of investors, for example, link to health financing and health system reforms and how these reforms are causally linked to improvements in medium- and long-term health and financing outcomes.

Figure 4. GFF logic model



Illustrative time for achievement of outputs is 1-3 years; medium term outcomes 3-5 years, and longer term outcomes and impact 5-10 years.

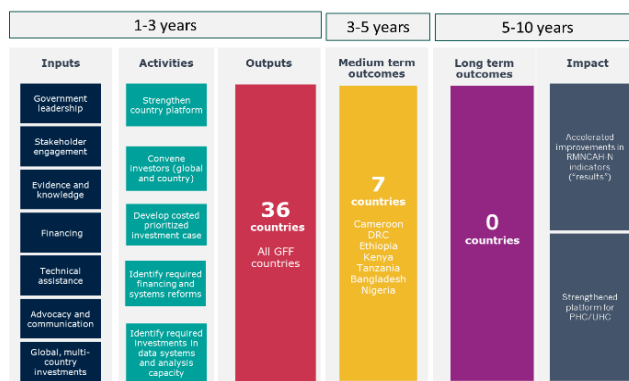
The GFF logic model also specifies the timelines: the GFF works with countries to see changes in inputs, activities and outputs in the immediate term and expects to capture updates during the first three years of entering the GFF, it is expected to see changes in medium term outcomes from year 3-5 and changes in long-term outcomes and impact in the second round of the grants (after 5-10 years).

As a relatively young portfolio, 26 of the current 36 GFF countries joined the GFF from 2015 to 2018 and 21 have completed investment cases. Sixteen countries have a World Bank-financed project that has been effective for more than one year as of March 2020. Only seven countries (Figure 5) have had GFF-related financing which has been under implementation for more than three years and for whom the GFF is currently able to monitor coverage trends over time and report on changes to impact indicators. Those countries are Bangladesh, Cameroon, DRC, Ethiopia, Kenya, Nigeria and Tanzania.

The GFF results approach focuses on the core inputs and activities supported by the GFF partnership, as well as the results achieved through both the GFF process and country-led programming, centered around a prioritized set of reforms.

Core to the GFF model is a country-led approach to improving RMNCAH-N outcomes. Country leadership is assessed through a composite indicator. The GFF approach includes several core

Figure 5. Country categories



inputs required to achieve the reform agenda that is tailored for each country and each of these inputs is monitored by the GFF Secretariat. Stakeholder engagement is a core input to a functional country platform (activity) and is monitored qualitatively through regular missions as well as annually through the GFF country platform survey. Promoting a country-led approach, the GFF supports the establishment of a multi-sectoral country platform comprised of government officials, CSOs, private sector and development partners. The country platform is responsible for developing and implementing a costed, prioritized investment case, achieved through critical activities, including identifying reforms, convening investors, and aligning investments (activities and outputs). In addition to the annual surveys and the missions, the platform is also monitored through monthly internal reports produced by the GFF Liaison Officer.

The inputs stipulated in the logic model translate into activities such as improved country coordination, the convening of global and country investors around one prioritized document focused on RMNCAH-N, and the routine accessing and use of data for decision making. Key to the development of the investment case is a mapping of all available resources, to ensure that prioritized areas are funded. The GFF also brings expertise in identifying and supporting the implementation of core health financing reforms, such as increasing domestic resources, improving efficiency of existing funds through improved public financial management or more strategic purchasing, and better harmonizing donor funding. The status of these reforms is monitored by GFF Secretariat staff on a quarterly basis. Additionally, the GFF model supports data infrastructure in countries, including systems (HMIS, surveys), processes (RBF data verification), governance for the collection, analysis, and use of data. The GFF investment case focuses on strengthening data systems where needed.

Each of these inputs is directly linked to outputs that will lead to improvements in service delivery and improved health outcomes. With support from the GFF partnership, countries take the lead in providing increased and sustained resources for health to enable improved equitable, scaled, and quality coverage of high-impact interventions. These resources are tracked by governments through annual resource mapping and expenditure tracking which is supported by the GFF Secretariat. Increased coverage of quality service provision will eventually lead to accelerated decreases in maternal and neonatal deaths; improved reproductive health outcomes for all women, including adolescents; and decreased stunting and wasting in children under five. Coverage of services is monitored through HMIS, project data and surveys and outcomes are monitored through periodic household surveys; however, more systematic effort will be required in the next few years to improve the ability of GFF countries to measure and take corrective action on quality, efficiency and sustainability. Without this focus on measurement of quality, for example, the GFF would not narrow the gap that is often seen between high coverage of services and poor outcomes and impact. Similarly, a core area of the GFF value add is to improve efficiency and sustainability; these dimensions will require more measurement than is currently the case.

The country-led and partnership approach means that it is challenging to attribute outcomes to specific investments because the investment case implementation is monitored as whole. As opposed to how development assistance is traditionally monitored, donor by donor, the GFF intends to monitor the implementation of the entire Country Investment Summary (CIS) (page 11), which includes the investment case and the health financing work program to which many financiers and implementers from various sectors are contributing at different program areas and levels. Thus, the GFF focus is on the implementation of the components of the CIS, not the attribution of results to individual financiers. The specific value-add of the GFF in this process – including the technical assistance provided – is identified in the CIS and monitored regularly. The GFF's role is to support governments – including building their capacity – to take the lead in

mobilizing and incentivizing a range of actors to contribute effectively to the achieved results. The GFF also takes responsibility to “keep an eye” on results and, in cases where gaps are identified, some of the following levers can be used to correct the situation: i) catalyze the World Bank and other partners to raise the issues with the government; ii) double down on support provided by the Secretariat, either the capacity development and/or the specific technical assistance; iii) provide more implementation support (e.g., the independent consultants described elsewhere in this paper), iv) mobilize key actors such as civil society to advocate, etc.

Focus on the poor and fragile: a challenging context for the GFF results agenda

The GFF’s focus on lower income countries, several of which are fragile states (approximately one third of GFF partnership countries are classified as fragile and/or conflict affected) has implications for the results function. The resource constraints inherent in lower income countries make it even more challenging to achieve full prioritization within investment cases (i.e., only include what is financed) which is a key value-add of the GFF. A high proportion of GFF partnership countries have weak delivery systems and particularly weak information systems to provide reliable routine monitoring data. While large initiatives such as the Demographic and Health Surveys (DHS) and the Multiple Indicator Cluster Surveys (MICS) provide valuable information to complement routine data systems, there remain gaps in the frequency and financing of these surveys. GFF countries also typically have very little facility-based information beyond what is available through routine health information systems or specific projects (e.g. results-based financing data from World Bank financed projects), with some of these systems being nascent and others having quality challenges.

Perhaps most challenging, however, from a GFF perspective, has been the fragmented nature of the partner engagement in lower-income GFF countries which have a higher dependency on external financing. This fragmentation, coupled with weak government capacity for data analysis and visualization, has made it challenging for governments to keep up with the various reporting requirements and to mobilize stakeholders around a common prioritized plan which is supported by consolidated and analyzed data for coordinated implementation. In some countries, too many donors that have specific reporting requirements for which data is extracted and serves a third party – this becomes reporting instead of monitoring. Donors also have diverse reporting requirements – often vertical – which means that country stakeholders, including the government, do not come together on a regular basis to review the portfolio together. As a result, national health plans or strategies are only monitored on an infrequent basis (mid-term review, end-line review). Data remains in-actionable – with reports going upstream, but decision-making and planning not translating to changes in implementation. This all generates a fragmentation that is observed not only within the government but also with donors and other partners. The support from the GFF through the use of data at the country platform aims to address these factors.

In addition to working with several of the poorest and highest burden countries, the GFF support is also usually targeted to the poorest and worst performing regions within these countries. These areas are usually performing poorly because they have the weakest service delivery systems, including information systems, thus posing an additional challenge for the GFF partnership. GFF partnership countries also have significant gender disparities and barriers and they are not always well equipped to analyze these or to define and monitor the reforms needed to address them. This poses a challenge for the GFF Secretariat given the centrality of gender disaggregated analysis and gender-related reforms to the GFF results agenda. The GFF has recognized the need for

disaggregated data analysis in order to facilitate dialogue in-country on these issues and will facilitate disaggregated data collection and analysis accordingly.

A joint effort: accelerating RMNCAH-N results

The GFF logic model highlights several critical inputs necessary to achieving results. These inputs are coordinated by national governments and require collaboration and contributions from a range of stakeholders. This mutual accountability means that routine reviews must include stock-taking of commitments from all the partners. At the moment, partners are not all sufficiently mobilized around the GFF-related results agenda in-country and thus there is room to improve the efficient use of partner capacity towards a common agenda. The GFF Secretariat will support governments to clarify the roles of partners in a more formal manner to increase mutual accountability for GFF-related results. Table 1 outlines minimum conditions for an effective results function for the GFF partnership with indications of which types of partners contribute, although the contributions from partners will vary by country. These minimum commitments require mutual accountability – with all partners bringing their data to the country platform for discussion. Especially in countries with weaker data systems, large financiers such as GAVI, Global Fund, bilaterally-funded programs, etc. all have data that could be used and analyzed together. Right now, there is an expectation that the government would share its data and reports, but the same expectation is not clearly articulated of all partners.

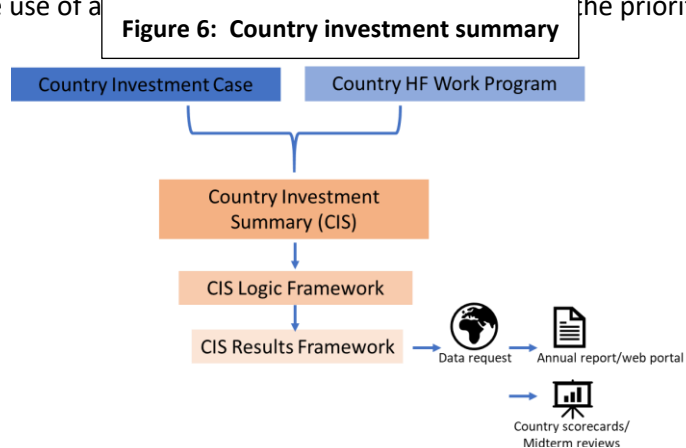
Table 1. Minimum conditions for GFF results function and partner contributions

		Government	Donors	Technical Partners	GFF
Prioritization	Resource mapping	✓	✓	✓	✓
	Priority areas for monitoring defined	✓			✓
	IC results framework developed Country	✓			✓
	Investment Summary developed	✓	✓	✓	✓
Data Use	Data availability	✓			
	Data sharing	✓	✓	✓	✓
	Data analysis	✓		✓	✓
	Routine reports/visuals for CP	✓		✓	✓
	Routine reports/visuals for Global stock-taking	✓		✓	✓
System Strengthening	HMIS landscape assessment	✓		✓	✓
	HMIS strengthening	✓	✓	✓	✓
	Process for report and decision dissemination	✓			
Planning and Accountability	Updates to implementation plan based on routine review	✓	✓	✓	✓
	Updates to Budget based on routine review	✓			

GFF Country Investment Summary (CIS)

While the GFF process in-country is anchored in an investment case (IC), the country-driven nature of that process has meant that the IC serves a useful purpose in creating strong national ownership around a set of priorities but it can fall short on the prioritization and especially on the sharpness of the results framework and the monitoring strategy. The IC also often does not include the full health financing program and does not fully define the technical assistance and other support provided by the GFF Secretariat and partners.

The CIS thus serves the purpose of “taking a few steps back” and outlining where the country was in terms of economic development and on the status of the main results which the GFF aims to achieve. As a common vision amongst country stakeholders, the CIS provides, in a template format, the country context, baseline data and decision points made to determine a prioritized set of reforms. Most importantly, the CIS defines the value-added in a country and defines indicators that will track this value add over time. The CIS further articulates the GFF country engagement narrative through the use of a **Country Investment Summary (CIS)** the prioritized reforms of an investment case and links those reforms to a core set of output and outcome indicators to monitor the implementation of and progress achieved through these reforms. The process of developing a CIS logic framework helps to sharpen the results frameworks from the investment cases – which remain overly ambitious – and help in streamlining reporting.



This framework essentially summarizes the investment case theory of change and leverages the investment case results framework and the health financing work program¹ to ensure that the technical RMNCAH+N, health financing and health system strengthening reforms are clearly articulated and that the activities being implemented to achieve the reforms can be monitored.

The CIS logic framework core set of output and outcome indicators are further utilized to populate a **CIS results framework**. The CIS results framework will represent a summary set of indicators, directly related to the funded activities being implemented referencing the investment case, the health financing workplan and applicable indicators. This summary set of indicators with validated sources and defined process for collection and reporting provides all stakeholders with the ability to routinely understand what progress is being made and, importantly, determine if course correction or budgets need to be adjusted. The CIS results framework will be utilized by the GFF for annual data collection documenting country-specific progress for the GFF annual report, routine portfolio reviews and TFC/IG updates. The CIS results framework will also be core to informing the mid-term and end-line reviews of the investment case and can be used by country platforms to develop investment case scorecards to flag challenges and successes with

¹ A health financing work program is developed because, in many cases, the investment case does not reflect the full health financing agenda that is pursued through the GFF process in a country.

implementation. The country-specific annually reported indicators will be shared via the **GFF web portal** enabling users to quickly view trends over time at national and sub-national level.

Role of World Bank-financed projects in the GFF results approach

The GFF engagement in a country should be financed by four types of funds: i) domestic resources; ii) IDA and/or IBRD resources provided by the World Bank; iii) external bilateral and multilateral funds; and iv) private sector resources. The World Bank resources are always a source of financing for an investment case and that is how the GFF trust fund grant is programmed in a country. This formal link (i.e., co-financing) to World Bank-funded projects strengthens the GFF approach to results in the following ways:

- **Policy dialogue.** The link with the World Bank means that key results issues can be raised at senior levels in government through the ongoing dialogue that the World Bank has in-country. This presents an opportunity to raise issues relating to the priority reforms that are identified in the investment case.
- **Incentives for data use.** The World Bank often leads in GFF countries at promoting and supporting the use of results-based approaches described in this paper, often with other partners aligning to the same indicators. This creates an incentive to generate and use data and shifts the focus from inputs to results because large disbursements are linked to the achievement of results.
- **Data systems strengthening.** The GFF trust fund finances technical assistance in-country – including for strengthening national health information systems – through the World Bank. The GFF trust fund co-financing in the projects (funds managed by the governments) also often have a focus on national health data systems strengthening, including on civil registration and vital statistics (CVRS).
- **Reducing fragmentation.** The World Bank convening power is often used to facilitate the adoption of common approaches for implementation, with or without pooling of funds. This can include the use of the same indicators and data for monitoring of results funded from different sources of funding and thus contributes to reducing fragmentation and the related transaction costs for governments.

Given the co-financing by the GFF trust fund to these World Bank projects, the GFF Secretariat has direct oversight over the results monitoring of these projects. The main monitoring is the responsibility of the World Bank which it effects through the legal agreements and supports through regular monitoring processes. The GFF Liaison Officer based in-country is closely involved in supporting the project monitoring as is the GFF Secretariat Country Focal Point. The World Bank Task Team Leader for the project produces comprehensive implementation status reports (ISRs) which are reviewed by World Bank Management. These same ISRs are a key source of information for the portfolio tracker. The implementation status and the likelihood of achieving the project results are thus monitored regularly. Other dimensions such as disbursement levels, etc. are also monitored by the GFF Secretariat. When performance challenges with projects are identified by the Secretariat through its portfolio reviews, the GFF Secretariat engages with the World Bank teams to review the corrective actions which have been identified by the government and the World Bank and to see what additional support may be required from the GFF Secretariat to facilitate improved project performance.

The oversight which the GFF Secretariat has over other sources of financing for the investment case is much less direct than for the World Bank funds. In the case of non-World Bank funding, the main oversight is through the various monitoring instruments that are described in this paper, notably the resource monitoring and expenditure tracking and the results monitoring which takes place through the country platform and requires the collaboration of the stakeholders involved in order to function effectively.

Support to countries from the GFF Secretariat on the results agenda

As noted earlier, the GFF has been intensifying the technical assistance it provides to countries to ensure they each have at least the minimum required support to use evidence and data effectively to prepare and implement sound investment cases. The starting point is an informal assessment of country capacity and needs in order to provide tailored technical assistance. This support is nimble and is easily modified to meet unanticipated needs. These are the types of support provided where gaps exist:

- **Government focal point.** The GFF Secretariat has recently developed a comprehensive knowledge and learning strategy which identifies the Government Focal Point as key role requiring increased capacity and motivational support in order to ensure there is strong coordination of the country platform. The skills and motivation required to lead a data driven process are at the core of the forthcoming learning program that will be proposed to Government Focal Points.

- **Country platform.** For a few years already the GFF Secretariat has provided the support of the GFF Liaison Officers, who report to GFF Secretariat Focal Points to support the functioning of the country platforms. The GFF Liaison Officer is another of the key roles that are targeted by the recently developed knowledge and learning strategy, including their ability to mobilize stakeholders for the common use of data. Every country also will continue to receive the support of monitoring specialist consultants hired by the GFF Secretariat. These specialists each support several countries on technical issues such as development of theories of change, refinement of results frameworks, and development of monitoring strategies, including data visualization and use for decision-making. The GFF Secretariat has also developed a survey instrument and carried out the first annual country platform assessment in early 2020. This annual assessment will complement the annual self-assessment process that will also start in 2020 (instrument has been developed and piloted in Liberia) which also includes an assessment of data use. Each country receives a report from the survey every year that identifies actions to improve the functioning of the country platform; these actions are agreed with the Government Focal Point and included in the work programs of key GFF Secretariat staff, notably the GFF Secretariat Focal Point and the GFF Liaison Officer.

In a select number of countries, the GFF Secretariat is also planning to hire a firm that will support the government – and the country platform more broadly – to prepare and implement quality investment cases. This support provided by the firm will vary based on the specific needs in the country, but is expected to include at a minimum support for data analysis and visualization at national and particularly at sub-national level given that this has been a challenge in virtually every GFF partnership country that has reached the implementation stage. It is anticipated that countries would receive as part of the firm contract the support of external consultants who would be placed at subnational level to accelerate the use of data by the government and its partners. This approach builds on a similar model that was used effectively to improve effective

coverage –including addressing equity challenges – in areas such as child vaccination and tuberculosis control.

➤ **Support for convening of investors.** As noted above, a key element of the GFF data driven approach is to support countries to undertake annual resource mapping and expenditure tracking for the priorities identified in the investment case. This is an area of support from the GFF that has met very high demand in-country and which the GFF Secretariat has scaled-up this year. The next frontier in this area of support is to move beyond the current data collection and analysis work (i.e. generating resource mapping assessments) to using the data for greater alignment of domestic and external resources against the priorities of the investment case. The GFF Investors Group and/or the Trust Fund Committee would be good mechanisms to facilitate discussions with the external financiers about countries in which some of the GFF partners at global level are not yet aligning their resources to the investment case in-country. This process would build on the dialogue that has already been initiated in the last year by the GFF Secretariat with partners who are increasing their alignment, such as DFID in Somalia, France in countries of the Sahel, with the Islamic Development Bank in Cote d'Ivoire, with the Bill and Melinda Gates Foundation in Nigeria and between GAVI, the GFF, the Global Fund and the World Bank in several of the countries who recently joined the GFF partnership.

➤ **Quality of the investment case.** Having an investment case that identifies a set of evidence-based priority services and reforms that align with the burden of disease, the system strengthening priorities (identified through rigorous gap analysis) and the health financing reforms is the foundation of the results function at the GFF. However, the quality of investment cases to date has been variable. The investment cases then also need to have a robust theory of change, a prioritized results framework that can be monitored and a monitoring strategy. The GFF Secretariat now systematically supports this process in the following ways: i) preparation of a data pack to support countries to identify the investment case priorities based on data; ii) revised investment case preparation guidelines that provide more guidance on a process to generate a quality investment case; iii) initiation missions in every country upfront to support the selection of the Government Focal Point at the right level and mobilization of the key stakeholders in a country platform; iv) sharing lessons with countries from technical reviews of the portfolio (e.g. review of MNCH in existing investment cases); and v) ongoing informal advice from the GFF Secretariat Focal Point, which draws from various strands of technical assistance (e.g., health financing, RMNCAH-N, results monitoring, CRVS, gender, etc.) available either within the GFF Secretariat, in the World Bank or within the technical partners active in the country.

➤ **Improving data availability and quality.** The GFF focus on improving the quality of health systems -- and particularly on strengthening primary health care service delivery at the front-lines – will require more real time/ innovative/ light touch approaches to collecting data to guide implementation. Given the challenging environments in which GFF countries operate, it is often the case that data for indicators that best reflect implementation are not routinely available and/or data collection may be incomplete. It will be critical in these cases to leverage the GFF partnership to ensure that a data systems landscape assessment and plan for strengthening these systems is prepared and financed. The GFF may provide – as a last resort, once other potential sources of funding have been exhausted -- financial and technical assistance for surveys, including rapid health facility-based surveys and population-based surveys, to meet critical data gaps for monitoring the implementation of the investment case. Health facility data will be part of the core focus of the GFF partnership and country support going forward. The GFF will also continue to utilize the facility-based telephone surveys, initially launched to assess the impact of COVID-19

on service delivery, as a tool for facility-based assessments. As noted earlier, given the challenges in some of the fragile states in which the GFF is engaged, leveraging a tool like telephone surveys serves as a source of information necessary to inform key questions related to service delivery. Given the critical gap that exists on quality of care, the GFF is well placed to strengthen country capacity for generating and making use of data on quality.

➤ **Supporting data use for planning and action.** In order for the GFF approach to be effective, there needs to be a strong focus on using data at national and subnational levels for planning, monitoring, gap analysis, identification of solutions and creation of mutual accountability to implement the agreed solutions, while integrating learning loops into the process through implementation research. Critical to realizing the results focus of an investment case is ensuring that not only are data available, but that a core set of indicators that best monitor what the investment case is trying to achieve can be analyzed and visualized routinely for the country platform and other stakeholders can easily monitor progress. But the process cannot stop at visualization: attention needs to also be given to systems and incentives for decision making and for creating mutual accountability. With the development of a Country Investment Summary the shared vision with a summarized results framework can be implemented for data use. Weak capacity and low motivation for data use in-country is perhaps currently the largest challenge the GFF model faces during implementation of the investment case. The GFF will support the establishment of data use processes with the aim of institutionalizing a routine system of data analysis and use centered initially with the review of routine reports and visuals at the country platform level, but with a larger view of establishing processes for data and decision sharing down to the sub-national level to facilitate a feedback loop of implementation challenges and successes. While leveraging the in-country partnership that may result in the use of existing in-country analytic working groups for data analysis the GFF will also provide direct support for data analytics utilizing the GFF analytic working group and/or 3rd party contracts. The GFF has also produced a data use guidance note and accompanying checklist for use by the GFF focal point and country platform to provide a systematic approach to achieving routine monitoring of the investment case.

Box 1. Building data-use processes

Data selection:

- ▶ Identify health financing, health system strengthening, and RMNCAH-N outputs/outcomes to monitor
- ▶ Determine quality and reliability
- ▶ Determine accessibility and routine availability
- ▶ Ensure data is cleaned and analyzed

Data use:

- ▶ Develop processes for data curation and interpretation
- ▶ Disaggregate data as needed (by subnational area, gender, and age) to promote equity
- ▶ Include data from multiple sources (such as health output and financial disbursement data) and triangulate
- ▶ Develop routine data visuals
- ▶ Establish data review process at national and subnational levels
- ▶ Document decisions to course-correct

➤ **Support country performance reviews.** Countries are developing annual, midterm, and end-line reports together with the Countdown to 2030 network of academic institutions. The GFF and Countdown to 2030 partnership is fostering relationships between regional and local academic institutions and ministries of health in order to conduct analysis for annual and midterm reviews of the investment case and national health strategies in 22 GFF countries. Aligned with the development of a data use strategy, the GFF is also working directly with country platforms to ensure that routine data is available, analyzed and visualized to support a semi-annual review of progress with a focus upon sub-national level data to enable course correction as needed.

➤ **Using results-based financing approaches.** The GFF trust fund co-finances World Bank projects which have a heavy focus on results-based financing approaches, whereby financial disbursements are made not on the basis of inputs but rather on the basis of results achieved. These approaches have shifted the focus of monitoring from primarily focusing on inputs, to a

greater focus on whether the outputs are delivered to ensure intended outcomes are being achieved. Results based approaches – such as performance-based financing, programs for results, etc. – require strong data processes (e.g. verification) to assess the achievement of results which trigger the disbursements and thus have given a stronger focus on data in health systems than was previously the case and have also incentivized governments and other stakeholders to focus on using data for decision-making. Different results-based financing approaches have been – and will continue to be -- used across the GFF portfolio depending on what the value-add of the GFF is in that country.

Disbursement-liked indicators at national and sub-national levels have been used in countries such as Ethiopia and Nigeria to incentivize policy changes and improvements in service delivery. In this approach the source of data for results verification is usually annual nimble surveys. In some other countries, notably Afghanistan and Nigeria, performance-based contracting of non-state actors has been used as a form of strategic purchasing that capitalizes on available capacity outside the government system. Results are again usually verified through nimble surveys or through an independent verification agency to confirm some process results. The most widely used form of results-based financing in the GFF portfolio has focused on the front-line service delivery whereby specific services and their quality are purchased at pre-agreed rates. The services to be paid for are confirmed through a combination of facility-based verification of both quantity as well as quality of services. In many cases there is an engagement of civil society groups for verifying patients' existence and assessing their perceptions of care. In some GFF partnership countries (e.g. Ethiopia, Mozambique), the same indicators and data sources are being used by several donors to track results, which has created an incentive for regular joint reviews as the GFF intends the country platform would do to monitor the implementation of the investment case.

➤ **Strengthening routine data systems.** As noted earlier, the current reliability and timeliness of routine data systems varies considerably in GFF partnership countries. While taking steps to ensure nimble systems (e.g. light surveys) are in place to support the data-driven discussions and decisions of the country platform, the GFF will also support the strengthening of routine data systems. Based on the findings of the HMIS landscape assessment, projects co-financed by the International Development Association (IDA) and the GFF will support the strengthening of HMIS based on the assessment findings and the resource mapping activity to determine both where in the process of the HMIS strategy a country sits as well as the current available funding.

GFF Governance arrangements for results

The results function within the overall GFF model is delivered through a shared accountability approach that includes the following structures:

- **Country Platform.** The core accountability forum for GFF related results is the country platform. This “platform” is not necessarily just one committee; it typically is more of an “ecosystem” of coordination mechanisms and includes coordination/decision-making entities at sub-national levels. This is the structure through which priorities are set through the investment case and the Country Investment Summary and it is the body that is meant to review data on status of implementation and take collective decisions on corrective actions. It should meet at least twice per year to serve that purpose and more often when specific tasks are required, such as when the investment case is being developed. However, the

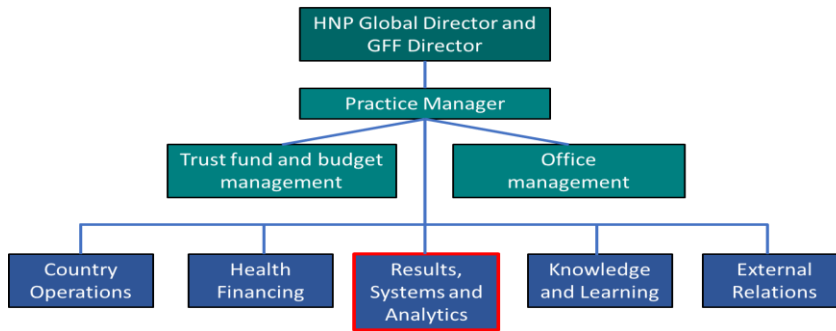
current effectiveness of the country platforms – in terms of their ability to effect change – varies considerably. One of the challenges is that the country platform is not usually a decision-making body and thus other mechanisms need to be used to ensure that the consensus which has been built in the country platform through the use of data is translated into actions which are bound by mutual accountability.

- **GFF Investors Group (IG).** This group will serve to facilitate global alignment with the needs of countries that emerge from the country analysis. For example, it can be a forum to discuss and address structural barriers within participating organizations that hinder alignment to the priorities identified in the investment case. It will also be a forum to discuss countries that need more financial or technical resources to accelerate results in certain areas. This is not a function which the Investors Groups has yet played.
- **Trust Fund Committee (TFC).** This is the mechanism that reviews the efficiency of the GFF trust fund investments in-country (which are financed by the Committee members) and the performance of the Secretariat in managing for results. It is also the body that sets policies related to results.
- **Technical Advisory Group (TAG) on results.** A new TAG will be created to advise the GFF Secretariat on results-related matters. It will provide updates to the Investors Group. A member of the Trust Fund Committee will have a seat on the TAG to facilitate coherence with discussions in the TFC as noted above.
- **GFF Secretariat Management.** GFF Management will be accountable to the TFC to deliver the results agreed in the work program that is approved by the TFC through the annual budget approval process. The GFF management supervise the staff who oversee the results function in-country, as explained in the following section.

Operationalizing the GFF results approach

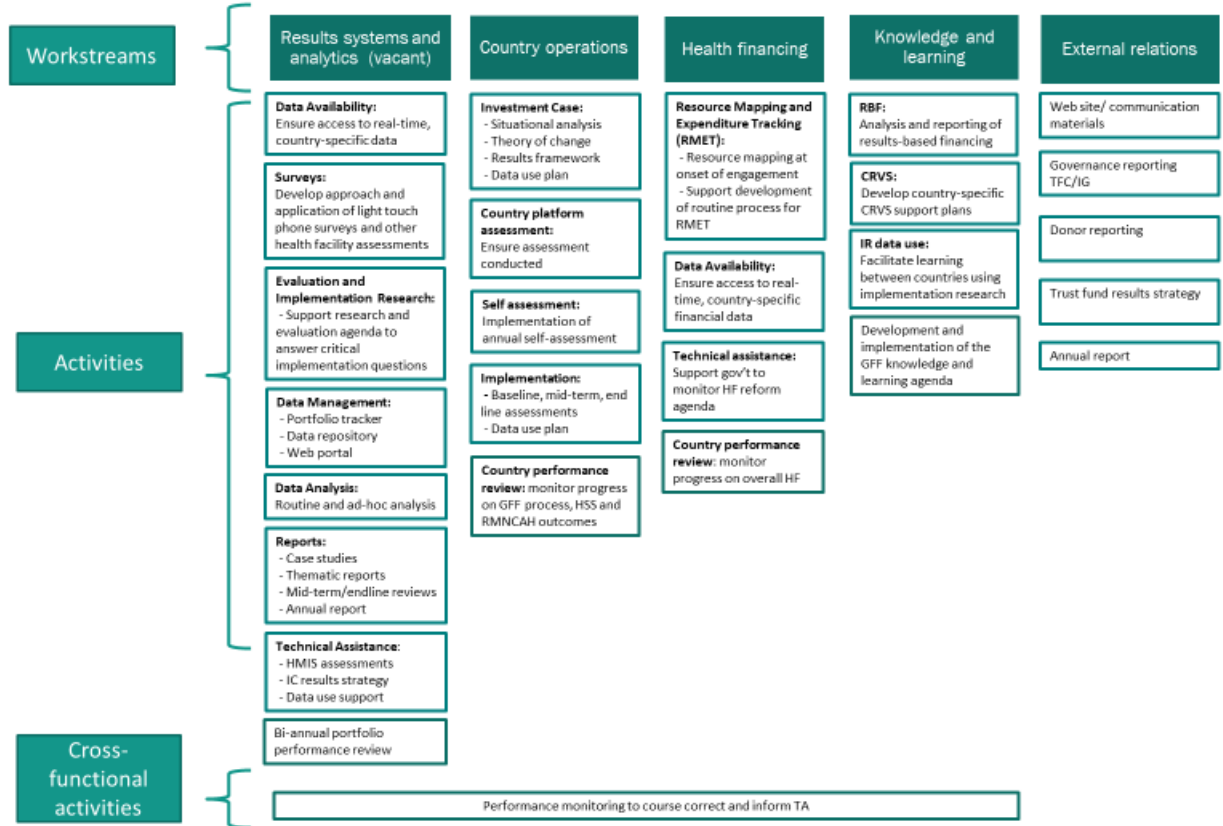
The results function within the GFF Secretariat has until now been integrated within each of the existing workstreams with no overall node to enable strong internal coordination on results. While there will continue to be a need for each work stream to play a role in the results agenda, the comprehensive approach outlined in this paper will require the creation of a dedicated “Results systems and analytics” workstream with its own Workstream Lead who will report to the Practice Manager (Figure 7). While the workstream will have its own work program and specific areas of accountability, like other workstreams, a considerable proportion of its work will focus on enabling other workstreams to deliver effectively on their roles in the results function. This new workstream will also be accountable for the effective functioning of the results function and will monitor the various aspects of the GFF results function described in this paper (across workstreams) and identify corrective actions as needed. The work will be coordinated within the Secretariat across the workstreams through a “Results working group”, which currently exists and includes members of all the workstreams. A Results Lead will be recruited to lead the new workstream as well as staff and/or consultants with additional skillsets necessary for routine analytics, the systems to support routine data use and operations research. The core building blocks of the results workstream are further detailed in Figure 8.

Figure 7. GFF Organogram



Overall analytic function. Obtaining data from countries, data cleaning/analysis and reporting are core responsibilities of the Results, Systems and Analytics workstream. The workstream will facilitate data use across the Secretariat with the intent of focusing on ongoing technical assistance and strengthening the ability of all stakeholders to understand how progress is being achieved across the elements of the GFF logic model. The growth of the GFF portfolio in recent years has outstripped the capacity for the Secretariat with its existing staff to fully undertake all the analysis required. It will be necessary to increase the analytical capacity of the Secretariat in this area.

Figure 8. Results agenda accountability across GFF Secretariat workstreams



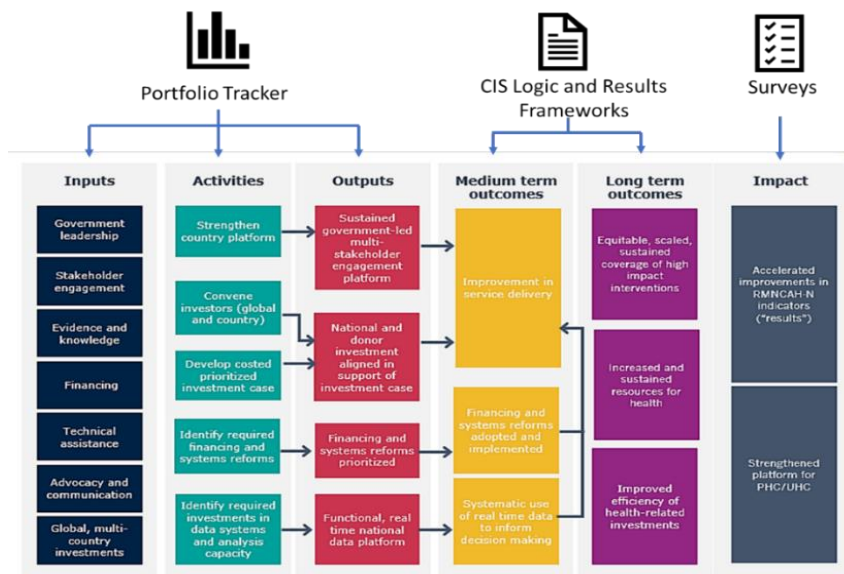
Data availability is a challenge in several of the GFF partnership countries. Identifying gaps in the availability of routine health and financial data needed to monitor the investment case will be addressed by the new results workstream through both long-term support strategies and immediate-term approaches such as utilizing light-touch facility-based and phone surveys overseen by the results cluster as well as supporting the development of data collection systems to monitor financial data supported by the health financing cluster. The selection of appropriate, timely and available data begins during the planning of the investment case and is facilitated by the GFF country focal point in the country operations cluster. While technical assistance is provided by both the results and health financing clusters to finalize a ‘fit-for-purpose’ results framework.

The **implementation research** workplan for a GFF partnership country is overseen by the results workstream but the country dialogue on this work program is led by the GFF Focal Point (Country Operations workstream) and cross-country learning is facilitated by the Knowledge and Learning workstream.

Country investment summaries. The results workstream is responsible for supporting the process (led by the GFF Secretariat Focal Point) of engaging with country stakeholders to prepare the Country Investment Summary and the monitoring instruments it contains. Perhaps the most critical element of this process will be the definition of the value-add for the GFF in the country.

Data management. The results workstream will lead on results data management within the Secretariat. Indicators utilized to monitor the inputs, activities, outputs, outcomes and impact are identified in three primary sources of documentation; the GFF Portfolio Tracker, the CIS results frameworks, surveys/assessments, and population-based surveys (Figure 9).

Figure 9. Monitoring country progress



The GFF portfolio tracker is an internal management tool for the GFF Secretariat which provides portfolio-wide information on investment case development status, investment case content, financing and disbursement data, tracking of technical assistance financed by the GFF and health financing work program details. **The CIS logic and results frameworks** serve to facilitate monitoring country-specific progress of the medium- and long-term outcomes while population-based surveys will remain the primary source of information to document national level impact over time.

The primary aim of GFF data collection is to consistently capture both required GFF core impact indicators and country-specific national and sub-national indicators as appropriate for each country's results framework. The GFF is therefore developing a central **data repository** to host data on core indicators retrieved from a variety of sources in a single system that is both secure and accessible. Additionally, GFF stakeholders need to view country data on a routine basis. To this end, a **GFF web portal** is being designed to produce dynamic, flexible analyses and visualizations for use by decision makers at the country, Investors Group/Trust Fund, and Secretariat levels.

GFF web portal. To facilitate use of data at the global level in a more transparent way, the GFF web portal (Figure 10) is a web-based tool that will provide analysis and visualization of data across the portfolio. Given its complexity, the tool will be developed in a phased approach. The full tool will eventually include data across the GFF logic model, from process and output to outcome and impact data, and will provide results monitoring visualizations for each of the 36 GFF partner countries. The data will be structured to reflect the specific value-add of the GFF in

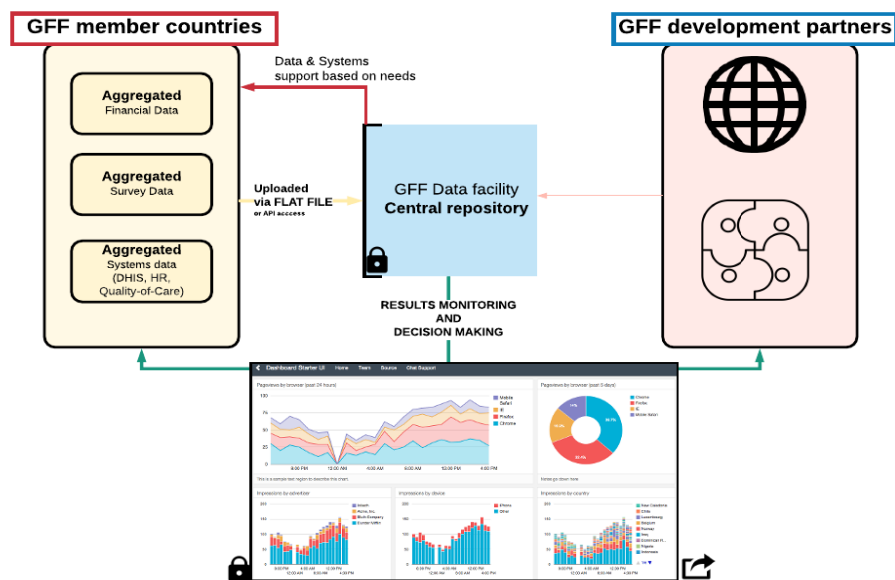
each country. Data sharing agreements with governments and the partners who adhere to the GFF process in-country will be required in order to enable the GFF web portal.

The GFF web portal will be linked directly to the GFF data repository, a database containing national and sub-national results data, country-led process data, financial data, and survey data specific to each country in order to:

1. Monitor the development, implementation, and progress of country Investment Cases
2. Track progress of specific program areas
3. Serve as a GFF communication and monitoring tool

Importantly, the web portal provides additional transparency and a systematic approach to documenting and sharing analysis of key gaps as well as agreed actions from country platform process and will house the results of country platform surveys, country self-assessments.

Figure 10. GFF web portal



The web portal will contain data from each component of the GFF Logic Model, including the following areas:

- Country-led **process data** from the GFF Portfolio Tracker, updated on a quarterly basis with country progress along the GFF process
- National and subnational **output and outcome** data from country sources
- **Impact data** from population-based surveys
- Overviews of areas of programmatic interest (CRVS, SRHR, Health Financing, Private Sector Engagement, and other areas)
- This data will be available on the web portal at the global level, providing a summary of all GFF countries, as well as at the GFF country level and subnational level.

The web portal will include customized section for each GFF partner country, based on the specific value add of the GFF. Country pages will visualize the data outlined in each country logic framework, including output and outcome data from country data sources. These will include but are not limited to:

- HMIS data
- Health Financing data
- CRVS data sources
- Data from large-scale projects (e.g. RBF data from World Bank financed projects)
- Resource mapping data
- Country-specific surveys and reports

Reports will be designed to allow donors and country teams to interact with the data on a routine basis, with reports specific to each country's reforms and Investment Case priorities. Reports will be customizable and flexible to different programmatic areas and data downloads will allow donors to view the full scope of results monitoring data. Country case studies will allow donors to view in-depth stories for each country using country-approved analyses, indicators, and data visualizations.

REFORMS	Indicator	OUTPUT	Data Source	Indicator	OUTCOME
Implementation of national health insurance (NHIS)	Number of districts covered by the CMU Number of people covered by the CMU Number of individuals enrolled in CMU who contribute on time Share of OOPs in THE		CMAM database CMAM database NHA		Share of the government budget to health Share of public health spend to primary care (category TE)
Scale-up of PBF nationally	Number of districts under PBF		PBF portal		Incidence of catastrophic pa
Decentralization of health districts (districts and ESFC have more control of their spending/budget)	Proportion of MoH budget controlled by districts (and ESFC) Share of health spending going to non-salaries		Budget (BOOST tool) TBD		Percentage of health spend financed by domestic resource
Program budgeting	Program budgeting implemented (Yes/No)				
Construction and rehabilitation of health facilities	Percentage of the population less than 60min (travel or by road) to a health facility Number of health facilities constructed or rehabilitated		AccessMod DEM report		Needs satisfied in EmCNC ARV coverage
Increased Quality of human resources	Percentage of public and private health facilities meeting the norm in terms of human resources		Care quality guarantee		Proportion of women who delivered were seen in immediate postnatal care (within 2hrs after delivery)
HMIS improvement	Timeliness of monthly facility reports in the DHIS2 Number of private health facilities registered and reporting data in the DHIS2		DHIS2 DHIS2		Number of pregnant women received HIV testing (PMTC) Number of districts conduct community health activities
Strengthening supply chain	Availability rate of major commodities (health facility stock)		PBF portal		Availability rate of tracer room (districts and hospitals)
Strengthening community health	Number of cases taken care of by the community health worker (malaria, diarrhea, pneumonia)		DHIS2		Number of children with SRD prescription ANC coverage in the health facility
Improved notification of deaths by health providers and CHWs	Number of maternal deaths notified by the health care provider and CHW		MAQPI		ANC coverage in the first trimester Number of deliveries in the health facility
Improved quality assurance	Average quality score of health facilities The integrated quality assurance tools are developed, approved, and disseminated Number of health facilities receiving an integrated supervision visit every trimester		PBF portal DHIS2 administrative data PBF portal		Couple Years Protection DTG-Htg-HB3 vaccine cov

Reporting and communications. The results workstream supports the production of various reports, notably portfolio-wide thematic reports, e.g. on sexual, reproductive health and rights (SRHR), on domestic resource utilization and mobilization (DRUM) and other topics in collaboration with technical counterparts. They also produce the analysis for the annual report and are the main source of information on results to support the GFF communications function.

Each year, a select number of countries will be highlighted based on how long they have been part of the GFF partnership, availability of routine data and timing of population-based surveys. The GFF will produce country-specific reports providing additional detail on the implementation planning and the results achieved based on the CIS and will utilize sub-national data disaggregated to support answering key questions related to service coverage, delivery, equity and trends over time.

Analyzing country progress as part of the global partnership will be captured through a formalized partnership with Countdown to 2030. The GFF will leverage the broader partnership of the Investors Group as part of an advocacy plan which includes but is not limited to jointly promoting an “Annual state of RMNCAH and Health Financing Global Update”, which will be discussed at the Investors Group in order to agree on a few key global actions each year which the partnership will take forward to accelerate progress on women, adolescent and child health and nutrition.

How the results function is managed within the GFF Secretariat

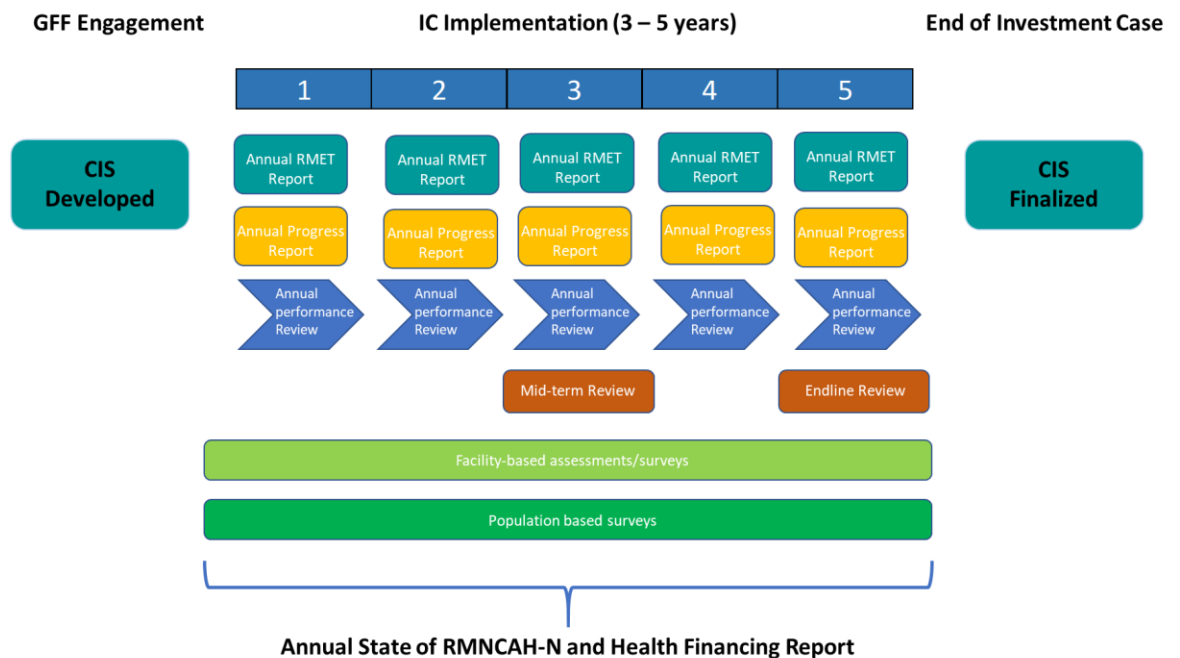
The results function is ultimately the responsibility of the Practice Manager who serves as Head of the Secretariat. In order to implement the results function on a day-to-day basis, the following roles have been defined within the Secretariat:

- **Results workstream.** As described earlier, the results workstream is responsible for the overall functioning of the results function in the Secretariat. Within this team, a specific group which will be strengthened is responsible for cleaning and analyzing data in order to support the decision-making process within the GFF Secretariat to manage for results. The analytics team is also responsible for preparing the content that is used for reporting and communications. The results team also includes country monitoring specialists who are responsible for providing quality technical support to countries in areas such as theory of change, results framework, data analysis, visualization and use, strengthening on information systems, etc. They also support the GFF Focal Point in monitoring performance and highlighting variances as well as potential corrective actions.
- **GFF Country Focal Point.** This person leads the country dialogue on behalf of the GFF Secretariat and thus anchors the monitoring of country results and facilitates government led process to identify gaps and corrective actions as needed. S/he is responsible for tracking the overall performance (and reporting on a quarterly basis in the GFF portfolio tracker) of the GFF engagement in a country and coordinating the various streams of support that are provided to a country, including the support from the GFF monitoring specialists. S/he leads the preparation of the Country Investment Summary (CIS) and its monitoring. In order to be effective, s/he needs to draw on the technical expertise available within the GFF Secretariat (e.g. health financing, RMNCAH-N, etc.).
- **GFF Secretariat health financing and RMNCAH-N technical staff.** These staff play an important role in providing technical guidance to inform the definition and monitoring of results. They conduct analysis on specific aspects of the portfolio on a regular basis. They will also have an important role to play in the preparation of the thematic reports.
- **World Bank Task Team Leader (TTL).** This person is accountable for appraising, obtaining approval from the World Bank Board of Directors and monitoring the performance of the World Bank-financed project(s), including those financed by the GFF trust fund. This includes ensuring that robust results frameworks are developed to track performance and that reviews are conducted by the government on a regular basis. S/he monitors performance through missions and documents key findings in internal reports (similar to the GFF portfolio tracker) at least every 6 months. The GFF Secretariat Focal Point has access to this project performance monitoring and uses it as one of the sources of information to prepare the quarterly portfolio country reports for the portfolio tracker.
- **GFF Management.** On a quarterly basis, the GFF country portfolio is reviewed by GFF Secretariat Management, with a particular focus on outliers, on performance trends and on actions identified by the GFF Secretariat Focal Points. The information is used to structure work priorities for Secretariat staff. The recurrent themes that emerge from the analysis (e.g., weak capacity for data analysis and use in decision-making also informs cross-cutting support from the Secretariat, notably the knowledge and learning program. The gaps identified through the reviews also informs the annual work plan and budget for the Secretariat.

Results Reporting

A critical part of becoming a GFF country is the agreement by the country to share health/nutrition data, including data on health/nutrition expenditures, with the development partners involved in the GFF process. The data will be required mainly to carry out the country reviews described in this section and for global reporting and learning purposes. When invited to join the GFF, countries will have been asked to confirm in writing their willingness to share data with GFF country platform members. It is also expected that partners in the GFF engagement will also share data from their investment case–related investments. Figure 11 illustrates the sequencing of the various reports over the course of a 5-year cycle of GFF country engagement.

Figure 11. Key reports during a cycle of GFF engagement



As a global partnership created to improve RMNCAH-N outcomes over the coming years, agreements on the type and timing of reporting is necessary as part of mutual accountability. The GFF has been developing its reporting systems and instruments but these do not yet fully meet the needs of all stakeholders, notably donors to the GFF Trust Fund who require specific types of information to maintain support for their financial contributions to the GFF Trust Fund. In follow up to a review commissioned by the GFF to review reporting the Secretariat has not only formalized and streamlined the data collection and systems utilized for external reporting but has finalized the products to be shared with the partnership. Table 3 of the expected routine reports that will serve as relevant milestones during the implementation cycle.

Table 3. Reports produced during implementation cycle

Country level		
Document / Process	Description	Frequency
Country Investment Summary - beginning of cycle	Defines focus of GFF engagement in country and summarizes what the IC aims to achieve.	Beginning of GFF engagement
Annual data review	Performed by the Country Platform to take stock of progress to-date and inform implementation programming and budget.	Annual
Mid-term review	Documents progress at the mid-term of the investment case to share across stakeholders what's working, what isn't and why to enable course correction as needed	Mid-IC
Endline review	Documents progress at the end of the investment case cycle to share across stakeholders what's working, what isn't and why. Will feed into the Countdown to 2030 Annual Report and will be used to inform future country planning.	End of IC
Country Investment Summary - end of cycle	Summarizes the findings from the endline review and provides final results to inform in-country strategy documents and donor engagement.	End of IC
Report from platform assessment	Country Platform assessment	Annual?
RMET annual report	Annual update of resource mapping and expenditure tracking to feed into the next year's planning cycle	Annual
Global/donors		
Document / Process	Description	Frequency/Date
Annual report for general public	General summarized update on progress to date in the GFF countries	Annual / September
Annual (detailed) results report for donors, will include country-specific systematic analysis as well as meta-analyses on the 8 core impact and 4 health financing indicators	A detailed results report providing country-specific analysis as well as meta-analysis on the 8 core impact and 4 health financing indicators	Annual / September
Use of results data in regular communications to general public	Portfolio tracker/Web portal/Reports all accessed for latest information to share externally	Ad-hoc/upon request
Thematic reports (SRHR, DRUM, etc.)	Thematic report examining, portfolio-wide, activities and progress. Theme determined by the Results TAG.	Bi-annual
Portfolio update	Provides IG and TFC with an update on GFF work	Annual
State of RMNCAH and Health Financing Report and Action	Partnership with Countdown to 2030 and XX to define the state of RMNCAH in GFF eligible countries and the state of HF in GFF countries.	Annual
GFF web portal	Tiered access web-portal enabling stakeholders to view the most recent administrative and country-specific data	

Ten strategic shifts for the GFF results agenda

This paper has described the approaches and systems that are currently in place within the GFF to manage for results and pointed out the main gaps. The following gaps have been identified along with actions to address them as part of the strategy refresh process:

- 1. Improving the quality of investment cases.** There is currently variation in the quality of the investment cases which countries prepare, although the process always serves as a mechanism to create strong country ownership. A quality investment case -- especially one that enables strong prioritization, is articulated through a clear theory of change, includes a robust results framework which is supported by a realistic monitoring strategy -- is the foundation of the GFF engagement on results in a country.
 - **Proposed actions.** The GFF Secretariat intensify its technical assistance related to the preparation of the investment case by further disseminating the revised (2019) investment case preparation guidelines, expanding the knowledge and learning programs to enhance corresponding competencies, providing TA for prioritization (within the package of services and reforms), TA for theory of change, results framework and monitoring strategy. In lower capacity countries, the GFF Secretariat will contract a TA firm to support the development and the implementation of the investment case. Once an investment case is completed, the GFF Secretariat will also facilitate the forging of consensus on key results in-country through the preparation of a Country Investment Summary (CIS) which will form the basis of the monitoring plan.
- 2. Monitoring quality, efficiency and sustainability.** The GFF has not yet given sufficient attention to supporting countries in the measurement of quality of health systems as well as to efficiency and sustainability aspects. These dimensions are critical to the results that the GFF aims to achieve and critical to the GFF value add because the GFF is uniquely positioned to bring together service coverage data with financing data.
 - **Proposed actions:** Building on the recommendations from the recent technical advisory group on high quality health systems as well as work conducted by the Secretariat in recent months to define efficiency and sustainability dimensions of the GFF engagement in each country, these dimensions will be integrated into the CIS results frameworks for all GFF countries. The resource monitoring support that is now being provided to all GFF countries will be an essential source of data for this sharper focus because it is an entry point for discussions on PFM reforms.
- 3. Monitoring equity, including gender.** While equity is already a dimension in most investment cases, the data systems to support the monitoring of equity within countries are not always in place.
 - **Proposed actions.** The GFF will invest additional resources to ensure that all countries are able to analyze data along key equity dimensions, notably: geographic (sub-national, income, gender and age groups (e.g., adolescents).
- 4. Strengthening national information systems and processes.** The GFF focuses on achieving results while using and strengthening national systems and processes; this includes maximizing the use of national health management information systems and innovating on nimble uses of data. These HMIS are often too weak still to be the sole source of data for monitoring of the investment cases.

- **Proposed actions.** The GFF has already carried out rapid assessments of the HMIS and of available survey data (households and facilities) to generate the data required to monitor the GFF engagement. In order to facilitate use of data for decision-making, the GFF will finance nimble phone surveys to a sample of health facilities to fill data gaps, (as currently for the monitoring of essential services in light of COVID-19) that provide real-time data to inform the country platform. The GFF Secretariat will also create a dedicated funding window to provide additional grant resources to countries who choose to strengthen their HMIS as part of the GFF Trust Fund/World Bank co-financed project(s).
5. **Addressing capacity gaps for in-country use of data.** Almost all GFF partnership countries have serious capacity constraints for data analysis and use (i.e. meeting the minimum requirements outlined earlier) to guide the implementation of the investment case.
- **Proposed actions.** The GFF will continue to provide TA to countries in areas such as data analysis, visualization and use. In an initial sub-set of lower capacity countries, the GFF Secretariat will contract a firm to provide an implementation support unit reporting to the GFF Government Focal Point, which includes sub-national results catalysts.
6. **Fostering alignment of external financiers to national priorities.** While the GFF Secretariat has supported almost all GFF partnership countries in the last year to carry out resource mapping, this information has not yet been fully utilized to maximize the alignment of external resources to the investment case.
- **Proposed actions.** The GFF Secretariat will use the resource mapping data to intensify dialogue in-country on further alignment of external resources to priorities in the investment case. The GFF Secretariat will also prepare a global analysis on alignment on a periodic basis (e.g. annually) and will facilitate a discussion at the Investors Group to identify institutional barriers that need to be addressed to facilitate alignment.
7. **Clarifying GFF value add and roles of GFF partners.** So far, the value-add of the GFF has not always been clearly defined and documented. The roles of partners in-country on the GFF-related results agenda has also not been clear. For example, it is not clear that partners are expected not only to share data on financial resources they provide to countries as part of the resource mapping, but also to share data on results for the initiatives they are financing when these are not already shared with the government. The role of technical partners in supporting the monitoring of the investment case also has not been agreed.
- **Proposed actions.** The Country Investment Summary (CIS) will be developed in all 36 GFF partner countries and will be used as a process to reach consensus on the GFF value add and to agree on how it will be monitored. A compact will be signed at the onset between all the partners who chose to join the GFF process in a country and will be reviewed/renewed on an annual basis. This compact will clarify issued related to results.
8. **Strengthening GFF Secretariat capacity.** The current GFF Secretariat capacity (including consultants) is sufficient to provide support to countries on the preparation and basic implementation support for the investment case, but does not provide enough support to lower capacity countries and capacity is insufficient in terms of the analytic capacity required to meet the Secretariat's internal decision-support needs and the external requirements for data sharing and reporting. The current capacity is also not sufficiently consolidated in one team as other workstreams.
- **Proposed actions.** The GFF Secretariat will create a new Results workstream that will consolidate the results function under a Results Lead who will report to the Head of the

Secretariat. While that workstream will have areas that it leads (e.g., portfolio analysis, web portal management, portfolio tracker, etc.) its work program – like that of other workstreams in the Secretariat will be delivered in an integrated manner with other workstreams, notably Country Programs, Health Financing, Knowledge and Learning and External Relations. The results team will also contract additional capacity to develop tools such as the web portal and for the additional analytical capacity that will be required for the country-specific and portfolio-wide analysis.

9. **Improving results reporting.** The GFF Secretariat has recently conducted a review of reporting requirements of its donors which points for the need for greater and different reporting than has been produced so far.
 - **Proposed actions.** Using analytics capacity outlined above, the GFF Secretariat will segment its reporting into two streams: i) a more general, short annual report for the wider public; ii) a data-driven annual report for donors. The annual report for donors will contain at a minimum: i) portfolio-wide meta-analysis, ii) country-specific analysis along the GFF logic framework; and iii) analysis of a few specific themes each year (e.g. sexual and reproductive health and rights, DRUM). The web portal will also be set up with permission access for donors who need data on a more regular basis.
10. **Initiating global monitoring.** There is currently insufficient global monitoring on the status of RMNCAH-N (except for nutrition) and there is no agreed action plan at the global level.
 - **Proposed actions.** The GFF Secretariat will partner with Countdown to 2030 to produce a global annual report which will be discussed at the Investors Group in order to agree on a few key global actions each year which the partnership will take forward to accelerate progress on women, adolescent and child health and nutrition.