



Independent observer
of the Global Fund

THE ED OF THE GLOBAL FUND REPORTS ON HOW THE FUND INTENDS TO INCREASE PROGRAMMATIC QUALITY AND EFFICIENCY

In his report to the Board, Executive Director Dr Mark Dybul, highlighted that in order for the Fund to maximize impact at the country level, the Fund must explore ways to improve program quality and efficiency from design to implementation. Dr Dybul stated in the report that the approach it is taking builds upon the Program Quality and Efficiency project it developed in 2015 which aims to improve health program outcomes.

The report states that a strengthened Global Fund approach to risk management-what it terms its new Risk Assurance Policy, calls for active management of risk in a way that leverages on its partnerships and key stakeholders in a process which would result in an increased focus on programmatic risks in order to achieve greater outcomes and impact.

Dr Dybul stated his optimism that the Implementation Through Partnership initiative (ITP), previously written about in GFO issue #299 available [here](#), can foster support amongst Fund partners and enable countries to more rapidly invest in effective and efficient health programs. The report stated that the ITP will be measured and assessed by how much impact it achieves, this focus on impact has resulted in the initiative's name being changed from Implementation Through Partnership, to Impact Through Partnership.

The report states further that the newly named and reoriented ITP will adopt a “proactive, problem-solving approach” to achieving increased impact and that the Fund and its partners have agreed that the ITP will shift from being focused on the disbursement of funds, to being a vehicle for driving efforts forward to maximize impact through what it calls a “country-centric partnership approach.” To achieve this objective,

existing partnership mechanisms will be utilized so that partners can leverage on their strengths for greater impact and increase the effectiveness of their political advocacy efforts to improve program quality and desired outcomes.

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Other ways which the ED outlined in his report which will enhance program quality and efficiency are:

Focusing on measurable outcomes that drive impact: Focusing on quality assurance in each step of the results chain to maximize measurable improvements in key outcomes that drive impact.

Leveraging efficiencies to maximize value for money: To achieve better results, The Fund and its partners intend to continue to improve on efficiency in the allocation of resources by investing in programs that deliver the greatest impact, taking cost and resource availability into account.

Strengthening mutual accountability: To continue the maximization of impact, the Fund and its partners will work together to further strengthen mutual accountability. This is to be achieved through the development of an online platform that “brings together needs and opportunities identified, committed actions, metrics that link actions with measurable outcomes and feedback on support being provided to countries.”

Furthermore, the report by the ED sites that efforts to achieve increases in impact and efficiency, especially in regard to efforts at reaching more people with what it calls ‘tailored services’ have been successful in a number of countries:

Tanzania: The country has launched regional training in 16 regions, spanning 200 health facilities, providing training to over 1000 health workers.

Democratic Republic of Congo: Cooperation between the Global Fund and key partners in expanding an integrated package of reproductive and maternal health services in DRC aims at strengthening service delivery, utilization, quality of care and stewardship. The Fund has worked closely with UNICEF to rapidly increase the work of community health workers, who are trained to prevent and treat common childhood diseases, to 133 health zones.

Uganda: The AIDS Support Organization (TASO) has been providing different models of delivering antiretroviral therapy and TASO analyses indicate that compared to facility-based settings, the community ART delivery models resulted in improved treatment retention of people living with HIV.

Zimbabwe: Data-driven malaria programming and surveillance enabled by funding from Government of Zimbabwe, the U.S. President’s Malaria Initiative and the Global Fund has led to increase of number of pre-elimination districts from 7 to 22 during the current grant period.

Togo: In order to improve health outcomes for HIV, TB, and malaria, Togo is implementing a program to improve the quality of integrated services in antenatal and postnatal care facilities level in the Plateaux and Savannes regions. This project will use WHO tools adapted to assess integrated care of mothers and newborns in health care facilities.

Ethiopia: Investments in community health information systems are addressing a challenge in Ethiopia's fragmented development of an electronic health management information platform.

The Executive Director's Report Board Document GF-B36-10, should be available shortly at www.theglobalfund.org/en/board/meetings/36.

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