

SOLOMON ISLANDS – AUSTRALIA PARTNERSHIP FOR DEVELOPMENT

SUMMARY PERFORMANCE FRAMEWORK

PRIORITY OUTCOME 1 – IMPROVED SERVICE DELIVERY			
Strengthen public health functions that are responsive to community health needs and improve progress towards the MDG targets by 2015.			
Solomon Islands MTDS Outcomes	Partnership Outcomes	Indicators	2009 Milestones
<ul style="list-style-type: none"> • Increased proportion of people with access to at least a Rural Health Clinic within one hour's travel. • Essential drugs and medicines available at all levels and at all times. • MDG 6: Reduced Malaria incidence and deaths. • MDG 7: Increased access to clean water and proper sanitation. • MDG 4: Reduced IMR and Under 5 mortality rate. • MDG 5: Reduced MMR and increased births attended by skilled health staff. 	<ol style="list-style-type: none"> 1. Increased percentage of population with access to a health facility staffed by a health care worker and stocked with appropriate medicines. 2. Reduced malaria incidence in high endemic provinces and elimination in Temotu Province. 3. Increased access to clean water and proper sanitation. 4. Reduced maternal and infant mortality rates. 	<ul style="list-style-type: none"> • Increased numbers of correctly stocked and staffed health clinics. • Improvements in time taken to reach a Health Facility. • Increased bed net coverage. • Increased number of households, health facilities and schools with access to clean, safe and reliable water supplies. • Improved access to quality maternal, neonatal and emergency obstetric care. 	<ul style="list-style-type: none"> • Upgrades to and construction of key health facilities commenced. • Provincial funding support provided through HSSP to enable purchase of vehicles and boats to improve access, supply and outreach at community level. • Scaled-up COARTEM anti-malarial treatment roll-out. • Establish data collection and baseline (including annual Malaria Survey; first Health Facilities Stocktake; Ministry of Health and Medical Services' Reproductive Health Statistics; monitoring and evaluation plan for the Rural Water Supply and Sanitation program). Disaggregated by gender and age.

IMPLEMENTATION STRATEGY FOR PARTNERSHIP PRIORITY OUTCOME 1 – IMPROVED SERVICE DELIVERY

(i) Aim of the Partnership

The Solomon Islands Government has identified Health and Medical Services as a key development priority in the *Medium Term Development Strategy 2008-10* (MTDS) and acknowledged the importance of related Millennium Development Goal (MDG) targets. The Partnership will strengthen public health functions that are responsive to community health needs and improve progress towards the MTDS and MDG targets by 2015 through ongoing commitment by Australia and Solomon Islands to a Health Sector Wide Approach (SWAp).

In June 2008, Solomon Islands and Australia signed a Subsidiary Arrangement signalling the commencement of the Health Sector Support Program (HSSP). This comprehensive, five year Australian commitment (2008-12) supports implementation of the *National Health Strategic Plan 2006-10* (NHSP) through the SWAp and targets:

- improved access to health services in provincial and rural communities;
- access to essential medicines through better pharmaceutical procurement warehousing and distribution;
- increased disease prevention through improved rural water supply and sanitation;
- implementation of a national malaria strategy for effective control and progressive elimination that aims to reduce parasite incidence and malaria related deaths across Solomon Islands; and
- health system strengthening, including enhanced financial management, human resource management, surveillance and data collection, and community engagement.

Improving the effectiveness of basic services through the HSSP will assist the Solomon Islands Government attain its vision of a “healthy, happy and productive Solomon Islands people.” Enhancing the quantity, quality and equity of basic services will make a significant contribution to positive progress toward MDG targets.

The HSSP aligns with the MTDS, and will assist with achievement of the targets in *Section 4.4.2 – Health and Medical Services*.

(ii) Measurement

The following indicators will measure progress toward Priority Outcome 1: Improved Service Delivery:

- Increase percentage of population with access to a health facility staffed by a health care worker and stocked with appropriate medicines;
- Reduce malaria incidence in high endemic provinces and elimination in Temotu Province;
- Increase access to clean water and proper sanitation; and
- Reduced maternal and infant mortality rates.

Specific targets and the relationship of indicators to baseline data is contained in the Summary Performance Framework.

In addition to the annual high level Partnership review for each Priority Outcome, ongoing consultation and regular policy dialogue on service delivery will be facilitated through the HSSP Quarterly Committee Meeting. The committee meetings will be complemented by sector wide Ministry of Health and Medical Services (MHMS) HSSP Quarterly Reports that capture key data for each of the program areas, provinces, and development partners in addition to financial and policy information. The reports are widely distributed and provide a consistent forum for discussion of issues, constraints and successes throughout the sector.

Governance arrangements for the SWAp include an annual joint Solomon Islands Government-Development Partner performance review in March to assess progress from the previous year, available financial and procurement audit reports, first quarter disbursements, and to inform program plans for the coming year. In September each year, a joint in-depth review will be undertaken on specific topics to be decided by the Solomon Islands Government and Development Partners during the March review mission.

(iii) Implementation Approach

Extensive consultation processes were conducted when developing the SWAp. AusAID and the World Bank began discussing the merits of a more harmonised and integrated approach to donor financing of the health sector with the Solomon Islands Government, and the elements of a broad consensus for a SWAp took shape over 2005-2007. Formal launch of the HSSP followed in early 2008 to assist the MHMS prepare for full implementation of a SWAp.

The Partnership recognises the existing SWAp as the primary vehicle for addressing key challenges in the health sector. Initial areas of focus that will provide longer term benefits for service delivery include:

- improving long-term financial sustainability of public health services;
- increasing management capacity within the public health system at the central and provincial level; and
- creating incentives for better health service performance.

Investments will also be made in the areas of Water and Sanitation and Malaria prevention.

The SWAp provides a framework for all Development Partners to work through and align with Solomon Island Government systems and priorities in order to strengthen health systems at the national and sub-national level and forms a significant contribution to improving service delivery.

Australian support to the SWAp has adopted a phased approach to implementation. The first year of the HSSP (through April 2009) is largely devoted to strengthening capacity in planning, standardised budget formulation, procurement, standardised accounting, and regular reporting – both on performance indicators and expenditure.

The MHMS and HSSP technical specialists will work with the Ministry of Finance & Treasury and the Ministry of Development Planning & Aid Coordination to improve on the existing systems and roll them out to the Provinces.

Establishment of these vital systems in year one will pave the way for implementation of the Health SWAp in year two and beyond. Aside from improving the management systems required of any successful organisation, the HSSP will also seek to:

- improve communications, consultation and participation between MHMS Divisions and the Provincial Health Divisions;
- promote active partnerships both internally and with all health stakeholders including churches, NGOs, development partners and others;
- ensure adequate resources reach the Provinces and are managed to best effect to support the delivery of rural health services;
- improve the quality of data collection (including by hospitals), appropriate information production, extensive information sharing, and promote information utilisation at the community, provincial and national levels;
- address the much needed renovation / maintenance of health infrastructure and staff housing, and construction of new staff housing where necessary;
- maintain and extend clean water and sanitation infrastructure giving priority to schools, clinics and communities;
- establish quarterly reporting including comprehensive financial reports, progress against core performance indicators, and addressing issues at all levels;
- support a re-energised and refocused health promotion initiative working directly with communities and encouraging participation by all; and
- increase malaria prevention and control in all provinces.

Paris Declaration and Accra Agenda for Action

The SWAp provides a strong foundation for implementation of the principles underpinning the *Paris Declaration*. Development and whole-of-government partners in the health sector will be brought together in a more harmonised, integrated effort to support execution of the NHSP and MTDS. This shared commitment to the *Paris Declaration* and *Accra Agenda for Action* is articulated in the Partnership Arrangement signed by World Bank, World Health Organization (WHO), United Nations Children's Fund (UNICEF), United Nations Population Fund (UNFPA) and the Governments of Australia and Solomon Islands.

World Bank has committed US\$1.5 million through a Technical Assistance Grant aligned with HSSP from 2008-12. This contribution will target the areas of public expenditure management and sector performance monitoring and complements the Health Systems Strengthening focus of HSSP and the NHSP.

The Partnership Arrangement articulates the principles for donor engagement in the sector and the key consultative and governance mechanisms. The Solomon Islands Government will encourage the Government of Japan to join the Partnership Arrangement in the near future and possibly Secretariat of Pacific Communities (SPC) in 2009 as an important regional agency that is heavily involved in the health sector.

Financial Arrangements

Implementation will leverage a range of support to the health sector. As a sectoral financing mechanism, HSSP supports the specific strategic areas of the MHMS NHSP and it utilises government systems for channelling support to the public sector. AusAID has committed A\$51 million over four years (2008-09 to 2011-12) to address system capacity, financing of operational costs for the health system in pivotal areas, and support to the vital policy shifts planned by the MHMS to achieve national health objectives. Financial support will be provided to Solomon Islands through a combination of program and budget support.

Australia will also provide A\$10.5 million under the Pacific Malaria Initiative (2008-09 to 2010-11) to support the National Malaria Program, and A\$6 million for water and sanitation development through the new Access for Clean Water and Sanitation Initiative (2008-09 to 2010-11).

Australia provided funding for the HSSP (A\$9 million) and the Pacific Malaria Initiative (A\$3.3 million) in financial year 2007-08. Australia's total commitment to the health sector over the next four years (2008-09 to 2011-12) will be up to A\$69 million.

Commitments

Solomon Islands and Australia are committed to the successful implementation of the Health SWAp, as a means of achieving improvements to service delivery articulated in the Partnership. The *HSSP Subsidiary Arrangement* provides a comprehensive framework that covers agreement between Australia and Solomon Islands on how to achieve a range of goals in the health sector, including those articulated in this Partnership.

The *HSSP Subsidiary Arrangement* also provides mutual commitments regarding risk management, anti-corruption, gender equality, management and review mechanisms and performance monitoring.

Improvements to service delivery in the health sector will require sustained investment from Solomon Islands and development partners. In addition to the financial support allocated by Australia through HSSP, Solomon Islands will commit to the following:

- A minimum of 10 per cent to the health sector from total Solomon Islands Government consolidated revenue in the relevant Appropriations Bill for the duration of the Partnership;
- Implementation of mutually agreed essential procurement reforms at the national and provincial level; and
- Ownership and leadership of the Health SWAp through strong whole-of-government engagement on sector planning, management and prioritisation of resources.