

YWAM Medical Ships – Australia (YWAM MSA) Management Response to Evaluation Report

OVERVIEW

1. YWAM MSA is grateful to DFAT for commissioning this evaluation and to the report's authors for undertaking the project. The effort taken to engage grass-roots beneficiaries and engage in field activities, albeit on a small scale, is particularly noteworthy. The efforts of the authors to respond to a particularly wide-ranging remit within the resources allocated is also noted.
2. YWAM MSA and its advisors hold a generally positive view of the report. Note is made of pertinent findings including:
 - a. YWAM MSA having delivered on its contractual obligations and exceeded quantitative targets for service delivery under the funding contract
 - b. Pleasing reports of strong trust developed between grassroots communities and YWAM MSA teams; alongside acknowledgement of strong and respectful relationships with the highest elected representatives
 - c. Clear presentation of the stark challenges facing remote rural communities and fitting acknowledgement of the important role that YWAM MSA plays in mobilising patrol services to connect with these vulnerable populations
 - d. Evidence from village representatives of growing understanding, demand for and satisfaction with key preventive maternal-child health interventions (such as immunisation and family planning)
 - e. Acknowledgement of the depth of multi-stakeholder partnership elicited by the YWAM MSA program, including donated professional services amounting to more than 50% of operational revenue (and expenditure) and other sizeable PNG private sector contributions.
3. As highlighted in the report, YWAM MSA reiterates particular gratefulness for the role that both PNG and Australian government contributors have made to the success of program activities to date. For example, in 2017 GoPNG contributions accounted for approximately 12% of total operational revenue; while DFAT grant funds accounted for 10%.
4. There are some areas of notable disagreement, portions of which pertain to contrasting opinion and interpretation; without broader context to the report, there is a risk of misleading the reader. The financial appraisal element exemplifies an area of significant methodological concern. In summary:
 - a. The repeated poor delineation of capital verses operational revenue and expense streams in the analysis can lead to misinterpretation; examples of clarification:
 - i. When adjustment is made for capital funds, operational cash revenue rose by over 50% between 2015 and 2017; furthermore
 - ii. Operational contributions from GoPNG and major PNG corporate donors grew by 1.4 million PGK from 2015 to 2016 and remained steady thereafter
 - b. The report lacks a balanced commentary regarding both financial costs and comparative benefits to the PNG health sector of partnership with the YWAM MSA program
 - c. The methods employed for value of service comparison are, at best, a poor fit
 - i. The comparator study (reference in full report) excluded outreach patrol; however, this is the prime YWAM MSA-supported activity
 - ii. It stated that funds received by studied facilities were markedly insufficient for basic functions and specifically inadequate to support routine patrol
 - iii. It stated that its data was inappropriate for application in drawing conclusions about relative efficiency of providers
5. Although the focus of the grant agreement was specific areas of Gulf and Western Provinces, the Terms of Reference acknowledged the broader context of YWAM MSA activities 2015 – 2017. Presentation of this context could have been stronger in the report, however, the appropriate mention of YWAM MSA's extensive investment footprint in PNG over the period is welcomed.

RESPONSE TO RECOMMENDATIONS TO YWAM MSA

Brief responses to the specific recommendations presented in the report are presented in a tabular format below.

Recommendation	Commentary
Strengthening collaboration and investing in higher-level development of PNG	
1.a Consider expanding the YWAM MSA board to include representation of a PNG national	The YWAM MSA Board has been actively exploring increased Papua New Guinean representation at the executive level for sometime and is currently seeking appropriate candidates. This is in addition to exploring establishment of senior management sub-committees, involving a range of stakeholder representatives, including PNG-representation.
1.b Develop communication strategy to target mid-level key opinion holders and public servants at the implementation level to enhance understanding of YWAM MSA operations, its purpose and modalities, and to promote coordination. The ET [Evaluation Team] recognises the strength to communications at the highest levels of government and with communities.	YWAM MSA accepts praise regarding strong communications with highest levels of authority and also community members. This is well developed and will remain a priority. In addition, ongoing and positive efforts will be made to strengthen relationships at mid-level structures, all the while working within recognised system constraints beyond YWAM MSA's direct control.
1.c Strengthen coordination with provincial health offices by advocating for effective health stakeholder coordination and ensuring earlier and longer-horizon planning of outreach activities. This includes coordinating involvement of Provincial personnel as well as prioritising program activities.	Ongoing efforts will be made to advocate for effective stakeholder coordination mechanisms at both the provincial and district level. Collaborative development of medium-term strategic field planning will continue to be actively pursued, at the capacity of local participation in effective partnership.
1.d Review procedures for registration with PNGMB to allow sufficient time for all clinical service practitioners to be registered ahead of service delivery. This might include volunteer submission of registration documents at the point of application to YWAM MSA. It is understood that YWAM MSA are currently in discussion with NDoH and PNGMB on this matter.	Applications for registration will continue to be supplied in advance and appropriate supervisory arrangements put in place. Advocacy to key stakeholders for system strengthening in this important part of PNG's health system will continue, acknowledging the constraints currently facing PNGMB.

1.e Continue to strengthen the supervision of clinical practice in line with NDoH clinical practice standards with emphasis on consistency of approach in the delivery of public health messages.	Strong focus will remain on application of existing protocols in the field and ongoing development and refinement of the same. Particular attention is being invested into further development of health education and community engagement strategy and implementation (relating to public health messages).
1.f Consider options for identifying and recruiting more PNG nationals who can provide clinical leadership during outreaches.	YWAM MSA is committed to ongoing and strengthening recruitment in this area. Currently approximately 25% of personnel participating in outreach patrol are PNG nationals, covering a wide range of technical roles. Field teams also work closely with the local health workers they are deployed to support. Avenues to further develop this are under exploration.
Management and governance	
2.a Strength processes for recruitment and training of health education volunteers to lessen the skills gap between senior staff and general volunteers and to ensure contextualisation of key messages	Particular attention is being invested into further development of health education and community engagement strategy and implementation. Recruitment and training of personnel forms an important part of this process.
2.b Conduct knowledge, attitude and practice (or similar) survey to obtain baseline information on knowledge on key health information topics in the communities served	Particular attention is being invested into further development of health education and community engagement strategy and implementation. Tools for assessment of current knowledge, attitudes and practices, within the broader frame of a participatory approach, form an important part of this process.
2.c Consider barrier analysis or other participatory methods to explore the barriers to behaviour change in the communities served and to tailor messaging accordingly	Particular attention is being invested into further development of health education and community engagement strategy and implementation. Tools for assessment of barriers and local solutions, within a participatory approach, form an important part of this process.

2.d Strengthen approaches to ongoing monitoring and appropriate evaluation so that data feeds into operational decision making. Collect data on the effectiveness and changes resulting from health information activities, capacity building activities, and clinical services. This will require investment in in-house capacity and fostering a culture of continuous learning and improvement.	This is an ongoing priority for YWAM MSA development. An internal review currently underway will include both monitoring procedures and broader evaluation and impact measurement processes. There is strong commitment to this process from the YWAM MSA Board level, through to senior field staff. Appetite is strong for further development of in-house capacity in this domain.
2.e Review data collection and privacy policy, particularly relating to ownership, use and security of patient photographs and sensitive diagnostic and treatment information	Data management and privacy policy is under active review as per continuous improvement processes. This will include comprehensive review of clinical data management, including digital safety.
2.f Continue to investigate piloting the NDoH eNHIS	YWAM MSA strongly endorses the development of the eNHIS and eagerly anticipates the opportunity to be included in the near future. In the meantime, paper-based NHIS forms will continue to be supplied as per current NDoH protocol and specific advisory.
Reviewing approach	
3.a A systematic approach to service planning be adopted that enhances coordination between YWAM MSA supplemental services and the province/district outreach services. YWAM MSA could assist in the process of setting a coordinated annual visitation program with the functions of each entity clearly defined.	YWAM MSA is committed to continue to engage in collaborative field planning and to actively pursue the strengthening and deepening of coordination processes in the sector with appropriate local leaders.
3.b Formalise a capacity building approach that contributes to individual and system capabilities. Working with national, provincial and district stakeholders to develop this approach may help YWAM MSA to clarify and obtain feedback from national and provincial stakeholders on how it can contribute to system strengthening.	This report fits in the context of ongoing internal review being undertaken by YWAM MSA and also broader stakeholder consultation regarding medium-term strategic planning. This will include a strong emphasis on capacity building approach.