

Programme
CABRI Policy dialogue

**More health for the money: Improving technical efficiency in health spending
in Africa**

30 November – 02 December 2016

Addis Ababa, Ethiopia

The CABRI Policy dialogue aims to strengthen the linkages between Ministries of Finance and Ministries of Health. Understanding their complementary roles at national and sector levels in policy formulation and budget processes and making these linkages more efficient and better integrated improves the provision of quality services for better health outcomes. Building on the international conference held in 2015 on Financing Healthcare in Africa, CABRI, in partnership with the South African programme PRICELESS SA, the Global Fund and the Bill and Melinda Gates Foundation, are inviting African budget and health policy officials to discuss the drivers of inefficiency in health spending and agree on ways in which they can achieve better health outcomes with limited resources.

DAY 1

08:00 – 08:30 *Registration and coffee*

08:30 – 09:00 *Welcome Remarks, Neil Cole, Executive Secretary, CABRI Secretariat
Introductory Remarks, Ministry of Finance, Ethiopia
Introductory Remarks, Ministry of Health, Ethiopia*

09:00 – 10:45 **Session 1: Panel discussion on the causes of inefficiencies in health spending**

Session objective: *To bring out the current policy issues and challenges facing countries in terms of efficiency in health spending. Issues include how to assess technical efficiency, what are the main drivers of inefficiencies and how can countries become more efficient in spending given limited resources.*

Panellists: CABRI, Gates Foundation, Global Fund, PRICELESS SA and WHO

Moderator: Tomas Lievens

10:45 – 11:15 *Coffee break and Group Photo*

11:15 – 13:00 **Session 2: The budget cycle and frameworks to analyse inefficiency**

Session objective: *To introduce a conceptual framework and engage in interactive discussion on integrating efficiency into the budget cycle. Delegates will apply these concepts in a Role Play that will consider investments and efficiency arguments in a case study of HIV/AIDS financing in **Burkina Faso**.*

Facilitator: Nana Boateng

13:00 – 14:00 *Lunch*

14:00 – 14:30 **Session 2: Continuation (Role play)**

14:30 – 17:00 **Session 3: Key sources of inefficiencies in health: human resources**

(30mins coffee break at 15:30)

Session objective: To present and discuss selected evidence from African countries on sources of inefficiency and demonstrated approaches to addressing them through policy action. Focus will be on inefficiencies around the health workforce. Delegates will discuss the case study on **Ethiopia** and also identify actions that they can take forward to improve human resources in their countries.

Facilitator: Nouria Brikci

17:00 **Closing**

DAY 2

09:00 – 12:00 **Session 4: Key sources of inefficiencies in health: Use of medical products**

(30mins coffee break at 10:30)

Session objective: To present and discuss selected evidence from African countries on sources of inefficiency and demonstrated approaches to addressing them through policy action. Focus will be on the inefficient use of medical products, vaccines and technology. Delegates will discuss the case study on **Nigeria** and also identify actions that they can take forward to optimise drug use in their countries.

Facilitators: Nana Boateng, Neil Cole

12:00 – 13:00 **Lunch**

13:00 – 16:00 **Session 5: Key sources of inefficiencies in health: hospital funding**

(30mins coffee break at 15:30)

Session objective: To present and discuss selected evidence from African countries on sources of inefficiency and demonstrated approaches to addressing them through policy action. Focus will be on hospital funding/strategic purchasing. Delegates will discuss the case study on **South Africa**, engage in a role play and also identify actions that they can take forward to improve hospital funding in their countries.

Facilitator: Tomas Lievens

16:00 – 16:30 **Coffee break**

16:30 – 17:30 **Recap of discussions and identified actions on the inefficiencies, Neil Cole**

DAY 3

09:00 – 12:00 **Session 6: Improving technical efficiency by using health technology assessment (HTA)**

(30mins coffee break at 10:30)

Session Objective: To introduce the key concepts and processes in conducting and using health technology assessment with a focus on issues affecting practical application in LMICs. Examples of how HTA has and can be used to improve technical efficiency will be provided in situations such as technology pricing and essential drug list inclusion and optimal use and standard treatment guidelines. Group exercise will focus on the concept of fit-for-purpose HTA and “decision space” which explores how HTA can be used effectively in capacity-limited settings for decisions beyond individual technologies and in broader health system platforms.

Presenter: Tommy Wilkinson and Anthony Kinghorn

Facilitator: Nouria Brikci

12:00 – 13:00 **Lunch**

13:00 – 15:00 **Session 7: The relationship between PFM reforms and health service delivery**

Session Objective: To present research findings on a study that looks into the relationship between PFM reforms and health care delivery. The debate in the health sector has often focused on ‘health financing’ (i.e. how to finance healthcare through various means, e.g. social insurance, government funding etc), delivery of rapid large-scale results (e.g. the vertical funds) or ‘health systems strengthening’ (i.e. how a variety of reforms, including PFM, could be put in place to make public health systems better). There has been relatively little discussion of the specifics of ‘PFM and health’ – what is the relationship? what matters for PFM and healthcare? and what is the evidence that there are specific mechanisms that link the two?

Presenter: Sierd Hadley

Facilitator: Tomas Lievens

15:00 – 15:30 **Coffee Break**

15:30 – 16:30 **Recap, remarks on future work in allocative efficiency, CABRI and PRICELESS SA**
