

Costing and Financing Subgroup Meeting

June 30th 10:00-11:00am EDT

Participants: Dyness Kasungami (MCSP), Colin Gilmartin (MSH), Gunther Baugh (WHO/RACe project), Anna Bryant (MCSP), Uzaib Saya (MSH/USAID ASH project), Sarah Lackert (MCSP)

Individual and organizational updates	Action Items
<p>MCSP Updates (Dyness):</p> <ul style="list-style-type: none"> It is currently work planning time for the next year which starts in October. Looking forward to our year 3 we are thinking about what the different subgroups are planning and how we can support as the CCM Task Force Secretariat. Kenya RMNCAH Investment Framework mentions use of the OneHealth tool for the costing analysis. It would be interesting to take up a discussion on its use/methodology in our subgroup. The investment case has been submitted but the document doesn't explain in detail what the process for funding/submission is supposed to be. The document details a project implementation unit and therefore reads more like a Global Fund model where there are program managers. <p>WHO RACe Project Updates (Gunther):</p> <ul style="list-style-type: none"> The RACe Project will be conducting <i>Sustainability Road Map Development workshops</i> in all five RACe countries (July – August) with MoH and partners to co-define where they want to go with iCCM and how they want to mainstream and integrate iCCM into their health systems over the medium and long term. Currently, there is not an iCCM strategy for DRC, Malawi, Mozambique, and Nigeria. All partners will be invited to contribute to the road map; transition planning will involve implementation partners. <p>USAID African Strategies for Health (Uzaib):</p> <ul style="list-style-type: none"> DRC and Senegal iCCM Underutilization Study: The data collection was completed and ASH is in final stages of validating information. Mhealth costing in Uganda: An SMS mother reminder program (implemented by UNICEF) is being costed by the ASH Project. This has been part of an impact study ongoing for a year and half to evaluate impact of SMS messages on ANC and IPTp uptake. Relevant documents and updates will be circulated during/before our next call. <p>Additional updates from MSH (Colin):</p> <ul style="list-style-type: none"> UNICEF Community Health Services Costing, Impact, and Bottleneck tool/methodology - data collection is complete and preliminary results have been shared with partners in-country and UNICEF. Colin will return to Sierra Leone to train MoHS on use of tool. The UNITAID ACCESS SMC Project held a high-level symposium on June 9th. David Collins presented on the costs of SMC in seven countries. 	<p>Dyness will share the Kenya Global Financing Facility Case.</p> <p>Gunther to notify Dyness of dates of workshops so MCSP/MSH can alert local staff.</p> <p>David Collins to share presentation from ACCESS-SMC Symposium in London.</p> <p>Colin will share the reports of the bottleneck tool (August)</p> <p>Uzaib to circulate Uganda SMS mother reminder results prior to next call.</p>
<p>Re-cap of previous meeting (May 2016)</p>	<p>Action Items</p>
<ul style="list-style-type: none"> During our last subgroup call we discussed: the Nairobi Meeting; the role of 	

<p>our subgroup in relation to the GFF and how it might be a timely opportunity to provide TA to countries and serve as a resource for best practices; and lastly we looked at the future of the subgroup.</p>	
<p>TA Needs</p> <ul style="list-style-type: none"> • Malawi request for TA for GFF Investment Case – consultants are currently being recruited. • Zambia –Dyness will keep checking in with Zambia point of contact to see if external support is needed. We might be able to provide feedback but it’s unlikely we will be able to support completely from this end. • Tanzania - is interesting because iCCM is not part of their full package but maybe in our next work plan we might include this but we would want to see the GFF document and see what is written there and if there is anything specific on training more CHWs and what they will be delivering. • Ghana was the other country and Kenya is looking to do sub county plans. At MCSP we are supporting 2 of the 20 subcounties in Kenya. 	<p>Action Items</p> <p>Dyness will check with colleagues from Zambia if external TA is needed</p>
<p>Memo Discussion</p> <p>Attachment: June 23 “Memo from the CCM TF Steering Committee to TF Members” Available here</p> <ul style="list-style-type: none"> • The steering committee recognizes that we are in a time of transition; iCCM is no longer a stand-alone strategy; momentum with SDGs. • Three specific studies are mentioned in the memo that all have implications on the iCCM task force. • “The Mapping of Global Leadership of Child Health” will be shared with TF upon receiving approval from USAID.. The outcome of all these discussions will impact the TF. • The WHO is conducting a Strategic Review of IMCI. The CCM task force steering committee proposed three things in the memo: <ul style="list-style-type: none"> ○ iCCM as a part of child health ○ Strengthening planning and how iCCM is reflected ○ Engaging more with countries and asking countries to make presentations • Any feedback or questions are welcome to Dyness. TF steering committee will collect the questions and they will send to the steering committee. • Key themes of the memo are how do we better engage with country team? What strategies can we use to better engage with country teams? 	<p>Action Items</p> <p>MCSP will share Global Leadership Mapping Report once dissemination is approved by USAID.</p> <p>Email Dyness with any questions on concerns about the CCM TF Memo.</p>
<p>Next meeting: late August</p> <p>Proposed agenda:</p> <ul style="list-style-type: none"> • Review of DRC + Kenya RMNCAH Investment Frameworks • Outcomes of RAcE Sustainability Road Map Development Workshops • MSH presentation on Community Health Services Costing, Impact, and Bottleneck Tool • Ongoing brainstorm – ensuring sub-group is proactive (in reference to TF sub-committee memo) 	

