







LOCAL HEALTH SYSTEM SUSTAINABILITY PROJECT

MAY 2020

The Local Health System Sustainability Project (LHSS) is USAID's flagship initiative in integrated health systems strengthening. Its goal is to help low- and middle-income countries transition to sustainable, self-financed health systems as a means to support universal health coverage.

AT A GLANCE

Funder: USAID, Bureau for Global Health, Office of Health Systems; USAID mission buy-ins

Value: \$209 million ceiling over five years (2019-2024)

Mechanism: Task Order I contract under USAID's Integrated Health Systems IDIQ

History: LHSS builds on achievements of the Health Finance and Governance Project (2012-2018) and Applying Science to Strengthen and Improve Systems (ASSIST) Project (2012-2020).

SUSTAINABILITY: A KEY PRINCIPLE

The project will support country-level efforts to reduce financial barriers to health care, ensure equitable access to essential health services for all people, and improve the quality of health care. Equally important, it will equip host countries to sustain progress after the project ends. It will do so by ensuring that local institutions and organizations have the technical capacity and expertise to independently design, implement, and manage continued health system strengthening activities.

OBJECTIVES

- Increase financial protection. Too many people cannot afford health care. LHSS will reduce financial barriers so that the cost of essential health services neither prevents people from accessing services nor causes financial hardship.
- Increase population coverage. The ability to access health care should not depend on social status. LHSS will ensure equitable access to essential health services, including for poor, underserved, and socially excluded populations. It will ensure that health services are accountable to meeting all clients' needs.
- Increase service coverage of quality essential services. Equitable access makes little difference if health services are of poor quality. LHSS will improve the quality of patient-centered services and ensure that care meets minimum standards.

WHAT MAKES THIS PROJECT SPECIAL

The project has the ability to mobilize technical assistance in a wide range of areas, customized to a country's context and priorities. Unlike previous projects that have targeted just one aspect of a health system, LHSS uses evidence and the latest thinking to find solutions across the health sector. It is a one-stop shop for countries seeking to create **sustainable**, **high-performing health institutions** – whether public, private, or nonprofit – that deliver high-quality health care that is **accountable**, **affordable**, **accessible**, and **reliable**.

CURRENT ACTIVITIES

As of May 2020, work was underway in Colombia, Jordan, and Zimbabwe, with activities focused on migrant health, continuing professional development for health workers, and health system assessment, respectively. LHSS was also supporting government responses to COVID-19 in Laos and the Central Asia countries of Kazakhstan, Kyrgyz Republic, Tajikistan, Turkmenistan, and Uzbekistan. Additional programs were under development in the Dominican Republic and the East Africa region.

LHSS is also conducting groundbreaking research that will help governments around the world strengthen health budget execution, institutionalize explicit processes for setting health priorities, obtain accurate data on pharmaceutical expenditures, and effectively operationalize policies to improve health care quality. The project is also examining evidence around digital health savings and insurance services, and helping private health innovators in Africa and India scale up and succeed.

JOURNEY TO SELF-RELIANCE

In recent years, USAID has reoriented its mission around the concept that "the very purpose of foreign assistance must be ending its need to exist." LHSS fully supports partner countries on their journey to self-reliance. Through strengthening local capacity, the project will prepare local organizations to receive transition grants—ultimately enabling countries to continually improve health system performance without donor support.

"USAID's focus on health systems strengthening is to support partner countries on their journey to self-reliance and prosperity to meet their commitments for improved health and wellbeing of their population." — Project contract

PROJECT CONSORTIUM

The project is managed by international consulting and research firm Abt Associates, with contributions from II partners.

Prime	Responsibilities
Abt Associates	Technical and financial oversight; monitoring, evaluation, and learning; quality assurance; selected technical areas including resource tracking, human resources for health, private sector, and digital technology
Partner	Responsibilities
Save the Children	Community health systems
Institute for Healthcare Improvement (IHI)	Quality of essential health services
Results for Development (R4D)	Benefit packages, strategic purchasing
Training Resources Group (TRG)	Organizational capacity building
Avenir	Epidemiological and costing modeling
Banyan Global	Gender equality and social inclusion, private sector financing
Harvard School of Public Health	Health systems research capacity building
Health Information Systems Program (HISP)	DHIS2 adaptation, capacity building in data for decision making
Internews	Media for health advocacy and UHC promotion
McKinsey	Fiscal space, public financial management, tax revenue
THEnet	Health workforce strengthening

KEY PERSONNEL

Project Director: Bob Fryatt (<u>Bob_Fryatt@abtassoc.com</u>) • Technical Director: Midori de Habich (<u>Midori_de_Habich@abtassoc.com</u>) • Monitoring, Evaluation and Learning Lead: Ekpenyong Ekanem (<u>Ekpenyong_Ekanem@abtassoc.com</u>)

USAID CONTACT

USAID missions and country representatives interested in buying into the project should contact Scott Stewart, USAID Contracting Officer's Representative, at sstewart@usaid.gov

This fact sheet was made possible by the support of the American people through the United States Agency for International Development (USAID). The contents are the sole responsibility of the authors and do not necessarily reflect the views of USAID or the United States government.