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**LEADERSHIP, MANAGEMENT
& GOVERNANCE PROJECT** 
Inspired Leadership. Sound Management. Transparent Governance.

Stewarding Resources

FOR HEALTH SYSTEMS STRENGTHENING

Series of Guides for Enhanced Governance
of the Health Sector and Health Institutions
in Low- and Middle-Income Countries

JUNE 2014



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The guides and accompanying handbooks on governance represent the collective effort and input of many experts in public health leadership, management, and governance. The LMG Project would like to acknowledge the individuals who have made these materials possible.

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The LMG Project team thanks the hundreds of leaders, managers, and people who govern the health sector and health institutions in low- and middle-income countries, who spent substantial time participating in our surveys and interviews in 2012. The five effective governing practices were identified based on insights they shared during these inquiries. Special thanks are extended to the three Provincial Public Health Coordination Committees and eleven District Health Coordination Committees in Afghanistan who pilot tested the five governing practices, and found that the health system governance and antenatal care visit rate in their provinces had improved.

Finally, LMG would like to thank all of the individuals and organizations striving to improve health sector governance all over the world. We hope the governance guides and accompanying handbooks will serve as valuable resources for the continued support of good governance.

Introduction

Thank you for all that you do to improve the performance of your health system. Good governing practices not only enable you to achieve more significant results in your work but also more sustainable results. Governance in the context of health has come into sharper focus over the past decade. It is one of the essential factors in the pursuit of stronger health systems and greater health impact. There is an emerging body of evidence that shows that effective governance improves health outcomes. Conversely, poor governance overall, and especially in the health sector, contributes to poor health outcomes. It undermines the vitality of a health system, making it less effective, less efficient, less equitable, and less responsive to the people it is intended to serve.

Governance is a collective process of making decisions to ensure continuous vitality and performance of organizations or health systems. Governance is (1) setting strategic direction and objectives; (2) making policies, laws, rules, regulations, or decisions, and raising and deploying resources to accomplish the strategic goals and objectives; and (3) overseeing and ensuring that the strategic goals and objectives are accomplished. Governance for health is governance done with the objective of protecting and promoting the health of the people served by a public or private organization.

(Source: Management Sciences for Health, "How to Govern the Health Sector and Its Institutions Effectively," The eManager, No. 1, 2013)

Studies, roundtable discussions, and fieldwork done by the Leadership, Management, and Governance (LMG) Project¹ funded by the US Agency for International Development defined five governing practices as essential to the effective functioning of governing bodies:

- Cultivating accountability
- Engaging stakeholders
- Setting a shared strategic direction
- Stewarding resources
- Assessing and enhancing governance

The LMG Project developed this series of guides and the accompanying training handbooks to help you operationalize each of the five governing practices in your organization. You will have an opportunity to use (1) guides that explain each of the five practices; (2) training handbooks that support and prepare you to apply the governing practices described in the guides, and (3) a series of reading materials, case studies, tools, and resources.

We hope you will find the materials and the training course based on them useful and, as a result of investing your time in the course, that you will be more comfortable, confident, and competent in your governing role. As governance leaders or members of governing bodies, using these guides you will be able to apply the five effective governing practices in your organization, and improve your governance performance and in turn, your organization's performance. Training course based on these guides will make the learning of the five governing practices more effective and the course will enable you to develop and implement a governance enhancement plan for your organization. The course uses the five guides as required readings for the participants. We have also developed a separate training facilitator's handbook to help the facilitators deliver the governance enhancement training in a structured way and with maximum effectiveness.

¹ The LMG Project is implemented by a consortium of six partner organizations: Management Sciences for Health, African Medical and Research Foundation, Medic Mobile, International Planned Parenthood Federation, Johns Hopkins University Bloomberg School of Public Health, and Yale University Global Health Leadership Institute. You may visit us at www.lmgforhealth.org.

Purpose and Audience for the Guides

The series consists of five guides on effective governance of the health sector and health institutions:

1. Guide for Cultivating Accountability
2. Guide for Engaging Stakeholders
3. Guide for Setting a Shared Strategic Direction
4. Guide for Stewarding Resources
5. Guide for Continuous Governance Enhancement

The primary users of these guides are the teams of leaders who govern and leaders who manage the health sector and health institutions in low- and middle-income countries. As senior health leaders, the guides are designed to help you implement the five essential governing practices in your organization. The contents of these guides are applicable to the public sector or government organizations and to not-for-profit or nongovernmental organizations (NGO) or civil society organizations. The guides are also applicable at all levels of the health system: national, provincial, district, or community level as well as at the institutional, organizational or health facility level. For example, the Minister or Permanent Secretary or Director of a department in the Ministry of Health and her/his senior leadership team will find the guides and the training course based on these guides useful. The Director or Head of a provincial health department or a district health office or a hospital or a health center and her/his colleagues in the governing body will likewise benefit. Using these materials, members of governing bodies that direct provincial health systems, district health systems, hospitals, and health centers in public and not-for-profit sectors will be able to adapt effective governing practices to their own settings, apply them, improve their governance and, in turn, the performance of their organizations.

To facilitate the structured delivery of the content of the five guides, training handbooks have been developed to accompany the guides and to be used by the training facilitators. The handbooks are designed as the training facilitator's tool and the training facilitator's resource for your capacity building as governance leaders (leaders who govern) or management leaders who support good governing practices. Separate training handbooks have been developed for the training of the governance leaders or governing bodies of (1) ministries of health, (2) provincial health departments or provincial health systems, (3) district health offices or district health systems, (4) hospitals, and (5) health centers.

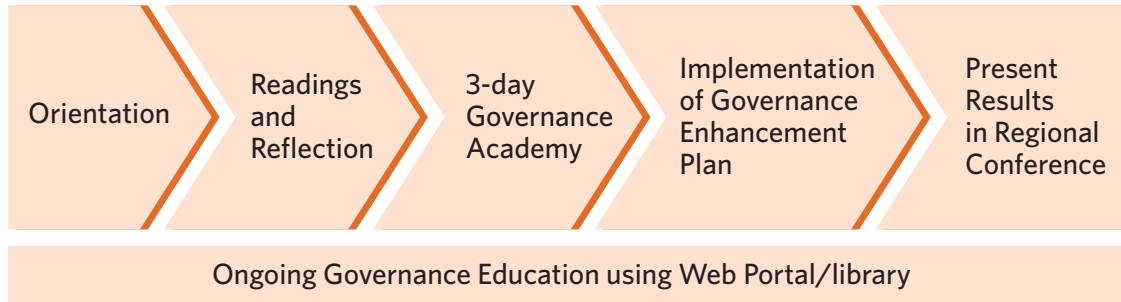
The guides can be used as a self-study resource by the governance leaders or governing bodies to learn the five governing practices and apply them. These are available at www.lmgforhealth.org/expertise/governing.

You may start with taking some of the governance self-assessments that you will find in the appendices in the Guide for Continuous Governance Enhancement. This will help you assess your governing practices. You may then start with the guide for the governing practice where you feel you need to improve the most. Alternatively, you may start with the guide on cultivating accountability, and then move on to the guides on engaging stakeholders, setting shared strategic direction, stewarding resources, and continuous governance enhancement, in that order. The practices are inter-related, one builds on another. This sequence will allow you to benefit from this attribute of the practices. The learning and its application will be more effective if a structured training is organized using the training handbook relevant for your setting. The guides, handbooks, and other resource materials will support your capacity building as leaders who govern or leaders who manage, and leaders who are dedicated to strengthening the performance and results of health systems in low- and middle-income countries.

The learning continuum comprises a carefully designed learning experience consisting of: general orientation of new governing body members; readings, reflection, and collective self-assessment by the governing body; a three-day Governance Academy through which the knowledge on how to

apply the five effective governing practices can best be mastered; implementation of a governance enhancement plan and an action plan to improve selected measures of the organization's performance; and presentation of lessons learned and results in a regional conference; all of this is supported by continuous governance education using the resources available on the LMG website www.lmgforhealth.org/expertise/governing.

Governance Learning Continuum



The three-day Governance Academy or governance workshop is at the heart of this learning plan. As described in the accompanying training handbooks, there are twelve sessions in the Governance Academy designed to help participants master the contents of the five guides. The sessions are practice-oriented and based on an experiential learning methodology. The handbooks describe specific trainer goals and learning objectives for each session. Course participants are expected to be teams of governance leaders and senior management leaders from similar settings. For example, participants could be senior governance and management leaders from several different hospitals. However, they should be from hospital settings only so that the focus is on applying the practices in a hospital setting. By the end of the course, the teams would have prepared a governance enhancement plan and an action plan to improve two to three strategic measures of their organization's performance. When they go back to their organizations, senior governance and management leaders work together as a team to consistently apply the five essential governing practices, implement their plans and improve their organization's governance and performance.

Governance enhancement plan comprises periodically assessing governing practices and continuously trying to improve these practices through regular governance assessments, governance orientation and education, building diversity in the governing body, cultivating essential governance competencies, conducting productive meetings, establishing governance policies, and using governance technologies like dashboard.

The primary purpose of enhancing governance is improving the organizational performance. For this reason, the governance leaders working with the senior management and key stakeholders develop an action plan to improve two to three strategic measures of the organization's performance. This involves practical application of the governance capabilities of the governing body and also consistent application of the effective governing practices they learned in course of the governance enhancement education. When the governance leaders see their governance decisions translating into higher organizational performance, they are inclined to consistently apply the effective governing practices. A virtuous cycle is set into motion, improved governance leading to better organizational performance, which in turn motivates the governance leaders to continuously enhance their governance.

Governing Practice—Stewarding Resources

Stewardship is the ethical use of common resources in pursuit of financially efficient outcomes. Policy making that is both *ethical* and *efficient* is the defining feature of stewardship. Compiling, disseminating, and applying data on how resources are being used are essential stewardship functions.

The lack of ethical and moral integrity can occur in any area of the health sector. Examples include in the: construction and renovation of facilities; purchase of equipment, supplies, and medicines; education of health professionals; and provision of services by medical personnel and other health workers. A lack of integrity can manifest itself through bribes, kickbacks, poor performance, refusal to uphold institutional policies, absenteeism, informal payments, or theft of public resources.

Corruption in a health system results in higher costs and lower quality of care, affecting the poor the hardest if services become biased towards a society's elite. Poor women, for example, may not get critical health care services simply because they are unable to pay informal fees. Patients may not receive high-quality care. There is a risk of harm due to substandard medicines and equipment, inappropriate treatment, and inadequate training of personnel. Patients and citizens lose faith and trust in the health system and in the government if health service delivery is riddled with corruption. And, the government loses its legitimacy.

To explore the good governing practice of stewarding resources, you will want to consider the following principles and actions.

Steward Resources: *Steward resources responsibly.*

Principles underlying the practice	Governing actions you can take:
Financial accountability Development Social responsibility Capacity building Country ownership Ethics Resourcefulness Efficiency Effectiveness	<ul style="list-style-type: none"> ▪ Mobilize resources to accomplish the organization's mission and plans. ▪ Protect and wisely deploy the resources entrusted to the governing body to serve stakeholders and beneficiaries. ▪ Collect, analyze, and use information and evidence for making decisions on the use of human, financial, and technical resources. ▪ Develop and implement a strategy for building the health sector's capacity to absorb resources and deliver services that are of high quality, appropriate to the needs of the population, accessible, affordable, and cost-effective. ▪ Advocate for using resources in a way that maximizes the health and well-being of the public and the organization. ▪ Inform the public and create opportunities for them to be included in monitoring and evaluating the way that resources are raised, allocated, and used.

Stewarding Resources Responsibly

Health sector leaders who govern effectively: (1) define the scope and nature of resources required to implement their organizations' strategic plans; (2) raise the needed resources from diverse sources; and (3) ensure that the resources are carefully used by managers, clinicians, and health workers.

Effective governance requires the careful stewardship of scarce resources (human, technological, and financial). To ensure good stewardship of a health sector organization's resources, the governing body needs to master six imperatives:

1. Wisely raise and use resources
2. Practice ethical and moral integrity
3. Build management capacity
4. Measure performance
5. Use information, evidence, and technology in governance
6. Eradicate corruption



This guide presents a number of activities that may be implemented to achieve each of these six imperatives. A variety of tools and resources to support these activities are provided in the Appendix of the guide. In the following sections of the guide, "you" should be interpreted as you the leader who governs—working with your governing body and the senior management team.

Wisely Raise and Use Resources

Every community's or country's health sector requires access to financial resources to support the provision of services by health workers that protect, promote, or restore the health of the population. Most countries believe that they never have enough resources to do all they would like to address both communicable and non-communicable diseases. Sources of funding can be diverse:

- Budget allocation from the Ministry of Health
- Revenue from public health insurance agencies paid per person or per unit of service delivered
- Donor contracts or grants
- Philanthropy
- User fees charged at the point of service delivery

Effective governing body members learn about their organization's historical patterns and trends regarding funding sources, and then determine whether the funds are at sufficient levels and stability to ensure the economic health of the health system or the health service organization.

There are several activities that will help you ensure a stable source and responsible use of resources for your organization. **Of the activities listed below, which are the two or three most important for you to accomplish over the next year?**

1. Mobilize resources to accomplish your organization's mission and plans and the vision and mission of the health ministry.
2. Protect and wisely use the resources entrusted to you to serve the people.
3. Collect, analyze, and use information and evidence for making decisions on the use of human, financial, and technical resources. Use technology to facilitate this decision making.
4. Develop and implement a strategy for building the health sector's capacity to efficiently and effectively use resources and deliver services that are of high quality, affordable, cost-effective, and appropriate to the needs of the population.
5. Use and advocate for using resources in a way that maximizes the health and well-being of the public.
6. Inform the public and create opportunities for them to be included in monitoring and evaluating the way that resources are raised, allocated, and used.
7. Involve the public in monitoring the work of health posts and health facilities, and the delivery of health services.
8. Have a strategic plan and work from it. Update your strategic plan regularly so that it is always a real road map for the next three to five years and so that you can forecast the need for resources and also measure your organization's performance.
9. Focus on things that really make a difference to the health of the people, and exert influence across all sectors for better health outcomes.

While implementing some of the key activities above,

1. What obstacles are leaders who govern likely to experience in implementing each activity?
2. How might those obstacles best be removed or reduced by the governing body?
3. What are two or three practical ways to help ensure the successful accomplishment of this activity?

Practice Ethical and Moral Integrity

Governing bodies need to ask their leaders and managers if the system or organization is receiving good “value for money.” Are the contracts to hire people, purchase pharmaceuticals and supplies, invest in facilities and equipment being established in fair, competitive, and ethical terms?

Performance-based purchasing requires those who govern to work with the organization’s leaders to establish a culture that sees the resources of the organization as being owned by the people served by the organization. As these resources are held in trust on behalf of the people and families of the community, district, province, or country, those who govern need strong ethical and moral integrity.

The following activities are important for your governing body to aspire to, to embrace, and accomplish. **For each category of activities, identify one or two that are the most important in your situation. How can you implement them?**

Act with ethical and moral integrity

1. Involve stakeholders and the public in the oversight of activities of your department or organization.
2. Make policies, practices, expenditures, and performance information open to stakeholder scrutiny.
3. Publish, preferably on the internet, and regularly update information on your budget and performance.
4. Make all stages of plan and budget formulation, execution, and reporting fully accessible to the public and stakeholders.
5. Make information about tender processes publicly available on the internet.
6. Introduce a code of conduct on ethics and whistleblower protections.
7. Take preventive measures to prevent corruption. Prevention is the best strategy.
8. Tighten control systems, such as financial management and procurement systems.
9. Adopt and enforce conflict of interest rules.

Begin with yourself

1. Demonstrate the highest standards of personal integrity, truthfulness, honesty, loyalty, and responsibility in all your activities in order to inspire confidence and trust in your activities.
2. Discharge your duties unselfishly to benefit only the public. Keep your personal interests separate. Work for the people’s health, not your own good.

3. Hold paramount the health and welfare of people in the performance of your professional duties.
4. Act with personal and professional integrity.
5. Communicate candidly, honestly, and openly as regards any material facts related to your official duties and activities.
6. Treat others fairly.
7. Strive to achieve the highest standards of performance, service, and excellence.
8. Have the courage to suggest improvements when needed.
9. Keep your promises.
10. Be accurate, fair, and timely in your communications.

Respect

1. Treat others equitably and respectfully in all aspects of your activities.
2. Do not engage in any form of discrimination or harassment.
3. Listen carefully even if others offer perspectives that are different from your own perspectives.
4. Uphold and implement policies adopted by your organization.

Loyalty

1. Be loyal to the mission of your organization.
2. Do not engage in any conduct that would undermine the public's trust in your organization.
3. Do not engage in any activity or relationship that would create a potential or actual conflict of interest and that would adversely affect your ability to faithfully perform your public service duties.

Gifts

1. Your organization should define its policy for accepting and receiving gifts. Follow it scrupulously.
2. Do not solicit or accept a gift in return for an official act, or accept frequent or expensive gifts such that a reasonable person is likely to conclude the individual is using his or her position for private gain.

Outside Employment

1. Make sure that any outside employment does not interfere with your responsibilities to your organization and does not adversely affect the organization or its mission.
2. Inform your chair of any significant outside activities that might impact your governing responsibilities.

Misuse of Position

1. Do not use your position for personal gain, or for the private gain of any enterprise, friends, family members, or persons with whom you are affiliated.

Vendor Relationships

1. Ensure that the management treats vendors fairly and avoids favoritism, and offers vendors the opportunity on a fair and competitive basis.
2. Refrain from influencing the selection of vendors who are family members or personal friends or are affiliated with you, or are employed by a person with whom you have a relationship that would create a potential or real conflict of interest.

Full Disclosure

1. Make full disclosure of all potential and actual conflicts of interest.
2. When in doubt whether to disclose or not, disclose all potential conflicts of interest.

Financial Oversight Responsibility

1. Manage your organization's resources in a responsible manner maximizing your ability to advance the organization's mission.
2. Ensure that the financial results are reported in an accurate and timely manner.
3. Be an honest and faithful fiduciary and protect the funds entrusted to the organization.
4. Use the resources, equipment, and material of your organization only for the performance of organizational duties.
5. Comply with all limitations on incurring expenses in the course of authorized activities for your organization.
6. Do not seek or receive reimbursement for expenses not incurred.
7. Adopt and implement policy on disclosure of conflict of interest.

Transparency

1. Openly, candidly, and transparently report the results.
2. Provide members of the public who express an interest in the affairs of your organization with a meaningful opportunity to communicate with an appropriate representative.

Governance decision making

1. Govern conscientiously and honestly to advance the mission of your organization.
2. Commit yourself to the mission of your organization, and competently, efficiently, and professionally perform the duties and tasks needed to be performed to advance the organization's mission.
3. Strive for excellence and professionalism in all your activities.
4. Work cooperatively with others when making a decision.
5. Fully and candidly discuss decisions entrusted to you and respect others' viewpoints.
6. Invest in the education and training of your governing body members as a means of ensuring excellence in governance.
7. Be an active listener and learner.

(Source: Adapted from the United Way of the National Capital Area Board's Code of Conduct)

As you consider this long list of activities for ethical practices, please answer the following questions.

- 1. What obstacles are leaders who govern likely to encounter in practicing ethical and moral integrity?**
- 2. How might those obstacles best be removed or reduced by the governing body?**
- 3. What are two or three practical ways to help ensure the successful accomplishment of this activity?**

Build Management Capacity

Management of scarce resources should be undertaken by experienced and effective managers, under the oversight of the governing body. The key practices of managers who lead and manage well (planning, organizing, implementing, monitoring and evaluation) are described in two MSH publications: *Health Systems in Action: An eHandbook for Leaders and Managers* and *Managers Who Lead: A Handbook for Improving Health Services*. These are also described in the Guide for Setting a Shared Strategic Direction. Governing bodies need to invest not only in continuously developing the competencies of managers to perform the essential leading and managing practices, but also in the tools, systems, and working conditions for employees to flourish. As you govern to support management's capacity, there are several activities that can help ensure that the organization's resources are being used wisely. **Which two or three of the following activities (numbered 1 to 7) are the most important in your situation?**

1. Invest in continuing education for the management leadership team, for example through:
 - a. Participation in formal leadership development programs,
 - b. Mentoring from selected governing body members,
 - c. Executive exchange programs with similar organizations in other districts or countries,
 - d. Access to best practices by reading, study tours, and interactions with diverse health workers.
2. Ensure the managers reorient processes towards concrete and measurable results.
3. Ensure the managers focus on monitoring and continuous quality improvement.
4. Ensure the managers develop cost-effective procurement, storage, and distribution solutions for supplies.
5. Strengthen oversight of service delivery and health management processes.
6. Use social accountability mechanisms, such as community scorecards, social audits, and public hearings (see the Appendix of the Guide for Cultivating Accountability for a description of such mechanisms).
7. Pay close attention to the quality of service and care provided by your organization.

1. What are the obstacles leaders who govern are likely to encounter in building management capacity?

2. How might those obstacles be removed or reduced by the governing body?

3. What are two or three practical ways to help ensure the successful accomplishment of this activity?

Measure Performance

The wise stewardship of scarce resources requires that their flow and use be carefully measured and accounted for. Modern, disciplined, accurate, and ethical accounting and bookkeeping are essential to the infrastructure of well-governed health systems. Effective governing body members ask pertinent questions about patterns and trends in the costs and expenditures of their organization. There are several activities that can help ensure the achievement of this essential practice. **Of the following activities (numbered 1 to 4), which are the two or three most important in your situation?**

1. Ensure the managers and health providers
 - a. measure performance,
 - b. involve stakeholders in the measurement of results,
 - c. consider the perspectives of users of health services when measuring results,
 - d. use performance information to improve services, and
 - e. periodically review and revise the performance measures.
2. Build the skills of managers and health providers in selecting and using meaningful measures to support their decision making.
3. Review your governance effectiveness at least annually. Regularly seek information and feedback on your own governance performance. Pause periodically for self-reflection, to diagnose your strengths and limitations, and to examine your mistakes. Measure participation of stakeholders in governance decision making, your gender responsiveness, openness, accountability and integrity, and improvements in health system performance and health service performance.
4. Use measurement results
 - a. for improving use of resources
 - b. for promoting your own accountability and that of your team
 - c. for your communication with the public
 - d. to evaluate, control, budget, motivate, promote, celebrate, learn, and improve.

For each of your top priority activities, address the following three questions:

- 1. What obstacles are leaders who govern likely to encounter in implementing this activity?**
- 2. How might those obstacles be removed or reduced by the governing body?**
- 3. What are two or three practical ways to help ensure the successful accomplishment of this activity?**

Use Information, Evidence, and Technology in Governance

Consider how best to support your organization's managers to use information, evidence and technology for effective utilization of resources. Consider how best to use these to facilitate governance decision making.

Use Information and Evidence

1. Use valid and reliable evidence when making decisions.
2. Use evidence to identify problems, frame solutions, and decide how solutions will be implemented.
3. Engage your stakeholders in evidence-informed decision making.
4. Build capacity of staff to find and use appropriate evidence.
5. Use technology to manage information and gather evidence.

Use Technology

1. Use data generated or transmitted via mobile phones and modern information and communication technologies for stewardship of resources.
2. Use mobile phones and eHealth strategies to rapidly collect data and evidence for evaluation purposes. Use modern technology for knowledge exchange and capacity development.
3. Use mobile phones and eHealth strategies to assess and improve access to health services for your organization's hard-to-reach populations.
4. Involve citizens in the monitoring of health services, such as reporting using mobile phones on the availability of medicines and vaccines, stock-outs, waiting time at clinics, health worker payments, functionality of equipment, etc.
5. Use eProcurement to publish contract and procurement opportunities for goods and services.

What two or three steps could you take to promote use of data, information, evidence, and technology to facilitate governance decision making around the wise use of scarce resources?

Eradicate Corruption

Corruption is the improper use of resources for personal gain or in such a way that the achievement of the organization's mission is compromised or jeopardized. Corruption unfortunately exists in the health sector of all nations. Good governance does not hide from this painful reality. Studies show that there are many causes and solutions for corruption.

Kickbacks and bribes, non-transparent tender and procurement processes, theft of drugs, supplies and money, diversion of medicines and supplies from public facilities for resale at private facilities, abuse of public facility space, private use of time on duty and resources (for example, vehicles), and absenteeism are the common expressions of corruption in the health sector. Expressions of corruption vary and can be blatant corruption like taking bribes, to things that might be more subtle like helping a relative get a job.

Governing body members must ensure that they do not behave in unethical and illegal ways and should take any necessary actions to protect the organization from all forms of corruption.

There are several activities listed below that can help mitigate the negative impact of corruption. **Which two or three activities are the most important to eradicate corruption in your organization?** (In addition to these activities, please see related materials in the Appendix.)

Interventions to reduce corruption

(Source: Personal Communication with Professor Taryn Vian, 2013)

1. Ethics and Compliance Initiatives
2. Ethics or compliance officer
3. Code of conduct for governing body members and staff; ethics policy
4. Ethics training for governing body members and staff
5. Internal whistleblowing or ethics reporting mechanism
6. Public statements by senior management
7. Risk assessments
8. Incentives for a well-designed compliance program

Human Resources Management

1. Employee performance appraisal system
2. Changes to civil service to allow for prompt disciplinary action
3. Performance-based payment
4. Merit-based hiring and promotion system

Pharmaceuticals Sector

1. Reforms to the drug inspection process (pay inspectors well, rotate inspectors)
2. Legal reforms to the drug registration system
3. Transparency in procedures and decisions for drug registration (posting on web sites, etc.)
4. Transparency in procedures and decisions for procurement
5. Contract out drug storage and distribution to the private sector (where there are incentives not to steal drugs)
6. Invest in security systems and ways to track stolen medicines
7. mHealth technology to monitor stock-outs and correlate with spending on pharmaceuticals (detect anomalies)
8. Hospital-based systems to reduce theft by employees
9. Impose serious penalties for breach of ethical and legal standards

Participation of Civil Society

1. Social audit initiatives (citizen report cards)
2. Citizen complaint offices (with trained legal counselors who can solve a problem)
3. Support watchdog or regulatory organizations (to analyze government performance, share data, etc.)
4. Citizen participation in governance structures (boards, public committees)
5. Civic training (teach people how to write a letter of complaint, etc.)
6. Satisfaction surveys (measure dissatisfaction and perceptions of corruption)
7. Media training (develop investigative journalism capacity, training in health policy for journalists, how to access public data)

Financial

1. Electronic cash registers (give itemized receipts, reconcile quickly with cash count, measure performance of individual fee collectors/locations)
2. Video surveillance of areas where cash transactions take place
3. Train auditors and financial staff; increase quality and frequency of audits
4. Strengthen computerized accounting systems (including automatic payments of per diems into bank accounts of employees)
5. Initiatives to reduce informal payments by paying staff well while at the same time increasing detection and punishment
6. Voucher programs (to reduce informal payments)

Crime Fighting

1. Situational crime prevention, which looks to “alter the immediate situation so as to create less favorable settings for crime thereby altering the decisions which precede crime commission” (increase the effort it takes, reduce rewards, reduce provocations, etc.)
2. Collaborate with other ministries and agencies (police, customs, anti-corruption agencies, finance)

Good Practices

(Source: UNDP. 2011. *Fighting Corruption in the Health Sector Methods, Tools and Good Practices*. New York, NY.)

1. Health policy goals should include anti-corruption considerations.
2. There is no “one size fits all” approach to combating corruption in the health sector.
3. More than one anti-corruption intervention should be employed to deal with one risk.
4. Prioritization is essential: based on evidence, governments and others involved in health services and programming should prioritize areas of the health system that are most susceptible to corruption and implement appropriate interventions.
5. It is important to work with other sectors.
6. Prevention is the best strategy: therefore, it is best not to wait for corruption to happen before beginning to deal with it.
7. Numerous empirical diagnostic tools should be employed.
8. Partners with experience in implementing anti-corruption strategies and tactics should be identified for technical support.
9. Broad stakeholder participation in health policy and planning is helpful.
10. Good behavior should be rewarded, and bad behavior punished.

What two or three steps could your governing body take to eradicate corruption in your organization?

A large, empty rectangular box with a thin black border, intended for the user to write their response to the question above. The box is currently blank.

Appendix

Eight Reasons to Measure Performance

to evaluate	to control	to budget	to motivate	to promote	to celebrate	to learn	to improve
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How performance measurement can be used to improve the stewardship of resources:

Purpose	Question That the Performance Measure Can Help Answer	Type of Performance Measure Used
Evaluate	How well is my organization performing?	Outcomes, combined with inputs and the effects of external factors
Control	How can I ensure that my organization's managers are doing the right thing?	Inputs that can be regulated
Budget	On what programs or projects should my organization spend money?	Efficiency measures (outcomes or outputs divided by inputs)
Motivate	How can I motivate my organization's managers, and health workers to do the things necessary to improve performance?	Outputs compared with targets
Promote	How can I convince stakeholders that my organization is doing a good job?	Easily understood aspects of performance about which stakeholders care
Celebrate	What successful accomplishments are worthy of celebrating?	Performance targets that, when achieved, provide your organization's staff with a sense of personal and collective accomplishment
Learn	Why is something working or not working?	Disaggregated data that can reveal deviances from the expected
Improve	What exactly should we do differently to improve my organization's performance?	Relationships that connect changes in operations to changes in outputs and outcomes

(Source: Adapted from Behn, R. 2003. "Why Measure Performance? Different Purposes Require Different Measures." *Public Administration Review*. 63 (5): 586-606.)

The development of measurement systems helps establish a performance-based culture in the public and private sectors. Performance measurement also helps promote accountability. Performance measures help you communicate better with the public, to build public trust. Improving accountability and increasing communications with the public have the potential to improve programs, thereby leading to better health outcomes.

What is Evidence-informed Public Health?

Stages of Evidence-informed Public Health

1.	Define	Clearly define the problem
2.	Search	Efficiently search for research evidence
3.	Appraise	Critically and efficiently appraise the research sources
4.	Synthesize	Interpret and formulate recommendations for practice based on the literature found
5.	Adapt	Adapt the information to a local context
6.	Implement	Decide whether and plan how to implement the adapted evidence into practice or policy
7.	Evaluate	Evaluate the effectiveness of implementation efforts

(Source: Adapted from National Collaborating Centre for Methods and Tools at McMaster University www.nccmt.ca/eiph/index-eng.html)

Examples of Evidence Considered in Decision Making in Public Health

Sources of Evidence	Examples of Evidence for Consideration
Evidence from research	<ul style="list-style-type: none"> The most relevant, high-quality qualitative or quantitative evidence available Research findings from a variety of disciplines and sectors relevant to public health
Evidence about the frequency, causes, and modifying factors of local community health issues	<ul style="list-style-type: none"> Surveillance data and community health status reports to determine the magnitude of the health issue in the local setting
Evidence from people about community and political preferences and actions	<ul style="list-style-type: none"> Evidence from people about community and political preferences and actions Needs and interests of community members Support or opposition from the public or government officials Current political climate (local, regional, provincial, federal) Current organizational climate
Evidence from various governments	<ul style="list-style-type: none"> Financial resources Human resources (personnel/staffing, administrative support, support from management) Materials (workspace, computers, supplies)

(Source: National Collaborating Centre for Methods and Tools. (2012). A Model for Evidence-Informed Decision-Making in Public Health. [fact sheet]. www.nccmt.ca/pubs/FactSheet_EIDM_EN_WEB.pdf.)

How Do You Measure Efficiency?

Health care outputs are mainly measured by the number of medical treatments and activities (e.g., surgical procedures and doctor consultations), adjusted when possible for their quality. Output efficiency is measured in terms cost per output. Individual medical outputs may be produced efficiently, but still have only a very limited impact on the health status of the population if they are not allocated in an optimal combination.

Outcomes are defined as those gains in the population's health status that can be attributed to health care spending. Outcome measures consist mainly of mortality and longevity indicators or disability-adjusted life years saved. Outcome efficiency is measured in terms cost per outcome. This approach is challenging because it requires disentangling the impact of health care from other factors (e.g., socio-economic environment and lifestyle) on the health status.

There are three alternative approaches to measuring efficiency in the health sector: ordinary least squares regression analysis; data envelopment analysis (a technique particularly appropriate when multiple outputs are produced from multiple inputs); and stochastic frontier analysis have been used to determine the contribution of health care or health spending and other determinants to the health status of the population.

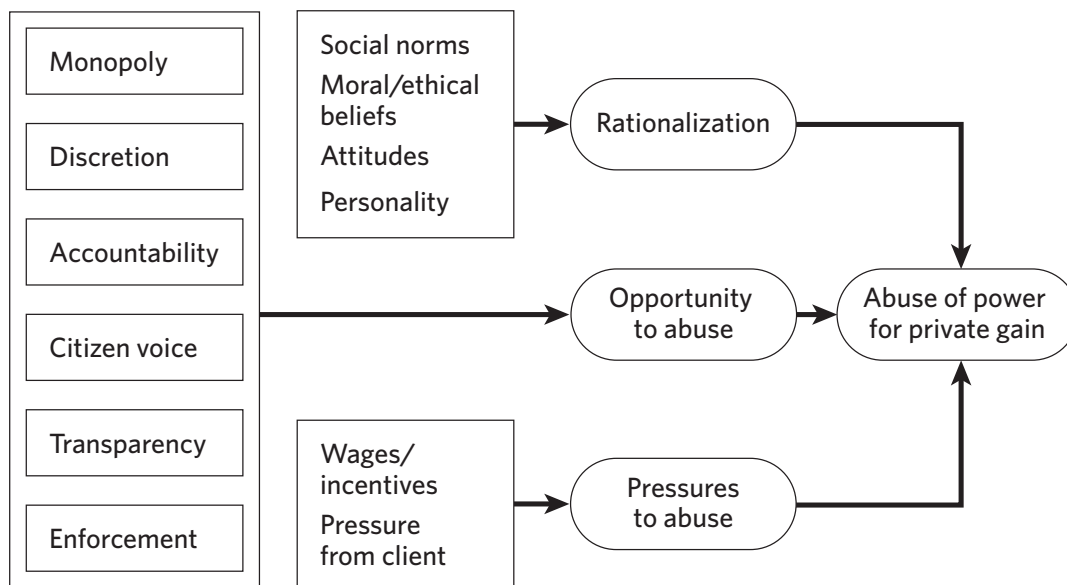
(Source: Joumard, I., Andre, C., and Nicq, C. 2010. "Health Care Systems: Efficiency and Institutions." *OECD Economics Department Working Papers*, No. 769, OECD Publishing.)

How Do You Measure Sustainability?

The concept and definition of sustainability are constantly evolving. There is a paucity of literature on determinants of sustainability and its outcomes. USAID Nepal has used a method for sustainability assessment comprising the following six components of evaluation, measured at project outset and periodically afterwards: (1) Health outcomes, (2) Characteristics of health services (quality, accessibility, and equity), (3) Institutional capacity of local government or civil society agencies with long-term responsibility for the outcomes, (4) Viability of these agencies for continued operation in service of the outcomes, (5) Capacity of beneficiary communities, and (6) Socio-ecological conditions enabling the work of the local agencies.

(Source: Sarriot E; Ricca J; Ryan L; Basnet J; Arscott-Mills S. Measuring sustainability as a programming tool for health sector investments: report from a pilot sustainability assessment in five Nepalese health districts. *The International Journal Of Health Planning And Management*. 2009. Vol. 24 (4), pp. 326-50.)

Theoretical Framework of Corruption in the Health Sector



Health care system & structure

- Insurance
- Payer-provider split
- Role of private sector etc.

Type of abuse

- Hospital construction
- Procurement
- Informal payments etc.

Resources

- High or low income
- Donor dependence, influx of funding

(Source: Vian, T. 2008. "Review of Corruption in the Health Sector: Theory, Methods and Interventions." *Health Policy and Planning* 23(2):83-94.)

Vian (2008) has presented a theoretical framework to guide policy makers in examining corruption in the health sector and identifying possible ways to intervene by increasing accountability, transparency, citizen voice, detection and enforcement, and controlling discretion and reducing monopoly power. In this framework, corruption is driven by three main forces: government agents who abuse public power and position for private gain do so because: they feel pressured to abuse (financially or by clients); they are able to rationalize their behavior or feel justified (attitudes and social norms support their decision); and they have the opportunity to abuse power.

How Do You Measure Corruption?

Corruption can be measured through quantitative surveys and qualitative methods (see the tables below). The surveys are broadly of two types: the first category is surveys of subjective perceptions of experts, professionals, representatives of private sector or civil society organizations or the general public, and the second category is surveys of objective information on expenditures. It is necessary to combine approaches and employ multiple sources of quantitative data, qualitative narrative analysis, and real-life case studies. No single data source or tool offers a definitive measurement. Moreover, measurement has a cost and hence it should be aimed at collecting actionable information.

The three main types of corruption indicators are perception-based indicators and experience-based indicators, indicators based on a single data source and composite indicators, and proxy indicators. Perception-based indicators are among the most frequently used measurement tools. They rely on the subjective opinions and perceptions of levels of corruption in a given country among experts and citizens. Experience-based indicators attempt to measure actual personal experience with corruption. Experience-based measurement tools ask citizens if they have been asked to give a bribe, or if they have voluntarily offered something to an official.

Data Collection and Analysis

Approach	Description	Benefits	Weaknesses
Corruption perception surveys	Surveys of perceptions about corruption, citizens in general, or particular classes of health workers. Examples: World Bank Corruption Perception Surveys, Transparency International's <i>Corruption Perceptions Index</i> , Freedom House's <i>Freedom in the World</i> Survey	<ul style="list-style-type: none"> Highlights areas of concern Establishes baseline and allows monitoring of changes over time Asking different health workers about the same problem can illuminate issues Provides public information for external accountability 	<ul style="list-style-type: none"> Current debate on best methodology, and how results may be affected by local understanding of terms Perceived behavior may differ from actual behavior
Household and public expenditure surveys	Household surveys measure expenditures, including health care and informal payments. Public expenditure analysis can identify leakages in flows of public funds between levels of government. Examples: World Bank Living Standards Measurement Surveys; Public Expenditure Tracking Surveys	<ul style="list-style-type: none"> Provides detail on household health spending by income and region, formal or informal Data can be compared with goals to provide measures of accountability, e.g., amounts paid for allegedly free services, percentage of government spending actually reaching service delivery points 	<ul style="list-style-type: none"> Existing data sets may not have asked questions in ways that allow one to distinguish between formal and informal payments Public expenditure tracking surveys depend on public records, which may be patchy
Qualitative data collection	Qualitative data collection through in-depth interviews and focus groups, to determine areas of concern	<ul style="list-style-type: none"> Provides details on attitudes, norms, beliefs, pressures Helps to define terms, clarify the "how" of corrupt acts, inform development of perceptions surveys Allows for follow-up 	<ul style="list-style-type: none"> Social desirability bias or reticence may influence results To get full cross-cultural meaning requires careful attention to translation and training of research staff

(Source: Vian, 2008.)

How to Identify, Track and Measure Corruption Risks and Corruption

Area	Issue	Tools to identify and track problems
General	Cross-cutting	<ul style="list-style-type: none"> ▪ Vulnerability to corruption assessments ▪ Value chain analysis ▪ Sectoral accountability assessment ▪ Analysis of governance in health care systems
Budget And Resource Management	Budget processes	<ul style="list-style-type: none"> ▪ Public Expenditure and Financial Accountability indicators ▪ Focus groups and interviews with public officials, recipient institutions, and civil society
	Payroll leakages	<ul style="list-style-type: none"> ▪ Public expenditure tracking surveys and reviews ▪ Household surveys ▪ Focus groups with public officials and health workers
	In-kind leakages	<ul style="list-style-type: none"> ▪ Public expenditure tracking surveys ▪ Quantitative service delivery surveys ▪ Facility surveys ▪ Focus groups with public officials, recipient institutions, and health workers
Individual Providers	Job purchasing	<ul style="list-style-type: none"> ▪ Official administrative records combined with facility surveys ▪ Interviews with public officials and former officials ▪ Governance and anti-corruption country diagnostic surveys
	Health worker absenteeism	<ul style="list-style-type: none"> ▪ Quantitative service delivery surveys ▪ Surprise visits ▪ Direct observation ▪ Facility records ▪ Focus groups or interviews with facility heads and patients
Informal Payments	Informal payments	<ul style="list-style-type: none"> ▪ Household surveys (e.g., World Bank living standards measurement surveys and demographic and health surveys) ▪ Facility exit surveys and score cards ▪ Focus groups/interviews with providers/patients and health staff ▪ Governance and anti-corruption country diagnostic surveys (World Bank)
Corruption Perceptions & Experience	Perceptions of Corruption	<ul style="list-style-type: none"> ▪ Governance and anti-corruption country diagnostic surveys (World Bank) ▪ National level perception surveys by civil society organizations and others
	Experience with corruption	<ul style="list-style-type: none"> ▪ AfroBarometer, LatinBarometer, EuroBarometer, national experience-based surveys ▪ Patient satisfaction surveys and report cards ▪ Focus group surveys /studies

(Source: Hussmann, K. 2011. "Addressing corruption in the health sector: Securing equitable access to health care for everyone." U4 Issue 2011(1). Chr. Michelsen Institute. U4 Anti-Corruption Resource Centre.)

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