

## **DRC-IHP Trip Report: Jean Kagubare (September 2013)**

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Jean Kagubare

December 2013

**Keywords:** Integrated Health Project; maternal, newborn, and child health; water, sanitation, and hygiene; family planning/reproductive health; malaria, tuberculosis, and nutrition

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## Integrated Health Project

in the Democratic Republic of Congo



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### TRIP REPORT JEAN KAGUBARE

<b>1. Scope of Work:</b>	
Destination and Client(s)/ Partner(s)	Democratic Republic of Congo/IHP (Integrated Health Project) Management Sciences for Health (MSH)
Traveler(s) Name, Role	Jean Kagubare, Global Technical Lead, Healthcare Financing, MSH
Date of travel on Trip	Sept 15-26, 2013
Purpose of trip	Work with IHP team on Project Year 4 Workplan, conduct a refresher training for the IHP Results Based Financing (RBF) team, and support the implementation of the RBF web database application
Objectives/Activities/ Deliverables	<ul style="list-style-type: none"> <li>• Work with IHP team on the development of the Project Year 4 workplan with focus on the RBF program</li> <li>• Update IHP RBF indicators, tools and templates and conduct refresher training for the IHP RBF team.</li> <li>• Support the set-up of the RBF web database application</li> <li>• Technical meeting with Ministry of Health (MOH) RBF team</li> <li>• Trip report</li> </ul>
Background/Context, if appropriate	<p>The Integrated Health Project (IHP) in the Democratic Republic of Congo (DRC) is a 5-year project whose overall objective is to improve the basic health conditions of the Congolese people in 80 targeted health zones in 4 provinces: Eastern Kasai, Western Kasai, Katanga and South Kivu. The two major project components are “services” and “other health systems”. The areas of focus for the “services” component are: increased use of high impact family planning, maternal, newborn, and child health (FP/MNCH); nutrition, malaria, and tuberculosis (TB); neglected tropical diseases (NTDs); HIV/AIDS; and water, sanitation, and hygiene services (WASH).. The “other health systems” component aims to improve the implementation of selected policies, program advocacy, and decision-making, particularly at the provincial levels; it will also concentrate on system strengthening, the “leadership and governance” sphere and other health systems at the provincial level and national levels. MSH partners include the International Rescue Committee (IRC) and Overseas Strategic Consulting, Ltd. (OSC).</p>

<p><b>2. Major Trip Accomplishments:</b> Should include the major programmatic goals realized, relevant metrics, and stories of impact from the trip.</p>
<p><b>1. Worked with team on IHP Year 4 Workplan:</b> I attended and facilitated the results-based financing (RBF) components of the weeklong workplanning workshop, held on September 16-24, 2013, to develop the IHP Project Year 4 (PY4) workplan. I also provided technical support in the development of the RBF workplan and budget. The primary tasks accomplished during the workshop were:</p> <ul style="list-style-type: none"> <li>○ Performance analysis of key activities and indicators achieved by the project overall and also by each coordination office at the end of fiscal year 3.</li> <li>○ Summary of key lessons learned during the implementation of IHP interventions and innovations.</li> <li>○ Identification of the major challenges at the central level and the coordination offices during PY3; brainstorming of possible solutions.</li> <li>○ Identification of activities and strategies to be implemented based on priorities for PY4</li> <li>○ Development of detailed budget to support activities during PY4.</li> <li>○ Identification of key strategies for increased project sustainability and improved project performance at all levels.</li> </ul>
<p><b>2. Updated IHP RBF indicators, tools, and templates, and conducted a refresher training of IHP RBF team</b></p> <ul style="list-style-type: none"> <li>● Working with the RBF senior technical advisor for IHP, we updated the IHP RBF management tools (RBF indicators, community verification templates) that will be used for the implementation of the RBF program.</li> <li>● I led a refresher training for the IHP RBF team. Eight IHP staff at the central level attended the workshop. The purpose of the training was to demonstrate the use of the revised RBF IHP tools and templates.</li> <li>● International Business &amp; Technical Consultants, Inc. (IBTCI) presented the preliminary findings of impact evaluation of IHP project and IHP RBF program. Key lessons and recommendations were provided and discussed. Recommendations from IBTCI were incorporated into IHP RBF Year 4 workplan.</li> <li>● The following IBTCI recommendations were incorporated in the workplan: <ul style="list-style-type: none"> <li>○ Use of free market and public choice: IHP will explore the possibility of subcontracting of other private health facilities in the catchment of the primary health center.</li> <li>○ RBF is dependent on a fully functional health system: IHP will use FOSACOF approach (fully functional service delivery point) in all RBF health facilities to improve the overall health system.</li> <li>○ Training of nurses at health center level: IHP will roll out the RBF training to capacitate all the staff at the health.</li> <li>○ Civil society involvement: IHP is planning to recruit community based organizations to conduct counter verification and client satisfaction surveys in all RBF health zones.</li> </ul> </li> </ul>
<p><b>3. Supported the set-up of the RBF web database application</b></p> <p>I provided support to the RBF consultant to finalize and update the RBF web database application:</p> <ul style="list-style-type: none"> <li>● Reviewed and updated IHP RBF indicators</li> <li>● Presented and reviewed the preliminary version of the web application to IHP and MOH staff (RBF and Health Management Information Systems teams) and collected their feedback.</li> <li>● Conducted training for IHP staff in the use of the web application.</li> <li>● Identified potential hosts for the web application, and presented the pros and cons and the costs to MOH staff and IHP leadership.</li> </ul>
<p><b>4. Technical meeting with Ministry of Health RBF team</b></p> <p>I attended two technical meetings with the Ministry of Health's RBF unit to share IHP RBF program plan for PY4. The MOH RBF team provided valuable feedback and recommendations on how to improve the program</p>

and enhance collaboration with the MOH, and these are:

- IHP should clarify team members' roles and responsibilities at central and district level.
- As RBF materials and templates are lacking, IHP should develop, produce, and distribute RBF materials in all RBF health facilities as soon as possible;
- IHP should explore how to subcontract private and other secondary health facilities in the RBF program;
- IHP should work with MOH RBF unit to plan and conduct regular joint supervision and evaluation of the RBF program in the IHP health zones.
- IHP will set up of RBF web application for the MOH, and conduct the training of key staff for the maintenance of the website.
- IHP will provide technical assistance to build the capacity of the MOH RBF unit on monitoring and evaluation of RBF program.

**3. Next steps:** Key actions to continue and/or complete work from trip.

Description of task	Responsible staff	Due date
Finalize IHP RBF health zone plans and budget	Health zone coordinators, Delmond Kyanza, Jean Kagubare	November 2013
Finalize the scopes of work for the IHP RBF central core team and health zone teams	Delmond Kyanza, Jean Kagubare	October 2013
Obtain USAID's approval of Community Based Organizations (CBO) contract	Peter Mahoney	October 2013
Conduct refresher trainings for RBF implementers in the remaining health zones	IHP RBF core team (Augustin Mwala, Kashosi Dorah, Sam Mbuyamba, Leon Katambayi, Britou Ndela, Delmond Kyanza)	November 2013
Finalize the development of the RBF business plans for health facilities, and sign RBF contracts	RBF core team and health zone teams, Ousmane Faye	November 2013
Sign contract with Community Based Organizations (CBOs) for RBF program counter-verification	Ousmane Faye	November 2013
Start RBF implementation in the selected health zones	All RBF implementers	December 2013
Set up the RBF web application, and train staff in its maintenance	RBF Consultant (Alfred Antoine Uzabakiliho)	February 2014

**4. Contacts:** List key individuals contacted during your trip, including the contacts' organization, all contact information, and brief notes on interactions with the person.

Name	Contact info	Home organization	Notes
Dr. Ousmane Faye	4, Ave. des Citronniers, Gombe, Kinshasa, DR Congo Email : ofaye@msh.org	MSH	IHP Chief of Party
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Delmond Kyanza	4, Ave. des Citronniers, Gombe, Kinshasa, DR Congo Email : <a href="mailto:dkyanza@msh.org">dkyanza@msh.org</a>	MSH	RBF Senior Technical Advisor
Thibaut Mukaba	Kinshasa- Gombe	USAID	FP/RH specialist
Jose Tchofa	Kinshasa –Gombe	USAID	PMI advisor
Richard Matendo	Kinshasa –Gombe	USAID	AOR IHP project
Dorcias Muteteke	Kinshasa –Gombe	USAID	TB specialist
Godefroid Mayala	Kinshasa –Gombe	USAID	FP/RH management specialist
Dr Makaya Augustin Damase	Kinshasa –Gombe	MOH	MOH RBF Unit
Charlie Tchomba	Kinshasa –Gombe	MOH	MOH RBF Unit
Lourd Shamashanga	Kinshasa –Gombe	MOH	MOH RBF Unit
Raymond Kambele	Kinshasa –Gombe	MOH	MOH RBF Unit
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Dr Yakim	Kinshasa –Gombe	MOH	MOH HMIS Unit
Eric Katanga	Kinshasa –Gombe	MOH	MOH HMIS Unit
Josué Elombe	Kinshasa –Gombe	MOH	MOH HMIS Unit

<b>5. Description of Relevant Documents / Addendums</b>		
<b>File name</b>	<b>Description of file</b>	<b>Location of file</b>
PROSANI RBF tools_sept 2013	PROSANI RBF Tools and templates	IHP eRoom
IHP and RBF findings PROSANI Debrief 240913	IBTCI presentation: IHP performance Evaluation RBF Impact Evaluation Preliminary Findings	IHP e-room