

AT A GLANCE

Service Delivery Learning Program

An action-oriented, needs-driven learning program, that supports countries in their effort to continue essential health services for women, children and adolescents amidst COVID-19 by:

- deploying core capacities to address COVID-19
- strengthening frontline service delivery
- addressing demand side constraints



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GFF’s Service Delivery Learning Program (SDLP) creates an environment for countries to learn and share good practices, get mutual support, and collaborate in co-creating solutions to be integrated into COVID-19 national response plans. **At the heart of the SDLP, country representatives are active agents in the learning process and in designing implementable action plans.**

The sessions are combined with topical knowledge and hands-on support through: (1) online webinars; (2) cluster workshops; (3) country sessions; (4) an online discussion forum; and (5) country-based coaching support.

Participating Countries

AFGHANISTAN	BURKINA FASO	CÔTE D'IVOIRE
NIGERIA	SENEGAL	SIERRA LEONE
UGANDA	ZAMBIA	ZIMBABWE

Over **90 participants** joined the SDLP including national officials from Ministries of Health, technical partners, financiers, World Bank Task Team Leaders, private sector and civil society representatives, and other key stakeholders.

“The SDLP enabled countries to brainstorm, dig deeper and get insightful and concrete ideas from country break-out discussions of what has worked in their country.”

“The SDLP was informative, exciting, and motivating - especially being able to learn how other countries are doing, what we’ve been struggling to do in my own country - and seeing that the solutions can be very practical.”

“I was skeptical that it would be a generic workshop where I would just listen. But I appreciated being able to share what we are doing in my country and discuss how it could be improved or scaled up or even taken up by other countries.”

Learning Approach

Our learning approach include adapted content from scientific trends; global guidance; and best practices specific to country needs. It enables experts that are actively engaged in their own country's response plan to lead discussions and facilitate knowledge exchange among participants from different geographies and languages.

The SDLP is not simply an online webinar series, but a virtual community of learning and practice, setting up structures for sustained virtual engagement, learning, and knowledge sharing.

- **Online discussion forum** allows for deeper continuous engagement and knowledge sharing, for participants – limited time-bound engagements yet continuously facilitated discussion, Q&A, and immediate feedback through the online discussion forum.
- Succinct learning, material with key messages for quick reference and broader dissemination of content.
- Country-based coaching support, including a structured action template to guide immediate and timely analysis.

Cluster discussions enables participants to **identify country actions**, as well as share experiences through presentations and webinars.

“The platform was vital to bringing us partners to a common understanding of the situation and guiding a common response”.

“After exchanging with other countries, I saw that we were on the right track with many of the actions we were taking and were able to acquire some innovative ideas for us to consider when we get back”.

“I'm grateful for participating in this important learning program. It came at the right time. The information and experiences shared during the discussions will help us shape the implementation of our agreed upon actions”.

“I found it most useful to hear about actions and strategies which are already being implemented in other countries of similar context and which my country has been undecided about implementing them”.

■ Cluster discussions ■ Sharing experiences ■ Prioritization of action planning ■ Other

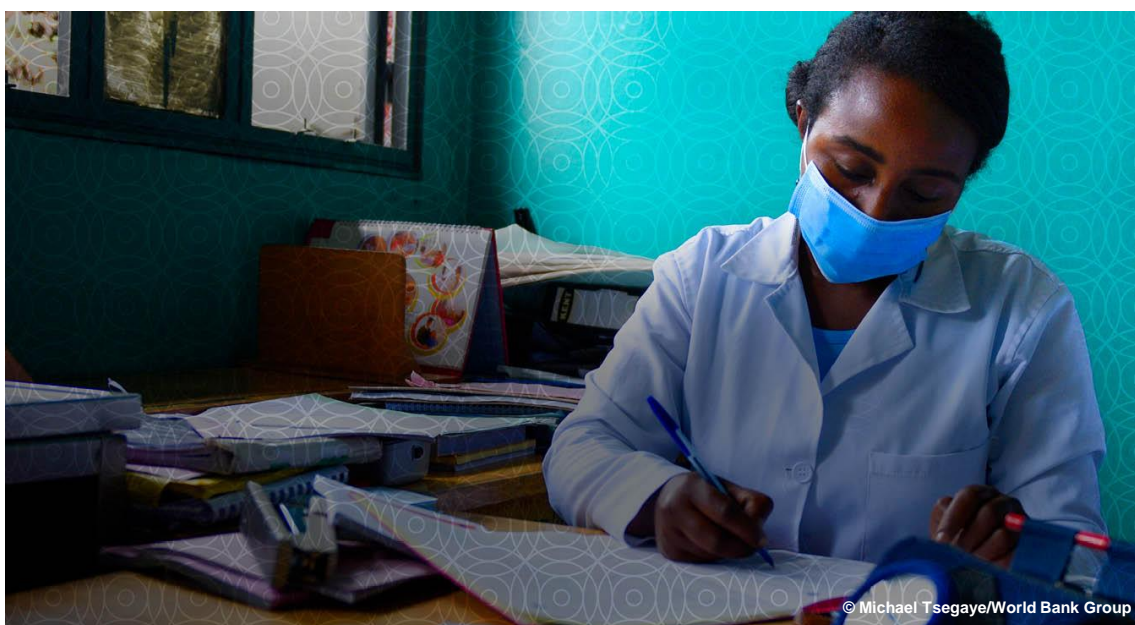
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Key Action Learnings

Keeping Patients and Clients Safe

- It is vital to support patients to feel comfortable accessing services, to continue the uptake of essential health services, maintain health indices, and minimize non-Covid19 (indirect) morbidity and mortality.
- This may require multiple, mutually supportive actions such as: reorganization of patient, staff, and visitor flows, visible commitments to the safety and protection of patients and providers; clear communication about the delivery of essential services; monitoring, understanding, and adapting to trends in service delivery utilization.

Enabling Necessary Visits to Health Facilities

- Rationalizing services between facilities must be a data-driven exercise.
- Strong communication channels are necessary to ensure data is communicated effectively to relevant stakeholders and decision-makers, and for clients to know when, where, and how to access care.
- Digital platforms and technology solutions have an important role in the reorganization of services.

Improving How Services are Delivered

- Countries with strong community health systems have stronger epidemic responses.
- The role of community health workers during Covid19 include preventing, detecting, and responding to information and service needs in their supported communities.
- Digital and telemedicine services play a critical role in service provision when traditional, facility-based systems of service delivery are disrupted.
- Utilizing all existing health care delivery systems serves to prevent duplication of efforts, including both the public and private sector.

Monitoring Changes in Essential Health Services

- Different health system approaches (e.g., results-based financing and learning networks) are designed specifically to support the quality of essential service delivery and drive change for continual adaptation and strengthening.
- Adaptation and learning from quality data and effective monitoring systems is critical to understanding essential service disruption during the pandemic and in guiding country response.

Reflections for SDLP Participants

Multidisciplinary and multisectorial perspectives

on topics including supply chain, data management tools, personal protective equipment, epidemiological trends, health financing, capacity building of community actors, and fragility - enriched the exchange between countries and provided an opportunity to learn from similar challenges across contexts.

Peer-to-peer and rich exchange of ideas and experiences across countries, especially between Francophone countries who are facing similar health challenges. Grouping countries based on shared contexts and experiences helped identify practical milestones and quick wins, especially during the straight on health systems resulting from COVID-19.

Problem and solution-oriented dialogue and discussion, aimed to identify and manage challenges brought by COVID-19, ensure that health systems are able to deliver essential services, and reinforcing the critical role of community agents at the operational level and their role in a concerted fight against COVID-19. Participants also discussed unexpected challenges - such as healthcare worker stress and anxiety - resulting from COVID-19 response.

Rapid curation of key takeaways after each SLDP session reinforced the key messages and the interactive nature of the learning experience.

Participants Outlined Specific Actions:

“Share highlights from the SDLP with the medicines and procurement technical working group”.

“Work with MOH on proposals to use alternative approaches to service delivery e.g. enhanced use of call centers/radios and use of ICT for scaling up trainings”.

“Support to CHWs as part of the endeavor to improve supply of healthcare at the communities”.

“Advocate for the use of village health workers to strengthen continuity of services in the current context”.

“Engage MCH stakeholders online to share ways that they can continue to provide services”.

“Organize similar activities for local groups who could not participate in the program”.

“Begin to carry out a rapid assessment across all services to get a clear picture on the status of availability of essential services as well as guide interventions moving forward”.

“Install triage station at the entrance to health centers and marking for social distancing”.



Looking Towards the Future



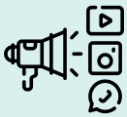
Future SDLPs participants are encouraged to map out local decision makers - including those beyond the health sector. By identifying civil society organizations, private sector, and country representatives involved in financing and universal health coverage, helps to ensure operational and programmatic dimensions are considered when developing action plans. This may include collating existing situational analyses and bringing context specific data to further contextualize and discuss the feasibility of solutions.



Post-program, in-country consultations will help realize pathways to implement new ideas and actions that emerged from the program. Consultations may address resource allocation, policy and advocacy activities, and developing realistic benchmarks for implementing agreed upon actions. The in-country consultations may be designed as mini SDLPs that could be delivered with GFF focal point and Liaison Officer or submit online feedback.



Explore coaching or mentoring options to help country participants to continue learning and momentum. This may include feedback mechanisms to provide updates on implementation activities, discuss challenges, and provide additional technical support as actions plans are implemented.



Develop a Call to Action for participants to bring back to their country colleagues.



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