

Summary of the Cross-cutting HSS Section from Lesotho's Round 8 HIV/AIDS Proposal

Below is a summary of the cross-cutting health systems strengthening activities that Lesotho included as part of its Round 8 HIV/AIDS proposal, illustrating ways that HSS activities can be integrated into proposals. This proposal has been recommended for approval by the Technical Review Panel.

The cross-cutting HSS section of Lesotho's Round 8 HIV proposal includes strategies to address four components of its health system: strengthening the health workforce to support service delivery, addressing health service delivery to improve outcomes at the primary health care level, strengthening the management information system, and strengthening the procurement and supply management system.

In the area of human resources, activities are focused on the recruitment and distribution of health personnel, retention, development of health personnel capacity, and health personnel productivity. The proposal aims to recruit additional health workers in primary health care (PHC) facilities, including 165 PHC community counselors and 50 retired local health workers on a short-term contract basis. Retention strategies proposed include provision of salary complements to 1,222 health workers at all levels (and not only those specifically working on HIV and TB) and mountain hardship allowances to 391 health professionals in primary care clinics in rural and hard-to-reach areas. The salary complements will be taken over by the Lesotho government at the end of the grant period. The hardship allowances will expand and help sustain an existing incentive program for health workers at remote clinics. The proposal also strengthens district level human resource management by recruiting, remunerating, and equipping ten new assistant human resource officers.

The teaching capacity at local training institutions will be strengthened through provision of salaries for 27 new tutors, salary complements for 30 senior tutors and 40 existing tutors, and through implementation of pre-service training of health care professionals in all training institutions. The proposal will also strengthen professional counseling services at health facilities by continuing to remunerate 63 existing facility-based professional counselors and recruit and remunerate 48 new facility-based professional counselors.

The proposal includes a mix of activities to address various issues that affect quality health service as Lesotho undertakes health sector reform and a decentralization process. Activities include updating the policy framework for service delivery regulations and mechanisms for implementation, including as the framework relates to public-private partnerships; establishing a clinical mentoring program; providing outreach to underserved communities including by procuring mobile clinics and an ambulance, and hiring drivers; strengthening supervision of district health management teams; conducting leadership training for senior staff at primary health centers; improving the safety at district hospital radiology facilities, and; improving primary health care in prisons.

To strengthen the national health management information system, Round 8 activities include developing a data quality management system; strengthening data collection at the district level by recruiting, training, and equipping data clerks for 65 health facilities and installing the Internet at 24 hospitals and clinics; developing the national capacity of all service providers in health management information systems through in-service training on monitoring and evaluation tools and principles for 150 public and private provider partners, and; conducting surveys of health facility accreditation and service availability.

Activities to strengthen the procurement and supply management system include training health workers in forecasting and supplies management; training various personnel responsible for logistics, procurement, and supply management; hiring key staff; procuring several vehicles and other equipment, and; supporting quality control testing for procured drugs.

These activities are in support of Lesotho's transition to decentralized health services. As noted in the proposal, support to the decentralization process is critical if the Government of Lesotho is to achieve optimum public health outcomes and, in particular, those for HIV and TB.