

Department of Health Systems Development

Profile and Vision



**World Health
Organization**

Regional Office for South-East Asia

Department of Health Systems Development

Profile and Vision

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1. Introduction

Seeking better ways of planning, financing, organizing and delivering health care is a continuous process. The World Health Organization (WHO) is working closely with its Member States and other health-related institutions and agencies, both national and international, to foster a sound understanding of social needs and the political and institutional context in which they can be effectively addressed. WHO also collaborates with its Member States and other agencies in identifying sound mechanisms for health information and policy, which would enable the correct assessment of what needs to be done and what can be done on the basis of solid evidence. It also permits the evaluation of efforts in health development. Furthermore, evidence-based approaches help to identify targets efficiently and to, allocate and utilize resources effectively.

The growing complexity in the development of health care systems necessitates continuous support to policy and managerial practices for appropriate infrastructure and logistics, use of technology, information collection and dissemination, organization of health workforce development at national and institutional levels, universal coverage and sustainable financing, and assured quality and safety in health-care. The Department of Health Systems Development (HSD) in WHO's Regional Office for South-East Asia (SEARO) endeavours to address these needs of Member countries in the Region.

2. Organization of the Department of Health Systems Development

2.1 Departmental Structure

The Department of Evidence and Information for Policy (EIP), established in March 1999 was renamed as the Department of Health Systems Development (HSD) in March 2004. The Department originally comprised programme areas of Strengthening of Health Systems (SHS) including Human Resources for Health (HRH), Research Policy and Cooperation (RPC), Evidence and Health Information (EHI), Information Management and Dissemination (IMD), Essential Drugs and Medicine Policies (EDM), Education and Training Support (ETS) and Health Systems (HSY). The organizational structure of the Department was reviewed and revised in 2005 and again in 2006 with the addition of Nursing and Midwifery (NUR), and the creation of four more technical units: Health Systems Financing (HSF), Quality and Safety of Health Care (QSH), Global Alliance for Vaccines and Immunization (GAVI), Health Systems Strengthening and Human Resource for Health (HRH). The area of Health Systems was renamed Health Services and Policy (HSP), and Essential Drugs and Medicines Policies as Essential Drugs and other Medicines (EDM).

The current organogram originated from a participatory process involving all staff in HSD. The technical units are currently organized under three technical teams: i) the Health Services Strengthening team (HSS); ii) the Health Information Systems team (HIS), and iii) the Human Resource Development team (HRD). Grouping of technical units facilitates much-needed coordination among units as well as their collaboration with other departments, in order to maximize the benefits of interplay between teams and units. For Departmental organogram please see Annex I.

The categorization of units under these three teams will facilitate the technical units to collectively take forward their work to achieve the strategic objectives spelled out in WHO's Medium-term Strategic Plan (MTSP). The Health Services Strengthening (HSS) team including (HSP, GAVI-HSS, EDM, HSF, QSH and RPC) will be responsible for achieving a part of the general programme objectives which dwell on improving the organization,

management and delivery of health services, ensuring improved access, quality and use of medical products and technologies; and extending social protection through fair, adequate and sustainable financing.

The Health Information Systems team (including EHI and IMD) will work to achieve the other elements of the general programme objectives which call for strengthening of leadership, governance as well as the evidence-based health information and research. It will also work with the health workforce development team (including HRH, NUR, ETS) as part of the strategic objectives to ensure an available, competent, responsive and productive health workforce for improving health outcomes.

A technical team consists of a group of professional and general Service staff who are together responsible for specific programme areas. Within each team, technical unit/units are assigned as focal points for specific programme/ programmes. In addition to these structural teams and units within the HSD department, there are inter-programme functional teams and units responsible for specific programme activities or thematic groups of activities.

2.2 Vision, Mission, Goal, Objectives and Broad Strategies

2.2.1 Vision

The vision of the Department of Health Systems Development is for Member countries in the South-East Asia Region to have efficient and effective health systems which are responsive, affordable and accessible to all and at all places at all times. Such health systems must be based on evidence from quality health information and research, serviced by a competent, motivated health workforce. and supported by the availability of appropriate medical products and technologies. Such health systems will facilitate people's participation in their own health.

2.2.2 Mission

The mission of HSD is to assist Member countries in achieving equity in their health systems and optimum performance in the areas of health policy

and services delivery, management, quality and coverage of health-care, health financing and social protection, essential medicines, health-care technology, health information, health systems research and health workforce. In order to do so, the department will provide, strengthen, enlist and utilize all available expertise and resources within and outside the department in collaboration with all partners in health.

2.2.3 Goal

The professed goal of the Department of Health Systems Development is to be the leading technical department in the WHO Regional Office for South-East Asia to support and provide leadership to Member countries, whenever deemed necessary, in developing safe, responsive, effective, efficient, and affordable national health systems based on sound evidence.

2.2.4 Objectives

The principle objectives of the Department of Health Systems Development are to:

- (1) Provide technical assistance to Member countries to develop national health policies that facilitate improvements in health services delivery;
- (2) Improve the availability, quality and use of health information by Member countries to enhance efficiency and effectiveness of national health programmes;
- (3) Provide technical support to Member countries to ensure that people have access to safe, effective, good quality essential medicines that are prescribed rationally;
- (4) Provide timely, reliable and comprehensive information and knowledge services to Member countries and WHO staff members for strengthening country health systems;
- (5) Provide technical assistance to Member countries to develop a competent, motivated health workforce in adequate numbers to serve in a geographically equitable manner;
- (6) Provide technical leadership and support in the design and implementation of interventions that promote quality and safety in health care in South-East Asia;

- (7) Analyse health research policies, promote regional health research priorities, support the generation and use of evidence-based research knowledge, and strengthen the research capability of Member countries, and
- (8) Provide technical assistance to Member countries to develop health financing modalities that improve the accessibility of the poor and the marginalized to essential health services.

2.2.5 Broad Strategies

- Articulating ethical and evidence-based policy and advocacy in a consistent manner to promote sustainable health system development in Member countries;
- Providing technical advice and assistance to Member countries in a timely manner to overcome health systems-related issues and challenges;
- Assisting Member countries to build strong partnerships and networks to share responsibilities and best practices, and to enhance resource-sharing;
- Strengthening the capacity and capability of Member countries to assume a leadership role in the process of national health systems development.

The following sections enumerate the general and specific objectives of each technical unit of the Department of Health Systems Development. The strategies adopted by each unit and the expected outcomes are also covered.

3. Profiles of Units: Objectives, Strategies and Outputs

3.1 Health Systems Strengthening (HSS)

3.1.1 Health Services and Policy (HSP)

The Health Services and Policy (HSP) unit aims to optimize the potential of the system to promote health, ensure coverage, reduce excess mortality, morbidity and disability; and respond to the legitimate demands of the people in a way that is equitable and fair. The Primary Health Care (PHC) concept developed at Alma Ata continues to play a significant role in all aspects of strengthening of health systems which will be carried forward by the HSP unit.

General objective

To support Member countries in formulating and developing health policy and in improving health services delivery by providing reliable and dependable technical assistance.

Specific objectives

- (1) To assist Member countries in enhancing national capacities in developing health policy and institutionalizing healthy public policy;
- (2) To assist Member countries in building national capacities in improving health services coverage and reaching the poor and the marginalized, and other vulnerable groups;
- (3) To assist Member countries in enhancing national capacities in improving responsiveness and efficiency of the national health services delivery mechanism.

Strategies

- Strengthening the capacity of ministries of health in developing national health policies that fit broader national development policies;

- Facilitating partnerships between public and private providers, to work together for favourable health outcomes;
- Advocating for resource mobilization through existing networks and partnerships, to support the development of health policy and service delivery;
- Facilitating the development of a regional and national observatory of health policy and service delivery; providing leadership, particularly on knowledge acquisition through learning from the experience of others, while disseminating best practices;
- Strengthening normative functions on health policy and service delivery;
- Advocating and providing technical assistance to ensure that health services reach the poor and the most vulnerable groups;
- Assisting Member countries in implementing decentralization, involving the community in health; and utilizing e-health to support health services delivery;
- Supporting pilot projects on innovative approaches in health services delivery leading to improvement of service coverage, efficiency and responsiveness; and
- Collaborating with WHO collaborating centres and networks of professionals in providing support to Member countries.

Medium-term outputs

- Regional consultations organized annually on health policy, planning and management for effective and efficient health services organization;
- Regional meetings organized annually to enhance national capacity in health service delivery;
- Strategies, guidelines and tools to improve the delivery and quality of health services in Member countries developed and advocated; and
- Technical support provided to optimize stewardship, organization and management of health services delivery.

3.1.2 Global Alliance– Health Systems Strengthening (GAVI-HSS)

The Global Alliance for Vaccine and Immunization has recognized that strengthening immunization programmes alone is not sufficient to increase and sustain immunization coverage levels. Unpredictable funding for salaries, weak transport and outreach, shortages of adequately trained human resources and other systemic barriers hinder the achievement of high immunization coverage targets as well as child survival goals. In response, GAVI opened up a Health System Strengthening (HSS) funding window in 2006. As nine countries in the South-East Asia (SEA) Region are eligible to receive HSS support, assisting their efforts to obtain and utilize HSS grants effectively and efficiently is a priority for the Health Systems Department.

General objective

To assist GAVI-eligible Member countries to achieve and sustain increased immunization coverage and child survival rates by strengthening the capacity of national health systems to deliver primary health care services.

Specific objectives

- (1) To assist countries in developing concept notes and proposals for selected thematic areas of the HSS (GAVI) funding window;
- (2) To facilitate the implementation and monitoring/evaluation of successful proposals;
- (3) To ensure GAVI and other donor HSS initiatives support the national public health strategy, to avoid a proliferation of HSS ‘projects’; and
- (4) To coordinate regional support to countries through regular meetings of the Regional Technical Support Group (RTSG) and facilitate interaction between countries for effective exchange of experiences.

Strategies

- Provision of support to country focal points to develop concept notes to obtain proposal development grants;

- Provision of technical support to countries to develop and submit proposals for GAVI HSS funding;
- Improve capacity of countries to develop detailed implementation plans; and
- Develop the capacity of country focal points in health system monitoring and evaluation of system strengthening strategies.

Medium-term outputs

- At least seven countries obtain proposal development grants by end-2007;
- Eight countries submit proposals for GAVI HSS funding by 2008;
- At least five countries receive funds for HSS from GAVI by end of 2008;
- Country capacity to implement health system strengthening strategies, using resources from multiple sources, is expanded;
- Country capacity for proposal monitoring and evaluation of outcomes is increased, as shown by a decreased need for external consultant.

3.1.3 Essential Drugs and Medicines (EDM)

Ensuring availability and affordability of medicines relevant to health care needs is mandatory for the effective and efficient functioning of a health system. A national drug policy based on the essential medicines concept is the framework to achieve this.

General objective

To provide technical support to Member countries to ensure that people have access to safe, effective, good quality essential medicines that are prescribed rationally.

Specific objectives

- (1) To assist Member countries to ensure that national medicines policies are based on the essential medicines concept;

- (2) To provide technical support to Member countries to ensure access to quality essential medicines through affordability, availability and support on public health provisions for medicines in the Intellectual Property Rights area;
- (3) To develop the capacity of Member countries to ensure quality and safety of medicines through strengthening and implementation of regulatory and quality assurance standards; and
- (4) To advocate among Member countries the need to promote the rational use of therapeutically sound and cost-effective medicines by health workers and consumers.

Strategies

- Provision of technical and financial support to ensure the establishment of national medicines policies;
- Technical support for strengthening quality assurance levels of drugs and biologicals;
- Promotion of traditional medicine according to national priorities; and improvement in standardization, quality control and utilization of traditional remedies;
- Developing and strengthening of human resources; assistance to improve the technical and managerial capabilities;
- Support the development of monitoring and evaluation system;
- Support to country offices through a full-time focal point for essential medicines activities.

Medium-term outputs

- Regional workshop to promote the Essential Medicines Concept;
- Regional workshops organized annually to develop capacity of country focal points on updating medicines policies and regulation mechanisms;
- All countries produce national essential drugs lists and appropriate lists for different levels of health care;

- Three drug quality control laboratories of the Region are recognized as WHO collaborating centres;
- Three national workshops conducted on Good Manufacturing Practices (GMP), inspection and auditing;
- A mechanism developed and advocated to ensure standardization, quality control and utilization of traditional or herbal medicines.

3.1.4 Research Policy and Cooperation (RPC)

The Research Policy and Cooperation (RPC) unit is designed to analyse health research policies, promote regional health research priorities, and strengthen research capability in the Region. This unit will monitor the regional and national research needs and opportunities within the global research policy framework of WHO. Member countries will be provided with evidence-based scientific advice in new and evolving problems in health and technology.

This work is carried out with the support and advice of the Advisory Committee on Health Research (ACHR).

General objective

To analyse health research policies, promote regional health research priorities, support the generation and use of evidence-based research knowledge, and strengthen research capability.

Specific objectives

- (1) To advocate for and facilitate research promotion and development in Member countries by providing support to draw up and implement health research agendas;
- (2) To build and strengthen national research capability through collaboration with medical/health research councils and analogous bodies and other health research-related institutions, including national, regional and international nongovernmental organizations;
- (3) To elucidate and foster public debates on the social and ethical implications of science and health development in their social, economic, medical and cultural environments;

- (4) To strengthen analytical capability and devise common approaches to analytical reporting within the Organization, and
- (5) To further develop and maintain health research information systems.

Strategies

- To support countries in drawing up and implementing national health research agendas;
- To strengthen national research capability through collaboration with research councils and analogous bodies, WHO collaborating centres (CCs) and other institutions in countries;
- To support countries in the development and maintenance of national research information systems that will continuously update the evidence-based information to be used for policy formulation and for improving programmes;
- To foster good managerial practices in research promotion and development at national and institutional levels.

Medium-term outputs

- At least ten countries carry-out research projects on analysing national health research systems and providing updated country profiles on health research;
- Biannual regional training workshops organized to train researchers and research managers;
- Regional Health Research Strategies reviewed and updated;
- Biennial meetings conducted to strengthen partnership with WHO CCs and institutions in health research; and
- Effective ethical review mechanisms established in at least eight countries in the Region.

3.1.5 Health Systems Financing (HSF)

Health care financing in the Region reflects the guiding principles described in the World Health Assembly Resolution WHA 58.33, which include “sustainable health financing, universal coverage and social health

insurance". Accordingly, the scope of the area of work includes financing mechanisms, financial management and macroeconomics and health. The overarching guiding principles are sustainability and equity.

General objective

To extend social protection through fair, adequate and sustainable financing.

Specific objectives

To assist Member countries in:

- (1) Addressing high out-of-pocket and catastrophic costs of care;
- (2) Improving efficiency in use of resources, effectively targeting them as a priority area for the public health needs of the poor; and
- (3) Securing sustainable increases in the volume of (domestic) resources available for health.

Strategies

To assist Member countries in:

- Improving efficiency in the use of resources for public health needs, e.g. by costing for priorities (eg. MDGs), maintaining National Health Accounts, and resource-tracking, etc;
- Developing social protection strategies to ensure equity in health financing. Two particular approaches within this are important:
 - (i) Priority coverage of the large informal sector in the Region, and
 - (ii) Given the country contexts in the Region, the system should be anchored at the community level with the potential to be increased in scope/integrated into broader national systems in the future;
- Effectively linking with other health systems functions and sectors that impact health financing; e.g. drug procurement and distribution; and (monetary) incentives for health workers to increase retention in poor areas;

- Profiling health in development to increase and sustain both political and financial commitment to the sector, eg. by building on the considerable efforts generated by the report of the Commission on Macroeconomics and Health (CMH) in the Region; and linking with the related area of social determinants of health, including the work by the Commission on Social Determinants of Health.

Medium-term outputs

- Regional workshops organized annually to advocate the need of ensuring fairness in health financing and social protection;
- Member countries assisted to link National Health Accounts to the policy-making process;
- Workshops organized to introduce the systematic use of other tools for policy (e.g. costing for priorities) to Member countries;
- A regional advocacy document on health accounts and policy making published;
- All countries reflect multisectoral financial planning for health in development of expenditure plans.

3.1.6 Quality and Safety in Health Care (QSH)

Quality and safety are serious concerns even in health systems that are well financed, staffed and resourced. The Regional Committee Resolution SEA/RC59/R3 on ‘Promoting patient safety in health care’, adopted by the 59th session of the Regional Committee, places patient safety at the centre of the drive to promote quality in health systems in the Region. The QSH unit serves as the focal point for the work of the World Alliance for Patient Safety in the Region. In addition, the unit collaborates with other units and departments within WHO in pertinent areas such as drug safety, blood safety, injection safety, safe surgery and medical procedures (including making pregnancy safer), planning and management of medical devices, and clean water, sanitation and health care waste management.

General objective

To provide technical leadership and support to Member countries in designing and implementing systems and interventions that reduce harm and promote quality and safety in health care in the South-East Asia Region.

Specific objectives

- (1) To support Member countries in the implementation of interventions and best practices that can have a rapid and significant impact on improving patient safety in the Region (e.g. hand hygiene);
- (2) To build national and regional capacity in key aspects of patient safety, including research;
- (3) To facilitate collaboration and the exchange of experiences and best practices among Member countries and between Member countries and the Alliance;
- (4) To contribute to the development of systems for reporting and learning from adverse events and best practices to improve patient safety;
- (5) To monitor and report on progress in the implementation of Resolution SEA/RC59/R3 to the Regional Committee.

Strategies

- Advocate for a legislative and regulatory environment that promotes quality and safety, and encourages transparent reporting of adverse events;
- Catalyse political commitment and action in areas of greatest risk to patient safety through the Alliance's Global Patient Safety Challenge programme;
- Develop a strategic framework and package of interventions for strengthening patient safety which builds on successful interventions and actions in the Region and worldwide;
- Conduct regional and national workshops to build capacity and facilitate the exchange of information and experiences among Member countries;
- Integrate patient safety concepts into pre-service and in-service training and continuing education;
- Develop national mechanisms to ensure minimal standards of quality and safety in health care such as external assessment and hospital accreditation;

- Provide technical assistance to Member countries as requested to improve the safety of their health systems;
- Build partnerships – engage patients, consumer groups, health care workers, professional associations, hospital associations, health care accreditation bodies and policy-makers as partners in building safer health systems;
- Establish networks for sharing experience and expertise on quality and safety in health care within and outside the Region; and
- Develop and monitor a minimum set of patient safety indicators.

Medium-Term outputs

- Highly visible national media events to build political awareness and commitment to patient safety such as national pledges to the Global Patient Safety Challenges;
- A strategic framework and package of interventions for strengthening patient safety;
- A series of regional workshops on priority topics in patient safety;
- Field testing of WHO guidelines such as the “WHO (advanced) draft guidelines on hand hygiene” and the “WHO draft guidelines on adverse event reporting and learning systems”;
- Documentation of country experiences in the form of reports and case studies; and
- Reports to the Regional Committee for South-East Asia on progress in this area of work.

3.2 Health Information Systems (HIS)

3.2.1 Evidence and Health Information (EHI)

The Evidence and Health Information (EHI) unit will ensure that evidence-based information is readily available for decision-makers to frame and implement health and health-related policies and practices. This unit will ensure adequate capacity at country level to improve availability, and quality and use of health information for improved efficiency and effectiveness of health programmes.

General objective

To improve the availability, quality and use of health information for enhanced efficiency and effectiveness of health programmes of Member countries.

Specific objectives

- (1) To validate, analyse and disseminate information on regional health situation and trends;
- (2) To enhance national capacity and capability in health planning and management by strengthening country Health Information Systems (HIS); and
- (3) To make sound evidence available for use in developing efficient and effective health policies.

Strategies

The strategies comprise 10 strategic directions as follows:

- Policy development, regulation and legislation on HIS-related issues;
- System analysis (health information system design/set-up and maintenance);
- Promotion of data quality;
- Appropriate application of information and communication technology (ICT);
- Enhancement of mechanisms for effective communication, cooperation and coordination;
- Development and allocation of HIS resources (human, physical, financial);
- Strengthening of data-sharing, analysis and utilization, at all levels;
- Strengthening data collection and utilization in decentralized systems;
- Effective marketing of HIS products; and
- Strengthening linkages between the Health Information System and the Health Research System.

Medium-term outputs

- Bi-Annual regional consultative meetings organized to advocate use of evidence-based disease classification, disease burden, comparative analysis, facility-based health information, and on application of new methodologies and approaches for decision-making;
- Guidelines on developing monitoring mechanisms and evaluation of health system performance developed and advocated;
- Two regional workshops organized to develop national capacity for compiling, analysing and disseminating experiences; and tracking progress in achieving MDGs;
- A series of monographs, technical and policy briefs and other scientific papers developed and distributed; and
- The Regional database for health and health-related indicators developed and maintained.

3.2.2 Information Management and Dissemination (IMD)

The need to ensure accessibility to health literature and information for all Member countries is an important function of the Health Systems Department. The Information Management and Dissemination (IMD) unit ensures that WHO provides assistance to all Member countries to have access to health literature and information conveniently and in an affordable manner.

General objective

To provide timely, reliable and comprehensive information and knowledge services to Member countries and WHO staff members for strengthening country health systems.

Specific objectives

- (1) To strengthen members of the Health Literature, Library and Information Services (HELLIS) Network and other partners with a view to build sustainable national capacities in providing information services to the health sector;

- (2) To support Member countries through the transfer of knowledge and technology in identification and management of national information and knowledge assets;
- (3) To promote information and knowledge-sharing practices among HELLIS Network members and other partners through the established HELLIS infrastructure; and
- (4) To create an environment for the sharing and effective use of knowledge among Member countries and WHO staff members.

Strategies

- Advocate the sharing of experiences thereby contributing to building Knowledge management capabilities and awareness in Member countries;
- Provide guidance, technical support and tools to HELLIS Network members and partners with a view to strengthen and sustain their capacity for provision of information and knowledge services;
- Facilitate in identification, collection and management of national information and knowledge assets through advice, training and knowledge-sharing;
- Advocate among regional and national health communities for adoption of Knowledge Management in the field of public health.

Medium-term outputs

- Range of health literature, library and information services (HELLIS) enhanced through the shared network of information services;
- Cost-effective acquisition of journals and other health materials in electronic and paper form made available to WHO staff and health professionals in five countries; and
- Enhanced dissemination and sharing of health information, including WHO materials.

3.3 Human Resources Development (HRD)

Human resources for health or health workforce refer to all people who are working to enhance the health of communities. The Human Resource Development (HRD) team in the HSD department comprises Human Resources for Health (HRH), Nursing and Midwifery (NUR) and Education and Training (ETS) units. The teams collectively contribute to the general and specific objectives in relation to capacity building of the health workforce to ensure the quality of health-care delivery and health workforce management.

General objective

To provide technical assistance to Member countries to develop a competent and motivated health workforce in adequate numbers to serve in a geographically equitable manner.

Specific objectives

- (1) To support Member countries in the development of national health workforce planning and management systems;
- (2) To promote education and training; both pre-service and in-service in accredited institutions for all levels of health workforce including public health workforce and community-based health workers;
- (3) To develop a regional health workforce database while assisting Member countries to develop their respective national health workforce database; and
- (4) To develop capacity of Member countries to regulate health workforce and its practices.

Strategies

- Advocate at the regional and country levels for health workforce development with special emphasis on public health workforce and community-based health workers;
- Provide advice, guidelines, tools and technical know-how to Member countries with a view to strengthen health workforce planning, education and training, retention and development, and health workforce management;

- Facilitate sharing of country experiences on health workforce regulation while building links across regulatory bodies to offer technical support to countries that may be in need of further assistance;
- Provide fellowships to support capacity building of national health workforce to meet the health needs for development;
- Develop and continuously update the web-based Regional Directory of Training Institutions to identify training programmes and expertise for technical collaboration; and
- Facilitate the building of robust global and regional partnerships and networking within and beyond the health sector.

Medium-term outputs

- The Regional Health Workforce Plan developed and its implementation initiated;
- A WHO collaboration package identified based on country needs on health workforce development, and its implementation initiated;
- A Regional Health Workforce database developed and countries provided support to develop country-specific health workforce databases;
- The fellowships programme aligned with the needs and demands of countries;
- Institutions of nursing and midwifery of eight Member countries strengthened;

4. Linkages

4.1 Linkages with other Departments

Collaboration with other units and with teams of other departments of the Regional Office is particularly important in order to develop strategies and implement initiatives or activities which are evidence-based. Close cooperation, continuous dialogue and joint efforts with other departments such as Communicable Diseases (CDS), Family and Community Health (FCH), Sustainable Development and Healthy Environments (SDE), Noncommunicable Diseases and Mental Health (NMH), Immunization and Vaccine Development (IVD) and Programme Planning and Coordination (PCU) have to be ensured. This is essential, particularly in developing models and mechanisms for integrating the prevention and management of diseases into all levels of national health care systems. The HSD department also cooperates closely with the Regional Director's Office (RDO) in building and reinforcing partnerships and alliances with international and regional institutions, nongovernmental organizations, the private sector and industry.

4.2 Linkages with WHO Headquarters and other Regional Offices and Country Offices

Coordination and joint initiatives with all relevant units, teams and clusters of WHO headquarters and other regional offices are also considered equally important. Close coordination with the WHO Representatives is considered a prerequisite for any technical support activity or networking at national and regional levels.

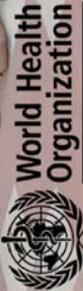
Linkages with country offices and with focal points of Member countries are crucial to achieve departmental goals. The department also works very closely and cordially with the focal points of Member countries in achieving stated goals and objectives.

The department also works closely with other development partners, and regional and global alliances in exploring avenues to bring in a harmonious, coordinated and synergistic drive for health system development in the Region.

5. Monitoring and Evaluation

All teams and units of the HSD department develop short-term and medium-term strategic plans based on the Logical Framework Approach that fits in under the broad programme of work for each biennium as part of the WHO Programme Budget preparation process.

These detailed plans specify indicators, targets and other means of verification by which the performance of units/teams are evaluated. The activities thus identified are then fed into the Performance Management and Development System (PMDS) and other monitoring mechanisms that the department adopts to monitor the performance of team members and units.



Regional Office for South-East Asia

Department Of Health Systems Development (Staff Retreat)

Taj Mahal Hotel , New Delhi , 19 October 2007

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