

Country: Saudi Arabia
Initiation Plan

Project Title: Support to the implementation of Non-Communicable Diseases Investment case study for Saudi Arabia

Expected CP Outcome(s): Public sector strengthened through improved efficiency, effectiveness, equity and accountability

Initiation Plan Start Date: 1 June 2017

Initiation Plan End Date: 31 October 2017


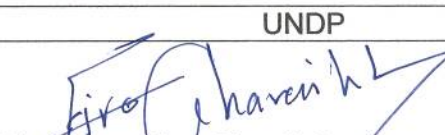
Implementing Partner: Ministry of Health

Brief Description

The aim of this PIP is to assist the Ministry of Health (MOH) in Saudi Arabia in conducting Non-Communicable Diseases (NCD) Investment Case aiming to address the first strategic area of the Saudi Health Transformational Plan and the first objective of the WHO-UNDP Global Joint Programme on NCDs – to assist the country in developing an advocacy case for increased investment in NCDs interventions. As a result of this PIP the national Partner (MOH) will:

1. Have a tailored, compelling and clear case outlining the economic benefits of strengthening the national NCDs response to the NCD-related Sustainable Development Goals targets, utilizing context-specific policy options to be used as an advocacy strategy.
2. Have an agreed road map for assessing and agreeing and priority recommendations and actions arising from the investment case
3. Have a clear, detailed, budgeted Project Document outlining future assistance to be provided by UNDP to MOH based on identified needs

<p>Programme Period: 2017 - 2021</p> <p>CPAP Programme Component: Public sector strengthened through improved efficiency, effectiveness, equity and accountability</p> <p>Atlas Award ID: SAU10/ 0010420</p> <p>PAC Meeting Date 17/05/2017</p>	<p>Total resources required 33,527 USD</p> <p>Total allocated resources: _____</p> <ul style="list-style-type: none"> • Regular _____ • Other: _____ <ul style="list-style-type: none"> ○ Donor _____ ○ Donor _____ ○ Donor _____ ○ Government 33,527 USD <p>Unfunded budget: _____</p> <p>In-kind Contributions _____</p>
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<p>Ministry of Health</p> 	<p>UNDP</p> 
<p>Print Name: Dr. Khalid AlShaibani Deputy Minister of Health for Planning and Health Economics and Leader of the Vision Realisation Office</p>	<p>Print Name: Firas Gharaibeh Deputy Resident Representative UNDP</p>
Date:	Date: 18/05/2017

<p>Output 2 A road map for assessing and agreeing and priority recommendations and actions arising from the investment case and mechanism for revision of road map</p> <p>Baseline: No roadmap available</p> <p>Indicators: Proposed roadmap accepted</p> <p>Targets: To launch road map</p> <p>Related CP outcome: Public sector strengthened through improved efficiency, effectiveness, equity and accountability</p>	<p>1. Activity Result Initial findings and preliminary recommendations agreed</p> <p>2. Activity Result</p> <ul style="list-style-type: none"> Drafting presentation of key findings/recommendations Drafting ICA and dissemination plan <p>3. Activity Result Finalization of key findings/recommendations</p> <p>4. Activity Result</p> <ul style="list-style-type: none"> Present to Ministry of Health Refine presentation per Ministry of Health comments Present to other ministries if requested Action 	<p>X</p>				<p>UNDP/WHO/MOH</p>			
<p>Output 3 Project Document</p> <p>Baseline: No Project Document Exists</p>	<p>1. Activity Result Draft Project Document</p> <p>2. Activity Result -Present PD and Discuss</p> <p>3. Activity Result Hold PAC Meeting</p>	<p>X</p>	<p>X</p>			<p>UNDP/MOH</p> <p>UNDP/MOH</p> <p>UNDP/MOH</p>			

II. RATIONALE:

The Government of Saudi Arabia has launched an ambitious national transformational plan (Kingdom of Saudi Arabia Vision 2030) which was adopted as a methodology and roadmap for economic and developmental action in the Kingdom of Saudi Arabia in line with SDG 3 (Good Health and Well Being). This plan encompasses, in a number of domains, strategic objectives, Outcome oriented indicators and commitments from all public and private sectors. The Ministry of Health has developed the Health Sector Transformational plan which is composed of the following six thematic strategic areas:

- 1- Consumer-centric model of care, that focus on prevention and emphasize the primary care as guardian of patients;
- 2- Health Care financing; that aims at setting up a national health insurance system with revenues identified and generated;
- 3- Governance, creating slimmer Health structures that separate policy and provision of services;
- 4- Private sector engagement and participation, increase the health care delivery through the private sector;
- 5- Human Capital, enhancement of quantity and quality of the human resources for health and;
- 6- Digitalizing the service provision through user-friendly interfaces (apps) and achieve full IC capacity throughout the country.

Accordingly, the Ministry of Health in the Kingdom of Saudi Arabia requested the support of the UN Country Team in the implementation of the health sector transformational plan based on the above thematic priorities. A meeting was held under the joint chairmanship of the Deputy Secretary for Health and the UN Resident Coordinator, with participation of various resident and non-resident UN agencies. UNDP presented the key service offerings which included conducting of an investment case for NCDs jointly with UNDP and WHO. The Ministry of Health expressed immediate interest in the Investment Case for NCDs in Saudi Arabia during February 2017.

Avoidable illness and premature death from NCDs constitutes one of the major challenges for development in the 21st century. In the 2011 UN Political Declaration and 2014 UN Outcome Document on NCDs, governments committed themselves to reducing risk factors for NCDs (tobacco use, harmful use of alcohol, physical inactivity and unhealthy diet). This requires engagement of all stakeholders across government, NGOs, civil society and the private sector; policy coherence; and mutual accountability of different spheres of public policy making that have a bearing on NCDs.

Significantly increased investments are necessary to meet the NCD-related Sustainable Development Goal targets. These investments will need to rely primarily on domestic public finance. WHO has identified 'best buy' interventions that will achieve the three goals of increasing financing for NCD interventions, growing the national economy and reducing the disease burden. From a return on investment perspective, prevention must remain the cornerstone of any national response to NCDs.

The UN has been asked to assist countries in quantifying the costs – to the health sector and the economy at large – and the benefits of scaled up action. The ability of governments – especially ministries of health – to make a compelling, evidence-informed advocacy case for NCD investments is crucial for reversing the trend of more and younger people falling ill, living with chronic and debilitating conditions and dying of NCDs.

Even when the economic case for increased investment is clear, there are still political and economic barriers to action. The UNDP/WHO mission will assess the options presented by the institutional and political economy context, and map a route to achieving the recommended policy change. The UN has been asked to assist countries in quantifying the costs – to the health sector and the economy at large – and the benefits of scaled up action. The ability of governments – especially ministries of health – to make a compelling, evidence-informed advocacy case for NCD investments is crucial for reversing the trend of more and younger people falling ill, living with chronic and debilitating conditions and dying of NCDs.

The following five products will be developed by the mission teams (both UNDP and WHO) and made available in English and Arabic:

- 1. An advocacy-oriented Report on the findings of the investment case, featuring a two-page executive summary;*
- 2. A set of PowerPoint slides to be used by national policy makers in their own further dialogues and advocacy;*
- 3. An infographic, fact sheet or other advocacy materials for communicating the main findings;*
- 4. The excel-based economic model containing the datasets and calculations used in the writing of the report.*
- 5. A tailored strategy*
- 6. A fully budgeted Project Document*

In terms of division of responsibilities, UNDP will lead on political analysis and non-health sector engagement. WHO will coordinate and lead on data collection and economic modelling.

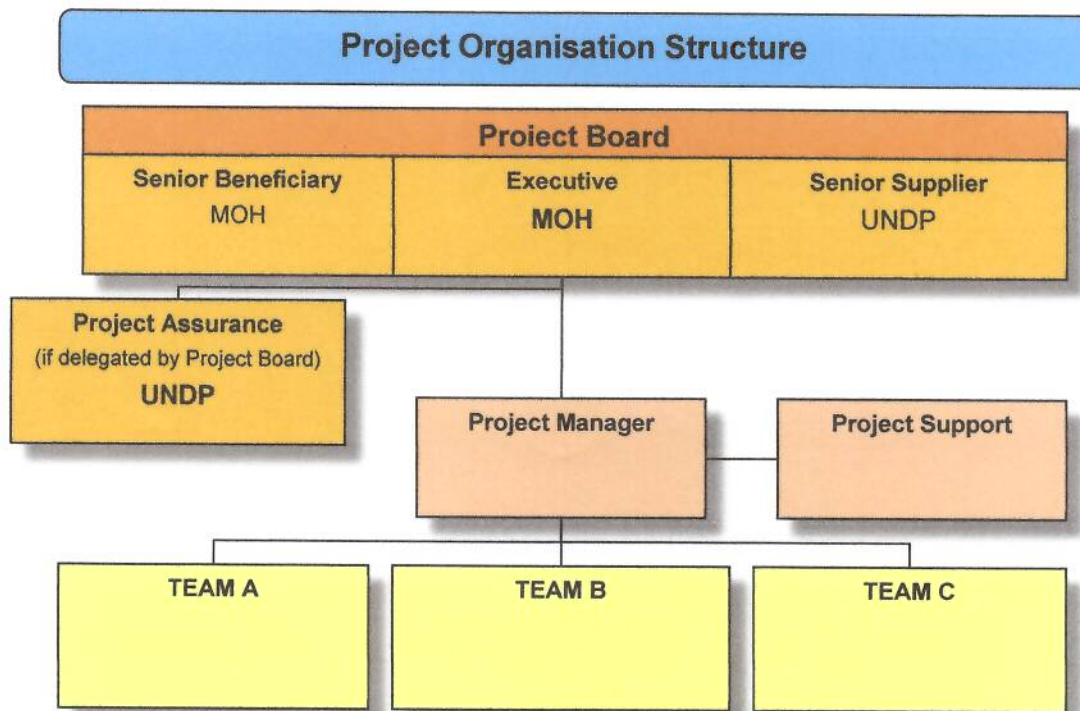
Both agencies will contribute the development and finalization of the five products listed above, but lead responsibility for initial drafts are as follows:

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- UNDP will be responsible for developing the advocacy materials*
 - WHO will be responsible for drafting the summary report*

III. MANAGEMENT ARRANGEMENTS

Full funding for this PIP will be transferred from the Ministry of Health to UNDP as cost-sharing upon signature of the PIP.

A short description of the individuals, organisations, and/or team structure required to conduct the activities of the Initiation Plan.



IV. MONITORING

A Progress Report will be prepared at the end of the Initiation Plan, using the standard format available in the Executive Snapshot.

V. ANNUAL WORK PLAN

Year:

EXPECTED OUTPUTS And baseline, indicators including annual targets	PLANNED ACTIVITIES List activity results and associated actions	TIMEFRAME				RESPONSIBLE PARTY	PLANNED BUDGET		
		Q1	Q2	Q3	Q4		Funding Source	Budget Description	Amount (USD)
Output 1 An advocacy-oriented Report on the findings of the investment case, featuring an executive summary and: <ul style="list-style-type: none"> A set of PowerPoint slides to be used by national policy makers in their own further 	1. Activity Result Inception meetings with UNDP, WHO, UNRC Inception meeting with Ministry of Health 2. Activity Result Activity action: Data collection and validation 3. Activity Result Model refinement and Model testing		X			UNDP/WHO/MOH			
			X			UNDP/WHO/MOH			
			X			WHO/MOH			

<p><i>dialogues and advocacy as well as</i></p> <ul style="list-style-type: none"> <i>An infographic, fact sheet or other advocacy materials for communicating the main findings; and</i> <i>The excel-based economic model containing the datasets and calculations used in the writing of the report</i> <p>Baseline: No report Indicators: Report accepted by MoH Targets: to have data needed to launch advocacy campaign</p> <p>Related CP outcome: Public sector strengthened through improved efficiency, equity and accountability</p>	<p>4. Activity Result Assess co-morbidity options ICA Interviews Stocktaking of initial findings</p>	<p>X</p>				<p>UNDP/MOH</p>			
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			X		UNDP/MOH			
			X		UNDP/MOH			
			X		UNDP/MOH			

<p>Indicators: PAC held Targets: PD Finalized Related CP outcome: Public sector strengthened through improved efficiency, effectiveness, equity and accountability</p>	<p>4. Activity Result Sign PD</p>			<p>X</p>		<p>UNDP/MOH</p>			
<p>Sub Total</p>						<p>Gov</p>	<p>Budget includes travel expenses and accommodations, no consultancy fees</p>	<p>31,000</p>	
<p>GMS 3%</p>						<p>Gov</p>	<p>For services rendered by the Country office</p>	<p>930</p>	
<p>DPC 5%</p>						<p>Gov</p>		<p>1,597</p>	
<p>TOTAL (USD)</p>						<p>Gov</p>		<p>33,527</p>	