

Project Collaboration Agreement

Report outline and process notes

This document contains the latest report outline and process notes for its development. It contains:

- Descriptions regarding the background for the report, roles and responsibilities for developing the report, and general guidelines for authors (pages 1-2)
- An updated report outline which describes suggested content for each chapter (page 3)
- Proposed timelines for the major milestones and contact details for principal authors (pages 5-6)

Background

The World Health Organization (WHO) has been working with the Ministry of Health and Medical Education (MOHME) and the National Institute of Health Research (NIHR) of the Islamic Republic (I.R.) of Iran to evaluate and support implementation of their Health Transformation Plan launched in 2014. Both the WHO, MOHME and NIHR have acknowledged the need to undertake further technical analysis to generate evidence to better inform the next phase of health reforms. To this end, an official Project Collaboration Agreement has been signed further signifying a commitment to closely collaborate in the development of a joint evaluation report. The report shall consist of a series of technical analysis of key issues in the I.R. of Iran health financing and governance system and will serve as a key piece of new evidence to inform future health policies and thus support the country in further advancing towards the goal of universal health coverage in a sustainable, efficient and equitable manner.

Report roles and responsibilities

The development of this report will draw on expertise across the WHO, MOHME and NIHR. To inform this process the following roles and responsibilities are proposed:

- **Core team:** Agnès Soucat (WHO HQ), Iraj Harirchi (MOHME Iran), Sameen Siddiqi (WHO Iran), Mohsen Asadilari (MOHME IRD Iran), Reza Majdzadeh (NIHR Iran), Justine Hsu (WHO HQ), Awad Mataria (WHO EMRO), Shadi Sirious (WHO Iran). Responsible for providing strategic guidance throughout the development of the report.
- **Report leads:** Reza Majdzadeh (NIHR) and Justine Hsu (WHO). Responsible for overall production of the report, including ensuring the content and direction meets MOHME and WHO objectives.
- **Principal authors:** Individual names listed per chapter in the report outline. Responsible for writing the first draft by coordinating inputs and perspectives across all co-authors and for taking forward revisions following a mid-term review. These individuals should be a subject matter expert and/or have good knowledge of the health system in the Islamic Republic (I.R.) of Iran. To ensure this balance, there will be one principal author from the country (MOHME, NIHR or other government or academic institution) and one from the WHO. Both individuals will work closely together.
- **Co-authors:** Individual names listed per chapter in the report outline. Responsible for contributing to the collection of data and background information to inform the chapter analysis, interpretation of findings including policy implications, and writing of the chapter. The composition of this group should be a balance of representatives from across all institutions. Co-authors will likely be a diverse group of individuals including both high-level policymakers who will add critical interpretation of policy messages and strategic guidance, as well as intermediate-level researchers or technical individuals who will add needed analytical support.

General guidelines for authors

To aid the writing of this report, the following points are highlighted for the attention of all authors:

- The objectives of this report are threefold:
 - To provide a robust assessment of key health financing and governance issues in the I.R. of Iran, including achievements made thus far, challenges encountered and policy recommendations.
 - To serve as a key piece of evidence to better inform future health policies.
 - To catalyse the formation of technical networks between Iran and WHO that could delve further into the analysis of specific issues and/or provide capacity building activities.
- The target audience for this report are:
 - High level officials in the MoHME (and other ministries)
 - Medical universities
 - Other academic and research institutions
- Some points regarding the foci of the report:
 - The report is focused on specific issues critical to the further strengthening the performance of the health system financing and governance in I.R. of Iran. There is thus an emphasis on economic analyses and institutional arrangements in the health system.
 - The report will not cover basic public health issues although all analyses are implicitly based on the public health principle of maximising health benefits for the population.
 - In addition, while service delivery will be covered in ‘chapter 1 health reforms’ in the context of understanding current financing and delivery reforms in the overall health sector, the report will not have a separate chapter on service delivery at this time. Rather, authors are encouraged to develop boxes that touch on service delivery issues from a financing or governance perspective where relevant. As an example it has been suggested in the below report outline that ‘chapter 4 purchasing’ include an extended box regarding innovations in service delivery arrangements and payment models (e.g. who are the providers, how they are contracted and reimbursed)
- Recommended writing approach: Authors present evidence not just in manner that is descriptive in nature (e.g. outlining facts and information) but also strive to be analytical (e.g. thinking about why, what and what next?). Authors should remain objective in their assessment, identifying both challenges and opportunities (negative and positive aspects) in the system. Thus, the analysis should reflect upon policy implications and conclude with clear policy recommendations. As noted above, one of the report’s objective is to provide evidence to inform the next phase of the country’s Health Transformation Plan as it moves closer towards Universal Health Coverage.
- Recommended chapter structure and key content components: while this will vary across topics, each chapter should begin with 3-5 key messages followed by chapter objectives, a short description of the analytical approach adopted, supporting evidence including key findings presented in figures and tables, policy implications, and practical policy recommendations.
- Recommended chapter length: 6,000-7,500 words (approximately 12-15 single-spaced pages not including figures or tables).

Report outline

This outline has been updated following feedback received during the recent inception workshop for the report. Descriptions for each chapter are suggestions for principal authors.

Strengthening institutional performance for health transformation in the Islamic Republic of Iran: an assessment of key health financing and governance issues

[Working title, to be discussed once chapters are more developed]

Executive summary

- This will be a synopsis of the report, highlighting key messages across all chapters and policy implications to inform the next phase of health reforms in Iran. [1-2 pages]

Introduction

- This will be a short section introducing the report as a joint WHO and MoHME report evaluating specific issues critical to further strengthening the institutional performance of the national health system in Iran. This section will outline the objectives for the report, the target audience, and the rationale for the focus on specific issues. [1-2 pages]

Chapters

[12-15 pages each, not including figures or tables]

- **Chapter 1: Health reforms in the I.R. of Iran**
This first chapter will provide an overview of Iran's current goals for the health sector and the evolution of reforms in health financing and service delivery, making reference to Five Year Development Plans and the recent Health Transformation Plan. The chapter may further be complemented by an overview of health outcomes, system inputs and the epidemiological profile of the population in Iran.
- **Chapter 2: Macro-fiscal context for budgeting and spending on health**
This chapter will assess Iran's status and performance vis-à-vis key macroeconomic and fiscal indicators to understand the broader context in which health reforms are designed and implemented and to assess policy implications for future fiscal space for health. It will further include an analysis of revenue sources, budgeting and spending measures in order to lay groundwork for the development of a medium-term expenditure framework for the health sector.
- **Chapter 3: Health insurance institutional setup and performance**
This chapter will describe the main public health insurance funds, mapping the evolution of their arrangements including coverage levels, target population, basis of enrolment, contribution mechanisms and rates, and cost-sharing arrangements for benefits. It will further assess what is needed from an institutional and financial perspective in the context reaching reach universal coverage.
- **Chapter 4: Purchasing health services**
This chapter will assess current purchasing arrangements and provider payment methods with a view towards proposing concrete policy options for a more strategic approach to purchasing, including practical advice for a more systematic and evidence based approach to defining benefits and improving the design of performance-based payments. It could include a special box regarding innovations in service delivery arrangements and payment models (e.g. overview of delivery across levels of care in terms of who are the providers, how they are contracted and reimbursed)
- **Chapter 5: Health labour market**
The chapter will first present key health labour market data such as the number, speciality, wages and placement of workers, as well as an overview of policies around medical education planning and training, curricula setting, and rules for hiring health personnel. It will further analyse the economic forces in the health labor market, including public/private market interactions, compensation levels, and pay for performance or other incentives.
- **Chapter 6: Financial protection in health**
This chapter will first highlight recent policy interventions aimed at improving financial protection in the I.R. of Iran followed by an analysis of patterns in the level and distribution of household expenditure on health and the impact of such payments on population living standards in terms of catastrophic and impoverishing health expenditures. Equity in health financing can also be assessed across different types of household contributions to the health system (i.e. OOP as well as prepaid contributions to health insurance schemes) in order to assess policy implications for better ensuring household contributions to health are more equitable.

- **Chapter 7: Utilisation and coverage of health services**
 This chapter will analyse the level of and distribution in the utilisation and coverage of key health services and interventions. Equity in service use will also be assessed through a benefit incidence analysis looking at the distributional impact of government spending on health services across population groups.
- ***Chapter 8: Opportunities and challenges in institution-building***
 This chapter will review opportunities and challenges in the current institutional and governance arrangements of institutions operating in the health sector (including their links across sectors). It will examine their effect on policy implementation (e.g. how do they help or hinder policy implementation) and look at options for change based on the space for reform space in Iran.
- ***Chapter 9: Public voice and participation in the health sector***
 This chapter will review recent processes and structures for bringing the public voice into the health sector with a view to strengthening and institutionalising how they function through presentation of different options. It will further examine ways in which the public can further participate in health sector planning, decision-making and monitoring processes.
- ***Chapter 10: Informing the next phase of health reforms in I.R. of Iran***
 This chapter will not only synthesize the previous technical analyses across all chapters but will further highlight connections across issues and draw out high-level policy messages together with recommendations to strengthen the health financing and governance system in the I.R. of Iran for its next phase of health transformation.