KENYA

TUPIME KAUNTI (COUNTY MEASUREMENT, LEARNING AND ACCOUNTABILITY PROGRAM)

Kenya has made significant progress in devolving the health system; bringing management authority and resources closer to the communities served, empowering county health management teams and fostering greater flexibility to meet local needs. To support this shift, functioning outcomes measurements, learning and accountability (MLA) systems at county level are essential. However, the counties have inadequate capacity to regularly collect, analyze and use data.

Tupime Kaunti is a five-year USAID-funded project that contributes to Kenya Health Sector Monitoring and Evaluation (M&E) Framework’s goal of one functional, sector-wide M&E system for improved decision-making, transparency, and accountability in health. The project works with county governments to strengthen outcome MLA systems to provide quality data and synthesized information for planning, implementation, policy development and decision making. Tupime Kaunti works in nine counties including Kakamega, Kisumu, Kisii, Migori, Busia, Bungoma, Vihiga, Homa Bay and Siaya. The project focuses its support in HIV, malaria and RMNCAH programs. The project is implemented by a consortium of Palladium Group (lead), Kenya School of Government and Plan International.
OUR WORK

Tupime Kaunti activities are structured around: increasing leadership, management and technical capacity of County Governments to use health outcome MLA systems effectively; and increasing availability and quality, analysis and use of health sector data. The project implements a comprehensive strategy of six interdependent technical approaches to improve outcome MLA systems in the focus counties. The technical approaches are as follows: a) ensuring a strong link with a national mechanism called Health Informatics Governance and Data Analytics Program (HIGDA); b) assessing MLA systems and learning from findings, and improving MLA systems strengthening approaches; c) fostering engagement, partnership, and county ownership; d) building and sustaining county capacity to implement and use MLA systems; e) strengthen MLA systems foundation through policies, systems, and guidelines and f) Use data and act to improve health programs and outcomes. The strategy builds on the enablers of existing policies and systems that govern MLA systems. At the center of this approach is a focus on building county ownership of technical components to ensure that the improvements achieved in this project are institutionalized and sustained by counties.

ACHIEVEMENTS

Since September 2016, Tupime Kaunti has:

- Successfully championed county-led advocacy efforts across all focus counties resulting in FY19 health budgets increase in Busia and Bungoma counties.
- Institutionalized the innovative governance approach called Leadership Development and Governance (LDG) group to steer MLA systems strengthening.
- Strengthened M&E structures across the focus counties - five focal counties now have functional M&E units compared to two at baseline.
- Enhanced structured engagement of stakeholders for joint planning, performance review, learning and accountability.
- Increased availability and quality of child protection and Orphan and Vulnerable Children data in CPIMS (child protection database).
- Increased availability and quality of mortality data with cause of death in DHIS2 (main health database).
- Improved capacity of focus counties in key health data systems including DHIS2, CAPR (HIV response) and CHIS (community health database) to increase availability of high-quality health data for program planning and management.
- Increased capacity of focus counties in outcomes measurement leading prioritization of outcomes measures, improved skills in outcome measurement estimation, and increased generation of outcome measurement information products.
- Advanced institutionalization of data analytics at county level by facilitating development of data analytics framework to guide data analytics practice and capacity building.
- Enhanced capacity of focus counties in data analytics and visualization leading to increased generation of data analytics products that is required for evidence-based decision making in health service delivery.
- Successfully spearheaded alignment of county planning processes with the government budgeting calendar referred to as MTEF cycle with priorities identified in FY17 and FY18 annual performance reviews informing FY18 and FY19 annual work plans and budgeting respectively.
- Enhanced data use culture in the focus counties including strengthening evidence-based planning and resource allocation.
- Promoted inter and intra-county learning resulting in implementation of key actions drawn from lessons and best practices.