Department of Health & Social Care

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Public Accounts Committee
House of Commons
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Dear Chair,

OFFICIAL DEVELOPMENT ASSISTANCE (ODA) EFFECTIVENESS: DEPARTMENT OF HEALTH AND SOCIAL CARE (DHSC) RESPONSE RECOMMENDATION 4

The Public Accounts Committee asked Departments to provide information on Recommendation 4 of the above report. I am writing to provide the requested information for DHSC.

In the 2015 Spending Review, DHSC was allocated £941.5m of ODA programme funding over the period 2016/17 to 2020/21. This is paid out through three strategic programmes which build on DHSC's remit and expertise and which contribute to achieving the Government's objectives in support of the UN Sustainable Development Goals (SDGs):

- The **Global Health Security programme** contributes to a world safe and secure from infectious disease threats and promotes Global Health as an international security priority;
- The **Global Health Research portfolio** supports high-quality applied health research and training for the direct and primary benefit of people in ODA-eligible countries to address global health challenges in areas which are underfunded or where there is an unmet need;
- The **Framework Convention on Tobacco Control 2030 project** supports the implementation of the World Health Organisation's Framework Convention on Tobacco Control in Low- and Middle-Income Countries (LMICs).

Monitoring, evaluation and learning was prioritised from the inception of DHSC's ODA Programmes. **We have established systems to enable us to measure outputs, outcomes and impacts across all of our ODA funded portfolio**. There are five key components to how we are measuring performance and ensuring ongoing effectiveness and value for money, which include:

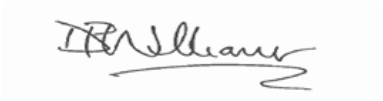
- **Theories of Change** (ToCs) – these explain how activities are understood to produce outputs that contribute to achieving the final intended outcomes and impacts. We use project level ToCs as well as "nested ToCs", meaning each project ToC feeds into the higher, portfolio level ToC. The ToC is developed through stakeholder consultation at portfolio and programme levels. For example, the theory of change for the Global Health Security Programme highlights how the

projects will lead to an outcome of early detection of threats. It also details how they lead to wider impacts of saving lives; prevention and reduction of the likelihood of public health emergencies; and rapid, effective response building on robust preparedness.

- The **Results framework** is the tool our programmes use to track progress against their theory of change, setting indicators against which we measure progress. Our monitoring tools have already shown valuable insights on improvements in the prevention, treatment and management of disease in LMIC health systems. For example, The Fleming Fund has supported 10 countries to submit quality AMR data to WHO in 2020 - up from 2 countries in 2017 – helping improve global surveillance of emerging resistant organisms and enabling more effective action to protect health. Separately, the NIHR-funded Unit on Respiratory Health has developed a model to diagnose pneumonia from digital chest X-rays that achieves diagnostic performance equivalent to a trained radiologist, with the potential to transform healthcare in LMICs.
- We also use **annual reviews** to assess programme performance, challenge underperformance, and analyse learning. At the end of each project, we undertake a **project completion report** which provides a record of what has been achieved as well as lesson learning.
- **Evaluation –** we have commissioned external evaluations for the UK Vaccine Network, the Fleming Fund and the Joint Global Health Trials. These have already yielded promising findings. For example, the Joint Global Health Trials evaluation showed that treatment of traumatic brain injury using a low-cost widely available drug, tranexamic acid, reduced deaths by up to 20% depending on the severity of injury, with the potential to save hundreds of thousands of lives. Alongside these evaluations, we are also developing our portfolio evaluation requirements which will enable us to systematically and objectively examine the design, implementation and impact across our portfolio.
- **Learning -** DHSC has embedded effective learning processes, both within our projects/programmes and across other ODA departments. Across NIHR Global Health Research programmes we have incorporated After Action Reviews which bring together key stakeholders into a facilitated learning discussion to identify critical lessons which can be transferred immediately into ongoing portfolio development. The 2019 ICAI review on How UK Aid Learns also found DHSC to be agile, sharing learning between its ODA and non-ODA portfolios and facilitating two-way learning with DFID.

We have established and developed robust measures to assess the performance of our ODA programmes based on impacts and outcomes, to ensure we are delivering effectively and achieving value for money. We continue to enhance the impact of our ODA programmes through this approach.

Yours sincerely,



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