

Country	Burkina Faso
Purchaser	Projet de Developement Sante et Nutrition (PDSN)
Provider	Direction Regionale de la Sante (DRS)
Type of Service	
Government administration	
Physical plant development and capital investment	
Hospital (general and specialized)	
Basic primary care and preventive services	Fight against great epidemics, malnutrition, logistic maintenance, maintenance of cold chain, equipment, motor vehicles, Vaccination
Diagnostic services	
Extended care	
Ambulance and transportation services	
Pharmaceuticals, medical supplies and equipment	
Human resources, education and training	
Knowledge management	
Purchasing options	
Public-public partnership	
<i>Government service delivery</i>	
<i>Project agreements</i>	Each Region (DRS) and each District (DS) has a written management agreement with the PDSN management committee. These agreements specify the amount of funds to be allocated, the obligations of the receipt, the modalities of payment, financial management and auditing rules, and conditions for termination of the agreement.
<i>Direct subventions</i>	
<i>Autonomization</i>	
<i>Corporatization</i>	
Public – private partnership	
<i>Service contract</i>	
<i>Contract in</i>	
<i>Contract out</i>	
<i>Leasing</i>	
<i>Concession</i>	
<i>Social Franchising</i>	
<i>Divestiture</i>	
Basic Content of Contract	
Preamble	Yes
Total amount of payment	To be determined. All annual allocations of funds to regions and districts were contingent upon the national coordinating committee's examination and approval of the accomplishments from the previous year.
Authorized persons and signature	Yes
Contract period	To be determined
Summary content	Yes
Levels of services	In Annex, but not attached here
Targeted population	The scheme implicated in 52 districts, with population ranged from 28,000 to 470,000
Quality standards to be achieved	N/A
Payment mechanisms	
<i>Capitation</i>	
<i>Fee-for-service</i>	
<i>Block contracts</i>	
<i>Labor and materials</i>	
<i>Cost-and-volume contracts</i>	
<i>Set price</i>	
<i>Prepayment</i>	Yes
<i>Indemnification</i>	
Variations to the agreement	N/A. The project management committee may cancel the accord (See Article IX: Invalidation of agreement)
Best endeavours	N/A
Arbitration	N/A
Statutory regulations	N/A
Confidentiality	N/A
Information requirements and reporting formats	Yes. Progress reports, activity reports and financial status reports from all regions and districts were expected to be submitted to the central management committee.
What do contracts manage?	Output (Service delivery)
Does the provider have discretion	N/A
<i>To hire and fire staff?</i>	N/A
<i>To set wages?</i>	N/A
<i>To decide services provided within the contract?</i>	N/A
<i>To decide services provided outside the contract?</i>	N/A
<i>To set prices of services covered by the contract?</i>	N/A
<i>To set other prices?</i>	N/A
Is this a performance-based contract?	No. There are no explicit rewards and penalties in return for different degrees of performance targets across key measures such as improving immunization coverage or increasing prenatal care.
Performance goals and indicators	The following indicators must be reported in the CSPS Action Plan: proportion of the population that obtains service, vaccination coverage rate, rate of utilization of curative care services, rate of prenatal care coverage, rate of coverage for nutrition consultations, rate of assisted deliveries, rate of utilization of contraceptive methods, rate of maternal mortality, rate of screening for high risk pregnancies
Evaluation of Project	The primary health care system in Burkina Faso used data to monitor and measure performance. The data are required to be reported to the PDSN project. PDSN conducts regular financial audits. The self –reported data on indicators might not be a problem in the current system since funding were not tied to performance measures. But there would be problem of falsifying data if the system change to performance-based management. (Rena Eichler) The Burkina Faso project move towards the performance-based management with close supervision and monitoring. Each one of 52 districts has baseline data on performance indicators at the local level. They monitor it very carefully. Now, they also work to minimize the false reporting by commissioning financial and technical audit to introduce external supervision. (Denise Vaillancourt) The decentralization of Burkina Faso's health service system initiated in 1996 did not achieve its objective of improving health sector performance. This led to the redesign of the World Bank's 6-year Health and Nutrition Development Project which included formulation of annual action plans and signing of a project agreement. Internal and external monitoring and evaluation were conducted. (Joseph Naimoli)
Links to contract	Copy of contract Rena Eichler: Improving immunization coverage in an innovative primary health care delivery model Joseph Naimoli: Performance-based management in an evolving decentralized public health system in West Africa: the Case of Burkina Faso
Contact person	Zacharie Balina balina.z@cenatrin.bf Joseph Naimoli jnaimoli@worldbank.org