Joint Learning Network for Universal Health Coverage & Primary Health Care Performance Initiative
Virtual Implementation Learning Exchange: Primary Care Networks (PCNs)
Call for Expressions of Interest (EOI)
February 2022

Background
The Primary Health Care Performance Initiative (PHCPI) is dedicated to transforming the global state of primary health care (PHC), leveraging PHC measurement to catalyze improvements. The Joint Learning Network for Universal Health Coverage (JLN) convenes network members for productive and high-impact practitioner-to-practitioner learning exchanges on a range of health systems topics, often related to health finance or primary health care service delivery. Under the partnership of the PHCPI and JLN, the “Implementing and Measuring the Performance of Primary Care Networks (PCNs)” learning exchange will convene individual health care professionals from across disciplines and three-to-four- country teams in cross-country virtual learning to identify and adapt global best practices in the design and operationalization of PCNs in their respective contexts. The PCN theme was selected as a response to country demand from the Transforming Health System exchange. This theme also builds on past JLN work on measurement and improvement such as the PHC Measurement and Improvement learning exchange and the Efficiency Collaborative's work on measuring health system efficiency.

PCN refers to a network of collaborating primary care providers working together to provide quality primary care to patients in a coordinated approach.¹

Access to comprehensive and quality PHC has long been identified as a fundamental prerequisite to achieving universal health coverage, but many low- and middle-income countries are still struggling to provide sufficient access to PHC for their population. Maternal and child morbidity and mortality rates are likely to remain high without adequate access to comprehensive PHC services. Insufficient investment, lack of political will, fragmentation of care, and poor organization of PHC services are among the drivers of inadequate access to PHC in many LMICs. To tackle these systemic challenges, some countries have begun adopting the network of care or PCN model to improve PHC organization and increase access to PHC for more people.

Establishing and operationalizing PCNs can be critical in ensuring that PHC serves as the foundation of Universal Health Coverage (UHC). Consequently, there is a growing demand among country government leaders, health care professionals, implementers, and other stakeholders for scaling up learning to

¹ A PCN has also been defined as “a group of public and/or private sector service delivery sites deliberately interconnected through an administrative and clinical management model which promotes a structure and culture that prioritizes client-centered, effective, efficient operation and collaborative learning, enabling providers across all levels of care, not excluding the community, to work in teams and share responsibility for outcomes.”¹
increase knowledge on how to design, implement, and measure the effectiveness and performance of PCNs.

**The focus of the 2022 Peer Learning Exchange**

The Implementation Learning Exchange will focus on implementing and measuring the performance of PCNs. Exchange participants will share experience, relevant lessons, and jointly problem-solve on common priority questions such as:

1. How can the operationalization of PCNs support better and equitable access to PHC?
2. How can the implementation of PCNs save health care costs, reduce fragmentation, and promote effective referral systems?
3. How can PCN support strong information exchange between providers and patient education?
4. How to design and implement an effective and inclusive governance approach for PCN.

**Structure of the Learning Exchange** The 2022 peer learning exchange will use an implementation learning methodology to enable learning exchange participants (individual peer learners and select country teams) to learn from one another through a structured cross-country learning process organized around the learning journeys of three to four PCN implementation cases that are in-process. This methodology will enable participants to accompany, learn from, and provide peer support to country teams implementing PCN initiatives while jointly addressing pressing challenges related to implementing and measuring the performance of primary care networks.

The individual peer learners who will be selected through this EOI will benefit from learning from peers from other countries with shared interests and experience with PCN design and implementation, with the opportunity to collectively problem-solve and jointly support and learn with the implementation case teams.

Peer learners will be an integral part of the Learning Exchange which will include three types of roles:

1. Implementation Teams (3-4 country teams): multi-stakeholder teams of in-country colleagues working together on a specific PCN implementation and benefiting from technical support through PHCPI
2. Individual Peer Learners: cross-country colleagues supporting and learning from one another and the Implementation Teams
3. Technical Facilitators: global and regional experts with experience with PHC improvement efforts, including PCNs, providing skilled facilitation and technical know-how to support the Implementation Teams and Individual Peer Learners.
There will be monthly virtual country learning checks with each Implementation Team to which peer learners will be invited to share experience and provide feedback and technical guidance as the Implementation Teams navigate specific challenges they are trying to solve. Peer learners will have access to resources shared through the monthly learning checks.

Bi-monthly, the full Learning Exchange community will virtually convene to discuss common challenges and learn on particular high-priority topics of shared interest. A number of best or promising practices will be identified in the course of the monthly checks and bi-monthly learning exchanges which the Implementation Teams will be encouraged to adapt, monitor, and share feedback on as part of their ongoing implementation efforts.

Learning Exchange participants will also benefit from the PHCPI online forum as a platform for sharing communications updates, relevant resources, and specific learning questions or appeals for peer support and engagement with PHC actors from around the globe. Depending on the priorities and interests of members, Learning Exchange participants may benefit from other learning and peer support modalities such as collaborative problem-solving (or “Labstorm”) virtual sessions, “office hours” to discuss specific challenges with experts, virtual networking for open dialogue, and/or facilitated country pairings to enable actors from two countries to have a deeper bilateral exchange.

**Expected Outcomes**

Participants can expect to get the following benefits through participation in the Learning Exchange:

- A solid collaboration with a network of health care implementers that are working to address similar challenges in improving access to and utilization of primary health care.
- A facilitated approach to soliciting feedback from others to address challenges in your work.
- Support from a dedicated technical facilitation team that will provide individual and group support to identify the appropriate resources and solutions based on the context.
- Opportunities to access the experience and expertise of PHCPI partners.
- Periodic updates from the facilitation team synthesizing the learning and collating relevant learning and resources for the community.
- Opportunities to co-develop promising approaches, tools, and products to support the implementation and measurement of PCNs.
- Access to multiple learning products and strategic documents focused on PCNs.

Expectations from Participants

The Implementation Learning Exchange: PCNs will launch in February 2022 with bi-monthly virtual sessions where peer learners are expected to actively participate alongside implementation teams with the support of a technical facilitation team. Peer learners are also encouraged to engage in asynchronous virtual dialogue via the PHCPI online forum.

During the learning exchange, participants are expected to:
- Attend and actively participate in all the virtual learning exchange meetings.
- Actively participate in and contribute to ongoing learning discussions through the PHCPI online forum, online polling, and other learning opportunities offered through the Learning Exchange.
- Identify and openly share priority PCN challenges and learning questions to shape the learning agenda.
- Ask questions that stimulate discussions and share real-world experience and best practices that will contribute to the body of knowledge around PCNs.
- Share and use relevant learning within your ongoing efforts to increase access to comprehensive and quality PHC.
- Actively engage with, and be responsive to, the technical facilitator(s) through email, WhatsApp groups, PHCPI online forum, and other platforms previously discussed with the technical facilitator.
- Provide regular feedback to facilitators on how to improve the learning and discussions.

Participant Profile for Individual Peer Learners

Individual PHC leaders and practitioners interested in action-oriented learning about PCN implementation and measurement are invited to submit an EOI for this opportunity. Country implementation teams will be constituted through a separate process led by PHCPI with support from the World Bank and UNICEF intensive country engagement leads in PHCPI priority countries, in consultation with JLN country core groups (CCGs) where relevant. EOIs may be submitted through their CCGs (for JLN countries) from individual health care professionals and implementers currently supporting PHC at government and non-governmental institutions, including:
● PHC leaders and managers from national and sub-national ministries of health or primary care institutions and agencies responsible for PHC policy, service delivery, financing, or measurement & evaluation.
● Representatives of national and subnational government agencies (e.g., ministries of finance, social welfare, gender, education) or departments (e.g., nutrition, rehabilitation) that work closely with the ministry of health leadership on strengthening the financing and delivery of PHC
● Managers or provider representatives from the district or rural primary health centers
● Representatives of the private primary health care sector
● Civil society or advocacy representatives interested in increasing access to PHC
● Leaders of community-based organizations working to promote public health through PHC
● Representatives of faith-based organizations focused on PHC strengthening
● Policy and implementation researchers focused on designing, implementing, and measuring PHC service delivery transformation and PCNs

Participants should have the following attributes and meet most of these criteria:
● Experience or knowledge of PHC service delivery models, ideally with experience designing and operationalizing PCNs at any level.
● Demonstrated interest in learning about PCN implementation and measurement.
● Role or mandate to improve how PHC is delivered and financed, including through new service delivery models such as PCNs.
● Commitment to actively share and learn with peer learners and implementation teams to increase our global understanding of how to implement and measure PCNs.
● Commitment to sharing learning with colleagues at home and adapting and using the lessons to improve PHC in your local context

How to Submit an Expression of Interest
The technical facilitation team welcomes all interested individuals to submit a brief Expression of Interest. Participants should submit the EOI application by February 14, 2022 using the online form at this link. All applications will be reviewed, and decisions communicated by the 18th of February 2022. For any questions related to the application, please contact Linda Arogundade, at larogundade@r4d.org