



# SDG PARTNERSHIP PLATFORM

**SDG PARTNERSHIP PLATFORM ANNUAL  
REPORT  
2018**

Office of the United Nations  
Resident Coordinator in Kenya

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<http://ke.one.un.org>

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## FOREWORD

Achieving the Sustainable Development Goals (SDGs) will be as much about the effectiveness of development cooperation as it will be about the scale and form that such co-operation takes. There is a lot of talk about partnership, but not enough practical, on-the-ground support to make partnerships effective in practice, especially not at scale.

Under the leadership of the Government of Kenya therefore, the UN System in Kenya in 2017 helped to spearhead the SDG Partnership Platform in collaboration with development partners, private sector, philanthropy, academia and civil society including faith-based stakeholders.

The Platform was formally launched by the Government of Kenya at the UN General Assembly in 2017<sup>1</sup> and has become a flagship initiative under Kenya's new UN Development Assistance Framework 2018-2022 (UNDAF)<sup>2</sup>. As the entire UNDAF, the Platform is geared to contribute to the implementation of Kenya's Big Four agenda in order to accelerate the attainment of the Country's Vision2030.

In 2018, the Platform has received global recognition from UNDCO and the Dag Hammarskjold Foundation as a best practice to accelerate SDG financing.<sup>3</sup> This clearly implies that we are on the right track, and as you can read in this report are developing a blueprint for how 21<sup>st</sup> Century SDG Partnerships can be forged and made impactful, but much more needs to be done.

Primary Healthcare (PHC) – in the SDG 3 cluster – has been the first SDG Partnership Platform window contributing to the attainment of the Universal Health Coverage as a key pillar of the Big Four agenda. We are living in a day and age where we have the expertise, technology and means to advance everyone's health and wellbeing. It is our moral obligation to support Kenya in forging partnerships, find the right modalities to harness the potential out there and make it work for everyone, everywhere.

Subsequently and catalyzed by our learning over the years, the Platform will open in 2019 new windows to support thematic SDG clusters in support of Kenya's "Big Four" agenda as for example food security and nutrition, affordable housing, and manufacturing and skills-building.

With leadership as from my co-chairs, Hon. Sicily Kariuki, Cabinet Secretary for Health in Kenya, and H.E Kuti, Chair of the Council of Governors Health Committee and Governor of Isiolo, and the strong political commitment, policy environment, and support of our partners we have in Kenya, I am convinced that Kenya can lead the way in attaining UHC in Africa, and SDGs more broadly.

*Siddharth Chatterjee, UN Resident Coordinator for Kenya & Co-Chair of SDG Partnership Platform*



<sup>1</sup> [https://gadebate.un.org/sites/default/files/gastatements/72/ke\\_en.pdf](https://gadebate.un.org/sites/default/files/gastatements/72/ke_en.pdf)

<sup>2</sup> [https://www.undp.org/content/dam/kenya/docs/unct/UNITED%20NATIONS%20DEVELOPMENT%20ASSISTANCE%20FRAMEWORK%20\(UNDAF\)%20B5%20web.pdf](https://www.undp.org/content/dam/kenya/docs/unct/UNITED%20NATIONS%20DEVELOPMENT%20ASSISTANCE%20FRAMEWORK%20(UNDAF)%20B5%20web.pdf)

<sup>3</sup> <http://daghammarskjold.se/wp-content/uploads/2018/06/UNDG-CountryStudy-Kenya.pdf>

## EXECUTIVE SUMMARY

After two years of building momentum, mobilizing partners, and an elaborate design process, the Government of Kenya announced in 2017 at the UN General Assembly the establishment of the SDG Partnership Platform (SDGPP).<sup>4</sup>

The Platform brings together leadership from Government, development partners, private sector, philanthropy, civil society, and academia to create diverse SDG accelerator windows to catalyze and unlock carefully selected private sector and philanthropic investments, partnerships and innovations to drive impacts in alignment with Government development priorities.

Primary Healthcare (PHC) has been the first window established to be a critical driver working with key stakeholders towards achieving Universal Health Coverage (UHC) in line with the SDG3 framework, Kenya's Big Four Agenda<sup>5</sup>, and UHC roadmap.

In 2018, and under the leadership of the SDGPP co-chairs, Hon. Sicily Kariuki, Cabinet Secretary for Ministry of Health (MOH) in Kenya, H.E Kuti, Chair of the Council of Governors (COG) Health Committee and Governor of Isiolo County, and Siddharth Chatterjee, UN Resident Coordinator to Kenya, the SDGPP Governance and Coordination structures have been enhanced, implementation accelerated, and resource and partnership base expanded.

The SDGPP has become a flagship programme under Kenya's UNDAF 2018-2022<sup>6</sup> and the SDGPP Secretariat has finalized, in consultation with of all partners, a draft PHC window Programme Document including Theory of Change, M&E framework, and 5-Year Strategic Plan and Budget.

In line with the SDGPP PHC Window strategic plan, key milestones have been reached in 2018 towards the following three sub-outcomes:

1. Enhanced institutional, organizational, and staff capacities at national and county government to advance public private collaboration and innovation for PHC.
2. Innovative financing mechanisms advanced in support of Kenya's domestic resource mobilization agenda for Health.
3. Innovative solutions and partnerships catalyzed to strengthen PHC delivery

Since its establishment, the SDGPP has mobilized \$5,800,000 financial and in-kind catalytic support from a range of multi-lateral, bilateral, philanthropic and private sector partners. 45% of this invaluable support is financing and 55% in-kind. \$1,500,000, or 58% of this financing, is pooled and disbursed through its Multi-Partner-Trust-Fund (MPTF).

As a result of all, the Platform has received global recognition from UNDCO and the Dag Hammarskjold Foundation as a best practice to accelerate SDG financing.<sup>7</sup>

During 2019<sup>8</sup>, the Platform will continue its work in supporting the implementation of the Primary Healthcare Window as well as in expanding its work in to the subsequent windows aligning with the UNDAF 2018-2022 and the Government's Big Four Agenda.

<sup>4</sup> [https://gadebate.un.org/sites/default/files/gastatements/72/ke\\_en.pdf](https://gadebate.un.org/sites/default/files/gastatements/72/ke_en.pdf)

<sup>5</sup> <http://www.president.go.ke/>

<sup>6</sup> [https://www.undp.org/content/dam/kenya/docs/unct/UNITED%20NATIONS%20DEVELOPMENT%20ASSISTANCE%20FRAMEWORK%20\(UNDAF\)%20B5%20web.pdf](https://www.undp.org/content/dam/kenya/docs/unct/UNITED%20NATIONS%20DEVELOPMENT%20ASSISTANCE%20FRAMEWORK%20(UNDAF)%20B5%20web.pdf)

<sup>7</sup> <http://daghammarskjold.se/wp-content/uploads/2018/06/UNDG-CountryStudy-Kenya.pdf>

<sup>8</sup> The current report presents the work of the Platform so far from the launch of the MPTF in September 2017 until December 2018.

## OVERVIEW OF THE SDG PARTNERSHIP PLATFORM



Since September 2015, the Government of Kenya, with support of the UN, and others have been partnering to explore opportunities for leapfrogging Kenya's health systems through public private partnerships and innovation. This process has evolved into the SDGPP.

Whilst Kenya had made substantial progress toward meeting the Millennium Development Goals, this progress has been uneven across specific goals and within the country. Important strides have been made in attaining universal primary education; reducing infant, child and maternal mortality and in the fight against HIV/AIDS.

SDG progress however must focus more on socio-economic equity of benefits to make sure that Kenya delivers on its SDG agenda leaving no-one-behind. Optimization of partnerships, financing, and innovation will be critical for the successful delivery of this agenda.

In September 2017, The Government of Kenya announced therefore at the UN General Assembly the establishment of the SDG Partnership Platform<sup>9</sup>. The Platform has since received global recognition from UN Headquarters as one of three most promising practices to accelerate SDG financing<sup>10</sup> and has become a flagship programme under Kenya's new official UN Development Assistance Framework 2018-2022 (UNDAF)<sup>11</sup> with the Government of Kenya.

The Platform brings together leadership from Government, development partners, private sector, philanthropy, civil society, and academia to create diverse SDG accelerator windows to catalyze and unlock carefully selected private sector and philanthropic investments, partnerships and innovations for driving SDG impacts<sup>12</sup>.

Primary Healthcare (PHC) - contributing to SDG 3 - is the first Platform window aiming to contribute to the Universal Health Coverage (UHC) pillar under Kenya's "Big Four" agenda. Subsequently, the Platform will open new SDG accelerator windows for Kenya's "Big Four" agenda such as food & nutrition security, affordable housing, and manufacturing & skills training.

<sup>9</sup> [https://gadebate.un.org/sites/default/files/gastatements/72/ke\\_en.pdf](https://gadebate.un.org/sites/default/files/gastatements/72/ke_en.pdf)

<sup>10</sup> <https://undg.org/document/unlocking-sdg-financing-findings-from-early-adopters/>

<sup>11</sup> [https://www.undp.org/content/dam/kenya/docs/unct/UNITED%20NATIONS%20DEVELOPMENT%20ASSISTANCE%20FRAMEWORK%20\(UNDAF\)%20B5%20web.pdf](https://www.undp.org/content/dam/kenya/docs/unct/UNITED%20NATIONS%20DEVELOPMENT%20ASSISTANCE%20FRAMEWORK%20(UNDAF)%20B5%20web.pdf)

<sup>12</sup> <https://www.undp.org/content/dam/kenya/docs/unct/SDG%20Partnership%20Platform%20Brochure.pdf>

The Platform focuses on four key strategies:



### **Programme Structure**

The Platform is fully aligned with the Agenda 2030, Government of Kenya's Vision 2030 and the Medium-Term Plan III as well as is recognized as the flagship programme in the United Nations Development Assistance Framework 2018-2022 (UNDAF) serving the UN Country Team in the strategic implementation of the Public-Private Partnerships.

During the Platform implementation, The UNDAF National Steering Committee provides general oversight and strategic direction to ensure successful design and roll-out of the initiative in terms of overarching governance.<sup>13</sup>

The Platform has established a Secretariat to ensure a robust coordination between partners and swift identification, analysis, implementation and monitoring of the Platform strategies and work plans. More specifically, the SDG Partnership Platform Secretariat is responsible for the strategic and operational functioning of the entire Platform as well as overarching external positioning and engagements on behalf of the SDG Partnership Platform; offering strategic and operational support to the Thematic Steering Committees; and leading the processes relating to the approval cycle of projects, programme monitoring, evaluation and reporting as well as risk management reporting to the SDG Partnership Platform Steering Committee (Figure 1).

Since the Platform will establish diverse SDG aligned thematic windows, each one will be governed by its own multi-stakeholder and multi-sectoral Steering Committee in which its investors and strategic partners are represented.

As the first Thematic Window to have been opened and over the course of 2018 the PHC Window Governance structures have been enhanced. The PHC Window is governed by its Steering Committee which is co-chaired by the Cabinet Secretary for Health, Chair of the Council of Governors Health Committee and UN Resident Coordinator. Furthermore, in addition to the Kenya Healthcare Federation, all PHC Window investors are represented in the Steering Committee to collectively discuss and agree on the window's strategic workplans and budgets.

Implementation of the PHC Window workplan is coordinated by the Platforms Secretariat through active participation in relevant MOH UHC sub-committees and subsequently reported to the UHC Steering Committee and Apex.

<sup>13</sup> For more information on the Governance structure, please see the section for Management and Coordination Arrangements

*The general governance structure of the SDG Partnership Platform comprises of the following bodies and formations (which may exist and operate virtually or in-person):*

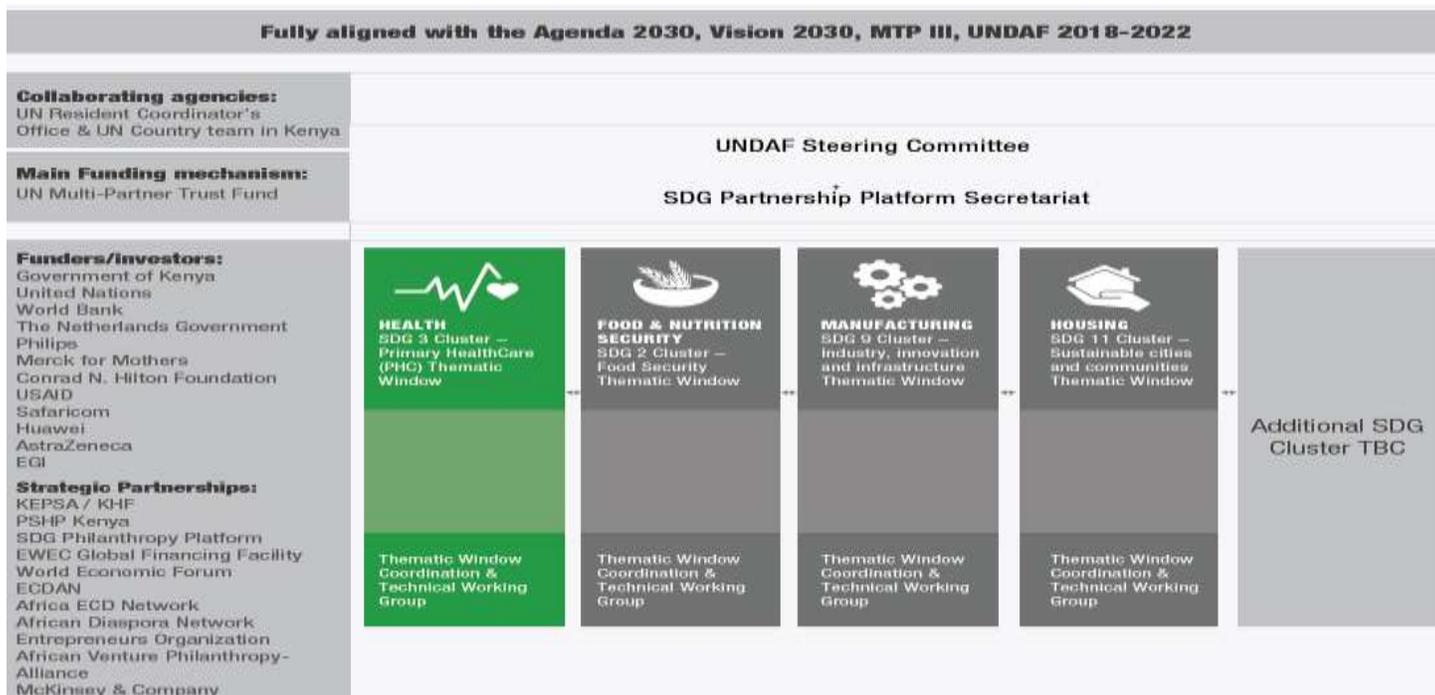
- *The UNDAF National Steering Committee as the overarching governing body.*
- *The SDG Partnership Platform Thematic Windows Steering Committees as the primary governing bodies of each of the Thematic Windows respectively.*
- *Working Groups and Sub-Committees (if deemed necessary), established by the Thematic Windows Steering Committees with delegated authority over certain matters as detailed below.*
- *The SDG Partnership Platform Secretariat, responsible for the overall management and coordination of activities of the SDG Partnership Platform.*
- *Multi-Partner Trust Fund (MPTF) is the main funding mechanism to The Platform. The Fund Board is the main governance body of the Fund*

A Multi-Partner Trust Fund (MPTF) is the main funding mechanism to The Platform. As the PHC Window has been the only Window established and financially supported, the Co-Chairs of the Window assume the role of MPTF Fund-Board, responsible for approving the Fund's strategic guidelines and the global results framework making allocation decisions for the Projects approved by the Thematic Steering Committees.

The Fund is administered by the UNDP MPTF Office acting as the Administrative Agent. The MPTF Office is responsible for Fund design and set-up, the maintenance of the Fund account, the receipt of donor contributions and the disbursement of funds upon instructions from the Chair and provision of periodic consolidated reports.

The financing mobilized by the Platform and pooled within its MPTF is managed by respective UN agencies, programmes and funds in liaison with the Secretariat, leading the various outputs upon signing of the SDG PP MPTF MOU. UNFPA and UNRCO, through UNDP, are the current co-signatories of the MPTF.

UNFPA as the UNH6 signatory to the MPTF is leading the implementation of the SDGPP PHC strategic plan to facilitate related technical support to the MOH, COG and other partners.



The SDGPP structure

## SDG3 Primary Healthcare Accelerator Window

Today, Kenya is at the right place and time to test multiple models to drive accelerated private sector participation in primary health care. It has made substantial progress on universal health and wellbeing and is poised to build on this momentum to ramp up transformative public private collective action moving forward.

The mid-term evaluation of the Kenya Health Sector Strategic Plan (2014-2018) also indicates that increasing investments and enhancing partnerships, and innovations, at the community base primary healthcare level, will be instrumental to help Kenya continue advancing reproductive, maternal, new-born, child and adolescent healthcare and realize its Vision 2030.

Uhuru Kenyatta, the President of Kenya, prioritized Universal Health Coverage (UHC) in the Government's "Big 4 Action Plan" announced in January 2018<sup>14</sup>. Subsequently, the MOH in Kenya has led in 2018 a consultative process resulting into the development of Kenya's UHC roadmap to inform gradual UHC roll-out in the country, thereby improving health and well-being of all Kenyans.

The related health system strengthening initiatives underway in Kenya are critical, yet exciting, and require "all hands-on deck" through strong multi-stakeholder collaboration.

Strategic investments in UHC will be key to harnessing the country's demographic dividend to further support the socio-economic progress not only in Kenya but also neighboring countries, adding positive regional impact.

The Government of Kenya is aligning forces with all key stakeholders in the implementation of its UHC roadmap, including with the private sector.

14 Kenya's President, Uhuru Kenyatta in "Daily Nation", 23 January 2018, <https://goo.gl/UDJCHF> The other three pillars include Food Security; Affordable Housing and Manufacturing. By 2022 the Government seeks to raise the share of manufacturing sector from 9% to 15% of GDP, expand food production and supply, provide universal health coverage for all Kenyans and build 500,000 affordable houses.

Whilst the SDG Partnership Platform's overall goal aims at contributing to the Government of Kenya's efforts to attain the *SDG target 17.17: Effective public, public-private and civil society partnerships, building on the experience and resourcing strategies of partnerships encouraged and promoted in Kenya*, more specifically the SDG3 Primary Healthcare Accelerator Window's support is contributing to Government of Kenya's efforts in attaining the SDG target 3.8: *Achieve universal health coverage (UHC), including financial risk protection, access to quality essential health care services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all.*

SDG3 Primary Healthcare Accelerator Window's planned results are laid out in the following three sub-outcomes:

1. *Enhanced national and county government capacities to efficiently and effectively identify, design, finance, purchase, and manage large-scale Primary Healthcare Public-Private Partnerships.*
2. *Innovative blended financing mechanisms promoted in support of the Government of Kenya domestic resource mobilization agenda for UHC.*
3. *Strengthened Primary Healthcare systems through improved public-private collaboration and innovation*

For the attainment of sub-outcome *Enhanced national and county government capacities to efficiently and effectively identify, design, finance, purchase, and manage large-scale Primary Healthcare PPPs* the following outputs are delivered:

1.1 Technical support provided to drafting and refinement of policies and regulations to optimize public private collaboration for universal access to quality affordable PHC
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1.2 National and County Government capacities to steward optimum private sector engagement for universal access to quality affordable PHC.
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For the attainment of sub-outcome on *Innovative financing mechanisms promoted in support of the Kenya's domestic resource mobilization agenda for UHC* the following outputs are delivered:

2.1 Evidence-base on potential new financing and business models for universal access to quality affordable PHC developed and promoted
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2.2 Public, private and blended financing and investments models brokered to accelerate universal access to quality affordable PHC
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For the attainment of sub-outcome on *Strengthened Primary Health care systems through optimum public-private collaboration and innovation* the following outputs are delivered:

3.1 Support to design and testing of innovative partnership and solutions delivered.
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3.2 System innovation approaches promoted across public-private stakeholders
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More generally, the SDG3 Primary Healthcare Accelerator Window's activities are implemented through a three phased-approach (I. Diagnostics and Facts, II. Design and Planning and III. Active facilitation of on-the-ground implementation (national and county level) under which a common fact-base will firstly be established for Platform members to jointly identify selected bold transformative initiatives in pursuit of the SDG Partnership Platform goals and objectives; secondly to carefully design and plan with key stakeholders for the successful delivery of these initiatives; and thirdly to facilitate implementation of the initiatives.

## **SDG PARTNERSHIP PLATFORM DEVELOPMENTS AND RESULTS SO FAR**

### **Outcome 1: Enhanced institutional, organizational, and staff capacities at national and county government to advance public private collaborations and innovations for PHC.**

H.E President Uhuru Kenyatta launched Afya Care – Wema Wa Mkenya on 13th December 2018. Kenya’s Universal Health Coverage (UHC) Pilot Program is teaching the Country how to deliver to all Kenyans essential preventive, promotive, curative, rehabilitative and palliative health services at minimum financial burden. Over the course of 2018 and in the lead-up of the launch the Kenya’s UHC Roadmap was developed under the inspiring leadership of Hon Sicily Kariuki, Cabinet Secretary for Health in Kenya, and through a consultative process engaging all key stakeholders. The SDGPP Secretariat and the Platform membership supported the development of the UHC roadmap through participation in the UHC Apex, Steering Committee and various sub-committees. Contribution especially were provided to the UHC roadmap M&E framework, and aspects related to public private partnerships, unlocking investments, and innovation.

In support of the development of the UHC Domestic Resource Mobilization (DRM) Blueprint, the SDGPP chaired the DRM Private Sector Working Group, and moderated a 2-day Pre-Dialogue informing the UHC DRM Blueprint chapters on PPPs, unlocking investments and driving Innovations.

MOH has mandated the SDGPP to lead on support in the development of the MOH Health PPP strategy and toolkit. In partnership with the Global Financing Facility and World Bank Health in Africa, the SDGPP has commissioned an assessment of the role of Private Sector in Kenya in supporting collaborations under devolution: roles, challenges and opportunities for public private dialogue and public private partnerships. This assessment will inform the subsequent development of a Health PPP strategy and toolkit for providing uniform guidance for national agencies and county governments on how to engage in Health PPPs and unlock private sector investments while safeguarding value for money.

Over the course of 2018, all 47 Counties have been engaged in various Public Private Dialogues to sensitize the Counties on the Platforms’ mandate and explore needs and opportunities for PPPs. In March 2018, the Platform organized for all 10 FCDC Counties (covering 65% of Kenya’s land mass) a co-create workshop over 3 days with 100 multi-stakeholder partners. In August 2018, the Platform presented its work to all 47 CECs of Health at the COG pre-governors summit in Nairobi. In October 2018, a Health Symposium was organized for the 14 Lake Region Economic Bloc Counties, and external advisory support has also been offered to individual Counties (eg Isiolo, Kisumu, Makueni, Homabay and Mandera). These respective engagements have informed the development of the 2019 AWP activities related to strengthening of national and county government capacities to engage with private sector, drive innovation, and unlock private and philanthropic as well as intellectual capital for PHC.

### **Outcome 2: Innovative financing and business models advanced in support of Kenya’s domestic resource mobilization agenda for PHC / UHC.**

The SDGPP, through generous support of USAID, commissioned McKinsey to identify overall PHC market scope and investment opportunities in Kenya and to help to broker selected investment deals that would advance the PHC agenda. McKinsey’s diagnostics identified that Kenya’s primary healthcare market offers great investment potential but the pipeline is thin, particularly considering the ~\$6 billion of private sector investment needed over the next 10 years. Given that the existing pipeline of potential deals is relatively ‘thin’, Kenya needs to strengthen the

enabling environment for private-public investments to unleash a much larger volume of private sector investments. Towards this end, McK identified 10 'big ideas' and with support of the Platform developed roadmaps to implement these ideas to unlock much greater investor interest and deal flow. Some of these 'big ideas' are needed to remove current barriers to private sector investment in primary healthcare, others to better enable business case development in the primary healthcare space, and yet others to ensure fair competition and market sustainability.

In support of catalyzing ongoing partnership efforts and investment interest, and building upon the diagnostics commissioned through McKinsey, the Platform has commissioned additional research through Intellectap to analyze and recommend 3-5 additional innovative health financing models appropriate for Kenya with supporting details for implementation, including operating models and partner selection frameworks.

To promote knowledge exchange and networking, four PHC financing and business modelling workshops have been organized over the course of 2018 bringing together investors, financiers and healthcare experts and enablers to raise awareness and understanding about the Primary Healthcare Market, how to make it work for the poor and explore ways forward for unlocking private capital for UHC whilst simultaneously driving efficiency and effectiveness of PHC delivery through PPP models.

In support of the implementation of the UHC DRM Blueprint, the Platform in partnership with MOH, Capital Markets Authority, and COG organized in December 2018 a workshop to analyze diverse models for designing a Health Social Impact Bond (HIB) in Kenya. Based on the outcome of the workshop, a pre-feasibility study will be commissioned with the aim of launching the HIB in to the market in 2019 following all requisite approvals.

In addition, the SDGPP has created strategic partnerships with Global Steering Group for Impact Investment, Africa Venture Philanthropy Alliance, East Africa Venture Capital Association, and Convergence to expand networks and access to expertise and financing for potential partnerships. SDGPP been selected to lead the Taskforce to establish the National Impact Advisory Board for Kenya in 2019.

### **Outcome 3: Innovative solutions and partnerships catalyzed to strengthen the delivery of PHC systems.**

The Platform Secretariat organized various consultations over the course of 2018 with Government Leadership, key stakeholders in the Kenya innovation ecosystem, and global innovation experts from US, Europe and India. As a result, the Government of Kenya, through its Ministry of ICT, has formally requested the Platform to establish an SDG Innovation Lab. The request has also been formally endorsed by the Kenyan Treasury. Work has been commissioned to co-design the Lab with Government and other partners to optimize its added value and embed it within Kenya's innovation ecosystem, whilst promoting South-South Collaboration. This will provide critical intellectual underwriting for decisions and investments for driving SDG impacts under the Big-Four Agenda.

The SDG Partnership Platform has partnered with eMentoring and the ICTA in the organization of 4 Hackathons to identify innovative solutions to accelerate attainment of the Big-Four Agenda, including UHC.

In October 2018, the Platform convened 50 CEOs and experts in Kenya from government, development partners, businesses and academia to develop a set of recommendations on leveraging ICT to achieve the Big Four Agenda and the Sustainable Development Goals. Prior to

the roundtable discussion, the participants completed a survey sharing their greatest challenges and opportunities for using ICT for the Big Four and SDGs.

*As a result of all activities under the three sub-outcomes, multiple partnership building processes have been initiated and are receiving a variety of types of transaction support with great potential to unlock close to \$120 million private capital for PHC within the coming years whilst improving delivery of care and consequently health and well-being impacts.*

### **Resource mobilization and partnership building**

The Platform has received invaluable financial and in-kind catalytic support from the following partners: Netherlands Government, Finnish Government, Swedish Government, Swiss Government, USAID, World Bank, Philips, Merck for Mothers, AstraZeneca, Huawei, McKinsey, Conrad N. Hilton Foundation.

So far, the Platform has mobilized \$5,800,000 financial and in-kind support from a range of multi-lateral, bilateral, philanthropic and private sector partners. 45% of this support is financing and 55% in-kind. \$1,500,000, or 58% of this financing, is pooled and disbursed through the Platforms MPTF.

The Platform is in the process of establishing its second window. Under the leadership of the Government, and with support of UN agencies as WFP, FAO, and UNICEF, Rockefeller Foundation, AGRA, GAIN, Atlas AI, and other partners, the Food-Security and Nutrition Window is expected to be launched by mid-2019.

The Platform presented its work at various regional and global events in support of its advocacy, partnerships and resource mobilization efforts (e.g. the Africa Diaspora Investors Summit, World Health Assembly, World Economic Forum, ECD Action Network, Scaling Up Nutrition Forum, HPPP Platform, and PMNCH Partnership Forum).

Finally, and as can be seen from Annex 2, the SDGPP mission and journey was captured in multiple OpEds by its leadership and partners, and activities captured in written and social media.

## **FINANCIAL OVERVIEW**

A Multi-Partner Trust Fund (MPTF) was launched in September 2017 (with the first private sector contribution signed with Royal Philips) to support the initiative with ongoing support from the UN MPTF office in New York. Other parallel funding mechanisms are also being used, to allow receipt of support through channels appropriate for respective development partners and other funders in the form of direct funding and/or outsourcing contracts.

So far, the Platform has mobilized \$5,800,000 financial and in-kind support from a range of multi-lateral, bilateral, philanthropic and private sector partners. 45% of this support is financing and 55% in-kind. \$1,500,000, or 58% of this financing, is pooled and disbursed through the Platform's MPTF.

The Secretariat will manage the MPTF under the oversight of the Platform Steering Committee and use the pooled funding in the most efficient, effective and accountable manner possible to achieve the Platform's strategic objectives.

Annex 1 presents the full financial report published by the MPTF office that has also been uploaded online: <http://mptf.undp.org/factsheet/fund/KEN00>

## NEXT STEPS IN 2019

The Platform Secretariat will continue its work in supporting the implementation of the SDG 3 Primary Healthcare Window that the Window's working group has been spearheading as well as in expanding its work in to the subsequent windows aligning with the UNDAF 2018-2022 and the Government's Big Four Agenda as per the agreed results framework.

The SDG 3 Primary Healthcare Window will further continue the implementation and delivery of the agreed outputs and activities as per the work plan for 2019.

Key deliverables for 2019 are:

1. MOH Health PPP Strategy developed
2. MOH Health PPP Toolkit developed and institutionalized
3. At least 50 Public Officers trained in facilitating Health PPPs
4. At least 16 county or county bloc health stakeholder forums organized to promote public participation in planning and decision-making and catalyze potential and feasible opportunities for PHC PPPs
5. At least 4 Counties and / or County Blocs received transaction support to develop large-scale PHC PPPs
6. At least 1 Innovative Health Financing Model Advanced (eg Health Impact Bond)
7. At least \$50 million private investments unlocked and blended for PHC transformation
8. SDG Innovation Nexus Designed and Operationalized to spur PHC Transformation
9. SDG Partnership Platform partnership and resource base expanded
10. SDG Partnership Platform media and communications platforms established in alignment with UHC roll-out

The Platform's Leadership and Secretariat will continue to pursue broader and deeper strategic partnerships and support for the successful implementation of its 5-year strategic plan.

For more information and the detailed work plan, please see the Programme Documents and the associated work plans.

**ANNEX 1: CONSOLIDATED ANNUAL FINANCIAL REPORT OF THE ADMINISTRATIVE  
AGENT FOR THE KENYA SDG PARTNERSHIP PLATFORM MPTF**

**for the period 1 January to 31 December 2018**

**Multi-Partner Trust Fund Office**

**Bureau for Management Services**

**United Nations Development Programme**

**[GATEWAY: http://mptf.undp.org](http://mptf.undp.org)**

## DEFINITIONS

### **Allocation**

Amount approved by the Steering Committee for a project/programme.

### **Approved Project/Programme**

A project/programme including budget, etc., that is approved by the Steering Committee for fund allocation purposes.

### **Contributor Commitment**

Amount(s) committed by a donor to a Fund in a signed Standard Administrative Arrangement with the UNDP Multi-Partner Trust Fund Office (MPTF Office), in its capacity as the Administrative Agent. A commitment may be paid or pending payment.

### **Contributor Deposit**

Cash deposit received by the MPTF Office for the Fund from a contributor in accordance with a signed Standard Administrative Arrangement.

### **Delivery Rate**

The percentage of funds that have been utilized, calculated by comparing expenditures reported by a Participating Organization against the 'net funded amount'.

### **Indirect Support Costs**

A general cost that cannot be directly related to any particular programme or activity of the Participating Organizations. UNDG policy establishes a fixed indirect cost rate of 7% of programmable costs.

### **Net Funded Amount**

Amount transferred to a Participating Organization less any refunds transferred back to the MPTF Office by a Participating Organization.

### **Participating Organization**

A UN Organization or other inter-governmental Organization that is an implementing partner in a Fund, as represented by signing a Memorandum of Understanding (MOU) with the MPTF Office for a particular Fund.

### **Project Expenditure**

The sum of expenses and/or expenditure reported by all Participating Organizations for a Fund irrespective of which basis of accounting each Participating Organization follows for donor reporting.

### **Project Financial Closure**

A project or programme is considered financially closed when all financial obligations of an operationally completed project or programme have been settled, and no further financial charges may be incurred.

### **Project Operational Closure**

A project or programme is considered operationally closed when all programmatic activities for which Participating Organization(s) received funding have been completed.

### **Project Start Date**

Date of transfer of first instalment from the MPTF Office to the Participating Organization.

### **Total Approved Budget**

This represents the cumulative amount of allocations approved by the Steering Committee.

### **US Dollar Amount**

The financial data in the report is recorded in US Dollars and due to rounding off of numbers, the totals may not add up.

## INTRODUCTION

This Consolidated Annual Financial Report of the Kenya SDG Partnership Platform MPTF is prepared by the United Nations Development Programme (UNDP) Multi-Partner Trust Fund Office (MPTF Office) in fulfillment of its obligations as Administrative Agent, as per the Terms of Reference (TOR), the Memorandum of Understanding (MOU) signed between the UNDP MPTF Office and the Participating Organizations, and the Standard Administrative Arrangement (SAA) signed with contributors.

The MPTF Office, as Administrative Agent, is responsible for concluding an MOU with Participating Organizations and SAAs with contributors. It receives, administers and manages contributions, and disburses these funds to the Participating Organizations. The Administrative Agent prepares and submits annual consolidated financial reports, as well as regular financial statements, for transmission to contributors.

This consolidated financial report covers the period 1 January to 31 December 2018 and provides financial data on progress made in the implementation of projects of the Kenya SDG Partnership Platform MPTF. It is posted on the MPTF Office GATEWAY (<http://mptf.undp.org/factsheet/fund/KEN00>).

The financial data in the report is recorded in US Dollars and due to rounding off of numbers, the totals may not add up.

## 2018 FINANCIAL PERFORMANCE

This chapter presents financial data and analysis of the Kenya SDG Partnership Platform MPTF using the pass-through funding modality as of 31 December 2018. Financial information for this Fund is also available on the MPTF Office GATEWAY, at the following address: <http://mptf.undp.org/factsheet/fund/KEN00>.

### 1. SOURCES AND USES OF FUNDS

As of 31 December 2018, 4 contributors deposited US\$ 1,305,658 in contributions and US\$ 4,269 was earned in interest. The cumulative source of funds was US\$ 1,309,928.

Of this amount, US\$ 847,102 has been net funded to 1 Participating Organizations, of which US\$ 453,596 has been reported as expenditure. The Administrative Agent fee has been charged at the approved rate of 1% on deposits and amounts to US\$ 13,057. Table 1 provides an overview of the overall sources, uses, and balance of the Kenya SDG Partnership Platform Fund as of 31 December 2018.

**Table 1. Financial Overview, as of 31 December 2018 (in US Dollars)**

	<b>Annual 2017</b>	<b>Annual 2018</b>	<b>Cumulative</b>
<b>Sources of Funds</b>			
Contributions from donors	855,658	450,000	1,305,658
Fund Earned Interest and Investment Income	867	3,402	4,269
Interest Income received from Participating Organizations	-	-	-
Refunds by Administrative Agent to Contributors	-	-	-
Fund balance transferred to another MDTF	-	-	-
Other Income	-	-	-
<b>Total: Sources of Funds</b>	<b>856,525</b>	<b>453,402</b>	<b>1,309,928</b>
<b>Use of Funds</b>			
Transfers to Participating Organizations	847,102	-	847,102
Refunds received from Participating Organizations	-	-	-
<b>Net Funded Amount</b>	<b>847,102</b>	<b>-</b>	<b>847,102</b>
Administrative Agent Fees	8,557	4,500	13,057
Direct Costs: (Steering Committee, Secretariat...etc.)	-	-	-
Bank Charges	0	7	7
Other Expenditures	-	-	-
<b>Total: Uses of Funds</b>	<b>855,658</b>	<b>4,507</b>	<b>860,165</b>
<b>Change in Fund cash balance with Administrative Agent</b>	<b>867</b>	<b>448,895</b>	<b>449,762</b>
Opening Fund balance (1 January)	0	867	-
<b>Closing Fund balance (31 December)</b>	<b>867</b>	<b>449,762</b>	<b>449,762</b>
Net Funded Amount (Includes Direct Cost)	847,102	-	847,102
Participating Organizations' Expenditure (Includes Direct Cost)	-	453,596	453,596
<b>Balance of Funds with Participating Organizations</b>			<b>393,506</b>

## 2. PARTNER CONTRIBUTIONS

Table 2 provides information on cumulative contributions received from all contributors to this Fund as of 31 December 2018.

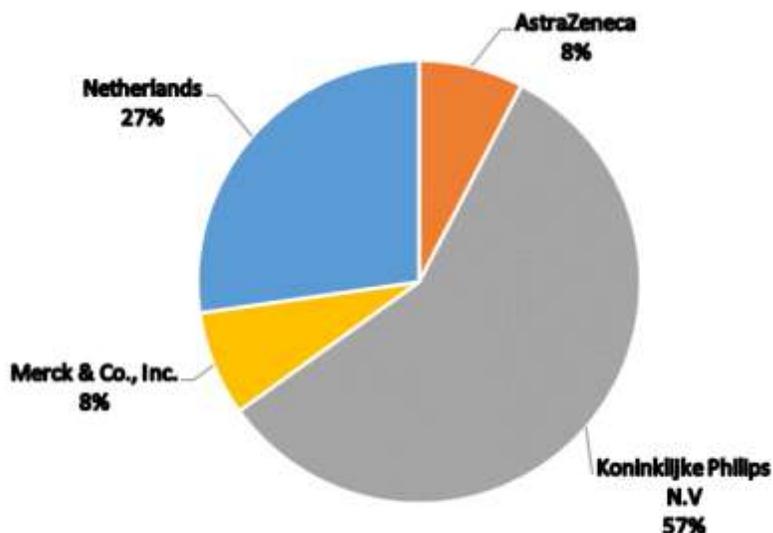
The Kenya SDG Partnership Platform Fund is currently being financed by 4 contributors, as listed in Table 2.

The table includes commitments made up to 31 December 2018 through signed Standard Administrative Agreements, and deposits made through 2018. It does not include commitments that were made to the fund beyond 2018.

**Table 2. Contributors' Commitments and Deposits, as of 31 December 2018 (in US Dollars)**

Contributors	Total Commitments	Prior Years as of 31-Dec-2017 Deposits	Current Year Jan-Dec-2018 Deposits	Total Deposits
AstraZeneca	200,000	-	100,000	100,000
Koninklijke Philips N.V	750,000	500,000	250,000	750,000
Merck & Co., Inc.	100,000	-	100,000	100,000
NETHERLANDS	355,658	355,658	-	355,658
<b>Grand Total</b>	<b>1,305,658</b>	<b>855,658</b>	<b>450,000</b>	<b>1,305,658</b>

**Figure 1: Deposits by contributor, cumulative as of 31 December 2018**



### 3. INTEREST EARNED

Interest income is earned in two ways: 1) on the balance of funds held by the Administrative Agent (Fund earned interest), and 2) on the balance of funds held by the Participating Organizations (Agency earned interest) where their Financial Regulations and Rules allow return of interest to the AA.

As of 31 December 2018, Fund earned interest amounts to US\$ 4,269. Details are provided in the table below.

**Table 3. Sources of Interest and Investment Income, as of 31 December 2018 (in US Dollars)**

Interest Earned	Prior Years as of 31-Dec-2017	Current Year Jan-Dec-2018	Total
<b>Administrative Agent</b>			
Fund Earned Interest and Investment Income	867	3,402	4,269
<b>Total: Fund Earned Interest</b>	<b>867</b>	<b>3,402</b>	<b>4,269</b>
<b>Participating Organization</b>			
<b>Total: Agency earned interest</b>			
<b>Grand Total</b>	<b>867</b>	<b>3,402</b>	<b>4,269</b>

### 4. TRANSFER OF FUNDS

As of 31 December 2018, the AA has transferred US\$ 847,102 to 1 Participating Organization (see details below).

#### 4.1 TRANSFER BY PARTICIPATING ORGANIZATION

Table 4 provides additional information on the refunds received by the MPTF Office, and the net funded amount for each of the Participating Organizations.

**Table 4. Transfer, Refund, and Net Funded Amount by Participating Organization, as of 31 December 2018 (in US Dollars)**

Participating Organization	Prior Years as of 31- Dec-2017			Current Year Jan-Dec- 2018			Total		
	Transfers	Refunds	Net Funded	Transfers	Refunds	Net Funded	Transfers	Refunds	Net Funded
UNDP	847,102		847,102				847,102		847,102
<b>Grand Total</b>	<b>847,102</b>		<b>847,102</b>				<b>847,102</b>		<b>847,102</b>

## 5. EXPENDITURE AND FINANCIAL DELIVERY RATES

All final expenditures reported for the year **2018** were submitted by the Headquarters of the Participating Organizations. These were consolidated by the MPTF Office.

Project expenditures are incurred and monitored by each Participating Organization, and are reported as per the agreed upon categories for inter-agency harmonized reporting. The reported expenditures were submitted via the MPTF Office's online expenditure reporting tool. The **2018** expenditure data has been posted on the MPTF Office GATEWAY at <http://mptf.undp.org/factsheet/fund/KEN00>.

### 5.1 EXPENDITURE REPORTED BY PARTICIPATING ORGANIZATION

In 2018, US\$ was net funded to Participating Organizations, and US\$ 453,596 was reported in expenditure.

As shown in table below, the cumulative net funded amount is US\$ 847,102 and cumulative expenditures reported by the Participating Organizations amount to US\$ 453,596. This equates to an overall Fund expenditure delivery rate of 54 percent.

**Table 5.1 Net Funded Amount, Reported Expenditure, and Financial Delivery by Participating Organization, as of 31 December 2018 (in US Dollars)**

Participating Organization	Approved Amount	Net Funded Amount	Expenditure			Delivery Rate %
			Prior Years as of 31-Dec-2017	Current Year Jan-Dec-2018	Cumulative	
UNDP	847,102	847,102		453,596	453,596	53.55
<b>Grand Total</b>	<b>847,102</b>	<b>847,102</b>		<b>453,596</b>	<b>453,596</b>	<b>53.55</b>

### 5.2 EXPENDITURE BY PROJECT

Table 5.2 displays the net funded amounts, expenditures reported and the financial delivery rates by Participating Organization by Project.

**Table 5.2 Expenditure by Project within Sector, as of 31 December 2018 (in US Dollars)**

Sector / Project No. and Project Title	Participating Organization	Project Status	Total Approved Amount	Net Funded Amount	Total Expenditure	Delivery Rate %	
<b>Enabling Support to the SDG PP</b>							
00108116	Establishing and operationaliz	UNDP	On Going	535,000	535,000	187,971	35.13
<b>Enabling Support to the SDG PP: Total</b>				<b>535,000</b>	<b>535,000</b>	<b>187,971</b>	<b>35.13</b>

<b>TW1 SDG 3 Cluster PHC</b>							
00108117	SDG3 Primary Healthcare Accele	UNDP	On Going	312,102	312,102	265,625	85.11
<b>TW1 SDG 3 Cluster PHC: Total</b>				<b>312,102</b>	<b>312,102</b>	<b>265,625</b>	<b>85.11</b>
<b>Grand Total</b>				<b>847,102</b>	<b>847,102</b>	<b>453,596</b>	<b>53.55</b>

### 5.3 EXPENDITURE REPORTED BY CATEGORY

Project expenditures are incurred and monitored by each Participating Organization and are reported as per the agreed categories for inter-agency harmonized reporting. In 2006 the UN Development Group (UNDG) established six categories against which UN entities must report inter-agency project expenditures. Effective 1 January 2012, the UN Chief Executive Board (CEB) modified these categories as a result of IPSAS adoption to comprise eight categories.

#### 2012 CEB Expense Categories

- 1.
2. Staff and personnel costs
3. Supplies, commodities and materials
4. Equipment, vehicles, furniture and depreciation
5. Contractual services
6. Travel
7. Transfers and grants
8. General operating expenses
9. Indirect costs

**Table 5.3 Expenditure by UNDG Budget Category, as of 31 December 2018 (in US Dollars)**

Category	Expenditure			Percentage of Total Programme Cost
	Prior Years as of 31-Dec- 2017	Current Year Jan-Dec- 2018	Total	
Staff & Personnel Cost (New)	-	348,822	348,822	82.29
Suppl, Comm, Materials	-	-	-	
Equip, Veh, Furn, Depn	-	1,360	1,360	0.32
Contractual Services	-	5,624	5,624	1.33
Travel	-	40,637	40,637	9.59
Transfers and Grants	-	-	-	
General Operating	-	27,475	27,475	6.48
<b>Programme Costs Total</b>	<b>-</b>	<b>423,919</b>	<b>423,919</b>	<b>100.00</b>

Indirect Support Costs Total <sup>15</sup>	-	29,677	29,677	7.00
<b>Total</b>	-	<b>453,596</b>	<b>453,596</b>	

## 6. COST RECOVERY

Cost recovery policies for the Fund are guided by the applicable provisions of the Terms of Reference, the MOU concluded between the Administrative Agent and Participating Organizations, and the SAAs concluded between the Administrative Agent and Contributors, based on rates approved by UNDG.

The policies in place, as of 31 December **2018**, were as follows:

- **The Administrative Agent (AA) fee:** 1% is charged at the time of contributor deposit and covers services provided on that contribution for the entire duration of the Fund. In the reporting period US\$ **4,500** was deducted in AA-fees. Cumulatively, as of 31 December **2018**, US\$ **13,057** has been charged in AA-fees.
- **Indirect Costs of Participating Organizations:** Participating Organizations may charge 7% indirect costs. Cumulatively, indirect costs amount to US\$ **29,677** as of 31 December **2018**.

## 7. ACCOUNTABILITY AND TRANSPARENCY

In order to effectively provide fund administration services and facilitate monitoring and reporting to the UN system and its partners, the MPTF Office has developed a public website, the MPTF Office Gateway (<http://mptf.undp.org>). Refreshed in real time every two hours from an internal enterprise resource planning system, the MPTF Office Gateway has become a standard setter for providing transparent and accountable trust fund administration services.

The Gateway provides financial information including: contributor commitments and deposits, approved programme budgets, transfers to and expenditures reported by Participating Organizations, interest income and other expenses. In addition, the Gateway provides an overview of the MPTF Office portfolio and extensive information on individual Funds, including their purpose, governance structure and key documents. By providing easy access to the growing number of narrative and financial reports, as well as related project documents, the Gateway collects and preserves important institutional knowledge and facilitates knowledge sharing and management among UN Organizations and their development partners, thereby contributing to UN coherence and development effectiveness.

<sup>15</sup> **Indirect Support Costs** charged by Participating Organization, based on their financial regulations, can be deducted upfront or at a later stage during implementation. The percentage may therefore appear to exceed the 7% agreed-upon for on-going projects. Once projects are financially closed, this number is not to exceed 7%.

## ANNEX 2 SELECTION OF SDG PARTNERSHIP PLATFORM IN THE MEDIA

### Government of Kenya:

- <http://www.health.go.ke/kenya-lauds-au-healthcare-and-economic-growth-report-addis-ababa-ethiopia-february-12-2019/>
- <http://www.health.go.ke/2018/03/health-cs-calls-for-partnership-to-achieve-uhc/>
- <http://www.health.go.ke/2017/04/press-release/>
- <http://www.health.go.ke/2016/12/cs-health-announces-public-private-partnership-to-accelerate-large-scale-primary-health-care/>
- <https://www.nation.co.ke/news/Consolidate-all-environmental-programmes-in-Nairobi--CS-Amina/1056-4111280-xypwdr/index.html>
- [https://www.huffingtonpost.com/entry/realizing-kenyas-vision-to-achieve-universal-health-us\\_59bd5965e4b0390a1564de1c](https://www.huffingtonpost.com/entry/realizing-kenyas-vision-to-achieve-universal-health-us_59bd5965e4b0390a1564de1c)
- <http://www.ipsnews.net/2017/01/demonstrating-the-power-of-partnerships-the-potential-for-universal-health-care-in-kenya/>

### OpEds co-authored by SDG Partnership Platform thought-leaders:

- <https://www.devex.com/news/q-a-changing-attitudes-for-global-health-progress-94717>
- <https://www.businessdailyafrica.com/analysis/columnists/NHIF-reforms-plan--will-help-deliver-universal-health/4259356-5065610-fo8wamz/index.html>
- <https://www.the-star.co.ke/opinion/2019-03-27-nhif-reform-critical-to-affordable-health-for-all-in-kenya/>
- <http://www.ipsnews.net/2018/12/united-towards-achieving-health-kenya/>
- <https://www.nation.co.ke/oped/opinion/Political-commitment-key-to-health-for-all/440808-4886974-v4iqec/index.html>
- <https://www.devex.com/news/opinion-achieving-uhc-in-africa-requires-focus-and-collaboration-from-the-private-sector-94086>
- [https://www.huffingtonpost.com/siddharth-chatterjee/ending-maternal-and-child\\_b\\_8100658.html](https://www.huffingtonpost.com/siddharth-chatterjee/ending-maternal-and-child_b_8100658.html)
- [https://www.huffingtonpost.com/entry/innovative-financing-for-universal-health-coverage-us\\_59452261e4b0940f84fe2ecc](https://www.huffingtonpost.com/entry/innovative-financing-for-universal-health-coverage-us_59452261e4b0940f84fe2ecc)
- [https://www.huffingtonpost.com/entry/japan-and-kenyas-push-for-universal-health-coverage-us\\_5a2c119be4b0d7c3f262231b](https://www.huffingtonpost.com/entry/japan-and-kenyas-push-for-universal-health-coverage-us_5a2c119be4b0d7c3f262231b)
- [https://www.huffingtonpost.com/entry/transforming-mandera-coun\\_b\\_8324154.html](https://www.huffingtonpost.com/entry/transforming-mandera-coun_b_8324154.html)
- [https://www.huffingtonpost.com/entry/from-despair-to-hope-fulf\\_b\\_8507612.html](https://www.huffingtonpost.com/entry/from-despair-to-hope-fulf_b_8507612.html)
- [https://www.huffingtonpost.com/entry/promise-not-peril-can-inv\\_b\\_9552638.html](https://www.huffingtonpost.com/entry/promise-not-peril-can-inv_b_9552638.html)
- [https://www.huffingtonpost.com/entry/stepping-up-the-fight-to\\_b\\_10319574.html](https://www.huffingtonpost.com/entry/stepping-up-the-fight-to_b_10319574.html)
- [https://www.huffingtonpost.com/entry/kenyas-health-sector-chal\\_b\\_11503202.html](https://www.huffingtonpost.com/entry/kenyas-health-sector-chal_b_11503202.html)
- [https://www.huffingtonpost.com/entry/kenya-can-lead-the-way-to-universal-health-care-in-us\\_58786d1ae4b094e1aa9dc516](https://www.huffingtonpost.com/entry/kenya-can-lead-the-way-to-universal-health-care-in-us_58786d1ae4b094e1aa9dc516)
- [https://www.huffingtonpost.com/entry/sexual-and-reproductive-health-and-rights-is-key-to-us\\_58dcd6e8e4b0fa4c0959863d](https://www.huffingtonpost.com/entry/sexual-and-reproductive-health-and-rights-is-key-to-us_58dcd6e8e4b0fa4c0959863d)
- <http://www.ipsnews.net/2018/03/government-kenya-united-nations-partnership-achieve-universal-health-care-inspires-many-silicon-valley-stanford-u-c-berkeley-communities/>
- <https://medium.com/@sidchat1/business-unusual-will-drive-africas-quest-to-achieve-health-care-for-all-d2c5f7d87c65>
- [https://www.huffingtonpost.com/ambassador-eric-goosby-md/kenya-is-poised-to-end-ma\\_b\\_6037166.html?ncid=engmodushpmg00000004](https://www.huffingtonpost.com/ambassador-eric-goosby-md/kenya-is-poised-to-end-ma_b_6037166.html?ncid=engmodushpmg00000004)

**World Economic Forum:**

- <https://www.weforum.org/press/2016/05/public-private-partnerships-africa-can-transform-health-systems/>
- <https://www.weforum.org/agenda/2016/05/smart-partnerships-health-in-africa/>
- [http://www3.weforum.org/docs/WEF\\_Health\\_Systems\\_Leapfrogging\\_Emerging\\_Economies\\_report.pdf](http://www3.weforum.org/docs/WEF_Health_Systems_Leapfrogging_Emerging_Economies_report.pdf)

**General media**

- <https://www.forbes.com/sites/montymunford/2017/07/12/the-un-and-philips-brings-hope-and-health-to-africas-most-challenging-region/#39251c34752a>
- <https://aptantech.com/2018/10/huawei-sponsors-two-day-big-4-agenda-hackathon-in-bomet-county/>
- <http://www.kassfm.co.ke/home/2018/10/19/ceos-develop-recommendations-for-leveraging-ict-to-achieve-the-big-four-and-sdgs/>
- <https://www.cio.co.ke/opportunities-for-innovative-financing-for-universal-health-coverage-launched-in-kenya/>
- <https://www.businessdailyafrica.com/datahub/Kenya-universal-health-care-coverage/3815418-5012528-yhgk2kz/index.html>
- <https://www.kbc.co.ke/program-launched-to-help-kenyan-farmers-access-agri-tech-by-2022/>

### ANNEX 3: PHC WINDOW THEORY OF CHANGE

