**Title**: Use of health facility committees to improve health system governance and accountability: Institutionalization and Sustainability issues in Enugu State Nigeria

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**Introduction/background**

Facility Health Committees or Health Facility Committees have been around for some years in Nigeria in various guises. It was originally designed for the Bamako Initiative’s promotion of Drug Revolving Funds but has expanded to improve health system governance. However, there are sustainability issues with the establishment of these committees especially in areas where they are supported by a donor programme

**Objective(s)**

To explore the institutionalisation and sustainability of these committees beyond the life of a donor agency that had supported the initiative in Enugu State Nigeria.

**Materials and methods**

Desk review of documents and Key stakeholders’ interviews (IDIs & FGDs). The basic assumption was that committees would be institutionalised and sustainable if theyhave strong internal relevance, viability and functionality;are well integrated into their relevant community and institutional environment; and are capable of renewal and reproduction without donor supported assistance.

**Results**

Committees’ internal viability key factors included Payments; Composition; Mentoring; LGA Role; Membership renewal; Threat of Ward Development Committees; Training and availability of Printed Reference Materials. The key factors that enhanced integration and replication included integration into the State, LGA and community Health System and Scaling up mechanism.

**Conclusion and recommendations**

Institutionalisation of FHC is essential for sustainability and maintaining the positive impact of FHCs especially with their proposed role in the implementation of BHCPF and other health financing reforms in Nigeria. It should be pursued with institutions in the community, LGA and the State health system. A Formal agreement with the State health system is desirable