



Minutes, DPG Health meeting Wednesday, 4th December 2019, UNICEF

Present

1. Kyaw Aung	UNICEF	DPG H Chair
2. Laurel Fain	USAID	DPG H Incoming Chair
3. Leticia Rweyemamu	WHO	DPG H Secretariat
4. Dr. Julius Wekesa	WHO	Member
5. Maximillian Mapunda	WHO	Member
6. Dr. Peter Nyella	Irish Embassy	Member
7. Fin Poulsen	Danish Embassy	Member
8. Gradeline Minja	Danish Embassy	Member
9. Britt Kjolas	Norwegian Embassy	Member
10. Hiltruda Temba	PEPFAR	Member
11. Ananthy Thambinayagam	USAID	Member
12. Peter Okwero	WB	Member
13. Erick Msoffe	GIZ	Member
14. Suse Matamwa	DFID	Member
15. Otilia Scutelniciuc	UNAIDS	Member
16. Frederick Magnusson	UNICEF	Member
17. Yu Shibui	UNICEF	Member
18. Kira Thomas	KOICA	Member
19. Thomas Teuscher	Swiss Embassy	Member
20. Dan Brun Peterson	MOHCDGEC	Member
21. Dr. Catherine Joachim	MOHCDGEC	Member
22. Tumainiel Macha	MOHCDGEC	Member

AGENDA

- 1. Welcome and Introduction of members
- 2. Presentations: (i) HSSP V development and funding gap (ii) New Digital Health Strategy
- 3. Adoption of the Minutes, Agenda and Matters arising
- 4. Updates on SWAp events
- 5. Critical issues from TWGs/Thematic Areas
- 6. Updates on key events/ Upcoming events, missions
- 7. AOB
- 8. Next DPG H meeting: 8th January 2020

ACTION POINTS:

- HSSP V:
 - **Consultative conference:** MOHCDGEC to confirm the dates as most of the stakeholders will be going on annual leave this December 2019.





- **Budget:** MOHCDGEC to share detailed budget with Government contribution.
- Policy Priorities 2020/21: Excel sheet to be circulated to DPs for mapping their support.
- Updates on the plans for measuring maternal mortality: DP focal point in RMNCAH TWG to provide updates.
- DHS 2020/21: DPG H Troika to draft a letter to DPG Main to request for their support.

1. Welcome and Introduction of members

The DPG Health Chair welcomed all members to the meeting followed by round of introductions.

2. Presentations:

(i) HSSP V development and funding gap - MOHCDGEC

The presentation was made by Head of Health Sector Resource Secretariat, MOHCDGEC. Key issues presented include:

- HSSP V 2020-2025 will be developed together with other 3 strategic health programmes plans which have either ended or about to end: HRH Strategy, NCD Strategy and One Plan III. The aim is to ensure that these three strategic plans are integrated in HSSP V.
- HSSP V will use WHO Framework focusing on the three priorities outlined in the 13th WHO General Programme of Work to achieve coverage to the 3 billion.
- It will be a participatory process where Health in All Policies (HiAP) forum will be used to involve other sectors.
- SWAp TWGs will be clustered to work as task force teams on: UHC, SDH, Epidemic disaster, HRH and One Plan III to test their effectiveness and try to work in a more focused manner to ensure that they all achieve one goal.
- Budget: the initial budget estimates for HSSP V including the other 3 programme plans i.e. NCD, HRH and One Plan III is USD 546,350. This includes Technical Assistance (TA) for costing and M&E. The MoH looks forward to request for TA support from USAID for the costing and WHO for M&E which will then lower the initial budget estimates if they agree to support.
- Timeline: 6 months, to be completed in May 2020. This is the first consultative meeting i.e. with DPG H, next week they will meet MoH officials and thereafter Non-State Actors. A consultative conference will follow from 15 -17 Dec 2019. It was observed that most of the stakeholders will be going on annual leave during this period. The MoH will discuss and confirm the dates.

More information on the presentation can be found at the DPG H website: <a href="http://www.tzdpg.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/he_alth/DPG H Meeting Documents_2019/Presentation_HSSP V formulation_process_1_.pdf

Discussion

 PORALG will be involved in the HSSP V development, they will join the Task Force teams.





- Other sectors will also be involved from the beginning i.e. from the consultative process. MOHCDGEC will make use of the HiAP forum.
- The drafting phase will start between February and April 2020.
- MOH will share with DPs the detailed budget with Government contribution.
- HSSP V Implementation plan for both MOHCDGEC and PORALG have been taken into consideration.

(ii) New Digital Health Strategy - MOHCDGEC

The MOHCDGEC through the Assistant Director M&E, presented to DPs on the new Digital Health Strategy. They appreciated partners support in data issues. It was noted that achievements from the previous eHealth Strategy, 2013 was only 13.3%; partial achievement 42.2%; whereas 44.5% was not achieved at all. This was because some of the interventions were not well done. This led to the revision of the Strategy to the new 2019 Digital Health Strategy to meet the targets that were not met. During the implementation of the eHealth Strategy, 2013 different approaches were used by different partners hence, worked in silos. This led to duplication of efforts and fragmentation. Some of the programs were donor/implementing partner driven. This made the partners to define co-investment to ensure joint efforts in implementing the new Digital Health Strategy.

The new strategy will among others, give emphasis to local capacity for future maintenance to avoid short term projects which cannot be sustained. Opportunities for improvement are there including strong political will, and local vendors with capacity to develop digital solutions. The new Digital Health Strategy has 5 strategic goals and 10 strategic priorities. Its governance framework is aligned to the SWAp mechanism. The MoH is looking forward to orient senior government officials on the new strategy; facilitate resources mobilization through Investment Roadmap and establish Digital Health Centre of Excellence. More information is on the DPG H website through: <a href="http://www.tzdpg.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2019/Digital_Health_Strategy_2019_-2024_Macha_PPT_2_DPG_meeting_Autosaved_pdf

Discussion:

All DPs are encouraged to read the new Strategy and support it as it will help to manage few resources in a good manner. Also, all the health issues that have been discussed daily are addressed in the Strategy. Having more than 200 data systems in the health sector has increased burden/workload to health workers in the facilities. The new strategy will harmonize the systems as they all aim to achieve one goal. It was advised that there is a need to prepare health personnel to use the system for example, pre-service training. It was responded that eLearning module has been introduced to those in training and in-service.

It was recommended that the data system should provide access rights as not everyone would wish to go to health facilities but having information at hand would be much better. The MoH has





developed Health Information system guideline on how to access information. DHIS2 provides data and guidance on how to access data. Also, National Bureau of Statistics (NBS) has a law which guides data access and use. It was noted that the practice has been different from what is being said, data access has been a challenge. The Government will work on that. It was also recommended that the new Strategy should be integrated in HSSP V.

MAIN MEETING

3. Adoption of the Minutes, Agenda and Matters Arising

The Minutes of the November meeting were approved. Agenda for this meeting was adopted.

Matters arising: draft letter to Global Health Initiatives is ready, will be circulated to DPs for their inputs.

4. <u>Updates on SWAp events</u>

HRH high level multi-sectoral dialogue: the meeting was held on 15th November 2019. The MOHCDGEC is currently following up with other Ministries to discuss the action points came out of the meeting. The Government agreed with among others, the idea of volunteerism at district level and working more with the private sector. The HRH high level dialogue report will be shared with DPs.

JAHSR Policy meeting: the meeting went very well with high attendance of Excellencies Ambassadors, Heads of Cooperation and UN Agencies and key senior Government officials: Ministers, Permanent Secretaries, Chair of Parliamentary Social Services Committee, Directors and Program Managers from MOH and Government Institutions, and Government sectoral Ministries. Policy Commitments 2020/21 were signed as well as the Health Basket Fund Side Agreement. There was a proposal to add RMNCAH as a standalone priority. The Ministry is still working on it. DPG H was awarded a Trophy for supporting the SWAp. The Policy Priorities will be put in an Excel sheet to map DPs in terms of who support what, scale, scope and timeline. The excel sheet will be circulated to DPs. This is to help keep all partners on the same page about their support and being able to communicate how DPs support the Government.

Updates on the plans for measuring maternal mortality: a meeting is on-going in Dodoma to review the proposed research/study protocol on maternal mortality estimates. DP focal point in RMNCAH TWG will provide updates.

DHS Updates: there is still a funding gap for DHS 2020/21: USD 2.5m gap for core DHS, i.e. without micronutrient component, and USD 2m gap with the micronutrient component. It was advised that the Government request should go to Embassies. China Aid, SNV and Dutch are potential donors. DPG Main can also be approached. A letter will be drafted to the DPG Main.

5. Technical Working Groups/Thematic Areas Updates





HBF: after the JAHSR Policy meeting, HBF partners visited Homboro Health Centre in Dodoma to appreciate their support. HBF funds for first two quarters have been disbursed.

Global Fund (GF): Preparations for next GF funding proposal ongoing, applications will be open in May 2020. TNCM is working on the roadmap.

GAVI: next week up to 14th December 2019, GAVI will be in the country to review audit issues.

DPG AIDS: during World AIDS day it was presented that Tanzania is on track to reach 90 90 90 targets by 2020. The main gap is on men, children and adolescents. It was also noted that new HIV infections are increasing to young population between 15 – 24 years. The Government will develop interventions to address this and strengthen the multisectoral response.

DPG Nutrition: there was a meeting with Deputy Minister, MOHCDGEC to discuss inclusion of micronutrient component in DHS. No indication yet on the Government contribution.

Disease outbreaks: No new outbreaks reported in the country. No alerts of diseases of international public health concern. In DRC, the situation is quite worrisome following attack of health care workers which has led into suspension of activities in Beni. Current EVD activities in Tanzania include the on-going Rapid Response teams (RRT) trainings on different thematic areas. Way forward: establishing and maintaining database for health workers who have been trained for timely deployment; strengthening pillars including coordination; partners to support timely resource mapping and 4Ws, reviving National Task Force (NTF) meeting with comprehensive participation and action. MOHCDGEC has sent invitation for NTF to be held on 6th December DPG Н 2019. More information is the website through: http://www.tzdpg.or.tz/fileadmin/documents/dpg internal/dpg working groups clusters/clus ter 2/health/DPG H Meeting Documents 2019/EVD outbreak updates 04122019 Final.pd f

6. <u>Updates on key events/Upcoming events</u>

No upcoming events

7. **AOB**

No any other business.

8. Next meeting:

Next meeting on Wednesday, 8th January 2020 at 12pm.