

**Summary and Analysis
of
RHMT Report July 2010-
June 2011 and
Annual Plans 2011/12**

Presentation Layout

- Introduction
- RHMT Progress Report July 2010-June 2011
- RHMT Annual Plans 2011/12
- Recommendations

Introduction

RHMTs have responsibility of overseeing the management of health services in the region.

Core functions

- To develop and operationalize RHMT plans and strategies annually
- To disseminate and support translation of policies, strategies and guidelines of the MOHSW/PMO RALG to CHMTs
- To support an appropriate environment for the private sector development

Introduction

- To coordinate health services in the region
- To support human resource management
- To ensure the quality of services at all health facilities
- To facilitate emergency and disaster preparedness and response
- To backstop the Regional Referral hospitals
- To Institute network system
- To conduct Innovative Supportive Supervision

Achievements

- Up to June 2011, planned activities were implemented at the average of 90%.
- In Nov and Dec 2010 training on RHMT planning and reporting was conducted. The guide is in use
- 18 regions received 1st and 2nd Quarter in btn Nov-December 2010
- All regions except Rukwa had received 3rd and 4th quarter by April 2011

CURRENT STATUS

Until September 2011 the Inventory of RHMT staff indicates that;

- Confirmed staff were 154= 91.66%
- Acting were 13= 7.73%
- Deficit 1= 0.59%
- Total 168= 100%

Achievement

- 121 position for RHMT core members have qualified personnel. Only 22 acting
- Technical support given on curative services. RHMT specialists are on RRHosp schedule for different clinics according to their specialty.

PROGRESS IMPLEMENTATION

Expenditures were at rate of 90%. Balance as of 30th June 2011 was 10%. Allocation was Tsh 4,107,083,494/=

Expenditure was Tsh 3,729,460,813/= Balance Tsh 377,622,681/=

Supportive Supervision (31.01%),

Coordination of Health Service delivery (13.06%)

Ensuring of Quality Health Service (12.13%)

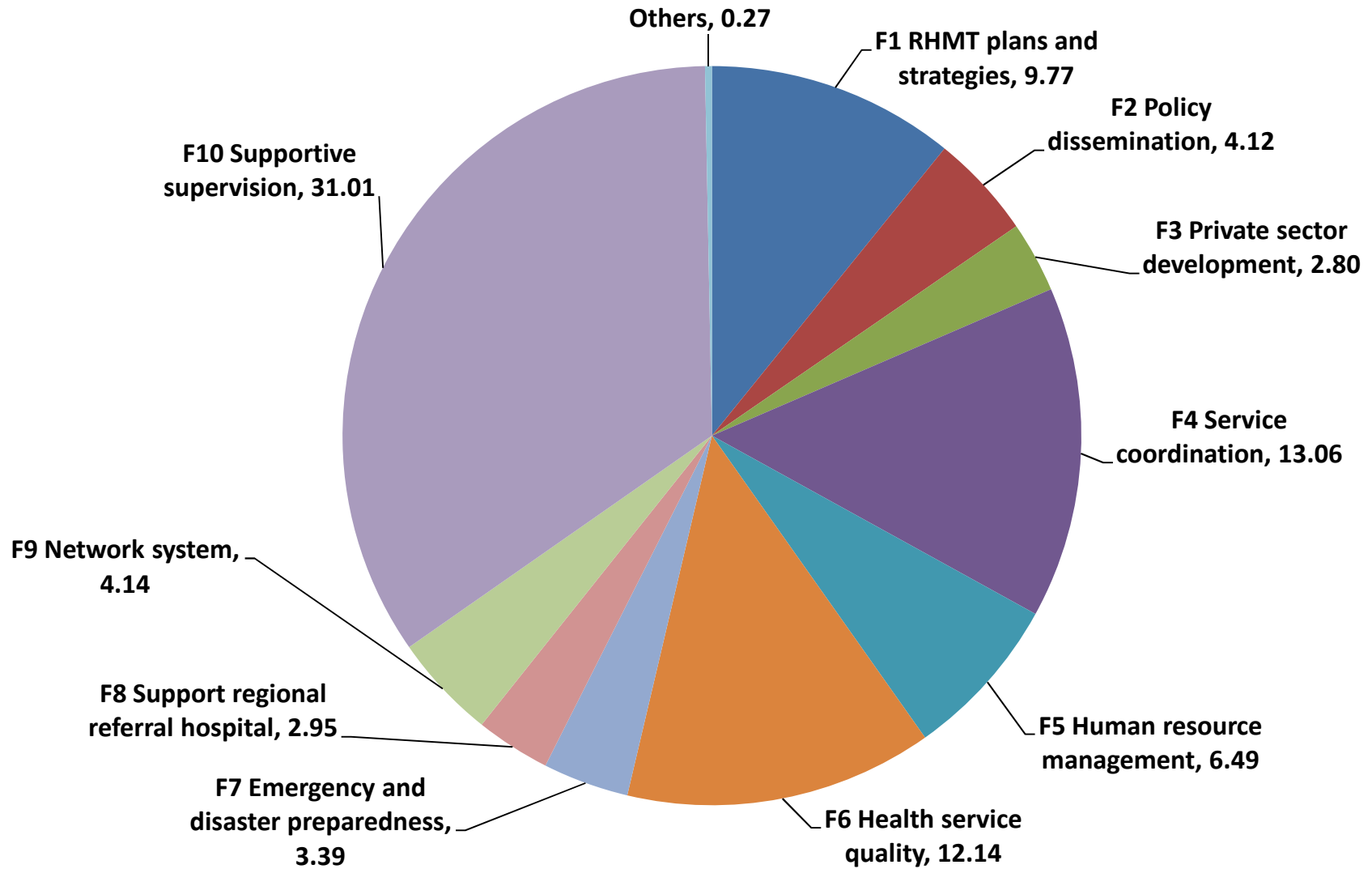
RHMT plans and strategies (9.77%),

HRM(6.49) Networking (4.14%)

Private Sector Coordination (4%)

Policy dissemination (4.12%) Emergency disaster (3.39%) support hosp (2.95) (0.27%) spent on others

Progress cont.....



Achievement

- All regions spent big percentage of allocated funds on supportive supervision.
- They conducted visits (RHMT to HMT and CHMT) at the average of 80% up to June 2011
- Some feedback between a supervisor, HMT,CHMT established at all levels
- Supervision has influenced planning and resource allocation at all levels.

Challenges

- Checklists are not standardized for the use of all RHMTs
- Inadequate supervision skills to some RHMT supervisors
- Inability to tackle effectively HMT, CHMT and health workers concerns regarding salaries, promotion, working tools etc

Challenges

- Inability to assess effectively health workers performance. Need for a simple Performance Assessment Tool.
- Difficulty in integrating all different programs of health services that come from different donors into region supervision matrix
- Supervision not conducted as per schedule due different factors including late receipt of funds and other limited resources

Annual Plans 2011/12

Assessment of RHMT reports was made in order;

- To see to what extent the RHMTs have improved their capacity to coordinate health activities and get reflection on increase of RHMT performance
- To identify areas in which RHMTs will need backstopping in the process of implementation

Assessment Results of RHMT Annual Plans 2011/12

Criteria	Max Score	Average Score
1. Timing of submission	5	15%
2. Structure and general outlay of the plan	3	75%
3. Executive summary	5	70%
4 Budget Summary	3	70%
5. Situational Analysis	5	60%
6. Priority Setting	5	50%
7. Review of the previous year RHMT and CCHP Annual plans	5	70%
8.Objectives and Plan of Operation	10	80%
9.Cost Analysis	9	90%
Total	50	64.4%

Score by Region 2010/11

	Region	Score (%)		Region	Score (%)
1	Iringa	96%	12	Manyara	68%
2	Mbeya	94%	13	Ruvuma	66%
3	Coast	90%	14	Mwanza	64%
3	Tabora	90%	14	Kigoma	64%
5	Kagera	88%	14	Arusha	64%
6	Singida	84%	14	Morogoro	64%
6	Tanga	84%	18	Dodoma	56%
8	Lindi	82%	19	Rukwa	48% RE Ass 68
9	Shinyanga	80%	20	Kilimanjaro	26% RE Ass 64%
10	Dar es Salaam	78%	21	Mtwara	30% Re Ass 70%
11	Mara	70%			15

Score by Region 2009/10

	Region	Score (%)		Region	Score (%)
1	Lindi	86%	12	Kigoma	60%
2	Mbeya	86%	13	Rukwa	60%
3	Singida	84%	14	Shinyanga	58%
4	Coast	80%	15	Tanga	58%
5	Ruvuma	78%	16	Manyara	54%
6	Kagera	74%	17	Iringa	52%
7	Mara	68%	18	Kilimanjaro	44%
8	Mtwara	68%	19	Arusha	32%
9	DSM	64%	20	Dodoma	32%
10	Tabora	64%	21	Mwanza	30%
11	Morogoro	62%			

Achievement

- Many regions except Kilimanjaro and Rukwa prepared the plan using the format as per planning guide.
- Objectives and Plan of Operation had a big improvement an indication of increase in planning skills among the RHMTs
- Majority set objectives focus on the RHMT functions.
- Cost Analysis was very well prepared by all regions

Areas for improvement

- Two regions did not follow the template. Plans sent back and corrections made
- Priority Setting: Some RHMTs need more skills on how to relate the prioritized health problems with planned activities.
- Situation analysis is averagely synthesized with objectives. Data analysis was averagely done.

Way forward

- To continue giving capacity to RHMTs so that they can perform better their functions.
- Design a management tool for regions to supervise districts/CHMTs.

Thank you for listening !!!