

## **THE HUMAN RESOURCE WORKING GROUP MEETING**

**VENUE: HSDPS CONFERENCE HALL MOHSW**

**TIME: 1. 00 PM**

**DATE: 25 February 2010**

### **ATTENDANCE LIST**

1. Mrs Elikaanan Mwakalukwa	Assist. Director HRP - Chair
2. Mr Renatus Mashauri	Ag ADCE - MOHSW
3. Ms Susan Roeder	Senior HRH Advisor – POPSM
4. Mr.Thomas Kinyagu	TA HRHPA
5. Ms Susan Monaghan	HIV/AID Advisor - USAID
6. Ms. Sylvia Kirenga	Research Scientist - IHI
7. Mrs Eliaremisa Ayo	Assit..Director Nursing (Apology)
8. Ms. Jennifer Macias	Country Director-Intra Health
9. Dr. Erick Van Praag	Country Director FHI (Apology)
10. Ms Suzanne McQueen	HSS Advisor CDC (Apology)
11. Dr. Martins Ovberedjo	WHO
12. Dr. Ellen Senkoro	Chief Executive Officer BMAF (Apology)
13. Dr Joseph Komwihangiro	Advisor CIDA
14. Mrs Pili Kimata	Coordinator Nursing
15. Dr. Adeline Saguti	Program Manager BMAF
16. Dr Sidney Ndeki	Programm Director BMAF
17. Ms Velda Aloyce	Health Admin MOHSW
18. Dr. Invocaviths Swai	Coordinator Continue Education

### **MEMBERS WHO COULD NOT ATTEND**

1. Dr. Gilbert R. Mliga	Director HRD (Apology)
2. Mr Hisahiro Ishijima	HRH Planning Advisor- JICA (Apology)
3. Mr. Lusajo Ndagile	Economist- Represent .Head Budget (Apology)
4. Mrs Tabu Chando	Director Admn and Personnel (Apology)
5. Mr. B. Konga	Head Budget – MOHSW (Apology)
6. MR. Ken Heise	Resident Advisor – MSH (Apology)
7. Dr. Bumi Mwamasage	Assistant Director Allied Health (Apology)
8. Dr Samwel Ogillo	Program Manager- APTHA
9. Ms. Mariam Ally	Head Health Financing (Apology)
10. Hellen Macha	Assist. Director-HR PORALG
11. Dr. Elias Kwesi	Head Health Research Sect.-MOHSW
12. Mr Gustav Moyo	Registrar- Nursing Council
13. Dr. Rik Peeperkorn	First Sec. Royal Netherland Embassy
14. Mr. Lazaro M. Malili	Princ. Education Office MoEVT
15. Dr. Faustin Njau	Head HSPS - MoHSW
16. Dr. S. M. A. Hashim	Chairman - APHFTA

17. 23 Mr. Richard Nkwera	HRH Junior Program Officer ( Apology )
18. Dr. Gosbert Mutahyabarwa	Asst Director Co Chair ( Apology)
19. Dr. Bergis Schmidt-Ehry	Health Sector Coordinator – GDC ( Apology)
20. Dr. Tumaini Mikindo	Health Advisor - Irish Aid
21. Ms. Peggy Thorpe	Sr. Health HIV/AIDS Advisor ( Apology)
22. Ms Prisca Lwangili	HR Officer MOHSW ( Apology)
23. Dr. Adeline. I. Kimambo	Director, CSSC ( Apology)
24. 12 Ms Angella Makota	Program Officer – CDC( Apology)
25. 17. Mr Jonathan Mcharo	Research Scientist – NIMR

## AGENDA

1. Opening of the meeting
2. Approval of the agenda
3. Confirmation of the minutes of the previous meeting held on 12/11/09
4. Matters arising
5. Progress made towards approval of the Task Shifting Approach and Health Workforce Structure
6. Strategize for efficiency ( SO Groups and HRH Working Group)
7. Discussion on the reviewed HRHWG - TOR

### AOB

1. Discussion on TOR for Public Expenditure Review study

### Agenda No 1: Opening the meeting

The chairperson Mrs E. Mwakalukwa opened the meet at 1.00 pm. She acknowledged the participation of the members who had attended and asked for any apologies of those who had not turned up as shown in unable to attend list.

### Agenda No 2: Approval of the agenda

Discussion on TOR for Public Expenditure Review study was added as an AOB

### Agenda No 3: Confirmation of the minutes of the previous meeting

Members read and observed the following corrections

- Dr. Martins Ovberedjo and Ms. Jennifer Macias were absent in the previous meeting with apology

### Agenda No 4: Matters arising:

Two issues were reported as matters arising

1. Strategize for efficiency (SO Groups and HRH Working Group).
2. Progress made towards approval of the Task Shifting Approach and Health Workforce Structure

The secretariat reported the positive progress; the discussion is reflected in the agenda No 5 and No 6

## **Agenda No 5: Progress made towards approval of the Task Shifting Approach and Health Workforce Structure**

### **1. Task shifting presentation**

It was reported that proposal for Task Shifting was presented at the Management meeting of the MOHSW. It was clear that Task shifting practice is on-going in Tanzanian health system. However it was agreed that thorough study need to be done whereby NIMRI has been commissioned to conduct the mentioned study to facilitate the process of legalizing it .It was suggested that a small task force is to be formed to work with NIMRI and keep informing the HRHWG on progress. The task force was identified as:

- POPSM Suzan Roeder
- PMO-RALG Hellen Macha
- MOHSW E. Mwakalukwa
- BMAF Name to be identified
- CDC Angella Makota
- FHI Erick Van praag
- NIMRI Jonathan Mcharo

The task force should consult officers from different professions and the Chair was requested to call the first meeting that will identify the chair for the task force. Other members will be co-opted as need arises.

### **2. Health Workforce Initiatives presentation**

The Management having received the presentation on the structure on the initiative, Members acknowledged a well thought structure which shows different level and how it links and hat roles and responsibilities are well stipulated for each level. However it was instructed that the monitoring and evaluation must be a built in responsibility and not a unit in order to avoid confusion with the existing Monitoring and evaluation unit in MOHSW structure.

### **Comments**

Reference need to be made to capture minor missing issues suggested in one of the previous meeting

## **Agenda No 6: Strategize for efficiency ( SO Groups and HRH Working Group)**

Members shared the suggestions made by secretariat

### **It was agreed:**

The secretariat role is the responsibility of Ministry and therefore two members are supposed to be identified to form secretariat

Agreed issues that could bring efficiency:

## **Refer Annex 1**

### **Agenda No 7: Discussion on the reviewed HRHWG – TOR**

The members having read the compiled suggestion they provided inputs as follows:

- It was stressed that, two secretaries of the Working Group should come from the MOHSW
- The participation of interested stakeholders is welcomed particularly where the relevant topics for them is being discussed

The draft of the TOR **Refer annex 2**

AOB

### **Discussion on TOR for Public Expenditure Review study**

**It was agreed that:**

- The study is relevant as it will provide necessary justifications for more funds for HRH.
- Members should submit their input on TOR together with suggestions of the names of consultants who are capable of carrying out the study.
- Members were asked to forward their input and suggestions of consultants to Dr Martins Ovberedjo.

### **Closing of the meeting**

The meeting was closed at 4.00 pm

**Matters arising**

<b>ITEM</b>	<b>ISSUE</b>	<b>RESPONSIBLE.</b>
Agenda No.5	Convene a meeting to identify the chair for the task force on task Shifting, and agree on working modalities	Chair WG
<b>AOB</b>	Members to forward their input and suggestions of consultants to Dr Martins Ovberedjo. regarding PER study	All members

## **Annex 1**

Agreed issues that could bring efficiency

### **HRH WORKING GROUP:**

2. To separate the role of the Chair of WG from the Secretariat hence need to define each ones role to avoid overlap.
3. Ensure agenda preparations are made 1 week before the meeting through the Secretariat consulting the WG members followed by consulting the Chair.
4. Members should provide names of one who will be constantly representing the members when unable to attend the meeting to ensure continuity.
5. The HWI Secretariat team is expected to provide technical and administrative support to the HRH WG.
6. The WG to obtain monthly updates from the Strategic Objective teams in line with the HRH Strategic Plan
7. The HW Secretariat to facilitate the WG meeting preparations including agenda setting, minutes taking and follow up of agreed actions.
8. The WG to obtain monthly updates from the HW secretariat which will consolidate the Strategic objective teams updates in line with the HRH strategic plan
9. To hold WG retreat made once a year, whereby among the agenda to include review of the performance of the group and broader HRH performance.

### **STRATEGIC OBJECTIVE TEAMS**

1. The team leader nominated by a letter from CMO
2. Each SO team leader to have local experts to support the team leader
3. To encourage partners in supporting the SO teams ( technical and financial)
4. To develop Clear terms of reference of each SO teamTo develop annual action plans that will reflect budget ( showing available funds from Govt, partners and NGOs in supporting that specific activity. It will also reflect the budget gap)

5. Mapping of the on going activities by different partners under the strategic objective and extent of the coverage in order to harmonize, synergise and avoid duplication
6. Establishment of the meeting schedule ( at least twice monthly )
7. Schedule of reporting and format to the HRH Working Group ( Once monthly)

## **Appendix 2:**

### **TERMS OF REFERENCE**

#### **HUMAN RESOURCES FOR HEALTH WORKING GROUP TANZANIA MAINLAND**

##### **Background:**

Human Resource for Health stakeholder have acknowledged the Human Resource for Health (HRH) crisis facing the country. The HRH area is complex and requires serious reflection on different perspectives and that it has to be effectively developed and managed. The Ministry of Health and Social Welfare (MOHSW) in collaboration with Development Partners way back in 2003 appointed a Multisectoral HRH working group whose aim was to provide a forum for tracking coherence of vision and provide advice on HRH issues. Despite the achievements of the group, there has been growing concern about its limitation on the comprehensiveness of the representation of all relevant sectors. The Ministry of Health and Social Welfare, in response to this concern, decided to reconstitute a new HRH Working Group to ensure adequate representation from Public, Private and Development Partners. Again during the Joint Annual Health Sector Review meeting in October 2009, it was agreed that all Working Groups should review its terms of reference to accommodate current issues and responsibility to facilitate the implementation of the set milestones. The reviewed terms reference (TOR) is this very version.

##### **Mission of the HRH Working Group:**

To provide sound advice and technical directions for sustainable development of HRH in Tanzania within the context of Government development priorities.

##### **Strategy:**

- **Provide advisory and technical support** to the MOHSW in bringing up relevant policy and strategy basing on wide perspective and focus to enable development of well developed HRH workforce in Tanzania Mainland
- **Multi-sector collaboration and engagement** of HRH stakeholders on important HRH issues that impact on the health sectors performance
- **Partnership and advocacy** to enhance HRH development.
- **Coordinate and monitor** implementations of existing priority HRH issues and plans; and identify important emerging HRH issue that requires attention.

- **Promote information and evidence for decision making;** convene regular briefing and advocacy meeting/dialogue on important HRH issues.

**Assigned Tasks of the working group:**

The following tasks are expected of the members of the working group

1. To identify and outline implementation arrangements to address current HRH priorities for the immediate, medium and long term based on sound technical and thematic reports.
2. To identify current and emerging systematic barriers to policy and strategy implementation with a view to advice respective authorities timely for remedial measures.
3. To assist the MOHSW to develop and implement a multi-sector HRH strategic plan
4. To receive and comment on HRH updates from members, sectors, and groups with respect to ongoing or proposed programme initiatives and action plans.
5. To provide regular necessary advice existing HRH workforce information
6. To provide systematic coordination arrangements for HRH activities in the country
7. To provide advice of the required linkages and partnership for HRH development in the country.
8. Produce regular reports, briefing papers and disseminate good practices documents on HRH for stakeholders.
9. To monitor progress with implementation of HRH strategies in line with existing key policy and plan guidelines and sector reforms milestones.
10. To assume all responsibilities related to successful implementation for the Health Workforce Initiative as stipulated in the role and responsibilities attached to the structure.
11. To undertake any assignment that may from time to time be allocated by the MOHSW.

**Terms of appointment**

1. Appointment of the Chair and Co Chair persons will be done by Permanent Secretary.
2. Members of the Group will appoint two persons one from the MOHSW and one from
3. Membership is based on institutional representation with a designated focal personal who is expected to participate actively in the activities of the HRH working group. Terms that members serve is based on the acceptable performance and interest.



4. The period of services for appointed members will be for two years, following approval by the Permanent Secretary. Special efforts are to be undertaken to ensure adequate performance on HRH development.
5. Participate in all meetings of the working group
6. Maintenance of “*Institutional Memory*” among the members

**Alternates membership:**

1. Provision for alternate members is provided and recognized subject to existing rules and procedures and the approval of the chairperson of the HRH working group.
2. The working group is expected to identify from time to time based on needs for attendance to meetings of alternate members for special periods/issues.

**Cessation of Appointment:**

1. Any appointment will be annulled by the appointing authority if the attributes and performance of appointed member is below expectations.
2. In the event that s designated member for one reason or the other is unable to continue such notice should be given to the working group in writing at least 3 months ahead of disengagement date to enable necessary replacement.

**The tasks and responsibilities of the HRH secretariat:**

1. The HRHWG secretariat will relate with the HRD department of the MOHSW
2. Facilitate and guarantee the use of office space and communications systems and designated staff of facilitate the work and activities of the working group
3. Maintain regular communication with the top management of the MOHSW on important HRH issues and initiatives
4. Undertake the following:
  - a) Arrangement and organization for all meetings of the working group
  - b) Documentation of meetings and production of quality minutes
  - c) Undertake the maintenance and regular up-date of existing HRH workforce information
  - d) Undertake production and distribution of required briefing documents as may be determined from time to time
  - e) Collate and disseminate required information to identified groups and organization as may be required from time to time
  - f) Undertake any additional assignments that may from time to time be allocated

