



Minutes, DPG Health meeting Thursday, 12th June 2019, UNICEF

Present

1. Meaghan Byers	Canada	DPG H Chair
2. Kyaw Aung	UNICEF	DPG H Outgoing Chair
3. Leticia Rweyemamu	WHO	DPG H Secretariat
4. Giampiero Baldassari	GIZ	Member
5. Pascal Kanyinyi	KfW	Member
6. Chiho Suzuki	World Bank	Member
7. Dr. Refaya Ndyamuba	WHO	Member
8. Kira Thomas	KOICA	Member
9. Dr. Rutasha Dadi	Canada	Member
10. Dr. Peter Nyella	Irish Embassy	Member
11. Thomas Teuscher	Swiss Embassy	Member
12. Laurel Fain	USAID	Member
13. Jacqueline Mahon	UNFPA	Member
14. Dr. Caroline Damian	MOHCDGEC	Guest
15. Dr. Yahaya Hussein	PORALG	Guest
16. Che Reddy	Harvard Medical School	Guest
17. Desmond Jumbam	Harvard Medical School	Guest
18. Dr. Augustino Hellar	JHPIEGO	Guest
19. Dr. Leopold Tibyehabwa	JHPIEGO	Guest
20. Erastus Maina	SS2020/Dalberg	Guest
21. Hannington Segirinya	SS2020	Guest

AGENDA

1. Welcome and Introduction of members
2. Presentations: Scaling up safe surgery as an essential component of universal health coverage in Tanzania
3. Adoption of the Minutes, Agenda and Matters arising
4. Updates on SWAp events
5. Critical issues from TWGs/Thematic Areas
6. The future of Results Based Financing (RBF)
7. Updates on key events/ Upcoming events, missions
8. AOB
9. Next DPG H meeting: 7th August 2019

ACTION POINT:

HBF funds disbursement: to be brought to the attention of the DPG Main for discussion with the Treasury.

1. **Welcome and Introduction of members**



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

2. Presentation:

Towards Surgical Equity in Tanzania – Safe Surgery 2020

Safe Surgery 2020 presented on their work particularly the recently developed National Surgical, Obstetric and Anesthesia Plan (NSOAP), 2018-2025 to ensure access to safe, affordable and timely surgical, obstetric and anesthesia services. The key strategic objectives of the NSOAP are to ensure Service Delivery, Workforce, Infrastructure and Information. NSOAP complements One Plan II in maternal health; as well as eHealth Strategy to ensure surgical indicators are used in data collection to improve service delivery. The investment needed for the implementation of the plan is \$597m. The NSOAP is coordinated by the NCDs Unit under the Directorate of Curative Services of the MOHCDGEC. The coordinator is in place, PORALG will also have one. The immediate priorities for NSOAP are to set up governance units, secure funding for implementation, national wide dissemination and development of the comprehensive operational and M&E plan. About 200 nurse anesthetists are trained in Muhimbili and Bugando Medical Schools. More information on the presentation can be found at the DPG H website: http://www.tzdpg.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2019/Safe_Surgery_ppt_DPG_Health_NS_OAP_V2_EM_1_.pdf

Discussions:

What good standards are set to ensure quality of services? Efforts are made to increase the number of anesthesiologists, develop a standardized curriculum to ensure they all graduate at the same level, use of safe surgical checklist and development of teamwork skills. There are currently on-going projects in 2 regions: Kagera and Mara to ensure safe surgery. It was advised that as the NSOAP TWG is cross cutting, it can fit under the SWAp arrangement including Zones, District and Regional services TWG, HRH and RMNCAH TWGs. A concern was raised on the lack of recognition of cadres with additional profession in anesthesia, it was responded that the government is looking forward to recognize those who had short training in anesthesia. With regard to external capacity, it was informed that the ultimate goal of the NSOAP is to make sure that national capacity is built to perform safe surgery. However, some capacities from outside may be welcomed where there is inadequacy.

3. Adoption of the Minutes, Agenda and Matters Arising

Minutes of the previous meeting were approved and Agenda for this meeting adopted.

4. Updates on SWAp events

Feedback from May and June consultative meetings: The PS-MOHCDGEC and Deputy PS Health-PORALG take the monthly consultative meeting very seriously.

- **HRH high level dialogue:** it took place on 16th May 2019 in Dodoma where the Minister, MOHCDGEC participated and recommended for another high level meeting which will be chaired by the Prime Minister. The ToR for the meeting will be finalized by 14th June 2019. The meeting is planned for September 2019. The first task force involved MOH, PORALG, DPs and CSOs. It was noted that there is a need for inclusion of other sectors in the preparation for the September meeting. Realistic scenario analysis against what is currently available should be done. WHO expertise can be applied on this. There was also a discussion on Community Health Workers (CHW) during the Dodoma high level meeting to see which model can be applicable to Tanzania. CHWs were also discussed during the World Health Assembly. Following this, the Permanent Secretary (PS) MOHCDGEC, Deputy PS Health-PORALG, PS-MOH Zanzibar have planned for a joint visit from 18-20 June 2019 to Uturo, Mbeya to learn the Uturo CHW model. Presentations on other models will also be made. They invited DPs to join the field visit.
- **PORALG meeting with implementing partners:** has been rescheduled to 21st June 2019 in Dodoma. PORALG will discuss with NGOs and DPs on their vision on primary health care particularly mobile specialized services. Revolving fund is suggested to reduce overcrowding at higher-level facilities and address HRH shortage. They encourage partners to attend in person. DPs need to confirm their participation.
- **Health Basket Fund:** Permanent Secretary Treasury (PST) has requested for additional information from the districts on HBF expenditure to facilitate release of the outstanding balance. The PS-MOHCDGEC has made follow-ups on the release of the basket funds. It seems the PST has endorsed the payment a month ago but the funds have not been disbursed. PS MoHCDGEC suggests the Ministry, PORALG and DPs have a meeting/roundtable to resolve the issue. Consultants for HBF Mid Term Review have been contracted, Inception report is under development. DPG Main will have a meeting with Treasury next week, this matter can also be brought to their attention and raised during the meeting with the Treasury.
- **SWAp TWGs:** Co-Chairs have been appointed and Accountability Framework has been shared. TWGs have been asked to meet to share reports from the 2018/2019 year and develop Plans of Action for 2019/2020. It has been noted that the TWGs meetings do not take place as planned, but appointing chairs and sharing the accountability framework is intended to help address this
- **Global Fund replenishment:** it will happen this year where Tanzania would like to make small contribution. There will be a pre-event by French Embassy. Tanzania will be both a contributor and a recipient of GF.

Updates on Mid-Term Review (MTR) – HSSP IV and One Plan II: Gender study and Analytical Review data collection started in March 2019 through field visits, where 8 regions have been covered. Validation workshop will take place from 21 -25 June 2019. The validation



workshop for all teams will be held from 26 -27 June 2019. The MTR is currently on track. The draft Main report is expected to be completed by 14th July 2019. \$700,000 has been secured for the MTR. Unspent funds could be used to bring in RMOs and DMOs during dissemination of MTR report.

5. Technical Working Groups/Thematic Areas Updates

TWG meetings: it is expected that several meetings will be conducted as the TWGs have been requested to prepare 2018/19 Annual reports and Plans of action for 2019/20 before July 1st, 2019.

GAVI: the government has reviewed its budget on the five-year plan and resubmitted. The Audit query has not yet been finalized.

DPG Nutrition: Embassy of Ireland has been elected as the new Chair of the DPG Nutrition. National Multi-sectoral Nutrition Action Plan (NMNAP) Mid-Term Review is on-going, the team is currently in the field visit. There was a concern on the shortage of pediatric ART where the meeting agreed that the DPG H Troika will consult with the chairs of DPG Nutrition and DPG AIDS so that this issue can be brought in the next consultative meeting with PS-MOHCDGEC. It was also advised that members can decide on the presentations to be made at the DPG Main like HSSP IV MTR outcome.

Disease updates:

Ebola: it has now crossed the border to Uganda. A case has been detected yesterday 11th June 2019. Transmission in DRC is still active in 13 health zones. Last week from 29th May to 6th June 2019, Tanzania conducted readiness assessment in 6 regions: Kigoma, Rukwa, Katavi, Mbeya, Songwe and Kagera. The findings showed that the preparedness in the regions is low. Coordination takes place at the national level but it is a challenge at lower level. National Task Force meeting will take place on 14th June 2019.

Cholera: there is still a sustained transmission. On the **dengue fever:** 300 cases were reported last week in Dar es Salaam, Pwani, Morogoro and Tanga. There is a challenge on logistical issues- no fogging machine and acteric 500 EC. More information on the diseases' updates can be found at the DPG H website:

http://www.tzdpdg.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2019/3_2_Final_EVD_PREP_OUTBREAK_RESPONSE_UPDATE_DPG_.pdf

Discussion: Who supports Uganda program such that they have good surveillance system, and what lessons can be learnt in Tanzania? Uganda has been attacked 5 times in less than 5 years, so the MOH and citizens appreciate that this is a big threat. The system has been hardened by the previous outbreaks like Ebola and Marburg. There is also political commitment and daily reports from regions and districts on screening and alerts.

6. The future of Results Based Financing (RBF)



The World Bank provided updates on the results based financing project for strengthening primary health care which has been rolled out in 8 regions of the 9 planned regions. About 1724 facilities benefitted from the project. The RBF funded activities are fully embedded in CCHPs and facility plans, and reported in FFARS. This was to ensure that the project ride on the existing systems. When the facilities were assessed through the Star rating exercise, the RBF funds were used to improve the facilities. The rolling out of the RBF was not done in all regions at once, other regions joined later. The focus on those 8 regions was due to poor results in achieving MDGs especially on RMNCH. Currently, there is an on-going evaluation and documentation of RBF which will contribute to government's reflections and decision regarding the future of RBF. More information is on the DPG H website:

http://www.tzdpq.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2019/RBF_at_DPG_H_June_12_2019.pdf

Discussion:

With regard to the additional funding for the current RBF project, it was informed that there are on-going discussions whether to have new project or provide additional funding.

7. Updates on key events/Upcoming events

Brown bag meeting on Universal Health Coverage: WHO has planned for the Brown bag meeting to be held towards end of June 2019. Invitations will be sent to partners.

8. AOB

Farewell event to the current DPG H outgoing and present Chairs to take place in September 2019.

9. Next meeting:

Next DPG H meeting will be held on **Wednesday, 7th August 2019 at UNICEF.**