



Minutes, DPG Health meeting Wednesday, 5th February 2020, UNICEF

Present

1. Laurel Fain	USAID	DPG H Acting Chair
2. Meaghan Byers	Canada	DPG H Outgoing Chair
3. Leticia Rweyemamu	WHO	DPG H Secretariat
4. Dr. Grace Saguti	WHO	Member
5. Kande-Bure Kamara	WHO	Member
6. Dr. Nemes Iriya	WHO	Member
7. Fredrick Magnusson	UNICEF	Member
8. Peter Okwero	World Bank	Member
9. Gradeline Minja	Danish Embassy	Member
10. Nynne Halkjcer	Danish Embassy	Member
11. Flavia Manyanga	JICA	Member
12. Britt Kjolas	Norwegian Embassy	Member
13. Otilia Scutelnicuic	UNAIDS	Member
14. Milly Kayongo	USAID	Member
15. Nelson Msuya	PWC (Global Fund)	Member
16. Sabine Flessenkaemper	GIZ	Member
17. Christian Pfleiderer	P4H	Member
18. Kira Thomas	KOICA	Member
19. Thomas Teuscher	Swiss Embassy	Member
20. Dr. Dan Brun Petersen	MOHC DGEC	Guest
21. Mary Ramesh	IHI	Guest
22. Donat Shamba	IHI	Guest

AGENDA

1. Welcome and Introduction of members
2. Presentation on Safe Delivery App (SDA) in Tanzania:
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: 4th March 2020

ACTION POINTS:

- **Funding for HSSP V development:** DPs respond to the DPG H Secretariat on their pledges and any comments (if any) on the proposed budget.
- **Digital Information system:** email to be sent to interested DPs to prepare talking points and policy messages on existing hospital management information systems.



1. Welcome and Introduction of members

The DPG Health Incoming Chair welcomed all members to the meeting and informed members that the Chair is on duty travel. It was then followed by round of introductions.

2. Presentation:

Safe Delivery App (SDA) in Tanzania: Empowering skilled birth attendants to provide a safer birth for mothers and new-borns everywhere

The presentation was made by Ifakara Health Institute (IHI) on the safe delivery application (SDA) for skilled birth attendants which has been piloted in Mpwapwa district, Dodoma region in Tanzania. The app was tested in Ethiopia, DRC Congo, Benin, Guinea and Philippines. It was developed to address RMNH challenges including quality of care. The aim is to strengthen local skills in management of obstetric and neo-natal emergencies. It is an app with animated videos for low literacy settings. No internet is required for use and it is available for free. No need to take health care workers out of their duty stations to train them on the app, what is needed is coaching. The app is also used to test the knowledge of the health care worker.

In Tanzania, the app was tested in one district of Mpwapwa where 56 health workers in 54 health facilities were introduced to the app. Out of 54 health facilities visited, 12 are managed by medical attendants. The language used in the app was English hence, most of the health care workers were struggling with the language. For example, most of the medical attendants are standard 7 leavers. Generally, most of the health care workers appreciated the app acknowledging that it is useful for both learning and as job aid. Currently, there are 889 downloads and 257 app active users. The app content has been translated into Swahili language, waiting for launching. More information is available on the DPG H website at:

http://www.tzdpq.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2020/Safe_Delivery_App_PPT_IHI_MF_5_Feb_2020.pdf

Discussion

The MoHCDGEC and Ifakara have recommended this app for roll out nation-wide and the MOHCDGEC has agreed to roll it out to all cadres at all levels of health facilities, but this needs to be coordinated as there are many apps being developed for similar use (for example, BMF is distributing computers with learning materials to health facilities, another app has been developed for CHWs to use with mothers etc). Further, not all staff at the lower level facilities have the skills to download and start using the app, so some support is needed. ToT will be conducted to Regional and District health officials to roll it out to their respective health facilities. The app was developed by Maternity Foundation, a Danish Organization which gave access to other users. The app can be updated in case of a new guideline. IHI works with RCH section of MOHCDGEC on this app. However, there is a challenge on coordination for eHealth initiatives of which the discussions are ongoing with the Ministry on how eHealth unit can be strengthened to manage the existing apps.



MAIN MEETING

3. Adoption of the Minutes, Agenda and Matters Arising

The Minutes of the January 2020 meeting were approved with correction on upcoming events on page 5. Agenda for this meeting was adopted.

Matters arising:

Maternal and newborn mortality study: Technical Working Group (TWG) has been formed and consultation has been done with high level officials. UN Interagency for maternal mortality group will arrive from 17 – 21 February 2020 to work on the proposal developed by the TWG. The main meetings will take place in Dar es Salaam. The team will meet with partners and departments and have a working session with the with PSTWG. They will also visit two facilities to see how data is collected. The study itself currently does not have a specific timeline – this will be developed during the upcoming visit.

4. Updates on SWAp events

Monthly consultative meeting with PS-MOHCDGEC: it took place in January 2020 where several issues were discussed as per below:

- **DHS:** MOHCDGEC will communicate their funding commitment through a formal letter.
- **HSSP V, HRH, One Plan III and NCD strategic plans development:** MOHCDGEC will provide an update on their funding commitment. Health Basket Fund (HBF) partners are in discussion to see whether they can fund a portion of the HSSP V development. ToRs for different TWGs are being finalized. Task Force meeting is scheduled for the end of February 2020. Costing and M&E exercises are expected in March-April 2020.
- **Resource tracking for the health sector:** CHAI will set a meeting with Ministry of Finance. More updates will be provided.
- **Community Health Workers:** Government and partners will review the draft guideline on community-based health program from 6-7 February 2020 in Dar es Salaam. The launching of the guideline is expected in February 26th, 2020 by Honourable Minister.
- **MOHCDGEC new building construction:** the current estimated cost for the construction of the new building of the Ministry at Mtumba Government city is TZS 32bn. The cost will be reduced to a reasonable amount (10-15bn) and shared with DPs for support.
- **Health Financing Strategy:** the Government wants to enrol more people on NHIF and so are not pushing iCHF any longer. However, PO-RALG is promoting and rolling out iCHF. The per person NHIF fee starts with TZS 192,000, this limits progress in achieving high health insurance coverage. As for the Single National Health Insurance it is unlikely that it will be approved soon due to upcoming national elections.



Digital Information system: need clarity on the application of the existing hospital management information systems. DPG H could come with talking points for Permanent Secretary and Policy messages. Email will be sent to interested DPs to meet and draft the talking points.

Funding requests for HSSP V development: Government will tentatively contribute USD 50,000. USAID and WHO have been approached separately for costing and M&E support respectively. There will be one International consultant to lead the development process and one national consultant per each plan. The plan is to combine the costing exercise for all strategic plans (HSSP V, HRH, NCD, One Plan III). HBF partners had discussions with PORALG to see whether HBF funds for this year can be reallocated for development of HSSP V, with funding specifically allocated to gender and climate change technical support (not to per diems and honorariums as this is against most DP policies). DPs should respond to the DPG H Secretariat on their pledges and any comments they may have on the proposed budget. Email will be resent to all DPs.

DHS 2020/21: funding commitment from DPs is increasing. About \$2m Canadian dollar (CAD) funding is being requested but is not yet confirmed; DFID is expected to contribute an additional £750k which is in addition to £500k that was already committed. A reminder will be sent to MOHCDGEC on their funding commitment. The CIF team will arrive in February 2020 for lab capacity assessment on micronutrient study component.

5. Technical Working Groups/Thematic Areas Updates

Health Financing TWG: the January meeting was postponed. New date will be communicated.

Health Basket Fund (HBF): HBF Mid Term Review (MTR) was presented and approved at the Performance Committee. It will also be presented in Basket Fund Committee in March 2020 for implementation.

Global Fund (GF): GF Country Team visited the country last week to announce the allocation letter and participated in COP 2020. They also met with the Ministries of Foreign Affairs, Finance and Planning as well as Health, Community Development, Gender, Elderly and Children. With regards to CSOs/NSAs that are GF implementers, discussions are ongoing on pending VAT refund and the Ministry of Finance and Planning will explore which mechanism to be utilized to refund the VAT paid following the July 2018 amendments to the VAT legislation. As is, it will be difficult to amend the current legislation. The team also met with MOHCDGEC and discussed on the fund absorption for the grant cycle ending December 2020, the upcoming LLINs mass campaign and the status of the logistics contractor, whereby most likely MSD will be used for this exercise due to its experience working with 3rd party to ensure they reach up to household level. It was noted that Tanzania representation at GF Board needs to be revitalized. GF Board Representative for the region (Mr Donald Kaberega) will be consulted and linked to the MOFP and MOHCDGEC to see how Tanzania team can fully participate in the GF global agenda. Malaria Strategic plan is getting global attention, and hence its key intervention needs preserved and to be well reflected in upcoming GF grant proposal for the period 2021 to 2023.



DPG H representation in GF Concept Note development: Laurel Fain (USAID and DPG H Incoming Chair) has volunteered to represent DPG H in the concept note development.

DPG AIDS: Harmonization meeting of 2 Plans i.e. GF Funding allocation 2020-2022 and PEPFAR COP 2020 took place last week with MOHCDGEC which agreed to align the Plans to ensure no duplication. DPG AIDS will be represented by 2 people from PEPFAR and UNAIDS in GF Concept note development.

Disease outbreaks: No new outbreaks reported in the country for the past 8 weeks. With regards to corona virus outbreak in China, things are not yet clear epidemiologically on the cause of the disease. As of 4th February, 20630 cases have been confirmed of which 3241 are new. Overall risk is very high globally, cases are increasing every day. Human to human cases have been observed but not sustained. Countries are encouraged to detect, isolate and care for patients to prevent disease transmission. Tanzania has been categorized as priority 1 due to high interactions in travel, trade, etc. With regards to preparedness in the country, MOHCDGEC is developing Contingency plan, Point of Entry screening is on-going, isolation and treatment centres have been identified: Dar es Salaam- Kigamboni and Temeke; Kilimanjaro and Mwanza. High risks regions have also been identified including: Dar es Salaam, Kilimanjaro, Arusha, Kigoma, Mwanza, Mbeya, Dodoma, Tanga, Geita and Mara. For Ebola virus disease (EVD), no case has been reported outside DRC. Cases are dropping down daily. More information is available on the DPG H website: http://www.tzdpdg.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2020/Disease_outbreak_updates-WHO_05022020_Presentation_final.pdf

Discussion: which animals are they referred to with regards to corona virus? It is not yet known. The question is that there are so many cases in China but only 130 are outside China and human to human cases are not sustained.

6. **Updates on key events/Upcoming events**

- **Community Health Based Program (CBHP):** will be launched on 26th February 2020.
- **GF Concept Note development:** Country Team will arrive at the end of February 2020.

7. **AOB**

There was no other business.

8. **Next meeting:**

Next meeting on **Wednesday, 4th March 2020 at 12pm.**