



SUMMARY OF ANALYSIS OF COUNCIL COMPREHENSIVE HEALTH PLANS 2011/2012

**PRESENTED AT BFC
28TH JUNE, 2011**

Dr. Anna Nswilla
Coord. District Health Services

MOHSW

**Maganga MWF
Coordinator, Health
Basket Fund, PMORALG**

Presentation Outline



- Background
- Objectives of presentation
- Objectives of the analysis of the plans (areas to be focused)
- Status of summary and analysis of the CCHP 2011/2012
- Recommendations

BACKGROUND



- Each year, LGAs are provided with Budget ceilings for delivery of health services
- Based on the ceilings LGAs prepares the annual comprehensive health plans addressing health sector priorities.
- Priority areas are linked with HSSPIII , MKUKUTA , MDGs and other health sectors strategic programs

BACKGROUND



- The summarized consolidated report will comprise and elaborate summary of CCHP and selected Health performance indicators for a period of 2009- 2010.
- The analysed report of the CCH Plans will be ready by September each year in order to be discussed at the JAHSR

OBJECTIVES



- ❑ To share the proposal on areas to be focused on summary and analysis of CCHPs 2011/2012 performance trend

The analysis of cchp 2011/2012 focus



- Performance using HMIS performance information 2010
- It was discussed in the TWG that the analysis of the CCH Plans 2011/2012 will focus on:
- Whether the Council health plans show improvement on compliance to the guidelines
- Whether the Council health plans respect the yearly priorities defined at the time of communicating the ceiling and allocated to identified priorities areas.

The analysis of cchp 2011/2012 focus



- Whether the plans are comprehensive and have been produced involving key stakeholders.
- What are the main challenges => and what measures need to be taken to address them up?

Main Objective of the analysis



- To analyse the Comprehensive Council Health Plans (CCHPs) for the financial year 2011/2012
- To analyse Quarterly January – March 2011 progress reports.
- Recommend them to the Basket Financing Committee for approval and funding.

Specific Objectives of the analysis



- To analyse and consolidate annual CCHPs from 132 Councils to see if:-
 - ✓ The planned activities are addressing the national health priorities and also addresses the councils identified health problems as per National Health Policy 2007 and HSSP III 2009- 2015.
 - ✓ Are in line with the available National Health policy, MMAM 2007-2017, Human resources for health Strategic Plan, One Plan, Disease Specific programmes (ATM, EPI, NCD MNCH- One plan etc.) and other related documents which are directly contributing to the improvement of quality health care services in the country.
 - ✓ All 11 priority areas addressing the Essential Health Packages have been included in the CCHP with reasonable budget
 - ✓ Planned activities /interventions/ targets address priority health problems of the Councils.

Specific Objectives



- To analyse and consolidate the budget allocated from various funding sources against priority areas and interventions.
- To consolidate the information looking the progress for three year trend in achieving MDGs 4, 5 and 6 using routine data reported in the CCHP 2011/2012 comparing performance with previous year(s) performance in order to see whether there is progress – trend (using MDGs data 2010 in the CCHPs).

Specific Objectives



- To compare the last year's performance of the CCHPs including those plans which were not recommended against the status of this year and find out if reasons contributing to failure this year are the same as last year, are quite different. Then take immediate actions to address those problems and propose measures supporting them.
- To analyse the status of human resources for health per cadre in the district in terms of number, distribution, posted, retained, trend including number of vacant positions / acting positions.

Specific Objectives



- To analyse the status of health facilities in order to revitalize progress in implementation of MMAM.
- To summarize status of essential medical equipment and apparatus by level in each LGA to determine the shortage level and quality of basic equipment at all levels of care.

Specific Objectives



- To establish/identify RHMTs strengths and weaknesses on reviewing the CCHP and producing the consolidated report. Identify also weak Councils that need Technical Assistance from the centre to improve their plans before being recommended for funding.
- To analyse and consolidate third quarter (January – March 2011) progress reports from 132 Councils to see if they have addressed the planned activities and comply with the laid down financial and technical criterion and determine performance achievement linked to planned activities against actual implementation

The other areas include



- To consolidate how many of the plans are made with Planrep
- Analysis of budget allocated for Delivery kits, all 11 available priority areas focus on specific area such as budget allocated to EPI, Delivery kits, malaria etc.
- Data extraction on status of Water availability and sanitary latrines
- Data extraction on Health Facilities Status/ availability – compare with last year.
- Evidence of functioning CHSB / HFGCs (money budgeted for the meetings).
- Essential drugs / equipment shortage (and reasons evoked)

Status Summary of the CCHP 2011/2012



- 19 RS/RHMTs have submitted the CCHP 2011/2012 from the LGAs. Only Arusha and Ruvuma regions have not submitted the CCHPs to date.
- 20 RS/RHMTs have submitted the LGAs CCHP 3rd Quarter (January – March 2011) progress report. Ruvuma region not submitted
- The task of data extraction, assessment, analysis and report writing is in the process it will be done starting July 2011.

Status Summary of the CCHP 2011/20



- This work of data analysis and report writing will be done by all Assistant Directors from PMO RALG and MOHSW involve zonal Health Resource centres and head of sections for the purpose of determining the LGAs' strengths and weakness in addressing health problems that will help them during supervision.

Status Summary of the CCHP 2011/2012



- Also easing them in carrying out effective supervision and follow-ups in the Councils.
- Due to this process requirement it has rendered production of the draft summary analysis of CCHP 2011/2012 report not done on time as planned.
- According to the agreement the draft final report will be discussed in the Districts & Regional Technical Working Group and finally presented and shared at JAHSR in September 2011.

Recommendations



- Recommendation is made for approval and funding of 132 LGAs CCHP 2011-2012 plans.
- The data extraction and analysis of the CCHP 2011/2012 will starting early July by a team of members including ADs from MOHSW and PMORALG for the purpose of owning the process and seeing how feasible the planned interventions/ activities have been put forward by the LGAs in CCHP tools.

Recommendations



- Capacity building to CHMTs/CHPTs on revised planning and reporting tool (PlanRep and Revised CCHP guideline) developing quality health plans and progress reports.
- Capacity building to Central level and RHMTs on revised planning and reporting tool (PlanRep and Revised CCHP guideline) for technical supervision and quality assurance.
- Capacity building for ZRCs for institutionalizing the planning activity in Zonal Resource Centres Continuity capacity building of the CHMT/CHPTs.

MWISHO



ASANTENI KWA KUNISIKILIZA