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DEVELOPING A HEALTH SERVICES M&E IMPLEMENTATION PLAN IN TANZANIA

BACKGROUND

The Government of Tanzania aims to improve the performance of the health systems as advocated in the Tanzania Development Vision 2025.¹ To implement Vision 2025, the Ministry of Health, Community Development, Gender, Elderly and Children (MOHCDGEC), with the support of development partners, has been developing a number of policies, strategic frameworks, and guidelines to improve health system performance. These policies include the medium-term Health Sector Strategic Plans (HSSPs), and strategies such as the Monitoring and Evaluation Strengthening Initiatives (MESI). The MESI focuses on the need to strengthen implementation capacity in general and specifically to support initiatives for data quality, analyses, dissemination, and use. It also focuses on digitizing facility and community-based data capture, improving surveillance and Civil Registration and Vital Statistics, and coordinating health surveys.

The Tanzania Technical Support Services Project (TSSP), led by Management Sciences for Health and funded by PEPFAR through the Centers for Disease Control and Prevention (CDC), supports and strengthens Tanzania's Ministry of Health, Community Development, Gender, Elderly and Children (MOHCDGEC) and key public health institutions to achieve HIV epidemic control and sustain HIV-related health systems and services. It provides targeted technical assistance in four main areas: client-level data systems, monitoring and evaluation (M&E), human resources for health (HRH), and quality assurance and quality improvement (QA/QI).

Activities under MESI I (2009–2015): Establishing and training leaders

- Launch of the Monitoring and Evaluation (M&E) Technical Working Group (TWG) and the consortium of partners
- Introduction of version three of the Health Management Information System (HMIS) recording and reporting books
- Introduction of DHIS2 electronic software
- Review of health indicators and established HSSP III (2009–2015) performance monitoring indicators
- Development of Health Basket Fund (HBF) indicators
- Training of more than 45,000 health staff and four members from each of the 184 Council Health Management Teams and two members from each of the 26 Regional Health Management Teams in mainland Tanzania on the new HMIS data collection and reporting tools

¹ Improvement of health systems is a key driver to attain high quality livelihood, which is among the Vision 2025 targets

These efforts resulted in improved routine health facility monthly reporting, from 0% monthly before the introduction of DHIS2 in 2012 to 98% in 2019.² Improvement in data quality is a direct reflection of proper planning and evidence-based allocation of resources. In addition, the government conducted the Demographic Household Survey, Tanzania HIV and Malaria Indicator Survey, and Tanzania Service Provision Assessment survey.

Activities under MESI II: 2015–2020: Data quality and integration

- Introduction of the Data Quality Assessment (DQA). Baseline data showed that 45% of district reports had good DQA results in 2015. The initiative contributed to the increase in quality of district reports from 64% in 2016 to 82% in 2018.³ This was done through a DQA of sampled district councils and health facilities for selected indicators.
- Vertical health programs (including HIV/AIDS and tuberculosis), Integrated Disease Surveillance and Response (IDSR), Human Resources for Health (HRH), Prevention of Mother-to-Child Transmission of HIV/AIDS (PMTCT) and Master Facility List (MFL) were integrated in DHIS2 using interoperability features; developing score cards and data dissemination tools through the web portal; using the crosscutting health dashboard; introducing annual district and regional health profiles and health facility profiles; and linking DHIS2 HIV data to PEPFAR. The HIV databases and HBF stakeholders recognized DHIS2 data as the platform for annual data verification for the HBF and results-based financing under the umbrella of the MESI.

The MESI's substantial achievements have led to a transition from the M&E strengthening initiatives (MESI I and II) to the current Monitoring and Evaluation Strategic Framework (MESF) 2020–2025. TSSP supported the development of the MESF 2020–2025. The project also continues to support the ongoing activities to make sure the MOHCDGEC has the costed MESF implementation plan, MESF indicator and activity tracking tool, and quarterly reporting template for reporting of MESF activities by implementing partners.

MESF 2020-2025: Strengthening data quality, analysis, and use

The MOHCDGEC developed the MESF 2020–2025 with financial support from the Global Fund and the CDC through MSH. The new framework aims to introduce and roll out electronic medical records (EMR); transform HMIS tools into electronic data capture; upgrade DHIS2 to accept patient-level data from AFYA Care, the Government of Tanzania Hospital Management Information System (GOT-

HOMIS), and other EMR data systems in Tanzania for indicator generation; migrate the data quality management system from paper-based to electronic; and develop an electronic data dissemination and communication strategy.

The MESF 2020–2025 takes into consideration new M&E developments that have occurred since 2015. These include the development of the Digital Health Investment Roadmap (DHIR) in 2017, adoption and signing of the Health Data Collaborative in November 2017, and adoption of the national health data portal in 2018. The MESF strategy focuses on the need to strengthen implementation capacity and to support initiatives for data quality, analysis, dissemination, and use. It also focuses on digitizing health facility and community-based data capture, improving surveillance and Civil Registration and Vital Statistics, and coordinating surveys. It is the Ministry's expectation that stakeholders at all levels will use this strategy as a guide for achieving individual and collective M&E objectives. This strategy succeeds the MESI II (2015–2020) and places milestones through 2025.

PARTNERSHIPS AND COMMITMENTS

MESF 2020–2025 will support stakeholders in implementing M&E activities both directly and indirectly. Partners include:

- Government Ministries, Departments, and Agencies (MDAs), such as the MOHCDGEC, the policy maker, and President's Office Regional Administration and Local Government (PORALG), the implementer. Other MDAs expected to use the MESF include the National Bureau of Statistics (NBS), Registration Insolvency and Trusteeship Agency (RITA), and Ministry of Finance.
- Development and implementing partners
- Faith-based organizations
- Nongovernmental organizations
- Private for-profit facilities

SUPPORTING AN MESF IMPLEMENTATION PLAN

Activities included the following:

Developing a concept note

The MOHCDGEC, in collaboration with MSH and with support from the CDC, developed a concept note and identified key stakeholders required for the development of the implementation plan. The MOHCDGEC approved the concept note in June 2020.

Reviewing documents and systems

The team reviewed national initiatives and priorities to make sure they were included in the MESF planning. Key documents included MESI II, the Tanzania DHIR 2017–2023, HSSP IV 2015–2020, e-Health Strategy 2019–2024,

² HMIS used to collect reports annually from health facilities

³ Reports on Independent Verification of Health Service Results, 2015–2019

M&E strategies for disease-specific programs, the Tanzania action plan for health security 2017–2021, MESF 2020–2025, and Tanzania Development Vision 2025.

Health information systems reviewed included the Health Facility Registry, the Human Resources for Health Information System, and the electronic Logistics Management Information System.

Conducting a situational analysis

This step involves extensive consultations with health sector leaders, practitioners, and stakeholders in M&E, such as the NBS, PORALG, and RITA. The team worked with the National AIDS Control Program; National Malaria Control Program; National Tuberculosis and Leprosy Program; Reproductive, Maternal, New-born, Child, and Adolescent Health; and surveillance systems to harmonize indicators and data collection tools. The exercise will also map existing practices, gaps, and opportunities that can potentially affect and enhance the implementation of the MESF 2020–2025.

Drafting a preliminary implementation plan

Based on results of the desk review and consultation with key organizations and institutions, the consultant should develop a preliminary MESF 2020–2025 implementation plan with a list of strategic objectives and activities, indicators, goals, outcomes, outputs, timelines, and proposed budget.

Producing a quarterly reporting template

The template should be developed to provide quarterly progress reports in relation to the milestones set in the MESF 2020–2025. The template, through a set of indicators and targets, should contribute to an understanding of the progress made, difficulties and challenges faced, and future activities.

Engaging the health sector M&E/ICT technical working group and key stakeholders

The MOHCDGEC will engage the M&E/Information and Communications Technology (ICT) TWG and key stakeholders, including funding and implementing partners, in a four-day workshop. This will involve extensive review of the proposed implementation plan, including objective, goals, targets, baseline values, indicators, implementers, and proposed budget. The workshop will also examine the consistencies and inconsistencies between the MESF 2020–2025 implementation plan and tracking tool, which will facilitate monitoring.

Finalizing the implementation plan

The MOHCDGEC will develop and review the draft implementation plan and its tracking tool based on the comments of the health sector M&E/ICT TWG and key stakeholders. The team then will update the plan and tool and present recommended changes to the M&E Steering Committee, which draws membership from the

Table 1: Activities, processes, and timeline for developing the MESF 2020–2025 implementation plan

Activity	Process	Responsible	Date(s)	Deliverable
Concept note	Desk review, consultation meetings, and a two-day workshop with MOHCDGEC	MOHCDGEC/ Partners	June 12	Approved concept note
Document/systems review	Desk review and consultation meetings	MOHCDGEC/ Partners	July (five days)	Desk review done and literature analysis conducted
Stakeholder engagement and situational analysis	Mapping M&E practices, gaps, and opportunities	MOHCDGEC/ Partners	July (10 days)	M&E practices, gaps, and opportunities identified and documented; priorities linked with MESF 2020–2025
Develop draft implementation plan	Desk review, consultation meetings, and workshop	MOHCDGEC/ Partners	July/August (10 days)	Draft implementation plan developed
Engagement of the health sector M&E/ICT TWG and key stakeholders	Validation workshop	MOHCDGEC/ Partners	TBD	Draft implementation plan and a tracking tool shared and presented
Finalization of implementation plan	Technical meeting	Health sector M&E/ ICT TWG and key stakeholders, including development partners	TBD	Inputs from TWG incorporated into the draft MESF 2020–2025 implementation plan Final MESF 2020–2025 implementation plan and a tracking tool developed and shared for approval
Approval and launch of the implementation plan	Consultation and follow-up meetings with senior MOHCDGEC management team	Health sector M&E/ ICT TWG	TBD	MESF 2020–2025 implementation plan approved and launched by the MOHCDGEC
Roll out of the approved MESF plan and stakeholder training	Design and printing of hard copies	MOHCDGEC/ Partners	TBD	300 copies of the MESF 2020–2025 implementation plan for the 26 regions and 184 councils in mainland Tanzania as well as sector ministries and development partners printed and disseminated

MOHCDGEC, the Permanent Secretary, the Chief Medical Officer, the Director of Policy and Planning, the head of the M&E section, and representatives from PORALG and major development partners. The M&E Steering Committee will review the proposed implementation plan and integrate final recommendations. A final draft will be forwarded to the Permanent Secretary, MOHCDGEC, for approval, signing, and launching of the MESF 2020–2025 implementation plan. This event will be organized by the MOHCDGEC under the Directorate of Policy and Planning. It will introduce key stakeholders to the MESF 2020–2025 and its tracking and reporting tools prior to roll out.

Monitoring implementation

Rolling out the plan will involve dissemination of e-copies as well as printing 300 hard copies for the 26 regions and 184 councils in mainland Tanzania as well as sector ministries and development partners. It will be followed by a training for stakeholders on tracking and reporting tools and requirements, which the MOHCDGEC will coordinate. The MOHCDGEC team will also conduct regular data verification and supportive supervision throughout MESF implementation.

NEXT STEPS

FINALIZING THE PLAN

The team will finalize the implementation plan, including methodology to systematically track implementation and outputs and measure the effectiveness of interventions. The final plan will provide a comprehensive baseline of what has to be achieved by the project, how it is to be achieved, who will be involved, how it will be reported and measured, and how information will be communicated.

The implementation plan should be used as a reference for clarifying MESF activities to ensure that the strategic framework is managed consistently and in line with policy and procedures. It is a living document that will evolve over the life of the project and will be updated as needed.

MOBILIZING RESOURCES

The MOHCDGEC understands that it is essential to diversify funding sources and gradually increase domestic investment in national guidelines and strategies to sustain achievements and progress toward the Tanzania Development Vision 2025. Therefore, the Ministry aims to mobilize funds for the development of the MESF 2020–2025 implementation plan and management of MESF 2020–2025. This approach will ensure that the Ministry secures funds to develop the plan, support orientation of partners who will implement MESF 2020–2025, and uphold its core functions.



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