

Year 3 Report (2014 activities)

Country: MOZAMBIQUE

EU-Lux-WHO UHC Partnership

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Prepared by: WHO CO

Reporting Period: January-December 2014

Main activities as planned in the Road Map

SO I

Activity 1 (ER3): Undertake a HF situation analysis and summarize core issues (incl. devolution, PBF, medical aid scheme for civil servants), and also explore various options (pros and cons) of user charge increases, SHI, CBHI, PHI regulation, oil revenues for health

Activity 2 (ER3): Undertake a study of "innovative" financing mechanisms

Activity 3 (ER3): Undertake a study of Benefit Package for Universal Health Coverage

Activity 3(ER3): Organize a series of consultation workshops for dissemination of NHA & Study findings and explore various HF options that strengthen efficiency and equity

SO II

Activity 1 (ER3): Knowledge exchange/training for ministerial staff (MoH, MoF, MoLG, Mo Labour, Planning) and other representatives

Activity 2 (ER3): Capacity strengthening of steering committee members

Activity 3 (ER3, 4): Strengthen HF policy analysis capacity within the MOH/Directorate Planning and Cooperation (TA in MOH Directorate for Planning)

Activity 4 (ER4): Provide a HF course module at university

Main activities achieved and progress made

This year activities focused on consolidation of health financing working group road map implementation, capacity building and advocacy with key government sectors relevant to HFS development (including development partners). On this, the assessment mission by the P4H network was an excellent opportunity to present the operational framework to support the process.

On capacity building the first induction workshop for the Working group was held in April. This was followed by attendance of 2 senior management team members of WHO Advanced Course on HFS in Tunisia. The training was timing and added value to Deputy Director skills to lead the process in a much coherent and comprehensive manner.

On strengthening the capacity of the Unit in charge of HFS, the recruitment of a national economist with WHO funding to support the team was completed and the staff will officially January the 5th. The national economist will also act as counterpart to the international experts to be recruited under the P4H network following the assessment Mission. The international team is expected to start in February 2015.

Data collection and compilation of national health accounts using 2012 information was completed a draft report produced in collaboration with USAID. A one day meeting was organized for initial discussion on the findings. In collaboration with Statistics Bureau an estimation of Household expenditure for NHA was completed.

Important to mention that the political environment affected full delivery of the following expected results:

SOI

Activity 1 (ER3): Undertake a HF situation analysis and summarize core issues (incl. devolution, PBF, medical aid scheme for civil servants), and also explore various options (pros and cons) of user charge increases, SHI, CBHI, PHI regulation, oil revenues for health

Activity 3 (ER3): Undertake a study of Benefit Package for Universal Health Coverage

Activity 1 (ER3): Undertake a HF situation analysis and summarize core issues (incl. devolution, PBF, medical aid scheme for civil servants), and also explore various options (pros and cons) of user charge increases, SHI, CBHI, PHI regulation, oil revenues for health

SOII

Activity 4 (ER4): Provide a HF course module at university

Roadmap and Timeline for 2015

Steps for policy Dialogue Activities	Strategic Objective	Expected Result	Inputs	Deliverable	Indicators	Funding Source	Expenditures USD	Budget estimate USD	TASK	Timeline
							2014	2015		
Undertake a HF situation analysis and summarize core issues (incl. devolution, PBF, medical aid scheme for civil servants), and also explore various options (pros and cons) of user charge increases, SHI, CBHI, PHI regulation, oil revenues for health	SO1	ER3	consultant study	HF situation summary, with 4-5 "technical briefs" on various subjects (SHI, CBHI, user charge increases, innovative financing)	HF summary first chapter in HFS document	EU		15000	42.1	May
Undertake a study of "innovative" financing mechanisms	SO1	ER3, ER5	APW	Options for additional domestic resource mobilisation are explored and budget estimates are available as a basis for planning of service extension and other UHC aspects.	Budget space for health increased	EU	33000	36850	42.1	February
Undertake a study of Benefit Package for Universal Health Coverage	SO1	ER3	APW		Benefit package established			45000	42.1	June
Organize a series of consultation workshops for dissemination of NHA & Study findings and explore various HF options that strengthen efficiency and equity	SO1	ER3	organization of workshops		Comprehensive and evidence based NHFS		10000	20000	46.2 ¹⁰⁴	

Other studies/workshop activities to support implementation/production of manuals	SO1	ER4						25000	42.2	July-December 2015
Information provision and sensitization of the public	SO1	ER3, ER4			Inclusive NHFS					
Visibility activities: organize media/press coverage, webpage	SO1	ER3	WCO communication officer	The EU-WHO programme is well-known to key stakeholders and core activities are featured in the media			20000	20000	46.1	Related to planned events
Develop talking points for MOH to be well prepare for dialogue with MOF	SO1	ER3	conceptual input	Talking points and key arguments available and used in MOF dialogue				5000		2015
Knowledge exchange/training for ministerial staff (MoH, MoF, MoLG, Mo Labour, Planning) and other representatives	SO2	ER3	organization of series of workshops /consultations by WCO	increased understanding, awareness and interest in HF				40000	42.2	Jun-15
Capacity strengthening of steering committee members	SO2	ER3	Attendance to HF Courses and seminars/Study Tours	increased understanding, awareness and interest in HF		EU and FICA	8000	30000	42.2	Jan-15
Strengthen HF policy analysis capacity within the MOH/Directorate Planning and Cooperation (TA in MOH Directorate for Planning)	SO2	ER3, ER4	1 year National TA	TA to complement P4H experts team in strengthening the HF policy analysis capacity and drafts the HF strategy document	M&E framework updated and used for JAR		10000	45000	42.2	January to December
HF course module at university	SO2	ER4	APW with a Training Institution and local costs					40000	42.3	March -April 2015
							51000	301850	105	

Please explain any changes in circumstances or programme implementation challenges encountered affecting the original plan

1. Undertake a study of "innovative" financing mechanisms: Activity delayed due to GSM approval constraints during procurement. This was mainly related to GSM approval signatures at the time of reassignment of Country Representative for Ebola Emergency. Contract with selected Consortium is now signed and field work was rescheduled to February 2015.
2. Undertake a study of Benefit Package for Universal Health Coverage: Activity still pending final clearance from decision makers in the Ministry of Health.
3. Provide a HF course module at university. ToRs developed and Procurement to engage a training institution launched. Activity is scheduled for March 2015.

Proposed modifications to Programme Road Map resulting from changes above

For 2015 we will continue with the implementation of the agreed road map aiming at full delivery of all expected results under SOI and SOII.

Lessons learned

1. Policy dialogue is a process that requires continue advocacy and building of synergies among stakeholders under committed leadership. With the appointment of a deputy director and engagement of health partner coordinator the debate has been put into monthly coordination meeting which allows for timely reporting and constraints on the process addressed.
2. Back up support and interactions with AFRO and HQ have been critical to guide the ongoing HFS process with regards to sharing of evidence, comments of Terms of reference as well as on sharing experts profiles experts.

Visibility and communication

WHO Mozambique is increasingly focusing on visibility through country office website regular updates on news about events and progress in the health sector. A list of all posted news can be found via: <http://www.afro.who.int/en/mozambique/press-materials.html>

Furthermore, WHO Mozambique has produced, printed visibility materials for partners, donors and the office. This includes printed info folders about our programs and our mission in Mozambique, information posters with photos and achievements in the health sector, and post cards with health statistics. WHO is the Vice Focal Health Partner in the Sector Wide Approach Coordination. Health financing Task force has now being elevated into a SWAP group and reports at Health Partners Monthly meetings as well as at the Joint High level meeting between partners and Ministry of Health indicating the priority that HFS given and allowing for continuous guidance on policy issues relevant to HFS that goes beyond technical work and require other level of involvement.

Impact assessment

1. The EU_WHO program gave new impetus to WHO to continue convene by bringing the policy dialogue on Health Financing as top priority with partners and Government Institutions (Health, Planning, and Finance) and act a key/lead role in the HF task force, where it ensures information exchange and coordination.
2. Facilitation of the P4H appraisal mission was critical on bringing other partners with interest on Social Protection namely the Ministry of Labour, Ministry of Women and Social Affairs and ILO. It was also an opportunity to brief government sectors (Planning and Finance) on recent developments, such as Universal Health Coverage, its implications and potential collaboration expected for analytical studies to be conducted.
3. The training of key actors in the lead HFS coordination was an added value, as now there are champions within the sector with knowledge and senior positioning in the system to influence decision as the process move. There is now increased awareness of the need to have a sound and clear HF strategy document that spells out the Government's vision.