Health Sector Strategy

August 2015, FMoH

Presentation Outline

- HSDP: success, the gap and lessons learned
- Envisioning and HSTP
 - Strategic Recommendations
- The HSTP:
 - The Strategic Themes and Strategic Results

HSDP

Success stories
The unfinished Agenda
Lessons Learned

Key successes and their contributing factors in the health sector

- The achievements or remarkable progress made in the/towards the achievement the MDGs, other health and health related parameters.
 - This is because of the presence of country owned, focused and pro-poor health policies and strategies, as well as,
 - Commitment and effort of the government towards primary health care coupled with the positive socioeconomic development
- Access to services has improved drastically as a result of the capacity building efforts in improving the health system inputs and processes.

Lessons Learned

- 1. Country Ownership: through Strong leadership by the government, Fostering community ownership, Building the health sector's capacity to respond to the health needs of the people, and Accountability for results. This can be further elaborated by the followings:
 - Government in the driving seat
 - Community Ownership
 - Building a strong health system
 - Mutual accountability

Lessons Learned...

- 2. Partnership: Aligning stakeholders behind one national plan
- 3. Coordination and alignment with regional governments

Visioning Ethiopia's Path Towards UHC Through Strengthening Primary Health Care

Rational of conducting the visioning exercise of the health sector now with the context of UHC through PHC

- Health sector is guided by: health policy long & medium term strategic plans – short term annual woreda-based plan
 - The current 20 year HSDP is in its final year and the need to design the coming twenty year plan is eminent
- The health sector need to contribute and benefit from the economic sector transformation and address the anticipated challenges in the transition & beyond
- The PHC will remain the core of the health system to narrow the gaps of inequalities of varies kind, to attain better level of health care and achieve Universal Health Coverage
 - We need to ensure the gains made so far in the PHC

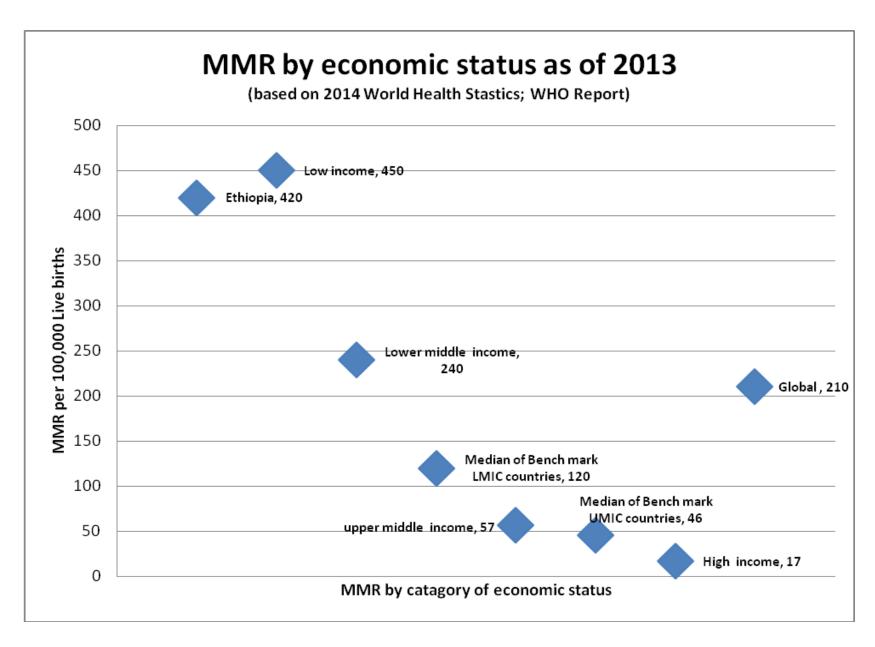
Purpose of the Visioning Document

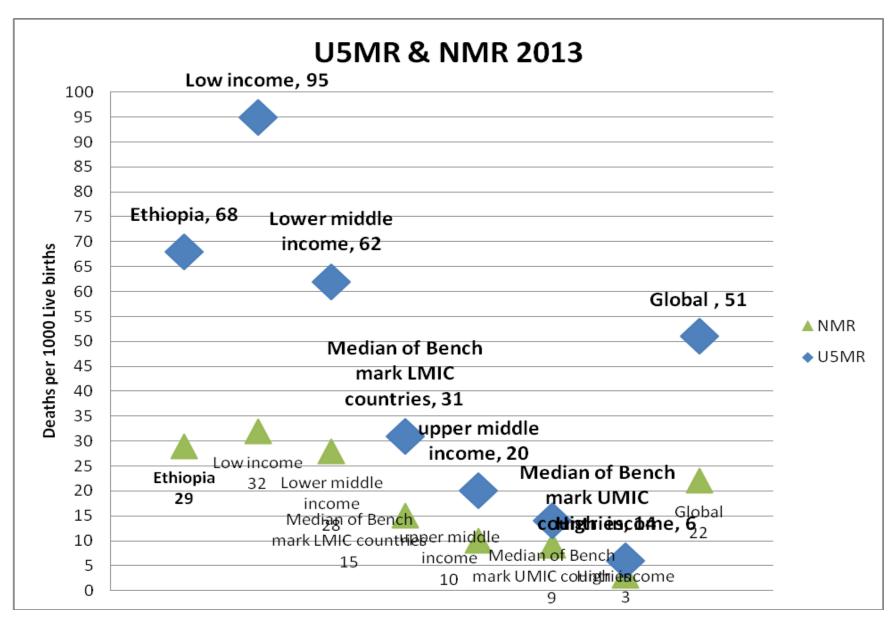
- Set strategic framework for the upcoming health development strategies
- Identify strategic areas/approaches to be tested in the future
- Place health in the center of sustainable development (pro-health policies and strategies by other sectors)

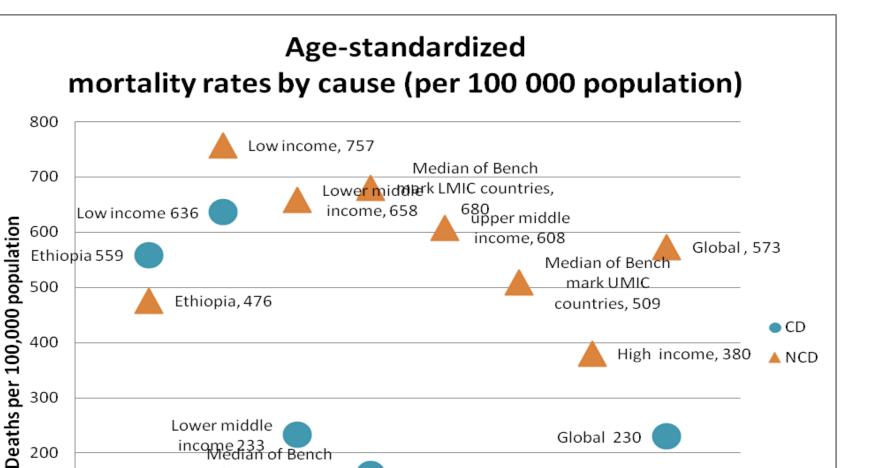
that ensure Ethiopia is on a path to achieve key health outcomes across its regions and income levels that are consistent with a middle-income country by 2035

Development: Ethiopia's current status VS MIC

Economic growth and development	Ethiopia Current Performance ¹	Current Average LMIC	Current Average UMIC	GTP 2014/2015 Target
Percent of population living in urban areas	17%	39%	61%	
Road density (km of road per 100 sq. km of land area) (2007)	4	27.7	48.2	
Access to electricity (% of population) (2009)	17%	64%	87%	
GDP growth (annual %) (2010)	11.2%9	5.14%	3.87%	
Improved water source (% of population with access) (2010)	44%	84.4%	93.7%	
Adult literacy rate (% of those 15 yrs+ (2010)	66%²	71%	82%	
Telephone lines (per 100 people) (2011)	0.98	8.96	19.40	
Internet users (per 100 people) (2011)	1.1	20.3	38.7	
Health investment per capita (in 2005				
international \$; purchasing power parity) (2011)	\$528	\$253	\$794	
Percent of total health spending supported by				
external donor funding (Ethiopia:2007, LMIC & UMIC: 2010)	39%³	2.5%	0.3%	40







mark UMIC countries

58

High income 31

Global 230

Lower middle

200

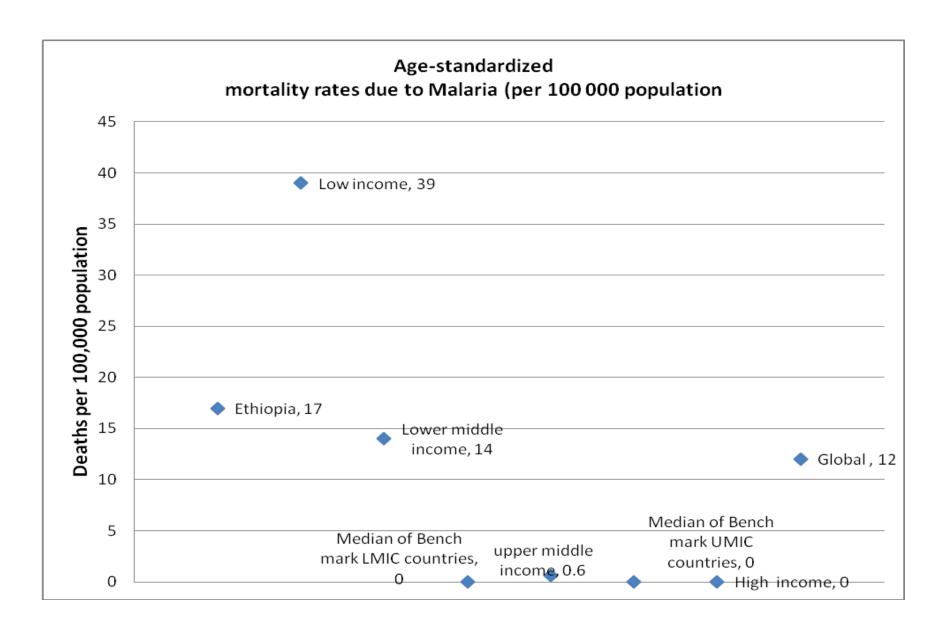
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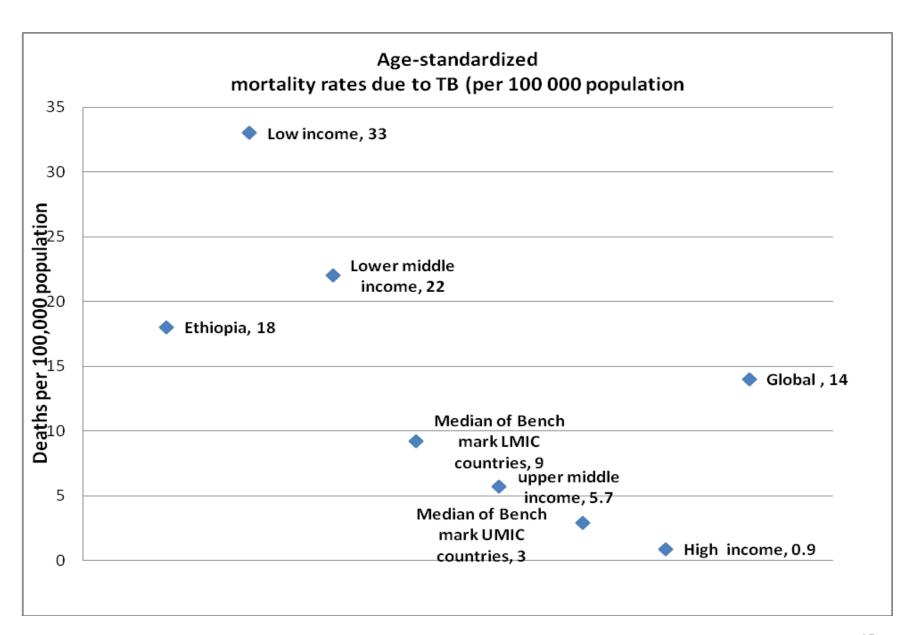
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income 233 Wedian of Bench

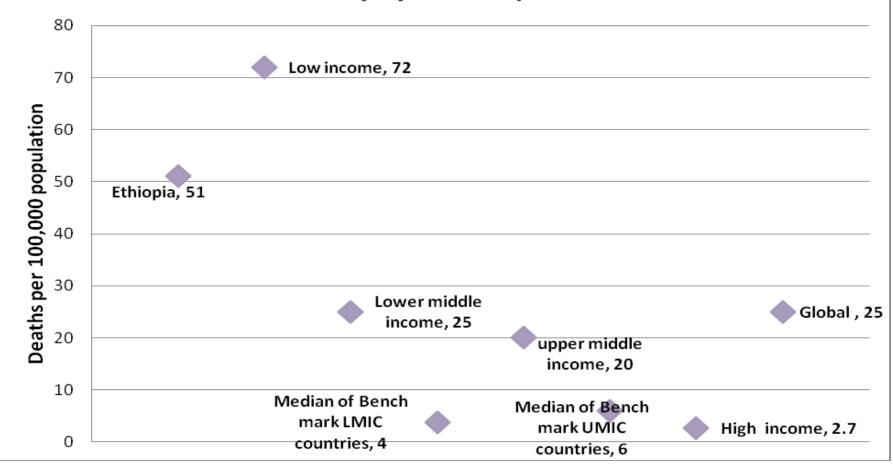
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mark LMIC countries upper middle









Strategic recommendations

- 1. Community empowerment
- 2. Health service delivery
- 3. Human Resource Development
- 4. Role of non state actors
- 5. Develop sustainable financing mechanisms
- 6 Capacity building



"Quality & Equity"

Strategic Themes and Strategic Results

Strategic Themes & Results

- Strategic Themes are:
 - The main focus areas of the sector's strategy;
 - Key areas in which the Health Sector must excel in order to achieve its mission, vision and strategy
 - The Sector's "Pillars of Excellence."
- For each theme, an explicit Strategic Result or a description of the desired outcome is articulated.

The Health Sector Mgt House

Vision:
To see healthy, productive, and prosperous Ethiopians

Community Excellence in leadership "Empowerment in health in quality in health **Stewardship** "Efficiency & capacity and governance delivery Effectiveness" Excellence Excellence Excellence **B.** Process assurance "Quality" system service L&G "Capacity"

- Refers to the promotion of good health practices at individual, family and community levels and the provision of preventive, curative, rehabilitative and emergency health services
 - The provision of service delivery should address existing gender, geographic, economic and socio demographic inequities

- Its attributes include:
 - Comprehensiveness
 - Accessibility:
 - Coverage:
 - -Continuity:
 - Responsiveness:
 - -Coordination:

- Strategic Result: A health system that:
 - 1. Delivers equitable promotive, preventive, curative and rehabilitative services ensuring that all people obtain the health services they need without suffering financial hardship when paying for them; and
 - 2. Enables the community to practice and produce good health; and be protected from emergency health hazards

- What it includes (Key Concepts):
 - Equitable health service delivery at household, community and facility level
 - Health promotion;
 - Disease and injury prevention;
 - Curative and rehabilitative service;
 - Health related disaster risk management;
 - Emergency medical service;
 - Nutrition services
 - Hygiene and environmental health
 - Gender responsive/women friendly health service delivery

- Success in this strategic theme will be measured by:
 - Increased knowledge, attitude and practice of the community including utilization of high impact interventions
 - Reduction of maternal, neonatal and child morbidity
 & mortality
 - Reduction of micronutrient deficiency, wasting and stunting
 - Reduction in incidence and prevalence of communicable and non-communicable diseases
 - Reduction of events and fatalities due to injury, medical and public health emergency

- How will these help move to the higher level of success?
 - It strengthens social mobilization and community ownership through consolidation and improvement of the health development army.
 - It improves accessibility of services (physical access, access to information and health promotion tailored to cultural context).
 - It ensures a continuous improvement of the primary health care reform, including the rollout of the second generation of health extension program.
 - It strengthens the implementation of hospital reform packages including improvement in hospital service quality improvement and clinical governance.
 - It leads to rapid response to medical and public health emergencies.
 - It promotes compassionate and respectful care in health facilities through community empowerment and emboldening the relationship between providers and communities.

Excellence in quality improvement and assurance

- Refers to managing and improving quality and safety in health services at all levels of the healthcare system.
- The focus on quality in health systems at this time is because there is clear evidence that quality remains a serious concern.
- Quality and safety have been recognized as key issues in establishing and delivering accessible, effective and responsive health systems.

- The dimensions of quality:
 - 1. Effective:- delivering health care that is adherent to an evidence base and results in improved health outcomes for individuals and communities, based on need;
 - 2. Efficient:- delivering health care in a manner which maximizes resource use and avoids waste; and provided in a setting where skills and resources are appropriate to medical need;
 - **3. Acceptable/patient-centered**:- delivering health care which takes into account the preferences and aspirations of individual service users and the cultures of their communities;
 - **4. Equitable**:- delivering health care which does not vary in quality because of personal characteristics such as gender, race, ethnicity, geographical location, or socioeconomic status;
 - **5. Safe**:- delivering health care which minimizes risks and harm to service users;
 - **6. Timely**: delivering the right care at the right time, reducing or eliminating delays.

- This theme, therefore, looks into the various interrelated and elements of quality, namely:
 - 1. Quality planning (QP):
 - 2. Quality Assurance (QA) or Quality Control (QC):
 - 3. Quality Improvement (QI):

- Furthermore, this theme will follow a simple 'map' of domains where quality interventions could be made (and where current quality problems might be located).
 - 1. Leadership:
 - 2. Information:
 - 3. Patients and Population engagement:
 - 4. Regulation and standards:
 - 5. Organizational capacity:
 - 6. Models of care:

• Strategic Result:

—A community served with health care that is effective, efficient, person-centered, equitable, safe, and timely at all levels and at all times and is protected from health hazards.

- What it includes (key concept):
 - Health literacy (Informed citizens)
 - Internal quality improvement and assurance
 - External quality assurance
 - Licensure and accreditation
 - Continuous quality improvement
 - Redesigning model of care

- The success in this strategic theme will be measured by:
 - Reduction of case fatality rate of priority diseases and conditions
 - Reduction of institutional mortality
 - Improved rates of client satisfaction
 - Improved timely access and reduced average length of stay
 - Enhancement in the public safety
 - Incidence of hospital acquired infections
 - Number of accredited services/facilities

- How will these help to move to the higher level of success?
 - Ensure service quality & provision per standard, and beyond standard

Excellence in leadership and

- governance
 Refers to evidence based policy formulation and planning; implementation; effective monitoring and evaluation motivation, and partnerships that integrate all health systems building blocks to achieve results.
- It incorporates:
 - The equitable and effective resource allocation;
 - Leadership development within the sector and the community including the health development army with the concept of community empowerment;
 - Woreda transformation and;
 - Partnership and coordination

Strategic Result:

 Efficient, accountable and transparent institutions serve all segments of the population

• It includes:

- Evidence-based policy formulation, planning, monitoring and evaluation;
- Evidence generation including research
- Equitable and effective resource allocation (finance, human capital & infrastructure);
- Financial protection
- Leadership development at all levels including community, Woreda transformation
- Promoting women into leadership/ decision-making and governing positions;
- Good governance
- Harmonization and alignment
- Multi-sectoral collaboration
- Community participation in health facilities governance
- Health in all policies and strategies

- How will successes be measured?
 - Use of research & health information outcomes for evidence-based decision making
 - Improved partnerships
 - Timely decision
 - Equitable resource allocation (finance, human capital & infrastructure)
 - Employees satisfaction at every level
 - Number of women in leadership positions
 - Number of health facility boards with community representatives

- How will these help to move to the higher level of success?
 - Policy will define priorities; strategies set long term targets with indicative resources
 - Evidence based and participatory resource allocation
 - Reducing avoidable disparities
 - Public-Private Partnership will be enhanced
 - Efficient and effective use of resources
 - Enhanced community participation (planning, M&E, regulation enforcement, policy formulation) & ownership, satisfaction
 - Gender mainstreaming

- This theme refers to the enhancement of resources for health, which includes the human and financial resources, health infrastructure and supply that are accessible to communities.
- The theme focuses mainly on development and retention of skilled human resource for health with the right mix of professionals.
 - It also refers to professional development to promote respectful and compassionate care.

- Health infrastructure includes construction of new facilities, rehabilitation of older ones and equipping these facilities as per national standards.
 - It emphasizes availability of adequate water and sanitation facilities as well as power and Internet connectivity in health facilities.
- Supply chain is about ensuring commodity security and delivery of safe, effective and affordable vital and essential medicines at all levels.
- This theme highly encourages use of technologies and innovations.

Strategic Result:

Communities are served by qualified, committed and motivated providers in health facilities that have the necessary equipments, tools and technological solutions as per the standards.

- Key Concepts/it includes:
 - Health workforce training, deployment, career development & improved HRH management and promotion of compassionate and respectful care.
 - Construction of new facilities and rehabilitation of older ones.
 - Health care financing resource mobilization and risk pooling (Health Insurance)
 - Supply chain- planning, quantification, selection, procurement, storage, distribution and disposal.
 - Technology adoption of new technology and practices to improve healthcare delivery.
 - Effective medical equipment management
 - Information and Communication Technology for health

- How will successes be measured?
 - Development of critical work force skills
 - Enhanced retention for qualified work force
 - All segments of community are accessing standardized health facilities (women, disability)
 - Stock-outs of essential drugs at all facilities
 - Functionality of medical equipment
 - Community's enrolment in health insurance schemes.

- How will these help to move to the higher level of success?
 - Institutionalizing mechanism for staff motivation and retention
 - Appropriate planning and implementation of in service and pre service trainings
 - Implement and scale up health insurance schemes
 - Strengthen implementation of health care financing mechanisms
 - Ensure health facility to population ratio met
 - Ensure health facilities have basic utilities (electricity, water, telephone...)
 - Use of ICT

Thank You

The unfinished Agenda Areas where we need to show better results

- Reduction of Neonatal Mortality is only 46%
 - 64 U-5 deaths/1000 LB is still very high
- MMR of 420/100,000 LB is very high
- Mortalities due to HIV, Malaria and TB are considerable
- Malnutrition is still high
- Mortality & morbidity due to NCDs are increasing
- NTDs
- Injuries
- Health system demands more effort