

**Joint Assessment of National Health Strategies
IHP+ Scoping Mission to Vietnam
19-22 April 2010**

Team Overview Note for the Record

Purpose and participation

At the invitation of the of the Ministry of Health (MOH) of Vietnam, the IHP+ Core Team conducted a scoping mission to discuss the possibility of a joint assessment of Vietnam's five year health plan. The specific objectives were to:

- (i) orient MOH staff and development partners on the joint assessment: background, objectives, tool and process, drawing on experience from other countries, and potential opportunities to reduce transaction costs for the MOH (e.g. single M&E framework, multiple reporting requirements);
- (ii) understand the status of current five year health plan's preparation and review processes, so that any joint assessment fits well within these;
- (iii) determine where the added value of Joint Assessment lies for Vietnam and discuss possible timing and process; and
- (iv) clarify the current status of the Joint Funding Platform at global level and discuss the practicalities of creating a joint funding platform in Vietnam to support the five year health plan.

The IHP+ Core team included WHO (Phyllida Travis), World Bank (Nicole Klingen, Iraj Talai), and UNFPA (Jacqueline Mahon). The IHP+ Core Team met with MOH Department of Planning and Finance staff led by the Director, Dr. Pham Le Tuan, and Vice Director, Dr. Nguyen Hoang Long. The IHP+ Core Team also met with other departments under the MOH, including the Department of Health Policy, as well as members of National Target Programs (HIV/AIDS, TB, Malaria, and NEPI); country office staff from the European Commission, GTZ, KfW, Netherlands, UNAIDS, UNICEF, UNFPA, U.S. Government Agencies (USAID, HHS), WHO, and the World Bank; and members of local civil society – VCSPA – and international NGOs – PATH and Pathfinder. See Annex 1 for full list of people met.

The de-briefing, chaired by Dr. Tuan, took place on 22 April 2010 and was attended by Ministry of Health officials, GTZ, and the European Commission.

Background

At the national level, Vietnam is currently on track to achieve the health MDGs. Some provinces are further ahead than others. Vietnam is also on track to become a Middle-income Country in the near future.

External assistance for health only makes up about 2% of total health spending in Vietnam. Out of pocket payments are 67%, 16% government expenditure, 9% health insurance and 6% private funding. 66% of the population is covered by health insurance. The Government of Vietnam intends to scale-up to universal coverage by 2014. Financing this scale-up presents a significant challenge. One striking finding is that although Official Development Assistance for health is small, there are separate Project Implementation Units for each health project within the MOH: 28 were reported to exist.

There are currently some layers of planning in Vietnam at national level– the 20-year vision, the 10-year strategy, the 5-year plan, and annual plans. Additionally, the MOH has been engaged in the 3-year rolling Medium-Term Expenditure Framework process at central level and in a number of pilot provinces. The

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Vietnam Ministry of Health is currently providing inputs to the Government of Vietnam's Socio-Economic Development Plan (SEDP) and is developing the next 5-year health plan for 2011-2015. The SEDP is meant to set forth overarching development goals and is expected to inform the health sector specific strategy laid forth in the 5-year health plan. Annually, development partners and MOH jointly monitor progress in the health sector through the Joint Annual Health Reviews (JAHRs).

The SEDP and 5-year plan will both be completed in 2010. The SEDP is expected to be finalized by 30 June 2010 and will go to the National Assembly in November 2010. The 5-year plan is still being developed through a new, more inclusive and still quite fragile process including development partner consultations via the Health Partnership Group (HPG). It is expected to be finalized by the end of September 2010.

While central planning is important in the health sector, resolutions from the Communist Party continue to guide many priorities of the health sector, and budgets and projects are largely decided by People's Committees at the provincial level. Planning for National Target Programs is also decentralized.

Development partners welcomed participation in the planning process of the 5-year plan. The MOH is pursuing a more inclusive approach to planning and has been working with the HPG since 2007. Civil society consultation in the current planning processes is somewhat limited. PATH, Pathfinder, Care and the International Non-Governmental Organization (INGO) Resource Center are civil society representatives in the HPG and the INGO community now has a regular meeting with the MOH, every two months. However, local civil society does not participate in the HPG and has little direct access to the MOH.

The MOH noted its commitment to sign the IHP+ Global Compact in May 2010 and expressed interest in learning more about the Health Systems Funding Platform. The health systems funding platform is closely linked to IHP+ in that it is based on its principles, shares the same objectives of better and more equitable health services and health outcomes, and uses a number of IHP+ tools. It is a mechanism for making better use of new and existing funds for Health System Strengthening (HSS). At country level, the Platform aims to make the financing of HSS more transparent and efficient, and simplify funding channels and financial management procedures. At global level, the agencies involved so far are GAVI, Global Fund and the World Bank, facilitated by WHO.

Issues and conclusions

1) The MOH confirmed interest in a joint assessment of the 5-year plan health, though timing and format still need to be decided. There were discussions around the various perceptions of value added, which included increased legitimacy of Vietnam's planning processes, improved donor trust, and increased financing for the health sector. The MOH will correspond with the IHP+ Core Team in the next two weeks to confirm if it wishes to pursue a joint assessment.

2) The format of the joint assessment: Given the multiple planning processes ongoing in Vietnam and time constraints of the joint assessment, MOH and partners discussed different options for applying the joint assessment tool:

1. MOH 'self assessment' plus 'independent element' (separate processes)
2. Joint assessment tool used by development partners only to structure feedback on SEDP and draft 5-year plan

3. Integration of the joint assessment tool the into annual planning framework
4. 'Joint' assessment by all partners at same time

In addition to the options discussed, some questions were raised regarding how to organize a joint assessment. The possibility of joint assessment at both central and provincial levels was discussed. The MOH suggested that the preference would be for something similar to option four - a joint assessment by all partners - but that further discussion would be required in order to gauge appropriateness given timing constraints and the challenges presented in having an 'independent' element in the joint assessment process. The MOH also noted that it may wish to consider other options for the joint assessment.

3) The timing of the joint assessment: The MOH is currently preparing inputs for the Vietnam National Socio-Economic Development Plan (SEDP) for the end of June 2010. The SEDP will guide the overall goals of the 5-year plan of the MOH, which is expected to be finalized by October 2010. The MOH has expressed interest in carrying out the JANS in conjunction with the development of the 5-year plan. Exact timing is not yet determined, but would likely be before September 2010. Some partners flagged the potential to over-stretch already busy MOH staff as an important consideration when determining the possible timing of the joint assessment.

4) The independent element of joint assessment: The MOH noted the importance of an independent element to the legitimacy of the joint assessment process in Vietnam. Some questions arose around the nature of the 'independent' element. It was clarified that 'independent' implied non-participation in planning processes. The MOH requested the support of WHO to identify potential independent entities to participate in the joint assessment process. Some possibilities were discussed, including local development partners, local research institutes, civil society, local schools of public health, and health specialists from other countries.

6) How joint assessment findings will be used: There was a useful discussion regarding potential ways to use the joint assessment to strengthen coordination within the Ministry of Health at central, regional, provincial, and commune level. It was also recognized that joint assessment would be useful in strengthening linkages between current planning processes (SEDP, 5-year plan, annual plans, etc.) and improving the synergies between existing plans, including for the National Target Programs.

The MOH recognized existing challenges of monitoring and evaluation and viewed the joint assessment process as a step towards building on existing input-based indicators to strengthen health information systems and reporting.

Finally, the ability to use the joint assessment as the foundation of an ongoing, iterative process to improve strategic planning in the health sector was noted. The MOH placed significant value on this, as it would strengthen the ability of the MOH to make stronger cases for increased funding for the health sector to the Ministry of Finance and the Ministry of Planning and Investment, as well as from external donors.

7) Health Systems Funding Platform (Platform): The MOH was interested in the possibility of using the funding platform in Vietnam and other partners noted the potential utility of the platform for coordinating external contributions to health systems and reducing the transaction costs. However, the decentralized nature of the Vietnam health sector presents unique challenges, which are worth further

consideration. The possibility to use the joint assessment tool as basis for the platform was discussed and the MOH was interested in using the Platform to apply for GAVI HSS funding during 2010.

Next steps

1. Joint assessment of the 5-year plan: The MOH will discuss the possibility of joint assessment internally and let the IHP+ Core Team know if it wishes to pursue the joint assessment of the 5-year plan. If it is decided to carry out a joint assessment, it is likely to take place before September 2010, based on discussions during this mission.

Annex 1 People met

Federal Ministry of Health

- Pham Le Tuan, Director, Department of Planning and Finance, Ministry of Health
- Nguyen Hoang Long, Vice Director, Department of Planning and Finance, Ministry of Health
- Hoang Kim Ha, Head of General Policy, Department of Planning and Finance, Ministry of Health
- Duong Duc Thien, Vice Head of General Policy, Department of Planning and Finance, Ministry of Health
- Sarah Bales, Consultant, Health Policy Unit, Ministry of Health
- Nguyen Thang Lung, Director General, Vietnam Administration of HIV/AIDS Control, Ministry of Health
- Bui Duc Duong, Deputy Head, Vietnam Administration of HIV/AIDS Control, Ministry of Health
- Nguyen Thi Ngoc Bao, Deputy Head, Planning and Health Policy Division, Department of Planning and Finance, Ministry of Health
- Ho Dinh Trung, Secretary, National Malaria Control Program, Ministry of Health Vu Huy Nam, National Malaria Control Program, Ministry of Health
- Vu Huy Nam, Secretary, National Malaria Control Program, Ministry of Health
- Duong Thi Hong, Secretary, National Expanded Program on Immunization, Ministry of Health
- Nguyen Hong Vu, Official, Ministry of Health

Development Partners

- European Commission: Le Van Thanh, Program Officer; Pham Thi Thuy Chi, Consultant; Ron Konkelerberg, Consultant
- Germany: Tran Hong Giang (KfW), Anna Frisch (GTZ);
- Netherlands: Nguyen Hoai Vam (Dutch);
- USA: Michael Iademarco, Captain, USPHS, Health Attaché, Department of Health and Human Services; Jonathan Ross, Director, Office of Health, USAID
- UNAIDS: Eamonn Murphy, Country Coordinator; Anne-Claire Guichard, Coordination and Institutional Development Adviser
- UNICEF: Jean Dupraz, Deputy Representative; Do Hong Phuong, Health and Nutrition Officer;
- UNFPA: Bruce Campbell, UNFPA Representative; Dat Van Duong, National Programme Officer; Jacqueline Mahon, Senior Advisor on Global Health and Health Systems
- World Bank: Toomas Palu, Lead Health Specialist; Robert Gilfoyl, Hub-leader Financial Management, Pham Van Cung, Senior FMS; Tean Phuong Mai, FMS, Cofi Amoah, Hub-Leader Procurement
- World Health Organization: Jean-Marc Olivé, WHO Representative; Graham Harrison, technical officer; Amanda Tyrell, consultant.

NGOs and CSOs

- Ton van der Velden, Country Representative, Pathfinder International
- Khuat Thi Hai Oanh, Executive Director, Supporting Community Development Initiatives; Chair, Vietnam Civil Society Partnership Platform on AIDS
- Joanie Robertson, Senior Technical Officer, PATH

Other Partners

- Euan Lindsay-Smith, Consultant, Health Sector Capacity Support Project
- Nguyen Tran Hien, Director, National Institute of Hygiene and Epidemiology

Annex 3: List of Documents

- A. General Documents
 - 1. IHP+ Scoping Mission Agenda
 - 2. IHP+ Letter to Government of Vietnam
 - 3. IHP+ Joint Assessment Tool
 - 4. IHP+ Joint Assessment FAQs
 - 5. DRAFT Platform Country Consultation Report Template
 - 6. Platform Workplan
 - 7. Platform FAQ

- B. Aid Effectiveness Forum – Vietnam
 - 1. Hanoi Core Statement on Aid Effectiveness
 - 2. Independent Monitoring on the Implementation of the Hanoi Core Statements at Sectoral and Sub-National Level in Vietnam
 - 3. AEF Workplan 2010

- C. Five Year Plan Development
 - 1. Development Partner Letter
 - 2. Proposals for a 5 Year Planning Framework
 - 3. PPT: Improving Monitoring and Evaluation in the Health Sector in Vietnam
 - 4. PPT: A Roadmap for Coordinating and Aligning Development Planning and Budgeting in the Health Sector
 - 5. Participatory Capacity Assessment for the Formulation of the Vietnam Health Sector Capacity Support Project (SCSP) – CECOFORMA
 - 6. PRSC mid-term review – 14 August 2009
 - 7. Annex 2: PRSC 6-10 Policy Matrix
 - 8. Drafting Strategies and Objectives for the SEDP
 - 9. Proposed outline of MOH response to SEDP
 - 10. Logframe Matrix
 - 11. Five Year Plan Checklist
 - 12. Comprehensive Development Design for the Health System of Viet Nam to 2010 and Vision by 2020 – Government of Vietnam, 30 June 2006
 - 13. Conclusion 42 of the Political Bureau – Government of Vietnam, 1 April 2009
 - 14. Conclusion 43 of the Political Bureau – Government of Vietnam, 1 April 2009
 - 15. Resolution 46 of the Political Bureau – Government of Vietnam, 23 February 2005

- D. Health Partnership Group Documents
 - 1. Improving the Effectiveness of Development Assistance for Health: Statement of Intent from Ministry of Health and Development Partners
 - 2. Matrix of MOH Partners
 - 3. Terms of Reference for the HPG Secretariat
 - 4. HPG Structure
 - 5. HPG 2010 Workplan
 - 6. Consolidated development partner talking points at Health Partnership Group (30.03.10)
 - 7. PPT: HPG Structure and HPG Secretariat
 - 8. PPT: Update on the Implementation of SOI Milestones - Viet Nam MOH, March 2010

9. PPT: Progress on the 5 Year Sector Plan Development – Viet Nam Dept. of Planning and Finance
 10. 2007-2009 MTEF, 14 January 2007
 11. 2006-2008 MTEF, 23 December 2005
- E. GAVI HSS Documents
1. GAVI HSS Support Evaluation, Viet Nam Case Study, August 2009
 2. GAVI HSS Support Evaluation 2009, Volume 1, 8 October 2009
 3. GAVI HSS Support Evaluation 2009, Volume 2, 30 September 2009
- F. GF Documents
1. GF Viet Nam Commitments and Disbursements as of 31 March 2009
 2. GF Proposal Form – Round 9
 3. GF Round 9 - HIV Proposal Summary
 4. GF Round 9 Workplan – HIV
 5. GF Round 9 Management Structure – HIV
- G. Background Documents
1. WB PAD – Central North Region Health Support Project, 25 February 2010
 2. EIU Viet Nam Country Profile 2008
 3. EIU Viet Nam Country Report, April 2010
 4. 2009 Joint Annual Health Review 2009, HRH in Vietnam, December 2009
 5. Vietnam Health Support, MIC – Vietnam UN Country Team, September 2008
 6. ODA Inter-Ministerial Taskforce 6th Joint Portfolio Performance Review
 7. CFAA 2009