Senior Consultation Group meeting, Naypyitaw 5th March 2014

3MDG Fund Objective: to provide joint donor support to address the basic health needs of the most vulnerable people in Myanmar/Burma, and expand the scope of support beyond the three diseases to encompass maternal and child health and longer-term sustainability.
Three Millennium Development Goal Fund
Coverage as of November 2013
3MDG – Six Main Overall Outputs and Results

• 1) Delivery of essential services, **with a focus on maternal, newborn and child health**, in townships supported by the 3MDG Fund.

• 2) **Strengthened capacity for delivery of essential MNCH services** in townships supported by the 3MDG Fund.

• 3) **Prioritised HIV, TB and malaria interventions** provided to targeted populations or areas not readily covered by the Global Fund.

• 4) **Prioritised components of the health system strengthened for long term sustainability.**

• 5) **Enhanced health services accountability** and responsiveness through capacity development of target communities, civil society organisations and the public sector.

• 6) Fund Management demonstrates value for money and cost-effectiveness, **generates evidence to inform policy**, funding and programming decisions, and strengthens aid effectiveness.
Governance, coordination and policy dialogue

**Core Structures**

**Fund Board**
Donor representatives + 3 independent experts oversee Fund Manager

**Fund Manager**
Contracted by the Board to manage implementation of all components of the Fund in accordance with Fund policy

**Supporting Structures**

**Senior Consultation Group**
Elected representatives of Implementing Partners Forum + representative of the MOH provide advice to the Fund Board

**Evaluation Group**
Contracted to provide independent evaluation services
• The 3MDG Fund will support health systems strengthening through policy dialogue and advocacy, long-term and short-term technical support, capacity development and training, sector and systems analysis and reviews, research studies and other activities to improve information for decision making.

• Component 3 will support complementary health systems strengthening at central and decentralised levels of the health system, to help develop a more effective and a more responsive health system.
Progress to date including new developments which will increasing enable 3MDG Fund to work through national structures and using national systems

- **Working to achieve health sector support and strengthening through partnership**
- **Working through M-HSCC**, newly established TSGs including TSG-HSS and TSG-MNCH as well as long established TSGs
- Township-based financing using **Public Financial Management systems of the MoH** based around “use of government regulations and systems. It will include measures to provide flexibility and more fluid fund flow while supporting a combination of measures for enhanced transparency and better management of identified risks.”
- Township-based Planning to support the establishment of **Comprehensive Township Plans**
Fund Flow Mechanism for Health Sector

• Three Existing Mechanisms are currently in use for Flow of Funds to the Public Sector:

• UNOPS as Principle Recipient for Global Fund managed the funds
  – No Flow – payment are made directly to providers of goods and services or to entitled recipients (eg. allowance, per-diem,..)
  – Supported development of capacity in planning and budgeting at township

• UN Agencies as implementing partner and as intermediary for Fund Flow

• NGOS, CBOs as Implementing Partners (IPs)
  – Received funds to mainly implement activities directly
  – Added implementation capacity, reduced burden on the Townships
Fund Flow Mechanism for Health Sector

• Identified Option for 3MDG

• A mechanism for direct flow of funds to National Programs, using as much as possible the national systems and institutions

• All activities so funded would be included in the Townships coordinated plans and would be approved for financing by the central MoH and 3MDG. Other activities centrally planned and executed would also be Funded.
Fund Flow Mechanism for Health Sector

1. Approved Township Work Plans and Budgets
2. Bank Account Opened at Township
3. Funds Transferred to Township Account
4. Funds Transferred to Township Account
5. Funds Expended on Eligible Activities
6. Proper Ledgers and Account Records Kept
7. Auditor General Certifies Accounts
8. Bank Account Replenished
Fund Flow Mechanism for Health Sector

• **Advantages:** the approach facilitates the use of all available capacity
  • Proposes to use the existing institutions, governance structure, and country rules and regulations as much as possible
  • Provides opportunity to build lasting country capacity
  • Proposes to phase in a comprehensive bottom-up approach by financing the work plans of townships which are approved and supported by the MOH
  • Other Departments can join in sooner or later and use the same mechanisms

• **Challenges:**
  • Capacity, particularly HR needs development,
  • Banking is not yet everywhere to provide the needed support in fund flow;
  • Internal controls, incl. Internal audit
Component 3 – Support to policy and evidence – some examples

- Advisory and Technical Services for Health Systems Strengthening – World Bank
- Financing to support policy-base around issues related to HIV and to address the concentrated HIV epidemic
- Support to evidence base underpinning MARC Strategy – financing to Oxford Mahidol to support NMCP and DMR
- Non-public sector strategic framework – to support how the 3MDG Fund will engage with the non-public sector in support of the Ministry of Health and 3MDG Fund’s objectives of increased coverage and quality of care for the poor, and improved health system capacity for oversight, regulation, governance and accountability
- Support to strengthening of Midwifery Services from curriculum to deployment
Strategic Areas for Systems Support

• Short-term wins for the health sector in Myanmar where 3MDG would wish to provide support
  – Expansion of service delivery coverage and improvement of quality of service delivery – urban health programming, strengthening of midwifery service provision and infrastructure financing
  – Supply chain management system: to support an un-interrupted supply of essential medicines across Myanmar, using a national single and unified system and to ensure accountability towards the MoH around medicines and equipment procured using the national budget
  – Public Financial Management and Fund Flow Mechanism: to build upon national system to support the accountable use and ability to manage increasing expenditure of financing from government budget as well as from external assistance support
  – Support to Public Financial Management and Fund Flow Mechanism alongside establishment of a SCMS will be a critical enabler for the medium-term transitioning of the role of PR of GF to MoH
Component 1

• Support to service delivery across Townships
  ▪ Direct support to the public sector
  ▪ Support to complementary private sector interventions
  ▪ Strengthening of health system/sector and contributing towards a more responsible health services through support to accountability practices
  ▪ Increased coverage of community-based health care interventions through service delivery by NGOs

▪ Support to operational capacity at a State/Region and Township level
▪ Developing the evidence-base to support MoH policy and strategies including towards medium-term expenditure planning and UHC
### MNCH Continuum of care

<table>
<thead>
<tr>
<th>Maternal health services</th>
<th>Child health services</th>
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<tbody>
<tr>
<td>• Improved access to family planning</td>
<td>• Essential newborn care</td>
</tr>
<tr>
<td>• Skilled birth attendance</td>
<td>• Case management of diarrhoea, acute</td>
</tr>
<tr>
<td>• Emergency obstetric and neonatal care</td>
<td>respiratory infection, malaria</td>
</tr>
<tr>
<td>• Prevention and management of postpartum haemorrhage</td>
<td>• Breastfeeding and complementary feeding</td>
</tr>
<tr>
<td>• Antenatal and postpartum care</td>
<td>• Immunisation</td>
</tr>
<tr>
<td>• Nutrition</td>
<td>• Nutrition</td>
</tr>
<tr>
<td>• Safe blood supply</td>
<td>• Malaria prevention, control and treatment</td>
</tr>
<tr>
<td></td>
<td>• Water, latrines, hand washing</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pre-pregnancy</th>
<th>Pregnancy</th>
<th>Birth</th>
<th>Neonatal</th>
<th>Childhood</th>
</tr>
</thead>
</table>

**3MDG**
Approved listing of initial 42 Townships to receive financing through 3MDG
OVERALL OBJECTIVES

Component 2 will support priority gaps in the national responses for HIV, TB and malaria that are not readily funded by the Global Fund.

Priority will be given to vulnerable and marginalised populations, to hard-to-reach areas and to emerging health threats.

Complementing and adding value to Global Fund and other donor programmes will be a key guiding principle.

PLANNING

Outline of EoI and CfP process to be covered separately.