Document up-dated in May 2009

Country: Rwanda

TITLE OF PROPOSAL: SUPPORT TO REINFORCEMENT OF THE HEALTH SYSTEM (RSS)

ISO Code	Round	Time Period		Total Budget USD	Approval Track	Disburse-ment Date
		HSS Prop.	Nat. Health Plan			
RWA	3	2007-2009	2005-2009	5,604,460	**First Submitted**: 11/06/2007 **App. W conditions**: n/a **Not approved**: n/a **Resubmitted**: n/a **Final Approval** 26/07/2007	29/10/07

SECTION I: HSS PROPOSALS AND NATIONAL HEALTH POLICIES: LINKAGES

National Health Policy Goals

To fight against poverty- and ignorance-linked diseases, and to improve the health status of the population through a sector-wise strategy

- Reinforcement of vaccination services;
- Argument, communication, and reinforcement of capacities;
- Epidemiological surveillance of targeted childhood diseases;
- Distribution of vaccines, the cold chain and logistics;
- Organisation and management of the vaccination programme.

Proposal Goals

Assure the reinforcement of health systems for quality and sustainable efficient primary health care support to the PEV (EPI) in Rwanda.

Proposal: Specific Health System Development Objectives:

MCH & Immunisation focussed	*Health System Wide*
	• Increase the mobilisation and the motivation of health personnel / agents for quality primary health care; • Improve the organisation and management of the health services at the district level; • Reinforce distribution and maintenance systems for medicines, medical consumables, equipment and infrastructure at the level of district health structures.

Document up-dated in May 2009

SECTION II: IMPLEMENTATION ACTIVITIES, AND BUDGETARY ALLOCATIONS

Unmet Needs, "Bottlenecks"& Barriers Identified:	Proposed Tasks/Activities	Budgetary Allocation	
		USD	%
Governance, Management, Organisational • Inadequate coordination of health programmes/activities in the context of the recently started administrative decentralization process.	• Integrated management of childhood illnesses; • Integrated epidemiological surveillance/data management/data dissemination; • Health promotion; • Improve demand for basic health services and their acceptability (PECIME) through information and community mobilization; • Planning, management and coordination activities.	411,020	7
Human Resource Development/Performance Management. • Insufficient qualified and motivated human resources, especially in rural areas where 83% of the population resides.	• Training of staff and community health workers in 30 districts, including epidemiological surveillance; • Incentive schemes for staff, to strengthen their motivation; • Performance contracts.	2,398,300	43
Drugs, Equipment, Supplies, Facilities • Insufficient financial resources to allow the health system to assure logistics, maintenance of infrastructures and equipment (cold chain, energy, etc.).	• Cold chain equipment for 20 new health centres and replace scrapped cold chain in 10 health centres; • Fuel supply; • Provision of laboratory equipment and reagents, computer equipment and solar panels' • Construction of 36 incinerators in 36 centers; • Support of maintenance of cold chain equipment.	2,014,300	36
Monitoring and Evaluation • Existence of several non-integrated systems of medical information collection (SIS, TRACnet etc.).	• Support for supervision activities at district level; • Ensure active and integrated epidemiological surveillance in the 30 districts of the country and establish a national data bank; • Support coordination activities at district level; • Operational research.	780,840	14
Overheads	Management of HSS		
TOTALS		5,604,460	**100.00**

Health financing Gap: Not stated

Document up-dated in May 2009

SECTION III - PERFORMANCE MONITORING, & EVALUATION ACTIVITIES

Indicator	Baseline Values 2005	Final Targets 2009	Expected Source of Data/Information
Outcomes/Outputs:			
• DTP3 coverage	95%	95%	EPI multiyear plan 2006-10
• #/% of districts reaching ≥ 80% of coverage by the DTC3	95%	100%	
• Mortality rate of children aged below five years (per 1000)	152 p/1000 live births	TBD	Rwanda DHS 2005 Final report
• Utilization of health services: average patients in outdoor consultation/head/year	0.33	0.5	Health Sector Strategic Plan 2005-2009
• Proportion of births under the supervision of qualified medical personnel	31%	60%	
• Supplementation rate for vitamin A: proportion of children from 6 to 59 who have received a dose of vitamin A during the last six months	69%	85%	
• % of health centers subjected to 4 integrated quarterly supervisions according to national norms	70	100	Multi year EPI plan 2006-2010
• % of districts with functional cold chain	95%	100%	
• # of vaccinators/100,000 inhabitants	6	15	
• % of districts with annual data quality assessments	TBD	100%	
• % of monthly reports of integrated surveillance	90%	100%	
• # of districts with functional incinerator	30%	100%	

SECTION IV: PROPOSAL DEVELOPMENT, SUPPORT AND MANAGEMENT

Country Management of Implementation: Through the General Secretary of the Ministry of Health who is also President of HSCG.
Channelling/Management of funds: RSS funds through an specific account of the Ministry of Health, care of the National bank of Rwanda and disbursed by internal transfer to district accounts.
Strategies proposed for sustainability of activities: Assured through reinforced technical, institutional, and managerial capacity in the provision of basic services. The acquired skills are the assets that will guarantee sustainability after the end of the GAVI support.
Collaboration with/ Involvement of other organisations in *i)* *Proposal Design & Planning:* Coordinated by the Planning, Documentation and Coordination Unit of the Rwandan Ministry of Health under the supervision of the HSCG and the EPI, the Ministry of Finance and Economic Planning, members of the CCI and civil society. ii) *Proposal Management*: Health Sector Cluster Group (HSCG) iii) *Proposal Implementation:* HSCG
Other Financial Support for HSS: Government budget, German Cooperation/InWent, PEPFAR and Global Fund.