

## Health Policy Reform, Peru

2010 – 2014

Futures Group is a partner in the Health Policy Reform project funded by USAID/Peru under the Population, Health, and Nutrition Technical Assistance and Support Contract 3-Global Health (TASC 3-Global Health) IQC, working with prime contractor Abt Associates. The project seeks to address the main challenges of ongoing health reform—decentralization and universal health insurance—and is working to ensure that the necessary policies and capacity to sustain reform are in place by the end of this five-year effort.

The goal of the project is to increase the capacities of the Peru Ministry of Health and regional and local public entities to ensure the delivery of high-quality health programs and services and to improve the effectiveness of the health system. Under this project, national-, regional- and local-level public entities are being strengthened to respond to challenges and opportunities created by a changing health sector, while maintaining focus on equitable access for all.

The project pursues the following five outcomes:

1. Health Governance - the Ministry of Health, regional and local authorities are operating in coordination under the decentralized health system by developing, implementing, and enforcing sound policies and regulations that are effectively implemented.
2. Health Financing - Peru has increased its public spending on health to achieve its health insurance coverage goals, and is funding health services to ensure efficiency and equity in the public health system.
3. Health Information - the Ministry of Health, regions, and local authorities are generating and using accurate and timely information to manage the health system.
4. Health Workforce - policies for improved human resources management in the public health sector are implemented.
5. Medical Products, Vaccines and Technologies - the Peruvian health system appropriately procures and manages the pharmaceuticals and supplies needed for all public health services and programs.

### Key Achievements Include

#### 1. Health Governance

- The Project provided technical assistance to the Coordination Committee of Political Parties Agreement in Health to start policy dialogue regarding new health issues, such as the increase of chronic diseases and the main problems of public health workforce.
- The Project provided technical assistance to the Regional Government (RG) of San Martin in the design and preparation of the conditions to start the Program for the Reduction of Chronic Malnutrition, as a decentralized management model of a health priority. With the Project technical assistance, the regional Program for the Reduction of Chronic Malnutrition shall avoid 13,145 malnourished children in 5 years.

#### 2. Health Insurance and Financing

- With the Ministry of Health Health Persons Directorate the Project finished the review and consistency of the Health Insurance Essential Plan, completing 100% of the revision. This revision is consolidated in a handbook which includes the clinical variants, medical procedures and drugs related to the 140 medical conditions of the PEAS. The current health insurance covers the health care of 5.56 million of children and 11.8 million of persons over 18 years old. The update of PEAS shall let progressively increase the health insurance coverage in an additional number of regional governments. In the more poor regions, the health insurance is covering 1.02 million of children and 1.1 million of adult population.
- To improve the elaboration of multi-year health investments plans at the regional level, the Project finished the design of a methodology, which includes guidelines and excels worksheets, currently being applied in San Martin. This methodology was approved by the MOH (RM 577-201) in July 2011. The Project finished the elaboration of a multi-year plan in San Martin and initiated the same process in Ayacucho, where the MOH assessed the complementarity of this investment methodology with the one that defines functional health networks.

#### 3. Health Information

- The Project provided continuous support for the implementation of GalenHos software for hospital information management in Ayacucho, Cajamarca, Huánuco, La Libertad, San Martin and Tumbes regions. The implementation of GalenHos in these hospitals allowed the recording and tracking of about 2.8 million of persons living in the Provinces where they are located; 295 thousands are children under five years and 667 thousands are women between 15 and 45 years old.
- The GalenHos software for the 1st level of care was developed with records organized by patients, family and community. This software is being implemented in San Martin and Ayacucho, where key staff is receiving continuous onsite training and supervision. In Ayacucho, it has already been installed in 10 health facilities of Huamanga network, serving to 221 thousand of persons; in San Martin, it has been installed in 38 health facilities. The implementation of GalenHos in San Martin is favoring the health care of 84 thousand of children under five years whose weight and growth will be follow up to prevent child chronic malnutrition.

#### 4. Health Human Resources

- In supporting the design and implementation of a broad-based system for planning and managing health workforce, the Project advanced in the validation of the software to calculate human resources gap and in the provision of specific technical assistance to Ayacucho, San Martin and Ucayali regions based in the analysis of the components of the Human Resources Management System. The calculation of the gap used regional data to validate use of time and the ratio of human resources per population standards.
- The Project provided advice to San Martin regional government in the selection process of directive staff for the Regional Health Directorate. In Ayacucho, the Project provided technical assistance in the elaboration of a salary scale, based in the availability of health personnel, which resulted in the approval of two directives about salary scales for health personnel hired by CAS on primary care and on the second level of care.

#### 5. Medical Products and Supplies

- To improve the quality and availability of medicines and supplies, the Project developed a proposal to establish a programming methodology, allowing a better rationale for purchasing, aimed at optimizing the use and availability of financial resources with the physical needs of medicines and supplies.

#### 6. Gender considerations as applicable for the implementing mechanism

- The project provided technical assistance to the MAS-IGUAL, group of leaders that promotes equality between men and women. The group has prepared a web page with information and recommendation for advocacy purposes; the Project elaborated for this web page an analysis of adolescent maternity and the main barriers for adolescents to access to health services. The recommendations to improve access include changing the penal law about the age for voluntary sexual relations, and formulating a health norm that regulates the type of services that adolescents can obtain without their parents' consent.

- During this semester, the Project trained and/or provided technical assistance to 1,765 participants who attended to our workshops and technical meetings. 43% of the attendances were women.