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A patient is tested at Ilemala Dispensary in Mwanza. The health facility has benefited from the Public Service Systems Strengthening portion of the Results Based Financing program. Patients' visits are recorded and saved digitally to ensure a smooth processes and reliable records for future visits.

Photo: Rachel Chilton, USAID/Tanzania

TANZANIA

RESULTS-BASED FINANCING

Results-Based Financing (RBF) is a Government of Tanzania program that incentivizes improved quality of services at participating health facilities and encourages enhanced support from regional and council health management teams. The purpose of the USAID grant for RBF is to support the roll out of the Results-Based Financing in selected regions to improve accessibility, utilization, and quality of health services through increased accountability and responsiveness. The RBF program began implementation in the Kishapu District in Shinyanga in April 2015, and has since scaled-up to eight regions: Shinyanga, Mwanza, Pwani, Simiyu, Tabora, Kagera, Geita, Kigoma, and Medical Store Departments (MSD) zonal stores. RBF is mostly implemented in public health facilities. Private and faith-based agencies that carry a service level agreement with local government authorities can also participate if they meet minimum entry requirements.

The U.S. Government is supporting RBF through a three-pronged approach:

1. USAID has an agreement with the World Bank that supports the Government of Tanzania's RBF program. This grant provides for program coordination, verification, and incentive payments that are used by health facilities for improved service delivery, particularly in Shinyanga and Mwanza.
2. USAID is partnering to implement the Public Sector Systems Strengthening (PS3) activity, which provides technical assistance to the national RBF Unit at the Ministry of Health and local government authorities.

3. At the facility level, USAID’s service delivery partners assist with RBF through participating in verification team visits done by Regional and Council Health Management teams as well as improving quality of care in response to results in the quality checklist project processes.

To ensure that health facilities such as dispensaries, health centers, and hospitals, maintain quality service and achieve results, a verification team visits each facility on a quarterly basis and provides a quality score, which then impacts the amount of incentive payment each facility receives. Similarly, teams assess data quality and adjust disbursements based on the quality of data, and adjust disbursements based on the quality of data reported through the Health Management Information System (HMIS).

EXPECTED RESULTS

- Increased availability of health supplies (including medicine) at health facilities.
- Increased health care utilization in primary health care facilities.
- Quality health service provision.
- Gains in health care providers’ productivity and efficiency in service delivery.
- Higher quality data that is used for evidence-based decision-making.
- Health management teams, MSD, and facility governing committees will be more accountable and responsive.

BUDGET \$49.9 million

DURATION
July 2015-July 2020

ACTIVITY LOCATIONS
Shinyanga, Geita, Mwanza, Tabora, Pwani, Simiyu, Kagera, and Kigoma

IMPLEMENTER
World Bank

PARTNERS
Government of Tanzania

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