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PS3 CASE BRIEF PLANREP

Access to PlanRep enables health facilities to directly plan and budget their services, including engaging citizens to ensure plans are responsive to community needs.

When facilities are empowered to plan and budget for themselves, services are often better and more tailored to the communities they serve. Until 2018, Local Government Authorities (LGAs) in Tanzania were responsible for developing the yearly plans and budgets for their facilities. Information was aggregated at the LGA level and often not communicated to the facility level, making it difficult for facilities to plan, budget and effectively manage services for their beneficiaries.

The United States Agency for International Development (USAID) through the Public Sector Systems Strengthening Project (PS3), in partnership with the Government of Tanzania (GOT), health basket funders and other development partners redesigned and implemented PlanRep.

PS3 worked across the education and health sectors using a systems approach to identify interventions that impacted multiple functions in the health system at once, such as information systems and data use, human resources, finance, governance, service delivery and quality improvement. Through PS3, USAID and the GOT are strengthening the systems that deliver important services to Tanzanians and paving the way for Tanzania to rely less on foreign donor assistance and more on the ingenuity of Tanzanians themselves.

COMPARATIVE ADVANTAGE

PlanRep is a web-based system used across the education and health sectors to plan public services. It replaces a former system that was error-prone, disconnected from other information systems, and fragmented between sectors. PlanRep solves those issues because it exchanges information with

other key public financial management systems including the Local Government Revenue Collection Information System (LGRCIS), the LGA accounting system Epicor, and the Facility Financial Accounting and Reporting System (FFARS). Together, these four systems exchange information and create a strong, more informed foundation for managing public services.

IMPACTS ON THE HEALTH SYSTEM

PS3 supported the GOT to enhance and extend PlanRep for use at the facility level in all 185 LGAs and 24,229 public health facilities and schools in Tanzania's FY2018 to FY2019. Extension to the facility level enabled facility management and governing committees to directly plan and budget their services - including engaging citizens to ensure plans are responsive to community need. PlanRep allows facilities to directly manage and monitor their plans and budgets, increasing efficiencies, reducing errors, and empowering management decision-making. PlanRep now includes "service outputs" – allowing facilities to plan and budget based on the services they provide instead of using rigid, line item budgets. With the inclusion of "service outputs" facilities can fully leverage the payment formulas and incentives in Direct Facility Financing.

A later analysis conducted by USAID through Data for Development (D4D) showed that automated review and approval of plans contributed to 53% reduction in costs for planning and budgeting, 61% reduction on printing, photocopying, binding & stationery costs and 59% reduction in the costs for budget scrutinization at the national level.

In the past, LGAs would have to print documents and travel to the capital to defend their budgets. PlanRep has also contributed to time savings, allowing facility staff to invest more time in better planning, management and service delivery.

The institutionalization of PlanRep service outputs across public health and education facilities in Tanzania means that traditionally less prioritized health services and programs like for nutrition and gender can be accounted for in budget planning. Tanzania has traditionally struggled to put into place a system for planning and budgeting for nutrition programs. PlanRep changes that because there is now a discreet budgeting objective for nutrition in the system and now every council in Tanzania is required to allocate and maintain a portion of its budget for nutrition. The government can see how much is being spent and compare the budget with health outcomes so that supportive interventions to improve nutrition where needed, can be put in place. PlanRep gives health facilities the system they need to better plan and budget, allowing them to optimize their financial resources to deliver accessible and higher quality services to their beneficiaries and communities.