



# THE ZIMBABWE RMNCH SCORECARD

## Background

### A Call to Action

The Zimbabwe has made great progress in reducing under-five child mortality from 129/1,000 live births in 2005 to 75/1,000 live births in 2014 although this is still higher than the 2015 MDG target of 25/1,00 live births. The maternal mortality ratio also declined from a peak of 740/100,000 births in 2005 to 581/100,000 births in 2014 and although some progress has been made, the rates are still very high and the country is not on track to achieve the millennium development goals (MDG) mortality target of 130/100,000. Zimbabwe has therefore made it a national priority to strengthen and ensure equitable access to high impact maternal and child health interventions to accelerate progress towards reducing preventable morbidity and mortality as focus shifts from the MDGs to the Sustainable Development Goals (SDGs).

### The Response

The Ministry of Health and Child Care (MOHCC) introduced the Reproductive, Maternal, Newborn and Child Health (RMNCH) Scorecard as a management tool to enhance accountability and drive action to improve performance of RMNCH priorities in August 2014. In October 2015, the Ministry convened a two-week exercise to identify opportunities to further strengthen the impact of their RMNCH scorecard and management tool. The African Leaders Malaria Alliance (ALMA), a forum of African Heads of State and Government, supported the exercise. Information was collected through interviews and group discussions, document reviews and questionnaires. At National level, meetings were held with senior Ministry of Health Directors and RMNCH programme managers, health information systems officers and development partners (UNICEF, WHO and UNFPA) who have partnered with the MOH implementing the use of the RMNCH scorecard.

### Progress

The MOHCC has produced five quarterly national scorecards since August 2014. These have led to targeted actions being taken to improve performance of key indicators. When the progress from the first three scorecards in 2014 showed targets had been achieved,

the Ministry convened a multi-level meeting and selected new priority indicators from the second wave for inclusion in the scorecards produced in 2015. During the support strengthening mission, the MOHCC and partners committed to officially launching the RMNCH scorecard as a management tool, rolling out the scorecard to district level and strengthening its use and impact at all levels.

## Strengths of the Zimbabwe RMNCH Scorecard

- The RMNCH scorecard has been produced for each quarter since roll out in August 2014 and shared with the Minister of Health, Permanent Secretary, Principal Directors, Programme Directors, provincial medical directors and medical officers of health, who provide feedback including questions on indicator performance and data quality
- The indicators in the scorecard are aligned with the indicators used in the national development blueprint The Zimbabwe Agenda for Sustainable Socio-Economic Transformation (ZimAsset), which are reported quarterly to the Office of the President and Cabinet as well as the Results Based Financing for health programme implemented in some districts.
- When the progress from the first three scorecards in 2014 showed targets had been achieved in some of the selected indicators, the Ministry convened a multi-level meeting and selected new priority indicators from the second wave for inclusion in the scorecards produced in 2015 and revised the thresholds for some of the indicators in-line with the MOHCC targets.
- The RMNCH scorecard was used to select provinces for situation analyses informing the development of the Zimbabwe Child Survival Strategy and Health Sector Strategic Plan
- The scorecard has resulted in targeted actions to address underperformance For example:
  - Training health workers and provision of required equipment and infrastructure to increase proportion of facilities providing comprehensive essential obstetric and neonatal care (CEmONC).
  - Task shifting of the insertion of implants from hospitals to clinic level thus increasing access and uptake of long term family planning methods.
  - Reimbursement of transport costs for pregnant women in one province to increase institutional delivery rates

- Review of procedures and institution of reminders to health workers at district level to submit Maternal Deaths Notification Forms to improve reporting
- Training of nurses in malaria case management to improve prompt access to treatment for malaria in pregnancy in a province where malaria is a leading cause of maternal death

## Future actions

- The MOHCC will decentralize the scorecard to district level and train key health staff on scorecard production as well as use of the RMNCH scorecard tool's accountability and action functions
- The MOHCC is committed to using the scorecard for tracking of the Results Based Financing programme and for ZimAsset reporting
- The Ministry of Health leadership will include the scorecard for discussion at key ministry of health and provincial and district development meetings.
- Partners are committed to support the MOHCC roll out and strengthen the use of the scorecard at district level for management and accountability

## Conclusion

Zimbabwe's RMNCH scorecard provides a strong foundation for the country to build on as it strengthens its health systems to accelerate progress towards improving maternal health and child survival. The scorecard will also help the country focus on accountability for maternal and child health outcomes, which will be required in the transition from MDGs to the sustainable development goals (SDGs).