

## **Round Table Implementation Meeting (RTIM) 2024: Draft Sector Working Group (SWG) Report**

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*This is a joint report of SWG Chair and Co-chairs. Please consult with your sub-sector working groups as appropriate and enclose the relevant documents to this report.*

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### **1. The main objectives and targets of the SWG for 2024 (1/2 page)**

The Health Sector aims to continue the implementation of the 9th Health Sector Development Plan (2021-2025) in alignment with the 9th National Socio-Economic Development Plan (NSED) (2021-2025) and the implementation of the Health Sector Reform Strategy for phase III. The Annual Health Sector Development Plan 2024 aims to contribute to achieve Universal Health Coverage (UHC) by 2025, achieve the conditions that will enable the nation to graduate from the Least Developed Country status by 2026 as well as to achieve the Sustainable Development Goals (SDGs) by 2030; specifically, it ensures all people and ethnic groups stay healthy, extending their average life expectancy, and adopting new healthy lifestyles.

The key targets for 2024 of the health sectors are as follows:

1. Prevalence of underweight in children under five will remain at 16%;
2. Prevalence of stunting among children under five will be at 28 %;
3. Infant mortality rate of children under one remains at 22 per 1,000 live births;
4. Children under five mortality rate remains at 32 per 1,000 live births;
5. Maternal mortality ratio remains at 120 per 100,000 live births;
6. Percentage of deliveries with skilled birth attendants must reach 84% for the targeted population;
7. Immunization rate for Penta 3 for children under one must be at 95% of the target population;
8. Percentage of households with access to clean water is at 94% of the total population;
9. The percentage of households using latrines must cover 84% of the total household;
10. National Health Insurance Coverage rate is at 94.5% of the total population;
11. The percentage of model health village certification is at 84% of all villages.

**2. What are the key results and impacts achieved within your sector in 2024 compared to the 2023 RTIM policy recommendations, and the 9<sup>th</sup> NSEDP, SDGs and strategic plan of the sector? (1-2 pages)**

According to the policy recommendation at RTIM in 2023, and the 9th NSEDP, SDGs, as well as Sector Strategies, in the 2024, the health sector has focused on implementing the policy recommendation from RTIM in 2023 by focusing on service quality improvement and achieving 11 indicators with high responsibility, which can be summarized as follows:

***1) Enhancing the use of information systems and technology***

The launch of the Digital Health Strategy 2023-2027 marked a significant step towards leveraging digital technologies to enhance healthcare delivery. This initiative was further supported by coordination with the Government Center and the Ministry of Technology and Communications to optimize the use of the E-office system, ensuring streamlined and consistent management of incoming and outgoing documentation within the Ministry of Health. Significant progress has also been made in strengthening the district health information software version 2 (DHIS2)-based Health Management Information System (HMIS) since its inception in 2013. Over the past decade, HMIS has become a well-established and well-integrated system, providing critical data to support informed decision-making and facilitating timely reporting and monitoring of health service utilization information from health centers to the central level. Central and provincial hospitals, as well as Nambak District Hospital, have adopted the electronic medical records (EMR) system, enhancing individual level patient data management.

Additionally, advancements include the implementation of the Electronic Immunization Registry (EIR), Client Health Registry (CHR), modern tools, and the Health State Accounting System (HSAS) for health budget management. Efforts are also underway to strengthen the Civil Registration and Vital Statistics (CRVS) system, particularly through birth and death notifications and the use of medically certified causes of death for health facility deaths.

## **2) *Enhance accessibility to health services***

Focused on implementing the 9<sup>th</sup> Five-Year Health Sector Development Plan (2021-2025) as well as the Annual Health Sector Development Plan for 2024 to ensure services provision widely, good quality of care and fairness that ensures all people and all ethnic groups stay healthy, ensuring a healthy life expectancy, along with a new healthy lifestyle plan that is not at risk to health and placing emphasis on hygiene, disease prevention and health promotion as key and consider treatment and services provision is important by focusing on:

- Maternal and child health and nutrition;
- Health promotion activities by providing health education through a various of channels to change their mindset and lifestyle with hygiene principles;
- Clean water and the use of latrines of the households as well as primary health care which is promoting a model health village certification and conducting outreach as integrated activities in remote areas;
- Preparedness for and to respond to seasonal disease outbreaks and health emergency by using a network of surveillance systems covering of all provinces and districts across the country. There are also 19 disease/symptom surveillance systems under the DHIS2 and a coordination mechanism between the centre and the provinces in monitoring information/data and reporting as well as implementing measures to control dengue and malaria and paid attention to the control of various infectious diseases;
- Providing health services to entire of population by enhancing and improving treatment and upgrading the infrastructure of hospitals at various levels to meet the Ministry's standards and quality including essential medicines and medical equipment, and improving services according to the policy of 5 Goods, 1 Satisfaction in order to have a better tangible success;
- Paying attention to managing, developing and distributing qualified public health workers by completing the HRH Development Strategy until 2030 and focusing on health staff allocation and retention to provide services to sub-national levels at remote areas. Currently, the Ministry of Health has a total of 19,560 staff, including 12,853 females, of which the sub-national levels account for 83%.

## **3) *Focus and supervise the implementation of health sector priority plan in accordance with 7 programs, 47 sub-programs, accelerating the achievement of 11 indicators endorsed by the National Assembly, which by September 2024 have made progress as below:***

### **A. *There are 4 indicators that are able to achieve***

- Percentage of households with access to clean water in the first 9 months of 2024 is 94.41% of the total population (target 94%);
- Percentage of households using latrines in the first 9 months of 2024 is 97.13% (target 84%);
- National Health Insurance Coverage rate in the first 9 months of 2024 is 94.5% of total population (target 94.5%);

- Percentage of model health village certification in the first 9 months of 2024 is 92.03% of total villages (target 84%).

**B. *There are 3 indicators tend to meet targets***

- Infant mortality rate of children under one in the first 9 months of 2024 is 6.77 per 1,000 live births (target 22 per1,000);
- Children under-five mortality rate in the first 9 months of 2024 is 7.81 per1,000 live births (target 32 per1,000);
- Maternal mortality ratio in the first 9 months of 2024 is 36.24 per100,000 live births (target 120 per100,000).

**C. *There are 4 indicators tend to fail to meet targets***

- Prevalence of underweight in children under five is 24.3% (based on survey results of LSIS III), compared to the targets in 2024 is 16% of target population;
- Prevalence of stunting among children under five is 32.8% (based on survey results of LSIS III), compared to the targets in 2024 is 28% of target population;
- Percentage of delivery with skilled birth attendants in the first 9 months of 2024 is at 60.33% of target population (target 84%);
- Immunization rate for Penta 3 in the first 9 months of 2024 is at 64.87% of target population (target 95%).

**4) *Increase coordination to facilitate budget support***

- Focused on and supported the management of the planning and budget of the Sector in order to ensure the achievement and completion of the Health Sector Development Plan in each period;
- Coordinated with the Ministry of Finance on budget planning for each period to allow concerned stakeholders to understand and be aware of the budget needs to implement activities during that period;
- Carried out budget adjustment/revisions to ensure budget approval is in line and meet with the actual situation;
- Collaborated with the Ministry of Planning and Investment to set up a working group with the Ministry of Planning and Investment and other relevant ministries to address tobacco tax issues to improve the government's revenue generation.

**3.a. Based on the recommendations of the mid-term review of the 9th NSED, what are the SWG's key priorities for 2025? (1 page)**

Health sector targets by 2025 include:

1. Prevalence of underweight in children under five to **15%** of the target population;
2. Prevalence of stunting among children under five to **27%** of the target population;
3. Infant mortality rate of children under one to **20** per 1,000 live births;
4. Children under five mortality rate to **30** per 1,000 live births;
5. Maternal mortality ratio to **110** per 100,000 live births;
6. Percentage of delivery with skilled birth attendants to **85%** of target population;
7. Immunization rate for Penta 3 of children under one to **95%** of target population;
8. Percentage of households with access to clean water to **95%** of the total population;
9. Percentage of households using latrines to be **85%** of total households;

10. National Health Insurance Coverage to be **94.5%** of the total population;
11. Percentage of model health village certification to **85%** of the total villages.

In addition, to meet the targets identified above, the health sector in 2025 will focus on the following priority activities:

- Continue to implement the national strategy and action plan for integrated reproductive, maternal and new-born, and child health services and the nutrition strategy, focusing on provinces, districts and health centers that are still in difficult situation;
- Focus on building capacity for efficiency and effectiveness on monitoring, surveillance, risk assessment and response to health emergencies; continue preparation to eradicate diseases that cause health issues; ensure on controlling and accessing to treatment/services on tuberculosis (TB), HIV and STI and malaria towards eliminating communicable diseases, specifically malaria in the next strategic period;
- Improve and upgrade quality of health services at all health facility levels in accordance with policies and standards identified of the Ministry by upgrading the infrastructure to meet the standards, providing essential medicines and medical equipment, improving services according to the 5 Goods and 1 Satisfaction policy effectively; strengthening patient referral system and reducing the issues on non-communicable diseases; focus on a better management of private hospitals and clinics in accordance with regulations;
- Continue to address noncommunicable diseases (NCDs) risk factors at national and sub-national level as well as improve clinical management using the primary health care approach.
- Increase the monitoring of quality and surveillance on safety of food, medicines and medical products, starting from the importation, production, and distribution in order to limit the import of illegal and substandard on food, medicines and medical products; maintains the ISO 17025 standard of the National Center for Food and Drug ; Continue to develop the Centre, certify quality standards from the World Health Organization (WHO PQ); improve and develop provincial analytical units capable of analysing the quality of basic food and medicines; develop and implement state-of-the-art IT systems in approval process;
- Develop an estimation annual plan on the need of new human resources for health (HRH), develop an annual HR distribution report by gender, ethnicity, remote areas, and focus on increasing proportion of doctors, nurses, and midwiferies with good quality in health facilities;
- Develop a detailed plan on the need for upgrading staff to specialists at each hospital level and focus on not only providing training, short-term and long-term training/upgrading for both in-country and overseas, but also developing a Continuing Professional Development (CPD) system to retain qualified HRH in line with the standards of the ASEAN Mutual Recognition Arrangements (MRAs);
- Continue to support and supervise the implementation of the Health Sector Reform Strategy.

### **Improving Financial Sustainability**

- Improve tools, recommendations and training on capacity building on health development plans; increase ownership on collaboration, coordination with all stakeholders to create an integrated health development plan at both central and sub-national levels; focus on

the efficient and effective management for the implementation of projects/activities that use the government budget and ODA;

- Create conditions and implement the hospital autonomy mechanism of some central and provincial hospitals;
- Improve and manage the implementation of the National Health Insurance Scheme to be more sustainable, efficient and effective;
- Revise the renewal of the Tobacco Investment License Agreement (ILA) at the end of 2024 for the enforcement of health tax increases according to the tax laws and related regulations;
- Prepare for resilience in the transition period through Gavi's support strategy in 2025 and beyond.

**3.b. Considering the recommendations in the mid-term review of the 9th NSEDP, what are the priorities of your sector for the preparation of the 10th NSEDP? (1/2 page)**

As part of preparation for the development of the 10th National Socio-Economic Development Plan (2026-2030), the health sector has identified priorities in line with the priorities of the Health Sector Reform Strategy in order to achieve UHC and contribute to achieving the SDGs related to health as follows:

- Strengthen primary health care to reach the hard-to-reach population (unreached population) towards achieving the last milestones in eliminating communicable diseases and improving maternal and child health in alignment with the Health Sector Reform Strategy and the Health Sector Development Plan. Strategic investment to strengthen primary health care will be made to meet the national health targets and achieve the SDG targets in health by 2030. It will also contribute to building a resilient national health system well prepared for future public health emergencies, growing threats of climate change and increasing burden of non-communicable diseases (NCDs). Under this direction, shifting the health system's focus from treatment to health promotion and disease prevention with a focus on addressing risk factors of NCDs and strengthening the overall continuum of care and the essential public health functions will be a key priority.
- Improve and upgrade health infrastructure, placing infection prevention control and water, sanitation and hygiene requirements with consideration of climate change impact at the core of the efforts, at both central and sub-national level as standards along with medicines, tools, and modern medical equipment to provide quality of services; develop a good health service system with a people-centered focus, have an ethics principles, and pay attention to the health of people in accordance with the 5 Goods, 1 Satisfaction policy; transform the management of public hospitals to a mechanism of financial self-reliance (hospital autonomy) of central and provincial hospitals to create an independent economy as self-owners, as well as transform central hospitals into modern, excellent facilities that are managed and adjusted by the state; encourage and promote the participation of the private sector in providing health services;
- Improve and implement maternal and child health promotion services, focusing on reproductive health services, mothers, newborns, children, and adolescents by increasing the rate of family planning services, prenatal care, delivery, and postnatal care. Implementation of nutrition work aims at reducing the rate of malnutrition, prevalence of

underweight and stunting, and wasting and increasing the rate of household consumption of iodized salt. To improve efficiency and effectiveness, strengthening integrated service delivery across maternal and child health, immunization and nutrition services will be another key priority;

- Enhance the quality of domestically produced medicines and medical products in order to meet international standards; promote and invest in scientific research infrastructure, develop traditional medicine, and promote and encourage the potential of traditional medicine. Traditional medicine needs to be combined with modern medicine by utilising natural resources to produce medicines for domestic use as well as export; enhance and develop the research laboratories in 3 strategic provinces in order to provide basic research services related to food and medicines;
- Strengthen well-distributed, competent and qualified health personnel, with a complete set of medical specialists in each field capable of serving society as a whole; establish high standards for learning and teaching in health education institutions, select excellent students to become educators, and reform health education institutions in order to have higher standards and quality. In addition, expand the national licensing and registration system beyond medical doctors, nurses, midwives, and dentists, and establish a Continuing Professional Development (CPD) system to renew their license and retain qualified HRH;
- Eliminating communicable diseases in the coming years according to the set national and global targets and strengthening the national health system's preparedness and readiness. Clear targets and strategies to eliminate malaria, TB and HIV will be set and implemented by 2030. Based on the results from the Joint External Evaluation in 2025, a set of priorities will be identified to strengthen the country's capacity to prevent, detect and rapidly respond to public health emergencies;
- Use modern tools in the administration and management of work to become highly effective by determining priority tasks, developing financial plans, managing health financing, and managing assets both at the central and sub-national levels; ;
- The development of up-to-date health information system, building on the progress made in integrated disease surveillance system, electronic medical records and unique identifiers in the development of civil registration and vital statistics, will provide a reliable and timely source of information for planning, monitoring, inspecting, and evaluating the progress across all the health programs.
- In the 9<sup>th</sup> Health Sector Development Plan period, the health sector revised and developed the key health laws. Under the next plan, it is essential to enforce the laws, regulations, and legislation promulgated to achieve the desired results and monitor the enforcement;
- Enhance sustainable health financing to prepare for the donor transition (particularly the transition of Gavi in 2026) and to strengthen the financial sustainability of the National Health Insurance system. To this end, it has to increase the domestic government budget for health sector reform and NHI in order to continue what has already been accomplished and continue to achieve UHC and SDGs by requiring strategic engagement with development partners;
- Develop an effective health insurance system that can cover both disease prevention, diagnosis, and treatment by improving the fund mobilization mechanism and effective management of the fund.

#### **4. What are the key lessons learned from the SWG, including lessons from the mid-term review of the 9<sup>th</sup> NSEDP? (1/2 page)**

Based on the implementation experience of the past four years, the following positive and negative aspects can be identified:

##### **1) *Positive aspects:***

- Coordinated with related sectors at the central and sub-national levels, with social organizations and with various development partners to ensure that the health sector receives financial and technical support from various parties which help make the health sector achieve priority goals. Additionally, all Lao population have taken responsibility for improving their own health, resulting in the achievement of many of the indicators that have been approved by the National Assembly.
- The health sector has focused on the improvement of health service network, upgrading infrastructure and medical equipment both at the central and sub-national levels, as well as building capacity for provision of health services, and improving the patient referral system to ensure quality health services.
- With close collaboration with the Ministry of Home Affairs, Ministry of Education and Sports, and other relevant ministries, the health sector has taken proactive and successful steps to promote primary health care, improve community engagement, and strengthen community ownership in order to promote health at the grassroots level. As a result of this effort, the people of Lao PDR will be able to better understand the importance of primary health care and their health in order to contribute to achieving the health indicators approved by the National Assembly.
- There have been a number of laws and legislations formulated, including the Law on Health, and Primary Health Care (PHC) Law. Meanwhile, the Law on Health Care, the Law on Communicable Diseases, and the Law on Tobacco Control have been revised in order to provide a better basis for implementation of health activities including piloting of 3 central hospitals for hospital autonomy namely: Mahosot Hospital, Friendship Hospital, and Sethathilat Hospital.

##### **2) *Key challenges:***

- Many infrastructures, especially at provincial hospitals, district hospitals and a number of health centers, are still not up to standard, and many medical equipment in many hospitals is outdated, inadequate to provide medical services. There is still a lack of personnel or HR in rural areas, both in terms of quantity and quality, which leads to a lack of trust among the population regarding the quality of services, resulting in an influx of people seeking treatment in provincial hospitals and central hospitals, or abroad for those who can afford.
- The government budget allocation to the health sector for infrastructure improvement, procurement of medicines and medical equipment, development of the National Health Insurance system and human resources for health remains limited. Along with the financial and economic difficulties, inflation last year resulted in stock-out of medicines and medical equipment in many hospitals. This led to difficult situations in improving the quality as well as providing health services.

- Moreover, sustaining contributions to fulfil co-financing requirements in United States dollars is challenging. Increasing government budget for health through securing co-financing requirements is critical to maintain essential health services. In addition, delayed disbursement of funding to health programs has been highlighted as a key challenge. It is important to improve funding flow to ensure no interruption in providing essential medicines and services. Both issues require timely and active engagement with donors and relevant ministries, particularly the Ministry of Planning and Investment, Ministry of Finance, and National Assembly. Donors will also need to review and design donor transition plans with the government based on a thorough assessment of the country's readiness and capacity.
- With limited resources, identifying areas for efficiency gains and avoiding duplicated support are getting more critical. Integrated service delivery across maternal and child health, immunization and nutrition services, for instance, has been the government's key direction. Many challenges faced in implementation of integrated service delivery can be overcome with strong commitment of the programs involved to maximize every opportunity to reach out to the target population and use the limited resources effectively and efficiently. Development partners' commitment and support to overcome vertical approaches and enable flexibility will also be a critical contributing factor. Furthermore, mapping partners' support across all the programs at both national and sub-national levels is another key issue to be addressed.