

THE FLEMING FUND COUNTRY GRANT FOR VIETNAM (FFCGVN)



The Fleming Fund
Country Grants



BACKGROUND

The Fleming Fund Country Grant for Viet Nam (FFCGVN), launched in 2019, focuses on strengthening human resources, laboratory and surveillance systems for antimicrobial resistance (AMR), antimicrobial use (AMU) and antimicrobial consumption (AMC) in the human, animal and environment sectors through a One Health approach.

The Department of Health and Social Care (DHSC)'s Fleming Fund is a UK aid programme supporting up to 25 countries across Africa and Asia to tackle AMR, a leading public health threat across the world. The Fund invests in strengthening surveillance systems through a portfolio of country grants, regional grants, and fellowships managed by DHSC's partners.

The FFCGVN is led by grantee - FHI 360 Vietnam - in collaboration with subgrantees and national partners.

FFCGVN PHASE 1 - 2 AT A GLANCE



FUNDER: the Fleming Fund, UK Aid (UK)



TIMELINE: May 2019 – Mar 2026



FUND: £8.82 million (I) + £3.4 million (II)



COUNTRY LEAD GRANTEE: FHI 360

KEY PARTNERS

Sub-grantees: NIHE², NIVR³, OUCRU⁴, PATH

National partners:

- Human health (HH): MSA⁵-MOH
- Animal health (AH): DAHP⁶-MAE⁷
- Environmental health (EH): VEA⁸-MAE

1. AMR/U/C: Antimicrobial Resistance, Antimicrobial Use & Antimicrobial Consumption
2. NIHE: National Institute of Hygiene and Epidemiology
3. NIVR: National Institute of Veterinary Research
4. OUCRU: Oxford University Clinical Research Unit

5. MSA: Medical Services Administration
6. From Mar 2025, DAH merged with DLP to form Department of Animal Health and Production (DAH)
7. From Mar 2025, MARD merged with MONRE to form a new Ministry of Agriculture and Environment (MAE)
8. VEA: Vietnam Environmental Agency

GOAL

Further strengthen surveillance systems for AMR/C/U in the human health, animal health and environment through a One Health approach

- Outcome 1: Quality production of AMR/C/U and burden data
- Outcome 2: Quality analysis of AMR data
- Outcome 3: Sharing of quality analysis of AMR data
- Outcome 4: Sustainable investment in AMR at country & globally

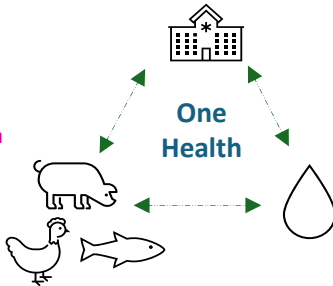
THE AMR SURVEILLANCE SYSTEM UNDER FFCGVN

Human Health surveillance (19 sites)

Passive surveillance of AMR bacteria using clinical specimens with monthly periodic reporting

Animal Health / Aqua surveillance (4 sites)

Active AMR surveillance in healthy pigs and chickens and pilot surveillance in aquaculture



Environmental Health surveillance (1 site)

Pilot AMR surveillance in the surface water

Human Health Laboratories

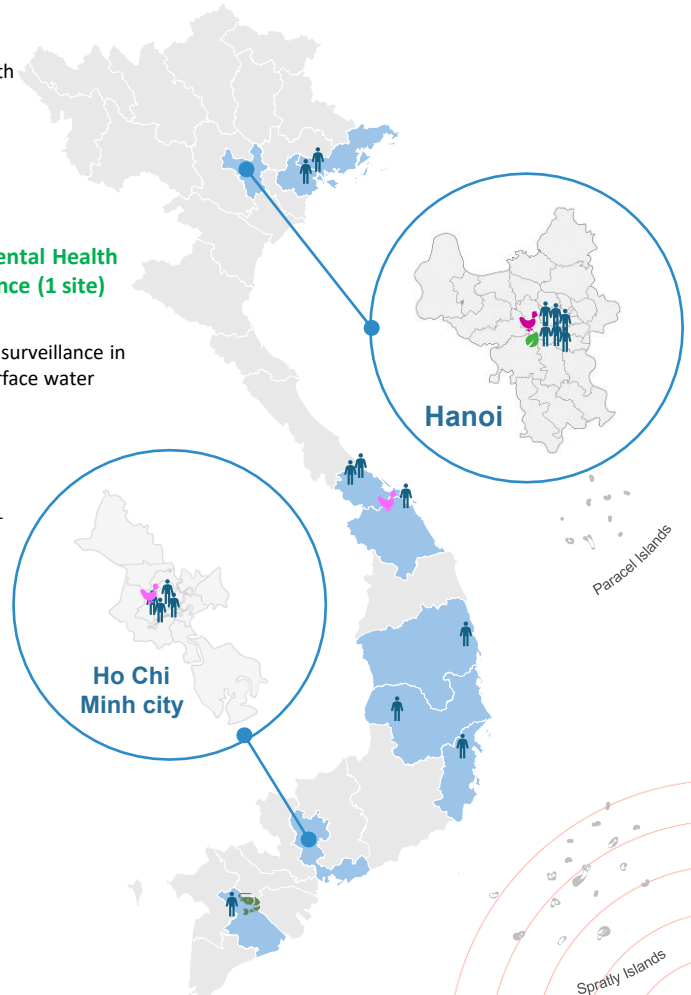
- Ho Chi Minh Hospital for Tropical Diseases
- Ho Chi Minh City University of Medicine-Pharmacy Hospital
- Pediatric Hospital No.1, Ho Chi Minh City
- Can Tho Central General Hospital
- **National Hospital for Tropical Diseases, Hanoi (NRL for 14 northern and central provinces)**
- **Bach Mai Hospital, Hanoi (NRL for 25 eastern and north-western provinces)**
- **Cho Ray General Hospital, Ho Chi Minh City (NRL for 24 southern provinces)**
- Hanoi Medical University Hospital
- Vietnam National Children's Hospital, Hanoi
- Viet Duc Hospital, Hanoi
- Saint-Paul Hospital, Hanoi
- Uong Bi Viet Nam-Sweden Hospital
- Viet Tiep Hospital, Hai Phong
- Hue University of Medicine-Pharmacy Hospital
- Hue Central Hospital
- Da Nang General Hospital
- Binh Dinh General Hospital
- Khanh Hoa General Hospital
- Dak Lak General Hospital

Veterinary Laboratories

- **NCVD1, Hanoi (AH Leading Site)**
- NCVD2, Ho Chi Minh City (AH Surveillance Site)
- RAH04, Da Nang (AH Surveillance Site)
- RAH07, Can Tho (Aqua Surveillance Site)

Environmental Laboratory

- North Center Environmental Monitoring, Hanoi (Surveillance Site)



Sprally Islands

KEY ACHIEVEMENTS

May 2019 – March 2025



The Fleming Fund
Country Grants



Continuous Support



Policy Advocacy



Biosafety and Biosecurity

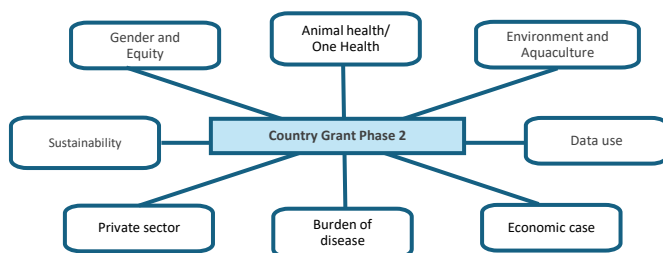


Microbiology Techniques



System Management & Data Analysis

Strategic shift and expansion in Phase 2



Strategic Frameworks and Planning



Developing the **National Antimicrobial Resistance Strategy 2023-2030** and the Monitoring and Evaluation Framework, along with Sectoral AMR Action Plans developed for HH, AH (2021 – 2025), and EH.

One Health Governance & Coordination



National Steering Committee, Subcommittees, and Technical Working Groups on AMR established.



One Health Partnership launched with 33 signatories; Multisectoral AMR MoU signed

Signing of the **Memorandum of Agreement on AMR Prevention and Control (2023)** between **4** Ministries and **6** Development Partners.

Surveillance and Data Systems



AH AMR (via WHONET) and AMC (VDMS) portals developed.



AMR surveillance strengthened through repeated rounds in AH (4 national, 2 provincial rounds), and piloted in Aqua and EH



HH AMR surveillance enhanced through isolate referral system by NRLs, private lab engagement, and Vietnam's submission to WHO GLASS



Integrated AMR surveillance piloted (Tricycle study)



AMC, AMU (PPS) surveillance and AMS piloted in HH; AH AMU guidance developed



Engagement of HH private sector in national surveillance system for AMR sharing



Piloted gender equity, disease burden, and costing analysis of AMR for expanding surveillance data

Laboratory & System Strengthening



19 Health Laboratories with Upgraded and Improved LIS-HIS Systems



Renovation of Facilities: **4** AH/Aqua Laboratories (NCVHI 1, NCVHI 2 and RAHO 7) and **1** HH laboratory



18 Advanced Automation Equipment and **100+** IT/Laboratory Devices provided



23 Labs supported with Technical Assistance and External Quality Assessment Programs (19 in HH, 4 in AH/aquaculture)



Integrated AMR surveillance piloted (Tricycle study)



Training and technical assistance missions conducted on microbiology testing, quality assurance, and AMR data analysis and management



45+ Technical Assistance Visit

More than **880**



male and

1,900



female

attendants in technical trainings

Research & Information Sharing



10+ Research studies conducted



3 National One Health AMR Symposia organized



This project is funded by the Department of Health and Social Care's Fleming Fund using UK aid. The views expressed in this publication are those of the FHI 360 and not necessarily those of the UK DHSC or its Management Agent, Mott MacDonald.