

HRP Health Sector Objectives, Activities and Indicators – Update 2018

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Introduction

This document presents the Health Objectives, Activities and Indicators proposed to be monitored and reported on during 2018, based on the agreements and participation of the hubs in 2017. The Information Management Team in hubs and WoS have access to the updated list in <http://bit.ly/wosHealthimwg> in the sheet: HRP Indicators 2018

Contents

Introduction.....	1
HRP Health Sector Objectives.....	1
Objective 1	2
Activities:.....	2
Indicators:	2
Objective 2	3
Activities	3
Indicators:	3
Objective 3	4
Activities	4
Indicators:	4
Periodic Monitoring Review -PMR indicators:	4

HRP Health Sector Objectives

1. **Objective 1:** Provide life-saving and life-sustaining humanitarian health assistance with an emphasis on those most at risk and in need
2. **Objective 2:** Strengthen health sector coordination and health information systems to improve the effectiveness of life-saving health response for people in need, with an emphasis on enhancing protection and increasing access for health
3. **Objective 3:** Improve health system capacity for support of continuity of care and strengthen community resilience and response to IDP movements and disease outbreaks

Objective 1

Provide life-saving and life-sustaining humanitarian health assistance with an emphasis on those most at risk and in need

Activities:

- 1.1 Strengthening provision of essential primary and secondary health care services
 - 1.1.1 validation and scale-up of an Essential Primary Health Care Package
 - 1.1.2 Strengthening provision of essential medicines and medical supplies and equipment
 - 1.1.3 Strengthening comprehensive care for trauma and injuries through provision of phased trauma management and care for associated disability
 - 1.1.4 Scaling up provision of physical rehabilitation services at facility level
- 1.2 Strengthening provision of EMONC Services and Improving maternal health services across all levels of care.
- 1.3 Strengthening of medical referral system.
- 1.4 Strengthening and expanding the communicable disease surveillance and response system.
- 1.5 Scaling up and supporting provision of mental health services at the community and health facility level
- 1.6 Strengthening management and primary and secondary prevention of non-communicable diseases (the proxies currently reported on for this activity are indicators 1.1 & 1.2)
- 1.7 Implement routine and supplementary immunization services for all children under one and under five

Indicators:

- 1.1 Outpatient consultations at health facilities, including through outreach service.**
 - 1.1.1 Number of outpatient consultations (static and mobile services).
 - 1.1.2 Number of admissions.
 - 1.1.3 Number of treatment courses provided (medications provided/prescribed, diagnostic procedures, minor medical interventions including dialysis).
- 1.2 Provision of Essential Primary Health Care Package.**
 - 1.2.1 Number of health facilities which providing the Essential Primary Health Care Services (outpatient consultations, NCDs, EPI, antenatal care, reproductive health).
 - 1.2.2 Number of children U1 covered with DPT3 or equivalent pentavalent vaccine (national program).
 - 1.2.3 Number of children U5 covered with DPT3 or equivalent pentavalent vaccine (stand-alone campaigns).
- 1.3 Trauma management.**
 - 1.3.1 Number of trauma cases received treatment.
 - 1.3.2 Number of health facilities with referral reception capacities.
 - 1.3.3 Number of war related trauma cases received treatment.
 - 1.3.4 Number of blood banks providing screened and safe blood products.
- 1.4 Rehabilitation services.**
 - 1.4.1 Number of facilities providing rehabilitation services (Mental and physical).
 - 1.4.2 Number of mental health cases receiving specialized assistance.
 - 1.4.3 Number of new mental health cases referred.
 - 1.4.4 Number of physical rehabilitation cases supported.
 - 1.4.5 Number of new cases for physical rehabilitation.

1.5 Number of facilities providing EMoNC services per 500,000 population

1.6 Deliveries attended by a skilled birth attendant.

- 1.6.1 Number of vaginal deliveries attended by skilled birth attendant.
- 1.6.2 Number of C- Sections.

1.7 Referral systems

- 1.7.1 Number of referred cases inside Syria to receive specialized treatment.
- 1.7.2 Number of referred cases outside Syria to receive specialized treatment.
- 1.7.3 Number of available ambulances.

1.8 Disease surveillance and reporting.

- 1.8.1 Number of sentinel sites registered for weekly surveillance reports.
- 1.8.2 Number of sentinel sites submitting weekly surveillance reports.

Objective 2

Strengthen health sector coordination and health information systems to improve the life-saving health response for people in need, with an emphasis on enhancing protection and increasing access for health services

Activities

Coordination

- 2.1 improve coordination through joint contingency and preparedness plans for disease outbreaks and in response to changing conflict dynamics across the five hubs.
- 2.2 Regular coordination meetings at Hub and WoS level for de-confliction of areas of overlap, gap identification and collaborative efforts between partners and across hubs.

Information Sharing and Data Collection

- 2.3 Continued roll out of health information systems (HIS) at the cluster/working group level.
- 2.4 Support improved reporting of health partners into 4W database.

Protection

- 2.5 Advocate for the protection of health care staff and patients at health facilities.
- 2.6 Mainstream protection efforts throughout health programming through coordination fora and training/workshops with health partners, with focus on increasing access to hard to reach, besieged and militarily encircled areas.
- 2.7 Register, report and conduct advocacy on attacks on health care.
- 2.8 Support provision of proper care for survivors of GBV.

Indicators:

- 2.1 Number of joint-contingency/preparedness plans developed by hubs and on WoS level.
- 2.2 Number of Regular coordination meetings at the Hub and WoS level.
- 2.3 Number of partners reporting into the 4W database.
- 2.4 Number of reports documenting attacks on health facilities and medical staff.
- 2.5 Number of health facilities providing clinical management of rape CMR.

Objective 3

Improve health system capacity for support of continuity of care and strengthen community resilience and response to IDP movements and disease outbreaks

Activities

- 3.1 Training, retaining and increasing the capacity of health care providers
- 3.2 Training community health care workers.
- 3.3 Rehabilitating and reinforcing health facilities, including physical structure, equipment/supplies to provide safe and secure environments for health service delivery
- 3.4 Promote mobile medical units for emergency response
- 3.5 Promote rapid assessment of emergency situations and design of rapid response planning and implementation

Indicators:

- 3.1 Number of healthcare providers trained and re-trained.
- 3.2 Number of community health workers trained and re-trained.
- 3.3 Number of mobile medical units supported.
- 3.4 Number of Rapid Assessment and Response Plans developed.

Periodic Monitoring Review -PMR indicators:

- 1) # of medical consultations (1.1.1+1.1.2+1.2.1).
- 2) # of treatment courses provided (1.1.3)
- 3) # of trauma cases supported (1.3.1+1.3.2+1.3.3).
- 4) # of children under 5 immunized (1.2.2+1.2.3).
- 5) # of sentinel sites submitting weekly surveillance reports or Percentage of all outbreaks investigated in a timely manner (1.8.1).
- 6) # of deliveries attended by skilled attendant (1.6.1+1.6.2).
- 7) # of facilities providing rehabilitation services (1.4.1).
- 8) # of reports monitoring violence against health MVH (2.5).
- 9) # of health care workers trained and re-trained (3.1+3.2).