

Operational Plan Matrix

Strategic Goals /Specific Objectives	Course of Action/Activities	Responsible Person/Dept	Partner	Timescale Y1, Y2, Y3, Y4	Indicator By 2020	Means of verification	Assumptions
SG1. Modernize and Strengthen Sector Governance	target: within 5 years, the MOPH Governence is imporved through adequate staffing, e- health system established at Qada level and quality and performance monitring system						
	CA1.1.1 Re-organization of organogram of MOPH to include emergency and preparedness response unit and NCD program						
	A1.1.1.1 Consultation within MOPH for revised organogram for final approval	general directorate, medical professionals departments	OMSAR	Y1 Y2	revised organogram approved	approved revised organogram avaialble at website of MOPH	commitment by Cabinet to upgrade MOPH capacity

<input type="checkbox"/> A1.1.1.2 Develop and implement a human resources plan for the MOPH	Medical Professional Department	All relevant professional orders , academia, WHO	Y3 Y4 Y5	recruitment progressively expanded	MOPH staffing reports	political commitment ensured; sustained funds
A.1.1.1.3 establish selected critical Units/programs at the mOPH	general directorate/directorate of prevention		Y1Y2Y3Y4 Y5	units/programs established for: emergency preparedness and response, NCD, nutrition and food safety	MOPH records and respective plans of action	political commitment; availability of adequate staff and sustainable funding
CA1.1.2 Develop and strengthen regulatory capacity						

**SO1.1 Stngthen
Executive and non-
executive regulatory bodie**

A1.1.2.1 upgrade the Accreditation and Licensing systems	Accreditation Program	All relevant professional orders, ESA	Y1, Y2, Y3, Y4, Y5	Conitnous cycles of Accreditation of hospitals	accreditation and licencing results reports published on website of MOPH	cooperation of Private sector continues
A1.1.2.2 establish Phamacovigilance and post-marketing systems	Pharmacy department	All relevant professional orders, academia	Y1 Y2	Pharmacovigilance reporting established and active	MOPH reports	cooperation of Private sector
A1.1.2.3 expand the Medical Technology Assessment Administration	HTA Department	All relevant professional orders, academia	Y1 Y2 Y3	HTA monitoring system functional	MOPh reports	Adequate staffat MOPH; cooperati on of Private sector
A1.1.2.4 expand the Quality Assurance for Pharmaceutical Products initiative	Quality Assurance of Pharmaceutic al Products Program	All relevant professional Orders	Y1 Y2 Y3 Y4 Y5	Quality assurance initiative established and active	MOPh reports	adequate staff at MOPH; cooperatio n of pivate sector
A1.1.2.5 maintain Public Managed Care Provider Executive/Third Party Administrator for 'insurer-of-last-resort' functions	general Directorate	Syndicate of Hospitals, Minity of Finance	Y1 Y2 Y3 Y4 Y5	TPA continous audit	MOPH contrac twith TPA; audit reports	adequate staff and funds at MOPH; cooperatio n of pivate sector

A1.1.2.6 Upgrade Good Storage Distribution & Packaging, Good Manufacturing Practices and Good Laboratory Practices Initiatives	Quality Assurance of Pharmaceutical Products Program	syndicate of manufacturers of Pharmaceuticals, WHO	Y1 Y2 Y3 Y4 Y5	GSDP, GMP, GLP guidelines established and enforced	updated guidelines available on MOPH website, training reports	cooperation of private sector
A1.1.2.7 develop and disseminate Code of ethics for drug promotion	Health Education Department	All relevant professional orders, Pharmaceutical industry	Y2 Y3 Y4 Y5	Drug promotion in line with code of ethics		monitoring capacity of MOPH is adequate; cooperation of private sector
A1.1.2.8 organize promotion initiatives for Generics use at the national level	Health Education Department	All relevant professional orders, Pharmaceutical industry, Media, WHO	Y2 Y3 Y4 Y5	Awareness campaign Conducted	material produced available on website of MOPH; awareness activities reports	cooperation of private sector
CA1.2.1. Develop a decentralization plan at Qada level						
A1.2.1.1 Assess the capacity of Qada health unit for monitoring health of population	general directorate	WHO, Academia	Y1	Assessment conducted	report of assessment	MOPH political commitment ensured

SO1.2 Strengthen sub-national public health administrations

A1.2.1.2 Capacity building, training on population health monitoring	Department of statistics, ESU	WHO, academia	Y2Y3Y4 Y5	Relevant trainings conducted	training material available on MOPh website; reports of trainings	MOPh political commitment; conducive health system infrastructure; availability of funds
A1.2.1.3 Staffing at Qada Level	general directorate,	Ministry of finance	Y1Y2Y3Y4 Y5	number of Qada health units sufficiently staffed	MOPh records	Government political commitment; availability of sustained funds
CA1.3.1 Improving information gathering and surveillance						
A1.3.1.1 Expand the Hospital based death notification system(Civil Registration and Vital Statistics)	Statistics Department	Syndicate of Hospitals, Orders of physicians and Nurses, WHO	Y1Y2Y3	number of hospitals reporting deaths	MOPh reports yearly published	cooperation of private sector; non opposition of MOI/CRVS
A1.3.1.2 implement a national wide project for ICD 10	Statistics Department	professional orders; WHO	Y2Y3Y4Y5	ICD-10 implemented at national level	reports of training;	cooperation of private sector;

**SO1.3.Strengthening
(sector level) information
systems and statistic**

A1.3.1.3 Develop an e-health strategy	E-Health Program	professional health orders and syndicates, OMSAR, WHO	Y1Y2Y3Y4 Y5	E-health strategy developed and implemented		cooperation of private sector; availability of funds; e government commitment
A1.3.1.4 upgrade the interoperability platform for health facility and provider networks interfaces (Primary, Hospitals, Pharmacies).	E-Health Program,	professional orders and syndicates, OMSAR, WHO, WB	Y1Y2Y3Y4 Y5	IT platforms upgraded and networks interfaces established	number of e platforms operations, reports generated through the e health system	cooperation of all stakeholders; e government commitment; IT infrastructure adequate; MOPH staff adequate
CA1.3.2Improving sector level data (for decision-making) reporting						
A1.3.2.1 Staffing	general directorate	ministry of finance/ Cabinet of ministers	Y1Y2Y3Y4 Y5	number of staff recruited	MOPh records	political commitment; availability of sustained funds

A1.3.2.2 Issuing annual health statistics reports	Statistics Department	main key health stakeholders	Y1Y2Y3Y4Y5	Statistical reports issued annually	reports published at MOPh website	cooperation of key health stakeholders
A1.3.2.3 Integrate National Health Accounts at government level	Statistics Department	MOI, MOD, NSSF, MOL MOF, WHO,	Y1Y2Y3	NHA activated at national level	NHA yearly reports published at MOPh website	cooperation of key health stakeholders
A1.3.2.4 Develop a unique identifier for beneficiaries of MOPH public services (World Bank Project)	Statistics Department	WB	Y1Y2	unique identifier for mOPH beneficiaries operational	MOPH reports	political commitment; availability of funds
CA1.4.1 Improve regulatory capacity of MOPH in Health Research						

SO1.4.Strengthening analytical, evidence, consensus and partnership formation capacity of MOPH

<p>A1.4.1.1 review the health sector Finance and Governance and options towards Universal Health Coverage</p>	<p>general directorate</p>	<p>WHO, Academia</p>	<p>Y2Y3Y4</p>	<p>review implemented</p>	<p>review report document available</p>	<p>political commitment, facilitation of access to information by all stakeholders</p>
<p>A1.4.1.2 Organize National Consultation of Public Health Priority research areas</p>	<p>Health Education Department</p>	<p>All public health institutions in the country , WHO</p>	<p>Y2 Y4</p>	<p>at least one consultation every 2 years</p>	<p>list of research priorities available on MOPH website</p>	<p>interest of national institutions</p>
<p>□ A1.4.1.3 Update regulations related to clinical trials and expand regulations to clinical trials that include medical devices</p>	<p>Health Education Department</p>	<p>professional orders and societies and syndicates, academia, WHO</p>	<p>y2 y4</p>	<p>Regulations Upgraded</p>	<p>regulation available on MOPH website</p>	<p>cooperation of stakeholders; adequate staffing at MOPH</p>

<input type="checkbox"/> A1.4.1.4 Set up a clinical trial registry	Health Education Department	professional orders and syndicates and societies, Academia, WHO	y2 y3 y4 y5	Registry Established	periodical reports on the MOPH website	cooperation of stakeholders; adequate staffing at MOPH
CA1.4.2 Develop the open network governance approach to engage stakeholder networks and strengthen partnerships						
A1.4.2.1 Conduct assessment and feasibility study	general directorate, PHC department	WHO	Y2Y3	Assessment conducted	report of assessment disseminated to key stakeholders	political committmemnt; adequate MOPH staffing; avaiability of funds
1.4.2.2 Pilot the open net-work approach modeling	general directorate	WHO, NGOs	y3Y4Y5	Pilot implemented	periodical progress reports generated to key syakeholders	political commitment; adequates taffinf: avaiability of funds

<p>SG2. Improve collective health and promotion across the life-cycle</p>	<p>target: within 5 years, population health will be improved in line with the SDGs, with focus on prevention and promotion</p>						
	<p>CA2.1.1.Non-communicable disease (NCD) promotion and risk-reduction</p>						
	<p>A2.1.1.1 organize Behavior change campaigns developed for anti-smoking and (childhood) obesity (diet and exercise), breast cancer early detection, breastfeeding, injuries and violence, HIV/STI etc..</p>	<p>Health Education Department, Mother & Child Department, National Anti-smoking program</p>	<p>professional orders, syndicates and societies, Media, NGOs,</p>	<p>Y1Y2Y3Y4 Y5</p>	<p>Relevant Awareness campiagns conducted at regular basis</p>	<p>IEC material produced avaiable at MOPH website; activities reports</p>	<p>avaialbility of funds: coopeartion of stakeholders, adequate MOPh staffing</p>

A2.1.1.2 expand School health programs and adolescents health program	Mother & Child Department	MEHE, WHO, UNFPA, UNICEF, NGOs, academia	Y1Y2Y3Y4 Y5	School health program expanded	IEC material produced available at MOPH website; activities reports	availability of funds, adequate staffing at MOPH and MEHE
A2.1.1.3 Review standards related to food quality with regard to NCD risk factors	Directorate of prevention	Academia, WHO, Codex alimentarius team, professional societies, LIBNOR	Y2 Y4	Food quality standards updated and implemented	updated standards published by LIBNOR and available at MOPH website	availability of adequate staff at MOPH; political commitment
CA2.1.2 Promotion and monitoring of maternal, child and adolescence health at PHC level						
A2.1.2.1 organize Community outreach activities and initiatives related to maternal, reproductive, sexual health, neonatal, child health and youth health	PHC Department	NGOs, UN humanitarian organizations, MOSA, Municipalities	Y1Y2Y3Y4 Y5	Relevant outreach activities implemented all over the country	MOPH reports	availability of funds; adequate staffing; cooperation of key stakeholders; security stability

SO2.1 Improve public health promotion and behavior change

A2.1.2.2 implementation of global school health surveys	Mother & Child Department	WHO;MEHE	Y5	Global health surveyys conducted every 5 years	GSHS report published at MOPH and MEHE websites	avaialbility of funds; adequate staffing at MEHE
CA 2.1.3.Reinforce the nutrition program						
A2.1.3.1 update the national guidebook for nutrition services at PHC (screening, awareness, and micronutrient replacement)	Nutrition Depatment	professional societies and syndicates, WHO, UNICEF, UNHCR	Y3	National guidebook updated and disseminated at PHC level	guidebook published at MOPH website	avaialbility of funds;
A2.1.3.2 Assessment of malnutrition and selected micro-nutrient deficiencies	Nutrition Depatment & PHC Department	academia, UN Humanitarian team, MOSA	y2y3y4	Relevant assessments conducted	repoprts disseminated to key stakeholders	avaialbility of funds

2.1.3.3. Capacity building on Nutrition (services provision at PHC level, management of malnutrition)	Nutrition Department & PHC Department	academia, UN Humanitarian team, MOSA, NGOs		Relevant trainings conducted	reports of trainings from MOPH	availability of funds
CA2.1.4 NCD Monitoring						
A2.1.4.1 Expand Cancer registry to include community data	Surveillance Unit	academia, professional societies	Y2Y3Y4Y5	Cancer registry expanded and published on yearly basis	periodical reports published on MOPH website	availability of adequate staff at MOPH
A2.1.4.2 Establish Diabetes Registry	Diabetes/NCD Program	academia, professional societies	Y3Y4Y5	Diabetes registry established and functional	periodical reports published at the MOPH website	availability of adequate staff at MOPH; cooperation of private sector

	A2.1.4.3 re-Establish Cardiovascular Registry	Cardiovascular/ NCD Program	academia, professional societies and orders	Y2Y3Y4Y5	Cardiovascular registry established and functional	periodical reports published at the mOPH website	availability of adequate staff at MOPH; cooperation of private sector
	CA2.2.1.Consumer and occupational protection, health and safety						
	A2.2.1.1 Reestablish occupational health program at MOPH	general directorate/ directorate of prevention		Y4Y5	Occupational health program established and functional	MOPH records an drelevant plan of action	availability of adequate staff and sustainable funding
	A2.2.1.2 Establish an occupational health registry	Occupational Health program	academia, professional societies	Y4Y5	Occupational health registry established and functional	periodical reports published on MOPH website	availability of adequate staff and sustainable funding

SO2.2. Improved consumer safety, environmental and sanitation measures for human health

A2.2.1.3 Revise and introduce legislations to ensure safety of human resources for health	occupational health program	academia,NSSF, professional orders and syndicates and societies	y3Y4Y5	Draft legislations for human resources safety for health finalized	draft document available to key stakeholders	political commitment
A2.2.1.4 Maintain and institutionalize food safety program	directorate of prevention/food safety program		Y1Y2Y3Y4Y5	Established food safety program	periodical reports and plan of action available to key stakeholders	political commitment; availability of staff and sustainable funding
CA2.2.2 Environmental safety						
A2.2.2.1 Link database of environmental health and sanitation program to MOPH-HIS	IT department	academia, professional societies, UN donors	Y1Y2Y3Y4Y5	IT platform operational	periodical reports available to key stakeholders	political commitment; availability of adequate staff and sustainable funding

A2.2.2.2 Review water quality and sanitation standards	department of sanitary engineering	LIBNOR, WHO	Y1Y5	Relevant standards reviewed and implemented	standrds available on MOPH website	availability of adequate staff at MOPH
A2.2.2.3 Establish a standard environment health and sanitation surveillane system	department of sanitary engeneering, ESU	WHO, MoInterior, Water and sanitation national authorities, CDR	y1Y2Y3Y4Y5	Relevant surveillane system established and functional	periodical reports available to key stakeholders	cooperation of key stakeholders;availability of adequate staff at MOPH
A2.2.2.4 Implement health care waste management standards in all health facilities (standards updates and training)	department of sanitary engineering	WHO, Moenv, MOI, professional orders and syndicates	Y1Y2Y3Y4Y5	Relevant standards updated, relevant trainings conducted and implemented at health facilities level	standrads available on MOPH website; training reports	political commitment; avaialbility of funds; updated legislations

	A2.2.2.5 Piloting of health cities model in selected areas	general directorate, multiple departments	WHO, UN Humanitarian partners, MoEnv, MOInterior	y2y3y4y5	Health cities model implemented in selected areas	reports of pilot phases disseminated to key stakeholders	political commitment; intra and interministerial cooperation; social mobilization
	CA2.3.1. Control of communicable diseases; to maintaining and expand the following programs:						
	A2.3.1.1 maintain HIV/AIDS program	NAP Program department of Communicable diseases	WHO, JUNTA, NGOS, professional societies	Y1Y2Y3Y4Y5	NAP plan implemented	yearly progress report on NAP strategic plan	political commitment; availability of trust Funds
	A2.3.1.2 maintain Hepatitis program(all)	Anti-Hepatitis Program /department of Communicable diseases	WHO,	Y1Y2Y3Y4Y5	Hepatitis Plan implemented	yearly progress report by the MOPH team	political commitment, availability of funds

A2.3.1.3 maintain and expand Tuberculosis program	Anti-TB Program	WHO, Global funds, NGOs professional societies and orders	Y1Y2Y3Y4Y5	TB strategic plan implemented	yearly progress report by MOPH team	political commitment, availability of adequate staffing and funds
A2.3.1.4 maintain Malaria	Anti-Malaria Program/ department of Communicable diseases	WHO	Y1Y2Y3Y4Y5	Malaria program implemented	yearly progress report by MOPH team	availability of staff
A2.3.1.5 Neglected Tropical diseases	department of Communicable diseases	WHO, UNHCR	Y1Y2Y3Y4Y5	Leishmania program implemented	yearly progress report by MOPH team	availability of staff
A2.3.1.6 Establish and implement antimicrobial resistance program	general directorate/department of communicable diseases/	National Committee for AMR, WHO, professional orders and syndicates and societies	Y1Y2Y3Y4Y5	antimicrobial resistance program established and implemented	yearly progress report by MOPH team	availability of adequate staff and funds, cooperation of private sector
CA2.3.2 Reinforcement of National Surveillance System						

SO2.3. Increasing the efficacy and efficiency of population based (vertical) public health and communicable disease programs

<p>A2.3.2.1 Routine surveillance upgrade using IT system</p>	<p>Epidemiology and Surveillance Unit</p>	<p>WHO</p>	<p>Y1Y2Y3Y4 Y5</p>	<p>Routine surveillance upgraded</p>	<p>yearly progress reports; outbreak reports available to key stakeholders</p>	<p>cooperation of private sector; inter departmental collaboration at MOPh; availability of adequate staff and sustainable funding</p>
<p>A2.3.2.2 Periodic issuing of bulletins on communicable diseases</p>	<p>Epidemiology and Surveillance Uni</p>	<p>WHO</p>	<p>Y1Y2Y3Y4 Y5</p>	<p>bulletins on communicable diseases issued on regular basis</p>	<p>availability of published bulletins on MOPH website</p>	<p>availability of adequate staff at MOPH</p>
<p>CA2.3.3 Vaccination Program</p>						

A2.3.3.1 Expand capacity of EPI at PHC level	EPI Program	WHO, UNICEF, UNHCR, NGOs, national EPUI committee, professional orders and syndicates and societies	Y1Y2Y3Y4Y5	EPI capacity expanded at PHC level	yearly progress reports,	availability of adequate staff and funds; intra-ministerial collaboration
A2.3.3.2 Procurement of vaccines	EPI Program	Unicef	Y1Y2Y3Y4Y5	continue Procurement of vaccines through unicef	records at MOPH	availability of funds
A2.3.3.3 consultations for Introduction of new vaccines (rota, hepatitis A, HPV, and others)	EPI Program	WHO, professional societies, UNICEF,	y4y5	recommendations for new vaccines	reports of consultations available for stakeholders	availability of funds, cooperation of private sector

A2.3.3.4 Develop an adult national vaccination calendar	EPI Program	WHO, professional societies	Y5	adult national vaccination calendar developed	reports of consultations	availability of funds
A2.3.3.5 Conduct monitoring surveys for coverage	EPI Program	WHO	Y2Y4	monitoring surveys for coverage conducted on regular basis	coverage study reports available for key stakeholders	availability of funds

CA2.4.1.Expansion of Mental health program

A2.4.1.1 expand the integration of mental health services at PHC	Mental Health Program & PHC Department	WHO, UNICEF, UNHCR, NGOs, professional orders and syndicates and societies	Y1Y2Y3Y4 Y5	mental health services fully integrated at PHC level at all MOH network	yearly progress reports at MOPH	availability of adequate staff and sustained funds; cooperation of private sector
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SO2.4.Development of community health, mental, elderly and social services and partnerships

A2.4.1.2 Expand mental health registry	Mental Health Program	WHO, NGOs, private sector		mental health registry expanded and functional	yearly bulletins on the MOPH website	availability of adequate staff and sustained funds; cooperation of private sector
A2.4.2.2 Implement mental health services in selected settings like prisons	Mental Health Program	UNICEF, UNHCR, WHO, NGOs, MOI, MOJ	Y3Y4Y5	mental health services implemented in selected settings like prisons	yearly progress reports by MOPH team	availability of adequate staff and sustained funds; cooperation of private sector
A2.4.2.3 Capacity building on emergency mental health care	Mental Health Program	WHO, professional orders and syndicate		Relevant trainings conducted	reports of trainings from MOPH	availability of adequate staff and sustained funds; cooperation of private sector

CA2.4.2.Development of long-term and elderly care program						
A2.4.2.1 Elaborate a palliative care package of services at MOPH	general directorate/ directorates of care	WHO,National Committee for PC	Y1Y2Y3Y4 Y5	Package developed and implemented	reports available at MOPH team	availability of adequate staff and funds; political commitment; legislative updates
A2.4.2.2 Integrate elderly health services at PHC	PHC Department	NGOs, UN humanitarian organizations, MOSA, Municipalities	Y3Y4Y5	elderly health services integrated at PHC	reports available at MOPH team	availability of adequate staff and funds
SG3. Continue progress to Universal Health(care) Coverage						

SO3.1 Expanding access to (quality) primary care

<p>CA3.1.1.National PHC network facilitation and 'platform' development</p>						
<p>A3.1.1.1 Expand PHC network at a rate of 50 new centers per year</p>	<p>PHC Department</p>	<p>WHO, UN Humanitarian partners, MoEnv, MOInterior</p>	<p>Y1Y2Y3Y4Y5</p>	<p>PHC network expanded</p>	<p>list of PHC centers available at MOPH website</p>	<p>availability of adequate staff and funds</p>
<p>A3.1.1.2 Expand PHC accreditation program</p>	<p>PHC Department</p>	<p>NGOs, academia</p>	<p>Y1Y2Y3Y4Y5</p>	<p>PHC accreditation applied on all network</p>	<p>lists of accredited centers and list of standards available at MOPH website</p>	<p>availability of funds; interest of NGOs; mandatory regulations</p>
<p>A3.1.1.3 Pilot open-network approach modeling as in 1.4.2.2</p>	<p>PHC Department</p>	<p>NGOs, academic institutions, WHO</p>		<p>Open-network model piloted</p>	<p>progress reports available to stakeholders</p>	<p>availability of funds and dedicated staff</p>

<p>CA3.1.2.Expand the wellness packages</p>						
<p>A3.1.2.1 Develop additional wellness packages (for elderly, people with special needs,..)</p>	<p>PHC Department</p>	<p>WB , WHO, UN humanitarian donors</p>	<p>Y2Y4</p>	<p>additional selected wellness packages developed</p>	<p>new packages available to key stakeholders</p>	<p>avaialbility of funds; updated regulations; avaiability of adequate staff</p>
<p>A3.1.2.2 Capacity building training on new wellness packages</p>	<p>PHC Department</p>	<p>WB, WHO</p>	<p>Y3Y5</p>	<p>Relevant trainings conducted</p>	<p>reports on training by MOPH team</p>	<p>avaialability of funds and staff</p>
<p>CA3.2.1Developed public hospital governance and management</p>						

A3.2.1.1 organize Training programs focusing on hospital management	general directorate/ department of care	academia, WHO, UN humanitarian partners, professional orders and syndicates	Y2Y4	Relevant trainings conducted	reports of training; training modules available to key stakeholders	availability of funds; cooperation of hospital managers
CA3.2.2. Develop internal financial management and ('business operations') performance systems						
A3.2.2.1 Develop and implement management systems for 'public' (i.e. private non-profit) hospital management [under development]	general directorate/ department of care	donors, academia	Y1Y3	relevant trainings conducted	reports of training; training modules available to key stakeholders	availability of funds; cooperation of hospital managers
CA3.2.3. Improve referral systems to public hospitals						

SO3.2.Strengthen the public hospital network, emergency and ancillary services

<p>A3.2.3.1 Develop a strategy to improve cooperation and referral between primary and hospital providers</p>	<p>general directorate/ department of care/ PHC department</p>	<p>donors, academia, NGOS, professional orders and syndicates</p>	<p>Y3Y4Y5</p>	<p>Strategy for referral developed and implemented</p>	<p>strategy document published on the website; report of pilot implementation</p>	<p>availability of funds and staff; updated legislations;</p>
<p>CA3.2.4.Review emergency services systems</p>						
<p>A3.2.4.1 Establish a sentinel system for information on emergency services</p>	<p>general directorate/Communicable Diseases Department/hospital Care department</p>	<p>WHO, donors, academia, professional orders and syndicates</p>	<p>y3Y4Y5</p>	<p>sentinel system for information on emergency services established and functional</p>	<p>periodical reports by MOPH</p>	<p>availability of funds and staff; cooperation of private sector</p>
<p>A3.2.4.2 Develop standards on quality of emergency care</p>	<p>hospital care department/ Communicable diseases department/ accreditation team</p>	<p>WHO, professional orders and syndicates and societies</p>	<p>Y2Y3</p>	<p>standards on quality of emergency care developed and implemented</p>	<p>standards available of MOPH website; reports of MOPH</p>	<p>availability of funds</p>

	A3.2.4.3 Training on Standards of Emergency care	hospital care department/ Communicable diseases department/a creditation team	WHO, professional orders and syndicates and societies	y3Y4Y5	Relevant trainings conducted	training reports available at MOPH	availability of funds
	CA3.3.1 Assess administration options for the MOPH ‘insurer-of-the-last-resort’ function						
	A3.3.1.1 Performance contracting trialsgeneral directorate / directorate of Hospital care		WHO, WB	Y1Y2Y3	contracts issued	reports at the mOPH	legislations updated; political commitment
	A3.3.1.2 Contracting ‘insurer-of-last- resort’ functions to a Third Party Administrator (TPA)	general directorate/ directorate of hospital care		Y1Y2Y3Y4 Y5	TPA contracted	audit reports available to concerned stakeholders	legislations updated; political commitment
	CA3.3.2. Develop a clearer branding strategy of the social/public funded ‘insurer-of-the-last-resort’ function						

SO3.3.Strengthen access through the ‘public social medical insurer’

A3.3.2.1 Upgrade beneficiary databases and management	general directorate/ department of statistics/IT department	WB, WHO	Y1Y2Y3Y4 Y5	beneficiary databases and management updated	reports available at MOPH team	intra-ministerial cooperation; legislations updated
A3.3.2.2 Development and implementation of a compatible communication strategy	general directorate/ department of statistics/IT departmen	WB, WHO	Y1Y2Y3Y4 Y5	communication strategy developed and implemented	reports available at MOPH team	availability of staff and funds; intra ministerial collaboration
CA3.3.3.Institutionalize the National Health Accounts						
A3.3.3.1. Training relevant institutions on e NHA	general directorate/ department of statistics/IT departmen	WHO	Y1Y2Y3	Relevant trainings conducted	reports on training at the mOPH	availability of staff ; inter-ministerial cooperations; intra ministerial collaboration

	A3.3.3.2, Generate yearly NHA report	Department of statistics	concerned Ministries, CAS	Y1Y2Y3Y4Y5	NHA report published on annual basis	yearly reports available on MOPH website	availability of staff ; inter-ministerial cooperations; intra ministerial collaboration
	CA3.4.1.High level public-private consultation forum on long-term human resource for health development						
	A3.4.1.1 Organize at least every 2 years a national conference to discuss human resources plan for the country	general directorate/Communicable Diseases Department /hospital Care department	academia, MOSA, MEHE	Y2Y4	national conferences to discuss human resources plan for the country conducted twice	reports of conferences	collaboration of academia ; legislations updates
	CA3.4.2.Update of Continuous Medical Education (CME) process with professional orders						

SO3.4.Improving health sector human resources and continuous medical education

<p>A3.4.2.1 Organize conferences/workshops to update CME content and set standards for validation of professional licenses</p>	<p>department of human resources</p>	<p>All relevant professional orders and universities</p>	<p>Y3Y5</p>	<p>CME content and requirements updated and standards for validation of professional licenses developed</p>	<p>reports of workshops at the MOPH</p>	<p>collaboration of academia and professional orders; legislations updates</p>
<p>A3.4.2.2 Update the national licensing requirements and process for medical professionals</p>	<p>department of human resources</p>	<p>All relevant professional orders and universities</p>	<p>Y4Y5</p>	<p>national licensing requirements and process for medical professionals updated and implemented</p>	<p>updated requirements documents available on MOPH website</p>	<p>collaboration of stakeholders</p>
<p>CA3.4.3 Training programs (short courses) to develop health professionals performance at work (in public facilities)</p>						

	A3.4.3.1 Develop modular course on performance improvement	geenral directorate/ directorate of human resources	WHO, academia	Y2Y3Y4	Modular course on performance imporvement developed	training material avaialble to key stakeholders	avaialbility of funds; lilegislations update
	A3.4.3.2 Organize trainings	geenral directorate/ directorate of human resource	professional orders and societies; academia	Y3Y4Y5	Relevant trainings conducted	rreports of trainings	avaialbility of funds
	CA3.5.1.Cooperation in e-procurement strategy and systems developments						
	No current planning. This section is included for purposes of comprehensiveness and use in future up-dates of this document for next strategy cycle.						

SO3.5. Efficient procurement and logistics

<p>CA3.5.2 Maintain Chronic NCD program with YMCA</p>						
<p>A3.5.2.1 Review Essential Drug List</p>	<p>PHC Department</p>	<p>professional orders and societies</p>	<p>Y1Y3Y5</p>	<p>Essential Drug list updated and published</p>	<p>list of Essential drugs available on website of the MOPH</p>	
<p>A3.5.2.2 Procurement of medications</p>	<p>procurement department</p>	<p>WHO UN Hukmanitarian donors</p>	<p>Y1Y2Y3Y4Y5</p>	<p>Continuoe procurment of medications</p>	<p>reports on procurement and consumption at the mOPH</p>	<p>avaialbility of funds</p>
<p>CA3.5.3 Access to catastrophic illnesses medications</p>						

A3.5.3.1 Update list of medications to be covered and mechanism for access	directorate of medical care/Medical Committees	professional orders and societies	Y1Y2Y3Y4 Y5	list of medications to be covered and mechanism for access updated	list of medications available on MOPH website	
A3.5.3.2 Include efficiency and cost-effectiveness studies when adding new medications to the list	directorate of medical care/Medical Committees	professional orders and societies, WHO	Y1Y2Y3Y4 Y5	efficiency and Adopt the use of cost-effectiveness studies when adding new medications to the list	reports available to MOPH	
A3.5.3.3 Continue procurement	procurement department	UN humanitarian donors	Y1Y2Y3Y4 Y5	Continue procurement	procurement and consumption reports at the mOPH	availability of funds

<p>SG4 .Develop and maintain (post-emergency preparedness and (long-term) health security (AII)</p>							
	<p>CA4.1.1Implement the 2015 International Health Regulations framework</p>						
	<p>A4.1.1.1 Expand health units at boarder areas</p>	<p>general directorate/IHR Team</p>	<p>WHO</p>	<p>Y1Y2Y3Y4 Y5</p>	<p>health units at boarder areas expanded and functional</p>	<p>physical evidence of Health units</p>	<p>avaialbility of funds</p>
	<p>A4.1.1.2 Expand Hazmat Team at Mohafaza level</p>	<p>IHR Team</p>	<p>WHO</p>	<p>Y1Y2Y3Y4 Y5</p>	<p>Hazmat Team at Mohafaza level expanded</p>	<p>repports of training; list of HAZMat memebrs with MOPH team</p>	<p>avaialbility of funds</p>

**SO4.1.Strengthen
emergency preparedness**

A4.1.1.3 Conduct simulation exercises in selected areas	IHR Team	WHO	Y1Y2Y3Y4 Y5	simulation exercises conducted in selected areas	repports of simulation exercises at the MOPH	avaialbility of funds
A4.1.1.4 Develop contingency planning at Qada Level	IHR Team	WHO	Y1Y2Y3Y4 Y5	contingency planning at Qada Level developed and implemented	contingency documents avaialable at Qada units and on the MOPh website	avaialbility of funds
A4.1.1.5 Update pandemic plans periodically	IHR Team	WHO	y1y3y5	pandemic plans periodically updated	pnademic paln avaialble on mOPH website	

<p>CA4.1.2.Reestablish the national central public health lab full functions</p>						
<p>A4.1.2.1 Update functions of central referral lab</p>	<p>general directorate</p>	<p>WHO, UN humanitarian donors</p>	<p>Y2Y3</p>	<p>functions of central referral lab updated</p>	<p>revised proposal available at the MOPH</p>	<p>political committment</p>
<p>A4.1.2.2 Select and capacity build labs to implement the functions of central referral public health lab</p>	<p>general directorate</p>	<p>WHO, UN Humanitarian donors</p>	<p>Y4Y5</p>	<p>Establish labs to implement the functions of central referral public health lab</p>	<p>reports of training for designated labs</p>	<p>politocal commitment; updated legislations</p>

SO4.2.Strengthen epidemiological surveillance program	CA4.2.1.Establish a comprehensive surveillance and response system modules in epidemiological and surveillance information systems						
	A4.2.1.1 Develop an IT platform to allow flow of information to and from epidemiological and surveillance unit	IT department/Surveillance Unit	WHO	Y1Y2Y3Y4 Y5	IT platform to allow flow of information to and from epidemiological and surveillance unit developed	surveillance report use through the IT platform	availability of funds; cooperation of ESU unit
	CA4.3.1.Expand EWARS and event management system using IT network						
	A4.3.1.1 Training on event based management	Surveillance Unit	WHO	Y1Y2Y3Y4 Y5	Relevant trainings conducted	reports on training; available reporting forms on the website	funds availability

SO4.3.Strengthen preparedness for epidemics

A4.3.1.2 Periodical alerts monitoring system linked to other partners	IT department/Surveillance Unit	WHO	Y1Y2Y3Y4 Y5	Periodical alerts monitoring system linked to other partners developed	REPORTS GENERATED	funds availability; stakeholders cooperation
CA4.3.2.Audit and asses registry of EWARS stock(s)						
A4.3.2.1 Procurement of PPEs and reagents	Deaprtment of Communicable Diseases/Surveillance Unit	WHO, UN humaniotarian donors	Y1Y2Y3Y4 Y5	PPEs and reagents procured	reports of procurement and utilization	avaialbility of funds

	A4.3.2.2 Periodic stock monitoring	Deaprtment of Communicable Diseases/Surveillance Unit		Y1Y2Y3Y4 Y5	Periodic stock monitoring conducted	periodical stocks reports updates at the mOPH	Avaialbility of staff
	CA4.4.1. Transition management and post-emergency strategy						
	A4.4.1.1 Update yearly the 5 year humanitarian response strategy	Health Education Department/emeregency response unit	WHO, UN Humanitarian partners, NGOs	Y1 Y5	5 year humanitarian response strategy updated yearly	humanitarian response startegy document avaialble at the MOPH website	avaialbility of staff

SO4.4 Develop crisis response and post-emergency transition management within context of Syrian crisis response strategy

<p>A4.4.1.2 Lead coordination activities within humanitarian response</p>	<p>Health Education Department / international relation affairs department</p>	<p>WHO, UN Humanitarian partners,</p>	<p>Y1Y2Y3Y4Y5</p>	<p>Continuous coordination activities within humanitarian response and relevant reports produced</p>	<p>coordination meetings reports; humanitarian response documents and proposals at the MOPH</p>	<p>availability of staff</p>
<p>CA4.4. 2 Enhance the role of media and academia in emergency preparedness and response</p>						
<p>A.4.4.2.1 organize sensitization meetings with the media</p>	<p>Health Education Department / international relation affairs department</p>	<p>WHO, UN Humanitarian partners</p>	<p>Y1Y2Y3Y4Y5</p>	<p>at least one meeting per year</p>	<p>report of meeting at the MOPH</p>	<p>availability of funds and staff</p>

	<p>A 4.4.2.2. organize sensitization meetings with academia</p>	<p>Health Education Department / international relation affairs department</p>	<p>WHO, UN humanitarian partners</p>	<p>Y1Y2Y3Y4Y5</p>	<p>at least one meeting per year</p>	<p>report of meeting at the mOPh</p>	<p>availability of staff and funds</p>
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