

Annex 3

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 Governance is improved through adequate staffing, e- health system established at Qada level and quality and performance monitoring 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 available at website of MOPH	commitment by Cabinet to upgrade MOPH capacity

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

□ 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		Y1Y2Y3Y4Y5	units/programs established for: emergency preparedness and response, NCD, nutrition and food safety	MOPH records and respective plans of action	political commitment; avialbility of adequate staffa nd sustainable funding
CA1.1.2 Develop and strengthen regulatory capacity						
A1.1.2.1 upgrade theAccreditation and Licensing systems	Accreditation Program	All relevant professional orders, ESA	Y1, Y2, Y3, Y4, Y 5	Conitnous cycles of Accreditati on of hospitals	accreditation a nd 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 staff at MOPH; cooperation of Private sector
A1.1.2.4 expand the Quality Assurance for Pharmaceutical Products initiative	Quality Assurance of Pharmaceutical Products Program	All relevant professional Orders	Y1 Y2 Y3 Y4 Y5	Quality assurance initiative established and active	MOPh reports	adequate staff at MOPH; cooperation of private 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, Ministry of Finance	Y1 Y2 Y3 Y4 Y5	TPA continuous audit	MOPH contracts with TPA; audit reports	adequate staff and funds at MOPH; cooperation of private 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	Y2Y3 Y4 Y5	Awareness campaign Conducted	material produced available on website of MOPH; awareness activities reports	cooperation of private sector
SO1.2 Strengthen sub-national public health administrations	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
	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						

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

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 nationa-wide project for ICD 10	Statistics Department	profession al orders; WHO	Y2Y3Y4Y5	ICD-10 implemente d at national level	reports of training;	cooperation of private sector;
A1.3.1.3 Develop an e-health strategy	E-Health Program	profession al health orders and syndicates, OMSAR, WHO	Y1Y2Y3Y4Y5	E-health strategy developed and implemente d		cooperation of private sector; avaiability of funds; e government committment
A1.3.1.4 upgrade the inter-operability platform for health facility and provider networks interfaces (Primary, Hospitals, Pharmacies).	E-Health Program,	profession al orders and syndicates, OMSAR, WHO, WB	Y1Y2Y3Y4Y5	IT platforms upgraded and neyworks inetrfaces established	number of e platforms operationls, repots generated through the e health system	cooperation of all stakeholders; e governement 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	Y1Y2Y3Y4 Y5	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						
A1.4.1.1 review the health sector Finance and Governance and options towards Universal Health Coverage	general directorate	WHO, Academia	Y2Y3Y4	review implemented	review report document available	political commitment, facilitation of access to information by all stakeholders

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

A1.4.1.2 Organize National Consultation of Public Health Priority research areas	Health Education Department	All public health institutions in the country , WHO	Y2 Y4	at least one consultation every 2 years	list of research priorities available on MOPH website	interest of national institutions
□ A1.4.1.3 Update regulations related to clinical trials and expand regulations to clinical trials that include medical devices	Health Education Department	professional orders and societies and syndicates, academia, WHO	y2 y4	Regulations Upgraded	regulation available on MOPH website	cooperation of stakeholders; adequate staffing at MOPH
□ 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 commitment; adequate MOPH staffing; availability of funds

	1.4.2.2 Pilot the open network approach modeling	general directorate	WHO, NGOs	y3Y4Y5	Pilot implemented	periodical progress reports generated to key stakeholders	political commitment; adequate staffing; availability of funds
SG2. Improve collective health and promotion across the life-cycle	target: within 5 years, population health will be improved in line with the SDGs, with focus on prevention and promotion						
	CA2.1.1.Non-communicable disease (NCD) promotion and risk-reduction						
	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, mental health, etc..	Health Education Department, Mother & Child Department, National Anti-smoking program	professional orders, syndicates and societies, Media, NGOs,	Y1Y2Y3Y4Y5	Relevant Awareness campaigns conducted at regular basis	IEC material produced available at MOPH website; activities reports	availability of funds; cooperation of stakeholders, adequate MOPH staffing
	A2.1.1.2 expand School health programs and adolescents health program	Mother & Child Department	MEHE, WHO, UNFPA, UNICEF, NGOs, academia	Y1Y2Y3Y4Y5	School health program expanded	IEC material produced available at MOPH website; activities reports	availability of funds, adequate staffing at MOPH and MEHE

SO2.1 Improve public health promotion and behavior change

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, youth health, and mental health	PHC Department	NGOs, UN humanitarian organizations, MOSA, Municipalities	Y1Y2Y3Y4Y5	Relevant outreach activities implemented all over the country	MOPH reports	availability of funds; adequate staffing; cooperation of key stakeholders; security stability
A2.1.2.2 implementation of global school health surveys	Mother & Child Department	WHO; MEHE	Y5	Global health surveys conducted every 5 years	GSHS report published at MOPH and MEHE websites	availability 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 Department	professional societies and syndicates, WHO, UNICEF, UNHCR	Y3	National guidebook updated and disseminated at PHC level	guidebook published at MOPH website	availability of funds;
A2.1.3.2 Assessment of malnutrition and selected micro-nutrient deficiencies	Nutrition Department & PHC Department	academia, UN Humanitarian team, MOSA	y2y3y4	Relevant assessments conducted	reports disseminated to key stakeholders	availability 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, profession al societies and orders	Y2Y3Y4Y5	Cardivascu lar registry established and functional	periodfical reports published at the MOPH website	avaialability of adequate staff at MOPH; cooperation of private sector
	42.1.4.4 Expand Mental health registry	Mental Health Program	academia, profession al societies and orders	Y2Y3Y4Y5	mental health registry established and functional	periodfical reports published at the MOPH website	avaialability 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	Occupation al 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, profession al societies	Y4Y5	Occupation al health registry established and functional	periodical reports published on MOPH website	avaialbility of adequate staff and sustainable funding
	A2.2.1.3 Revise and introduce legislations to ensure safety of human resources for health	occupational health program	academia, NSSF, profession al orders and syndicates and societies	y3Y4Y5	Draft legislations for human resources safety for health finalized	draft document available to key stakeholders	political commitment

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

A2.2.1.4 Maintain and institutionalize food safety program	directorate of prevention/food safety program		Y1Y2Y3Y4Y5	Established food safety program	periodical program 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	standards available on MOPH website	availability of adequate staff at MOPH
A2.2.2.3 Establish a standard environment health and sanitation surveillance system	department of sanitary engineering, ESU	WHO, MoInterior, Water and sanitation national authorities, CDR	Y1Y2Y3Y4Y5	Relevant surveillance 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 engeneering	WHO, Moenv, MOI, professional orders and syndicates	Y1Y2Y3Y4Y5	Relevant standards updated, relevant trainings conducted and implemented at health facilities level	standrads avaialble on MOPH website; training reports	political commitment; avaiability 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 stakehodlers	political commitment; intra and inetr minisyterial 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 Communicabl e diseases	WHO, JUNTA, NGOS, professional societies	Y1Y2Y3Y4Y5	NAP plan implemented	yearly porgress report on NAP strategi plan	political commitment; avaiability 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

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

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						
A2.3.2.1 Routine surveillance upgrade using IT system	Epidemiology and Surveillance Unit	WHO	Y1Y2Y3Y4Y5	Routine surveillance upgraded	yearly progress reports; outbreak reports available to key stakeholders	cooperation of private sector; inter departmental collaboration at MOPH; availability of adequate staff and sustainable funding
A2.3.2.2 Periodic issuing of bulletins on communicable diseases	Epidemiology and Surveillance Unit	WHO	Y1Y2Y3Y4Y5	bulletins on communicable diseases issued on regular basis	availability of published bulletins on MOPH website	availability of adequate staff at MOPH
CA2.3.3 Vaccination Program						

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
	CA 2.4.1 Reorienting services towards scaling-up comprehensive, integrated and responsive mental health services in community-based settings						
	A.2.4.1.1 Integrate mental health services in PHC Centres and Social Development Centres that are part of the MOPH network	Mental Health Program & PHC Department	WHO, UNICEF, UNHCR, NGOs, professional orders and syndicates and societies	Y1Y2Y3Y4Y5	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
	A.2.4.1.2 Develop community-based multidisciplinary mental health teams	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

**SO2.4. Development of
community-based health
(including mental health)
and social services,
tailored to the needs of
vulnerable populations
(including elderly)**

A.2.4.1.3 Adapt and pilot an e-mental health guided self-help programme for Lebanon	Mental Health Program	UNICEF, UNHCR, WHO, NGOs, MOI, MOJ	Y3Y4Y5	mental health services implemente d in selected settings like prisons	yearly progress reports by MOPH team	availability of adequate staffa nd sustained funds; cooepration of privates ector
A.2.4.1.4 Scale-up evidence-based psychotherapies such as Interpersonal Psychotherapy	Mental Health Program					
A.2.4.1.5 Tailored capacity- building on mental health	Mental Health Program	WHO, profession al orders and syndicate		Relevant trainings conducted	reports of trainings from MOPH	availability of adequate staffa nd sustained funds; cooepration of privates ector
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/ directorate of care	WHO,Nati onal Committe for PC	Y1Y2Y3Y4 Y5	Package developed and implemente d	reports avaialble at MOPH team	avaialbility of adequate staffa nd funds; politocal commiitment; legislative updates

	CA3.1.2.Expand the wellness packages						
	A3.1.2.1 Develop additional wellness packages (for elderly, people with special needs,...)	PHC Department	WB , WHO, UN humanitarian donors	Y2Y4	additional selected wellness packages developed	new packages available to key stakeholders	avaialbility of funds; updated regulations; avaiability of adequate staff
	A3.1.2.2 Capacity building training on new wellness packages	PHC Department	WB, WHO	Y3Y5	Relevant trainings conducted	reports on training by MOPH team	avaialability of funds and staff
	CA3.2.1Developed public hospital governance and management						
	A3.2.1.1organize 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 avaialbe to key stakeholders	avaialbility of funds; cooperation of hospital mangers
	CA3.2.2.Develop internal financial management and ('business operations') performance systems						

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

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

	A3.2.4.2 Develop standards on quality of emergency care	hospital care department/ Communicable diseases department/ accreditation team	WHO, professional orders and syndicates and societies	Y2Y3	standards on quality of emergency care developed and implemented	standards available of MOPH website; reports of MOPH	availability of funds
	A3.2.4.3 Training on Standards of Emergency care	hospital care department/ Communicable diseases department/ accreditation 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 trials general 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		Y1Y2Y3Y4Y5	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	Y1Y2Y3Y4Y5	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 department	WB, WHO	Y1Y2Y3Y4Y5	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 department	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						

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

A3.4.1.1 Organize at least every 2 years a national conference to discuss human resources plan for the country	geenral directorate/Communicable Diseases Department /hospital Care department	academia, MOSA, MEHE	Y2Y4	national conference s 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						
A3.4.2.1 Organize conferences/workshops to update CME content and set standards for validation of professional licenses	department ogf human resources	All relevant profession al orders and universitie s	Y3Y5	CME content and requiremen ts updated and standards for validation of professiona l licenses developed	reports of workshops at the MOPH	collaboration of a cademia and professional orders; legislations updates

	A3.4.2.2 Update the national licensing requirements and process for medical professionals	department of human resources	All relevant professional orders and universities	Y4Y5	national licensing requirements and process for medical professionals updated and implemented	updated requirements documents available on MOPH website	collaboration of stakeholders
	CA3.4.3 Training programs (short courses) to develop health professionals performance at work (in public facilities)						
	A3.4.3.1 Develop modular course on performance improvement	general directorate/ directorate of human resources	WHO, academia	Y2Y3Y4	Modular course on performance improvement developed	training material available to key stakeholders	availability of funds; legislations update
	A3.4.3.2 Organize trainings	general directorate/ directorate of human resource	professional orders and societies; academia	Y3Y4Y5	Relevant trainings conducted	reports of trainings	availability of funds
	CA3.5.1.Cooperation in e-procurement strategy and systems developments						

**SO3.5. Efficient
procurement and logistics**

No current planning. This section is included for purposes of comprehensiveness and use in future up-dates of this document for next strategy cycle.						
CA3.5.2 Maintain Chronic NCD program with YMCA						
A3.5.2.1 Review Essential Drug List	PHC Department	professional orders and societies	Y1Y3Y5	Essential Drug list updated and published	list of Essential drugs available on website of the MOPH	
A3.5.2.2 Procurement of medications	procurement department	WHO UN Hukmanitarian donors	Y1Y2Y3Y4Y5	Continuoe procurement of medications	reports on procurement and consumption at the mOPH	avaialbility of funds
CA3.5.3 Access to catastrophic illnesses medications						
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	Y1Y2Y3Y4Y5	list of medications to be covered and mechanism for access updated	list of medications avbailable 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	Y1Y2Y3Y4Y5	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	Y1Y2Y3Y4Y5	Continue procurement	procurement and consumption reports at the mOPH	availability of funds
SG4 .Develop and maintain (post-emergency preparedness and (long-term) health security (AII)							
	CA4.1.1Implement the 2015 International Health Regulations framework						
	A4.1.1.1 Expand health units at boarder areas	general directorate/IHR Team	WHO	Y1Y2Y3Y4Y5	health units at boarder areas expanded and functional	physical evidence of Health units	availability of funds

**SO4.1.Strengthen
emergency preparedness**

A4.1.1.2 Expand Hazmat Team at Mohafaza level	IHR Team	WHO	Y1Y2Y3Y4Y5	Hazmat Team at Mohafaza level expanded	repports of training; list of HAZMat memebrs with MOPH team	avaialbility of funds
A4.1.1.3 Conduct simulation exercises in selected areas	IHR Team	WHO	Y1Y2Y3Y4Y5	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	Y1Y2Y3Y4Y5	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	
CA4.1.2.Reestablish the national central public health lab full functions						
A4.1.2.1 Update functions of central referral lab	general directorate	WHO, UN humaniota rian donors	Y2Y3	functions of central referral lab updated	revised proposal avaialble at the MOPH	political committment

	A4.1.2.2 Select and capacity build labs to implement the functions of central referral public health lab	general directorate	WHO, UN Humanitarian donors	Y4Y5	Establish labs to implement the functions of central referral public health lab	reports of training for designated labs	political commitment; updated legislations
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	Y1Y2Y3Y4Y5	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						

**SO4.3.Strengthen
preparedness for
epidemics**

A4.3.1.1 Training on event based management	Surveillance Unit	WHO	Y1Y2Y3Y4Y5	Relevant trainings conducted	reports on training; available reporting forms on the website	funds availability
A4.3.1.2 Periodical alerts monitoring system linked to other partners	IT department/Surveillance Unit	WHO	Y1Y2Y3Y4Y5	Periodical alerts monitoring system linked to other partners developed	REPORTS GENERATED	funds availability; stakeholders cooperation
CA4.3.2.Audit and assess registry of EWARS stock(s)						
A4.3.2.1 Procurement of PPEs and reagents	Department of Communicable Diseases/Surveillance Unit	WHO, UN humanitarian donors	Y1Y2Y3Y4Y5	PPEs and reagents procured	reports of procurement and utilization	availability of funds
A4.3.2.2 Periodic stock monitoring	Department of Communicable Diseases/Surveillance Unit		Y1Y2Y3Y4Y5	Periodic stock monitoring conducted	periodical stocks reports updates at the mOPH	Availability of staff
CA4.4.1.Transition management and post-emergency strategy						

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

A4.4.1.1 Update yearly the 5 year humanitarian response strategy	Health Education Department/ emergency response unit	WHO, UN Humanitarian partners, NGOs	Y1 Y5	5 year humanitarian response strategy updated yearly	humanitarian response strategy document available at the MOPH website	availability of staff
A4.4.1.2 Lead coordination activities within humanitarian response	Health Education Department / international relations department	WHO, UN Humanitarian partners,	Y1Y2Y3Y4Y5	Continuous coordination activities within humanitarian response and relevant reports produced	coordination meetings reports; humanitarian response documents and proposals at the MOPH	availability of staff
CA4.4. 2 Enhance the role of media and academia in emergency preparedness and response						
A.4.4.2.1 organize sensitization meetings with the media	Health Education Department / international relations department	WHO, UN Humanitarian partners	Y1Y2Y3Y4Y5	at least one meeting per year	report of meeting at the MOPH	availability of funds and staff

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