

| Cluster Objective: 1 Ensure the availability of acceptable and quality essential healthcare services to vulnerable communities in oPt | |
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| Relates to Strategic Objective: 2 | |
| Outcome level Indicator: # of most vulnerable people in oPt accessing quality lifesaving health interventions by type of service, including primary healthcare, nutrition, child health, sexual and reproductive health, including SGBV, mental health and psychosocial support (MHPSS), healthcare for elderly, and rehabilitation services for people with disabilities (PwD) (sex, age and disability disaggregated indicator) | |
| Activity | Indicator (sex, age and disability disaggregated indicator) |
| Provide L2 PHC health care services using mobile clinics, including consultations, supply of drugs/equipment/ disposables, integration of Sexual and Reproductive Health (SRH) and prevention and referral of SGBV. | # of people who have access to L2 PHC services |
| | # of children under 5 receiving health and nutrition services through mobile clinics |
| | # of people directly benefitting from awareness sessions and health / nutrition education |
| | # of women received SRH services |
| | # of health workers trained on different SRH topics |
| | # of SGBV survivors reached within 72hrs of incident |
| Deliver essential elective surgery, emergency and trauma care at all levels of the pathway, through life- and limb-saving training, triage and injury protocols, deployment of emergency medical teams, timely data and multidisciplinary rehabilitation. | # of cases received frontline prehospital care |
| | # of cases received appropriate care in the emergency department using a standard validated triage tool and vital signs monitoring |
| | # of acute surgical interventions conducted |
| | # of patients treated for limb reconstruction |
| | # of patients treated for post-operative care |
| | # of health staff trained on essential life-saving interventions |
| Provide essential medical supplies (medicines, disposables, blood components, etc) for acutely vulnerable NCD patients and preventive activities at the community level. | # of patients benefitted from provision of elective surgery |
| | # of NCD patients benefitted from access to medicines (cancer, diabetic >60 and <18, hypertensive >60, or/and patients with kidney failure) |
| | # of healthcare workers providing NCD treatment trained on NCD management |
| | # of people directly benefitting from NCD awareness sessions and health education |
| Provide access to healthcare and nutrition that prevent excessive maternal and newborn morbidity and mortality by ensuring that clean and safe delivery, essential newborn care and emergency obstetric and newborn care services are available at all times. | # of neonates receiving quality healthcare services in NICUs |
| | # of < 5 children receiving targeted health and nutrition interventions |
| | # of women in reproductive age, pregnant and lactating women receiving quality maternal and nutrition services |
| | # of healthcare workers trained on neonate interventions and SRH topic and management of Malnutrition |
| | # of people directly benefitting from awareness sessions and health education |
| Deliver multidisciplinary management of neglected people with disabilities (PwD) including rehabilitation services, psychosocial support and community awareness on disabilities and other cross cutting issues. | # of PwDs with access to multidisciplinary rehabilitation |
| | # of healthcare workers trained of inclusive healthcare services |
| | # of people directly benefitting from disability care awareness sessions and health education |
| Establish MHPSS services ensuring inclusion of marginalized people, provide psychological first aid to those exposed to traumatic events, integrate MH into all health facilities through provision of MHPSS training for healthcare workers essential psychotropic medicines and ensuring clinical case management is evidence based. | # of trained healthcare providers and community workers on MHPSS, including mhGAP |
| | # patients with access to MHPSS services |
| | # of people directly benefitting from awareness session and mental health promotion activities |
| | # of Health Cluster partners trained on key priority themes (such as protection, gender, disability) |
| Strengthen health sector coordination and health information systems to improve the effectiveness health response for people in need, with an emphasis on enhancing protection and increasing access for health across oPt | # of healthcare facilities reporting to the Health Cluster HeRAMS |
| | # of partners contributing to the PARP "partners activity reporting platform" |
| | # of local NGOs included in the HRP with self-led projects |
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| Document and monitor barriers to healthcare services access, including for patients requiring and receiving permits to reach essential healthcare services, as a basis for evidence-based advocacy. | % of patients and companions requiring permits to access essential healthcare services receiving permits |
| Document and monitor attacks on healthcare as a basis for prevention efforts and evidence-based advocacy. | # of agencies contributing to documentation of attacks on healthcare |
| | # of healthcare staff benefitted from monitoring and protection interventions |

| Cluster Objective: 2 Strengthen the healthcare system's capacity to respond to emergencies and build community resilience to cope with the impact of current and future crises | |
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| Relates to Strategic Objective: 3 | |
| Outcome level Indicator: # of healthcare facilities and healthcare workers with capacity to respond to emergencies (including COVID-19) and are prepared to cope with impact of current and future crises | |
| Activity | Indicator (sex, age and disability disaggregated indicator) |
| Provide essential medical supplies: laboratory, hospital and community-based case management, infection prevention and control items to build the capacity of health system to timely and effectively respond to the outbreaks of new and re-emerging infectious diseases | # of people with access to testing to detect communicable diseases e.g. COVID-19 |
| | # of healthcare workers protected with the provision of PPE |
| | # of healthcare workers trained on laboratory testing, case management |
| | # of non-medical staff and community health workers trained on protocols, IPC, etc |
| | # of treatment/ isolation/ quarantine facilities supported including medical supplies and equipment |
| Enhance preparedness within the health sector to better deal with sudden onset events, such as heightened conflict and disease outbreak, through stockpiling lab supplies, drugs, disposables, and IPC supplies, capacity building, enhanced coordination and communication. | # of healthcare facilities with prepositioned items |
| | # of affected benefitted from prepositioned supplies |
| | # of healthcare facilities which have a disaster plan including management of mass casualties, reviewed and rehearsed on a regular basis |
| | # of healthcare workers trained on emergency preparedness |
| Strengthen health information management systems including disease surveillance to improve the speed and effectiveness of emergency responses. | # of people from the community to benefit from provision of first aid kits and first aid training |
| | % of cases reported to WHO within 24 hours of confirmation as per IHR requirement |
| | # of trained multidisciplinary RRTs |
| Provide support to conduct supplementary emergency vaccination activities, including for COVID-19 | # of healthcare workers trained in surveillance and early detection |
| | # of vulnerable people vaccinated |
| Support risk communication and community engagement especially targeting high risk groups and to combat misconceptions and stigma | # of printed prevention messaging material distributed |
| | # of views through social media platforms and other media channels with communicable diseases prevention measures |

| Cluster Objective: 3 Advocate for unhindered and equitable access to healthcare and protection of the right to health for all, including the most vulnerable in oPt | |
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| Relates to Strategic Objective: 1 | |
| Outcome level Indicator: # of patients, companions and healthcare workers benefitting from documentation, monitoring and advocacy activities (sex, age and disability disaggregated indicator) | |
| Activity | Indicator (sex, age and disability disaggregated indicator) |
| Document and monitor barriers to healthcare services access, including for patients requiring and receiving permits to reach essential healthcare services, as a basis for evidence-based advocacy. | % of patients and companions requiring permits to access essential healthcare services receiving permits |
| Document and monitor attacks on healthcare as a basis for prevention efforts and evidence-based advocacy. | # of agencies contributing to documentation of attacks on healthcare |
| | # of healthcare staff benefitted from monitoring and protection interventions |