



Iraqi Ministry of Health is currently engaged in a process of health reform and moving forward with stabilizing and reorganizing its health services. Ensuring access to routine, high quality, and equitable healthcare has emerged as a critical need and the Government of Iraq is committed to improving the quality of primary healthcare (PHC) services. The health status of the Iraqi people has significantly deteriorated over the past two decades. Under-five mortality due to acute diarrheal and respiratory problems is now greater than 41 per 1000 live births and only 35% of children under the age of five are fully immunized. Child malnutrition has increased steadily, with an incidence of low birth weight exceeding 10%. Maternal mortality rates have increased to 84 per 100,000 live births as access to quality antenatal and safe delivery services has declined. Incidence of food- and water-borne disease has increased, particularly amongst Internally Displaced Persons (IDPs).

To assist with these efforts, the United States Agency for International Development (USAID) awarded University Research Co. LLC (URC) in partnership with Management Systems International (MSI) a four-year Primary Health Care Project in Iraq (PHCPI). PHCPI has been designed to provide support to the Iraqi Ministry of Health (MoH) to achieve its strategic goal for better quality primary health care (PHC) services.

PHCPI will help the Iraqi MoH to put in place key building blocks to support the delivery of quality PHC services at the community and facility levels. PHCPI will help the MoH in strengthening PHC services, especially those that target reductions in maternal and neonatal mortality, so that the country can meet its Millennium Development Goals (MDGs) by 2015, with special emphasis on MDG 4 and 5, that are concerned with maternal, newborn and child health.

The objective of PHCPI is to: strengthen management systems; improve the utilization and quality of clinical services; and, increase community involvement to increase demand for and use of PHC services. The project will cover at least 360 clinics in 18 governorates.



The project works in 360 PHC clinics throughout Iraq

How we work

For 45 years, URC has worked to improve the quality of health and social services around the world. URC manages projects in over 30 countries, with 11 projects focused within the Middle East and Asia. URC focuses on helping partners implement high-impact, needs-based solutions to expand the coverage of critical health services. The approaches utilized under PHCPI have been tailored to closely reflect the unique health needs of Iraqi communities, including IDPs. PHCPI will coordinate with all stakeholders throughout Iraq, including the Ministry of Displacement and Migration (MODM), to ensure that the health and social support needs of IDPs are adequately accounted for within the program framework and that partners at the national, provincial and facility levels are capacitated to integrate approaches to increase coverage for IDPs within the PHC setting. PHCPI will collaborate with all stakeholders to assist Iraq achieve its MDGs while supporting sustainable, locally led improvement in health service delivery. The project will build upon URC's experiences utilizing modern quality improvement (QI) methodologies to assist the MoH in analyzing, identifying and addressing gaps in the following areas.

July 2011

Focus areas

Strengthening Management Systems

Highly functional management systems are critical to ensure accessible, efficient, and quality health services. To improve primary healthcare management systems, the project will:

- Work with the MoH to establish, mobilize and manage teams with broad representation from relevant clinical and management staff responsible for the development of quality management systems and operational guidelines, including functional patient records systems, that include service utilization of IDPs;
- Assist the MoH to strengthen the health management information system (HMIS), and improve facility management and logistics systems to ensure an uninterrupted supply of drugs and medical commodities, and
- Help the MoH to strengthen the management and leadership capacities by developing and supporting institutionalization of management standards.

Improving Clinical Services

To ensure the availability and utilization of high quality clinical services for maternal, newborn, child health, nutrition, and management of chronic illnesses, the project will:

- Help the MOH to update/revise treatment protocols and clinical standards and guidelines, related to the basic package of PHC services in Iraq and improve human resources capacity through pre-service and in-service training programs including Continuing Medical Education (CME) for physicians, nurses and other cadres of health providers;
- Assist the MoH to support an ongoing QI initiative at PHC facilities and district level as well as strengthen referral, supervision and mentoring systems; and
- Develop and facilitate a research agenda to fuel further evidence-based improvements in quality health care service delivery and to translate research results into specific policy, resources, management and/or clinical decisions and processes which, in turn, contribute to improved quality of care.

Fostering Community Collaboration

To have acceptable and sustainable quality health services, strong relationships with clinics and communities including IDPs must be promoted. PCHPI will:

- Help the MoH to develop and disseminate a Patients' Rights Charter that promotes and builds feedback mechanisms to ensure health systems responsiveness to community and patient needs;
- Assist MoH, clinic staff and community members explore broader roles for the health committees, including advocacy for community health needs and priorities and active participation in clinic's QI processes;
- Support development of effective community partnerships; and
- Work with Zain and other private groups to use technology and leverage other resources for health service improvement.

Anticipated Year One Achievement Highlights

PHCPI anticipates several strategic achievements in its first year:

Under Focus Area 1

PHCPI, with guidance from the Technical Advisory Group, will assist MoH to put in place management systems regarding equipment, logistics, supervision, and human resources development. The project will develop and strengthen management and leadership capacities at the facility and district levels. Facility management will be enhanced using QI tools and approaches.

Under Focus Area 2

PHCPI will convene several Improvement Collaboratives at facility and district levels to improve the quality of priority clinical services. These QI efforts will increase the proportion of women accessing antenatal services and receiving safe and quality care during labor, delivery, and after delivery. It is anticipated that persons with chronic illnesses will be better managed and have improved health status outcomes. The project will also target hand washing, hygiene and other public health issues. Facility level QI teams will be supported to help improve patient care and follow-up. Routine data will be tracked on a regular basis to demonstrate improvements in patient level health outcomes, including IDP health service utilization

Under Focus Area 3

PHCPI will work with local health offices and healthcare facilities to engage communities in designing and delivering healthcare services. As part of the community-driven response, healthcare committees at facility and district levels will be established to seek community inputs. These committees will engage women as well as civic, IDP and other civic group representatives. PHCPI will work with MoH to develop and field test drafts of the Patient's Rights Charter as well as to develop and roll out guidelines to assist PHCs to engage community's in improving their health status.

Cross Cutting Coordination for Scale Up

PHCPI will leverage MoH and other resources to support strengthening and expansion of the PHC services in Iraq. PHCPI will work closely with the MoH and the World Health Organization (WHO) in the adaptation and scale up of the Basic Health Service Package (BHSP) by improving the performance of District Health System on Family Practice Approach (IDHS-FPA). This initiative aims at assuring universal, equitable, and efficient access to essential health services for every individual especially the most vulnerable (children, women, IDPs and elderly). The project will also build partnerships with other stakeholders (Amar Foundation, Zain Communications, professional associations, among others) to leverage resources for the rapid and significant improvements affecting the health status of the people in Iraq.