



FACT SHEET

USAID Primary Health Care Project in Iraq (PHCPI)

The USAID-funded Primary Health Care Project in Iraq (PHCPI) is a 4-year (March 2011 – March 2015), \$69 million project that covers all 18 provinces and 360 target primary health care (PHC) clinics nationwide including 36* model clinics (2 in each province) covering a total catchment population of 9,391,182 (28% of total Iraq population). Since March 2011, PHCPI has supported the Iraqi Ministry of Health (MOH) to put in place key building blocks to strengthen the health management systems and to support the delivery of quality PHC services at the community and facility levels. PHCPI has worked to build the capacity of the MOH and PHC clinics to respond to the needs of the Iraqi population and to assist the MOH in achieving its country-level health priorities, such as meeting its Millennium Development Goals (MDGs) by 2015.

PHCPI 2011-2013

Strengthening Primary Health Care Management Systems

PHCPI aims to strengthen Primary Health Care Management Systems through the development of highly functional management systems to ensure accessible, efficient, and quality health services. Effective management and leadership systems provide the underpinning for efforts to build more accessible and sustainable quality health services.

Key Achievements:

- 360 PHCCs reached and 1,324 of PHC staff trained on the PHCPI-developed Management Handbook
- 1,913 MOH staff trained on PHCPI-developed Facility and Equipment Maintenance standard operating procedures (SOPs)
- Leadership and Management Program established and 1,315 staff trained from all 360 PHC clinics
- New comprehensive paper-based PHC patient record system developed, tested, and printed
- 1,806 PHC staff across Iraq trained on medical records
- Referral system established in 216 PHC clinics across Iraq's 18 provinces
- Established a National Technical Advisory Group (TAG) that serves as a platform to disseminate insight and lessons learned from PHCPI-sponsored initiatives and to explore ways to scale up improvements beyond PHCPI target areas as well as foster effective collaboration

* Was 36, now 34 due to the current security situation, two clinics in Al Anbar Governorate were damaged and are no longer participating in the Model Clinics initiative.

between key stakeholders

Improve PHC Service Providers Performance

PHCPI has worked closely with MOH counterparts to establish standards of care, develop and introduce quality improvement programs, expand high-quality in-service training programs, develop platforms to enhance the quality of care provided in the private sector, and develop an agenda for conducting research to fuel further evidence-based improvements. The project is placing particular emphasis on low-cost, high-impact interventions to reduce maternal and child mortality and to strengthen referrals between hospital-based services and the primary care level.

Key Achievements:

- National policy for guidelines and protocols development is in place
- 30 clinical care guidelines developed, printed and distributed to PHCCs (Available in Arabic, Kurdish and English)
- Two sets (24) of training packages developed
- Over 9,500 relevant staff trained on clinical guidelines in 347 target clinics
- Six operational research studies finalized
- Supportive supervision, and referral systems developed and 360 Quality Improvement teams established in PHCCs across Iraq's 18 provinces
- IEC materials covering MNCH areas developed, printed and distributed in Arabic and Kurdish

Increased Community Partnerships for Primary Health Care

PHCPI's approach to building effective community participation directly aligns with the MOH's Five Year Strategic Plan which underscores community participation in health service delivery as a means to expand access to critical health services, especially for underserved and vulnerable populations, and reduce morbidity and mortality. USAID/PHCPI is working with partners at the district and clinic levels to ensure that communities are involved in the design of effective partnership structures and has developed guidelines for community participation in PHC clinic services.

Key Achievements:

- National Statement of Patients' Rights developed for the first time in Iraq
- Community Health Partnerships guideline developed with trainer of trainer (TOT) teams established and 1,049 staff trained on the guideline from 360 PHC

November 2014

- clinics
- 360 local health committees established
- PHCPI activities and interventions promoted through various media channels, including television, newspapers, and websites
- National Behavior Change Communication (BCC) strategy developed
- BCC campaign conducted throughout Iraq
- Supported MOH Polio efforts through a \$2.9M awareness campaign via 8 national TV and radio channels
- All PHCPI-developed materials have been provided to project supported clinics in Arabic, Kurdish in English in hard copy as well as soft copy for continued and sustained use

Model Clinics

The project initially targeted 360 PHC clinics throughout Iraq's 18 provinces, now 298 after the change in scope of work in October 2013. Among those, 33 of 34 targeted PHC clinics were upgraded by the project to the standard of Model Clinic, or "a PHC clinic equipped with modern medical equipment, stocked with the needed drugs and medical supplies, staffed with well-trained health care providers who are in full compliance with the national clinical protocols, guidelines, and effectively operate with appropriate organizational and management structure." PHCPI has provided equipment and targeted technical assistance to each of the 34 clinics to help them meet the model standard. The MOH-PHCPI team has identified 85 standards that are grouped into eight domains that cover all elements of a "fully functional model clinic."

PHCPI trained over 2,500 model clinic staff on the clinical and management guidelines developed by the project as well as over 60 model clinic TOTs. Through the model clinics, PHCPI is ensuring that the management and clinical systems strengthened by the project are operationalized at the clinic level.

Support for MDGs 4 & 5

Beginning in Fiscal Year 2014, PHCPI focused its technical assistance on helping the MOH meet its MDGs 4 & 5 of reducing child mortality and improving maternal health in target project areas. The project developed a package of low-cost, high-impact interventions for improving maternal, neonatal, and child health (MNCH).

PHCPI, in partnership with the MOH, updated a number of clinical guidelines related to MNCH (Table 1) and conducted six MCH studies:

- 2013 Bottleneck Assessment identifying key programmatic factors that contribute to the continued high levels of maternal, newborn, and child mortality

- A study of ANC services at PHC clinics across Iraq
- A study on pediatric deaths in hospitals, judiciary offices and Forensic Pathology Units
- A survey of TBA knowledge and practices
- An assessment of Maternal Deaths Recording and Reporting

PHCPI-Updated MNCH Guidelines	# of Staff Trained	# of TOTs
Acute Flaccid Paralysis (AFP)	262	54*
Antenatal Care (ANC)	1423	59
Breast and Cervical Cancer	190	33
Communicable Disease Control (CDC)	350	34
Early Management in Trauma	336	19
Emergency Obstetric Care and Newborn Care	367	17
Integrated Management of Childhood Illness (IMCI), for Nurses	1,878	111
IMCI, for Physicians	698	45
Maternal and Child Health (MCH)	74	115
Menopause	50	47
Maternal and Child Nutrition (MCN)	568	22
Premarital Counseling	599	35
Traditional Birth Attendants (TBAs)	975	55
Total	7,770	592

When Iraq confirmed the reemergence polio, PHCPI worked closely with the MOH to:

- Developed an AFP surveillance field guide
- Developed guidelines/protocols for vaccine cold chain management
- Developed guidelines/protocols for the detection of immunization side effects
- Held workshops for vaccinators on developed guidelines
- Trained over 677 vaccinators on Iraq's Expanded Program of Immunization (EPI)

Expanded FY15 Activities

PHCPI continues to assist the MOH in strengthening the primary health care program, with a goal for October 2014 – March 2015 to help support MOH coordination efforts to strengthen surveillance and immunization systems, improve PHC staff capacity in prevention and control of priority communicable diseases, and increase IDPs' access to PHC services. PHCPI is also helping to develop IDP response specific health guidelines for physical, psychological and social support.

So far in FY15, PHCPI has trained 629 vaccinators and 195 supervisors in EPI, 89 on Epi Info surveillance, 37 IDP health volunteers and 21 Immunization Master Trainers.