

occupied Palestinian territory 2018 (part of 2018-2020 HRP)

Appealing Agency	MÉDECINS DU MONDE FRANCE (MDM FRANCE)
Project Title	Reinforce the access to quality medical, mental and psychosocial emergency response in the Occupied Palestinian Territory
Project Code	OPT-18/H/115137
Sector/Cluster	Health and Nutrition Cluster
Refugee project	No
Objectives	<p>general objective: Mitigate the impact of emergencies on the health and psychosocial well-being of the Palestinian population in the oPt</p> <p>Specific objective: The Access to quality medical, mental and psychosocial emergency response in the occupied territories is reinforced.</p> <p>Within this action, MDM will mainly contribute to reaching the SO3 of the general HRP “ The ability of vulnerable Palestinians to cope with the protracted crisis, including environmental threats, is supported, while solutions to violations and other root causes of threats and shocks are pursued” .and SO2 of the Health and Nutrition cluster “Vulnerable communities and health facilities in the West Bank and Gaza are better prepared to respond to emergencies and reduce avoidable mortality and morbidity</p> <p>The project is aiming to contribute to the achievement of SO2 by the following project results and indicators</p> <p>Result 1: The ability of emergency management and response at the emergency providers (hospital, PHCC) level has been strengthened; including the detection, basic management and referrals of mental health and psychosocial difficulties.</p> <p>Result 2: Vulnerable communities are prepared to cope with the impact of current and potential emergency man-made and natural disasters among targeted areas within Gaza Strip.</p> <p>The proposed activities will be implemented in good cooperation and coordination with the health and nutrition cluster, ICRC, MAP UK and any other emergency provider. Regular meetings are organized in order to harmonize the work, share experiences and avoid training duplication. MDM F will use some of the MOH staff that has been trained by other NGOs to support some training. Exchange of information and training materials and modules is already ongoing with Hayat center and Juzoor association.</p>
Beneficiaries	<p>Total: 103,934 number of consultation of emergency department, Community members and MOH staff</p> <p>Female: 52,175</p> <p>Male: 51,759</p> <p>Children (under 18): 44,692</p> <p>Adult (18-59): 57,164</p> <p>Elderly (above 59): 2,079 254 MOH staff</p>
Implementing Partners	UAWC, Juzoor , Hayat Center , MOH
Project Duration	Jan 2018 - Dec 2018
Current Funds Requested	\$559,714
Location	Projects covering just Gaza
Gender Marker Code	2a - The project is designed to contribute significantly to gender equality

Contact Details	Itziar de Miguel, genco.palestine@medecinsdumonde.net, +972 (0)54 7750191 NEW	
Cash transfer programming	Is any part of this project cash transfer programming (including vouchers)?	No
	Conditionality:	
	Restrictions:	
	Estimated percentage of project requirements to be used for cash/vouchers:	0

Needs

The main objective of this project is to prepare MOH Medical staff (Hospital ER department) and communities to cope with emergencies due to man-made or natural disasters and mitigate risk life of vulnerable groups.

The program is based on the following information:

1. Humanitarian Needs Overview (HNO), 2018
2. five years' experience of MDM F working with fishermen and farmers on Emergency Preparedness
3. MDM F field assessments 2017.

During the last years, access and quality of services are generally acceptable in an ordinary situation but it is usually impaired during emergency situations. The health system faced great difficulties in dealing with an important number of injuries due to lack of resources, lack of needed drugs and equipment, depletion of supplies and failure of equipment. The quality of care is questionable due to lack of appropriate standards and absence of a clear national emergency preparedness plan.

In the time of crises, the unmanageable numbers of injuries including both genders (male and female) in MoH hospitals are a barrier to the provision of timely and appropriate emergency caretaking in consideration the specific needs of women and children. The situation has been worse during the last period due to the Political situation with an increase in the chronic shortage of drugs and disposable and the decrease in the salaries of the health personnel, both impacting the quality of emergency interventions.

Following MDM experience in EPP at PHC during the last years and Based on the field needs assessment and the continuous monitoring of the MDM F current activities, hospitals emergency department are still in need to be strengthened in priority. Strengthening the hospital emergency departments will ensure the provision of the complete emergency services for all community members including women and children after being referred from the community and the PHC emergency centers that had been supported by the previous project. In the meanwhile, the follow up of the PHC emergency units is also needed to maintain a good intervention quality, to decrease the overload on hospitals and to improve the chances of providing quality, nondiscriminatory services for categories (male, female, boys and girls). To intervene at this superior level (hospital emergency departments) will be really relevant to complete the patient referral cycle (community > PHCC > hospital) and to ensure a complete and quality treatment.

Based on HNC framework, community preparedness is still crucial in times of crises, as communities are the first responder to any critical incident, emergency community awareness for female and male is important for long-term impact on decreasing the complications related to first aid practices for a victim of the critical incident. The good knowledge of the Community Based Organizations about existing services is particularly important to aware the population on close and accessible emergency services, especially in the ARA. Being well informed on services available will reinforce their role, relay of information and help to seek for more adapted and quicker response. The systematic violation of respect of basic rights afforded to civilians under international law such as a right to life, liberty, and security shall be documented to support efforts to seek accountability.

Activities or outputs

Outcome 1: The ability of emergency management and response at hospitals emergency departments (ED) in 5 emergency department has been strengthened (Shifa, Naser Hospital, Gaza European Hospital, Abou Yousef al Najar and Andonisi hospital); including the detection, basic and advanced management and referrals to mental health services.

Through the technical support of MDM F medical team, the proposed interventions will reinforce the capacities of the MoH medical staff (males and Females) on Emergency management and response at Hospitals' ED in Gaza governorates. It will include theoretical, practical, refreshment training and in-service visits/follow up for male and female staff in order to be able to ensure a gender equality services. The hospital ED (Naser Hospital, Gaza European Hospital, Abou Yousef al Najar and Andonis hospital) will be supported as well with the provision of essential emergency drugs and disposables, equipment, maintenance and rehabilitation based on the needs. The following activities will be designed in order to respond to the needs of each specific target as required (women/ girls and Men /boys) for each specific need. (1) To update and harmonize the existing emergency protocols ensuring privacy, confidentiality in services provision for women and girls. This review will be done in cooperation with the national emergency committee and other providers through workshops and regular meetings (2) To inform, train and prepare concerned stakeholders about emergency plans and crises management through different sets of training, theoretical, on job training and simulations. Targets will include Hospital ED and Managers at the MOH (estimated targets: 150 ED staff (doctors and nurses) / female and males + 50 managers with the total of 30 females and 120 male). (3) To provide emergency drugs and disposables in case of shortage, medical equipment, maintenance, and rehabilitation to the ED in the six targeted hospitals (Andonisi, Naser Hospital, European and Abou Yousef Al Najar). (4) To pilot the integration initiative of MHPSS at the ED in one hospital (Shifa hospital).

Outcome 2: Vulnerable communities are prepared to cope with the impact of current and potential emergency man-made and natural disasters among targeted areas within Gaza Strip

Considering communities as the first responders (Male or/and Female) in terms of emergency situations either in crisis or in daily emergencies, strengthening their emergency skills is crucial in saving lives and mitigating the risk of health complication due to first aid malpractices. ARA population is considered one of the most vulnerable population with a higher probability of exposure to emergency situations and overall lower income. MDM intervention will focus on the implementation of an exit strategy with the final outcome by: 1) MDM F will continue implementing directly the BLS training in two governorates, Khanyounis, and middle area (1980 Female 1500 male). 2) Identification of partners will take place through an assessment. The assessment will include the evaluation of the association mission and principles, technical capacity, community involvement, gender equality, financial stability and commitment to sustainability after the withdrawal of MDM. Increasing the capacities of local partners to take all activities in 2018.

Indicators and targets

Indicator of Result 1:

- 1) Number of staff (116 nurses and 138 doctors) oriented and empowered on Emergency topics (30 female + 224 male)
- 2) Number of referred patient from PHCC to the hospital fulfilling qualitative criteria. target : (200)
- 3) number of cases that have been managed fulling the emergency protocols :target (100000= 50000 male + 50000 female)

Indicator of result 2

- 4) Number of community members received BLS training (1980 female + 1500 male)

Indicator	Project target
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Médecins du Monde France(MDM France)	
Original BUDGET items	\$
Staff and other personnel costs: Emergency medical manager and Mental Health manager	80,947
Direct inputs and services to beneficiaries (Supplies, Commodities, Materials, Services, dedicated S	423,347
General operating and other running costs: Office rent,running cost,office supplies	28,767
Indirect / Overhead Costs (MAX 11%)	26,653
Total	559,714

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