

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

<b>Appealing Agency</b>	<b>QATAR RED CRESCENT SOCIETY (QATAR RC)</b>
<b>Project Title</b>	Supporting life saving Neonatal Care services in Gaza
<b>Project Code</b>	OPT-18/H/115791
<b>Sector/Cluster</b>	Health and Nutrition Cluster
<b>Refugee project</b>	No
<b>Objectives</b>	<p>Project main goal: save lives of male and females newly born and at high risk in Gaza through contribution to decrease mortality and morbidity rates amongst these vulnerable group</p> <p>The Project aims to continue the phase 1 and 2 of rehabilitation of neonatal unit in Shifa hospital, phase 1 building of the third floor in shifa hospital nursery, phase 2 equipping and furnishing to cover neonatal services (furniture, medical devices, and bed with monitors). This step to increase the bed capacity to reach integrated services of neonatal ICU. in addition to that the project contributes to support the NICU in El Nasser hospital for male and female pediatrics as it is the only specialized hospital for diagnosing cardiac problems especially congenital heart defects in male and female infants and newborns equally</p> <p>Overall objectives</p> <ol style="list-style-type: none"> <li>1. Placing the needs of the mother and family at the neonatal department so that all cases (male and female) are treated with dignity and respect.</li> <li>2. Providing a range of safe high quality choices of care, from nurse to NICU consultant whereas at risk male and female babies can offer comprehensive neonatal intensive care facilities</li> <li>3. Highly trained workforce which delivers high quality services equally to this vulnerable group.</li> <li>4. Neonatal services for male and female newborns are constantly improved.</li> <li>5. To ensure the availability of life saving equipment and essential medicines at the neonatal units for delivering equitable services for this vulnerable group.</li> </ol>
<b>Beneficiaries</b>	<p>Total: 4,000 vulnerable group</p> <p>Female: 1,960</p> <p>Male: 2,040</p> <p>Children (under 18): 4,000</p>
<b>Implementing Partners</b>	QRC in coordination with MOH
<b>Project Duration</b>	Jan 2018 - Dec 2018
<b>Current Funds Requested</b>	<b>\$823,000</b>
<b>Location</b>	Projects covering just Gaza
<b>Gender Marker Code</b>	2b - The principal purpose of the project is to advance gender equality
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<b>Cash transfer programming</b>	<p>Is any part of this project cash transfer programming (including vouchers)? No</p> <p>Conditionality:</p> <p>Restrictions:</p> <p>Estimated percentage of project requirements to be used for cash/vouchers: 0</p>

Needs

NICU department in Shifa hospital characterized by crowding with bed occupancy rate more than 200%, with not less than 20000 births per year. It also receives all surgical conditions for male and female newborns from all over the Gaza Strip to prepare them for all complex medical procedures and medical attention after surgery until they are discharged from the hospital in addition to other hospital births. Before the expansion in the NICU department in Shifa hospital it has 16 intensive care incubators and 14 moderate care incubators. Compared to the annual delivery rate at Shifa Hospital, the hospital needs at least 40 intensive care incubators and 60 medium care incubators. Added to that the high need for El Nasser Hospital to high-tech devices as there is 10/1000 LB suffer from congenital heart defects which is high percentage

Male and female infant mortality rates show only a slowly decreasing trend during the last two decades. If no specific actions are taken, the expected infant mortality rate will not drop to 12.5 per 1000 by 2017 as targeted by the millennium development goal 4 (MDG 4). Neonatal deaths from both genders (13.1 per 1000 live births) represent half of child mortality (25.1 per 1000LB) and two thirds of infant mortality (20.6 per 1000 live births). Therefore, during the 28 first days of life the number of male and female deaths is equal to that during the 58 following months. In addition, neonatal deaths mostly occurred during the first days of life. Hence, to achieve millennium development goal 4, the reduction of child mortality, intervention must target male and female newborn babies in their first days and weeks of life (early-neonatal and neonatal period).

The NICU receives monthly about 180-200 cases of entry in Shifa and 100 - 120 case monthly, which is a huge number compared to the number of beds. High risk male and female babies of low birth weight less than 1500 gm most of them remain for long days on the same condition, even without monitoring devices and without an incubator, and the lack of incubators sufficient to accommodate them. For the last few years and with the support of QRC's neonatal consultant, the NICU unit is assessed and found to be lacking the essential medicine, equipment, and staff (male and female) with updated skills needed to provide good quality and safe neonatal care equally for both genders. The most recent assessment was conducted in NICU in Shifa hospital established the following needs (Training of doctors and nurses (from both genders) on the standard procedures and protocols inside the NICU, drugs, medical supplies and incubators and some other equipment Provision)

The specialty of neonatal and preterm infant medicine is precise and rapidly developed, which need continuous communication with outside areas, this reflects the high need to trainings for staff in equitable way in the department. As appeared from different assessment in the field there is a critical gap in neonatal services in Gaza which requires collaborative efforts from different organizations. No single organization has enough resources and expertise to fill the gap and develop the neonatal care services for both genders on its own, therefore working together is essential. This project will build on the achievements made by previous QRC projects including building the capacity of one neonatologist and provision of state of the art equipment to same NICU. It will be also a complementary intervention with other interventions done by UNICEF which is supporting the renovation and equipping of Nasser hospital neonatal unit and also building and equipping a new floor for Al Shifa hospital's neonatal unit to increase their bed capacity from 32 to 44 beds. The non-governmental as (MAP UK, UNICEF, UNDP, and QRC) organizations work together to avoid duplication of efforts and to ensure the proper use of resources to achieve the goal of reducing male and female neonatal morbidity and mortality.

### **Activities or outputs**

**Selection:** The beneficiaries (male and female new-born infants) are automatically selected based on their need for intervention and admission at the neonatal unit. In shifa NICU, there are 180 - 200 male and female newborns are at high risk and require admission to a neonatal unit. These new born babies male and female will benefit from neonatal care project interventions equally in the neonatal departments in Shifa and EINasser hospital.

**Community involvement:** QRC have been always sensitive and responsive to feedback from families and care givers (mother of newborns) who want to see an improvement in neonatal care services which consequently reduce morbidity and mortality rates. A feedback is also taken from key managerial and technical male and female staff in the MoH and at shifa and EINasser neonatal units who were involved in the planning of activities and identification of needed medical supplies to be procured. Onsite job trainings that will be implemented will be coordinated with MOH. This will take place through beneficiary from both genders consultation, case studies and field visits to NICU, and regular meeting with staff from both genders and families of admitted babies. Added to that consultation of organizations working in the same field as (MAP UK, UNICEF) will take place to avoid duplication of interventions. The project will be implemented through comprehensive cooperation between staff in QRC technical team, number of beneficiaries who will be directly involved in the planning, implementation, delivery, monitoring and evaluation of the project to ensure sustainable success.

#### Activities

##### 1. Staff training

(Including Identify male and female trainees in coordination with MOH, Implement onsite job trainings as in needs assessed, and Monitoring)

##### 2. Drugs and supplies supply

(Including Identify list of drugs with support from MoH, identify list of equipment needed with support from MoH, Procure and deliver drugs and disposables, and monitor the distribution)

##### 3. Equipment supply

(Including identify list of equipment needed with support from MoH, Procure and deliver equipment to MoH central stores, and monitor the distribution of equipment and shortages of items)

#### Monitoring

The monitoring with comprehensive cooperation between QRC technical staff and MOH teams. The team will be responsible for the overall management of the project. The monitoring will depend on availability of results of assessment, monthly data on morbidity and mortality at NICU also number of male and female cases diagnosed professionally as congenital heart problem. Taking into consideration that the monitoring will be planned at the beginning of the project with the key stakeholders. Regular field visits to the unit, meetings with key staff, and write monthly and quarterly reports will be the tools. All over the project period the committee will continue to collect baseline data to support the project evaluation. The other key stakeholders will be also consulted and involved in the process given that they have been contributing to project's implementation.

#### Output/Results

- Over 20 male and female staff at the unit in shifa and EI Nasser hospital will benefit from onsite job trainings specialized
- NICU in shifa hospital and EI Nasser hospital are supplied with needed drugs, necessary equipment and disposables

The onsite job training regarding international protocols on neonatal care offered to the hospital male and female staff equally at the NICU in EISHifa and EINasser hospitals aimed at the improvement of their treatment and care of newborn infants admitted to department. The majority of trainings will be conducted by local staff and neonate consultant. This will give local ownership to the project and ensure minimal dependence on external support. The equipment purchased will be reusable in the hospitals we support. These steps will be important for insuring sustainability of the project.

#### **Indicators and targets**

Target 1.

Over 20 male and female staff ability to reduce morbidity and mortality rates amongst new-born infants from both genders in shifa hospital and EINasser hospital for pediatrics will be improved

Indicators:

1. Number of equitable professional trainings for male and female staff working in NICU targeted
2. Number of equipment's provided
3. Number of needed drugs available
4. Number of onsite job trainings in shifa hospital and EINasser hospital for pediatrics
5. mortality rates amongst male and females newly born in NICU targeted

Target 2: 4000 male and female newborn at high risk as vulnerable community will have access equitably to quality essential lifesaving health service in equitable manner to in shifa hospital and EINasser hospital

Indicator

1. mortality rates amongst newly born from both genders and admitted to NICU targeted
2. Male and female cases admitted and improved in shifa hospital and EINasser hospital for pediatrics
3. cases from both genders benefciate from professional diagnosis equally in shifa hospital and EINasser hospital for pediatrics

Target 3: The strengthening the neonatal care in NICU in shifa hospital and EI Nasser hospital.

1. staff from both genders benefciate equally from onsite job trainings in NICU (EIShifa hospital and EINasser hospital)
2. the third floor equipped as well in in shifa hospital
3. bed occupancy rates
4. hospitalization rates for male and female newly born in NICU targeted
5. number of cases from both genders diagnosed as congenital heart problem

Indicator	Project target
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Qatar Red Crescent Society(Qatar RC)	
Original BUDGET items	\$
project technical staff	42,000
equipment	580,000
life saving drugs	50,000
furniture	50,000
on site job staff training	30,000
external evaluation	10,000
admin costs	61,000
<b>Total</b>	<b>823,000</b>

Qatar Red Crescent Society(Qatar RC)	
Current BUDGET items	\$
project technical staff	42,000
equipment	580,000
life saving drugs	50,000
furniture	50,000
on site job staff training	30,000
external evaluation	10,000
admin costs	61,000
<b>Total</b>	<b>823,000</b>