2020 LCRP Sector Workplan

		2020 Timeline		1				
Sector Output Select from list of outputs in the sector loaframe	Key Activities List activities which will contribute to the output using action verbs	Q1	Q2	Q3	Q4	Responsible	Main Partners	Additional Comments
	prehensive primary healthcare (PHC)							
Output 1.1: Financial subsidies and health promotion provided to targeted population for improved access to a comprehensive primary healthcare (PHC) package	Activity 1: Provide subsidized medical consultations (incl. Antenatal Care (ANC), Noncommunicable diseases (NCD) and Mental Health (MH)) and laboratory diagnostics to displaced Syrians, vulnerable Lebanese, PRL and PRS through fixed primary health care outlets	x	x	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	URDA, AVSI, ARCS, IMC, Rahma Association, LOST, PU-AMI, Caritas, IOM, SIDC, IOCC, LAECD, MEDAIR, Common Effort, RI, Al Midan, Mercy-USA, AMEL, IDRAAC, Thiqah, UNHCR, UNRWA.	
	Activity 2: Provide emergency primary health care services through mobile medical units where primary health care facilities are hard to reach	х	х	х	х	Health Sector Co- leads (UNHCR & WHO)		
	Activity 3: Provide health awareness/promotion activities at Primary Healthcare (PHC) facility-level and community outreach awareness/promotion activities linked to the health facility	x	x	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)		
nearthcare (FIIC) package	<u>Activity 4</u> : Provide family planning counselling to targeted population at PHC facility level	x	x	х	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)		
	Activity 5: Provide children under 5 and pregnant and lactating women (PLW) with micro-nutrients	ting women (PLW) with X X X	х	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)				
Output 1.2: Free of charge chronic	<u>Activity 1</u> : Dispense chronic diseases medication to targeted population at primary healthcare level through enrolment in national channels (MoPH/YMCA, UNRWA)	х				Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	MAGNA, URDA, MAPs, ISWA, HCI Lebanon, PCPM, Rahma Association, Caritas, IOM, QRCS, IOCC, MEDAIR, Common Effort, RI, WHO, AMEL, Thiqah, UNHCR, UNRWA.	
disease medication provided at PHC level	<u>Activity 2</u> : Dispense chronic diseases medication to targeted population at primary healthcare level which are not available through YMCA list (i.e. insulin) nor covered through UNRWA	x				(IVIOPT) & CO-leads		
Output 1.3: Free of charge acute disease medication, medical supplies and reproductive health (RH) commodities provided at PHC level	Activity 1: Provide acute diseases medication to targeted population at primary healthcare level	х	x	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	HWA, MAGNA, URDA, MAPs, IMC, PU-AMI, Caritas, IOM, Plan- International, IOCC, MEDAIR, Common Effort, WHO, Fondation Mérieux, AMEL, UNICEF, Thiqah, UNHCR, UNFPA, UNRWA.	
	<u>Activity 2</u> : Provide medical supplies to primary health care facilities	х	x	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)		
	Activity 3: Provide reproductive health commodities including family planning commodities to targeted population at primary healthcare level	x				Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)		
	<u>Activity 4</u> : Dispose of expired medications	s X	x	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)		
Output 1.4: Free of charge routine	Activity 1: Provide routine vaccination for children under 5 at primary healthcare level	x	х	x	х	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	URDA, HCI Lebanon, DAF, PCPM, Makassed, Caritas, IOM, IOCC, I AFCD MFDAIR	

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vaccination provided for all children under 5 at PHC level and through vaccination campaigns	<u>Activity 2</u> : Refer children under 5 who have not completed their vaccination as per the Expanded Programme on Immunization (EPI) calendar to PHCs for vaccination	х	х	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	Common Effort, RI, WHO, Al Midan, UNICEF, Thiqah, UNHCR, RMF, UNRWA, Tahaddi Lebanon
Output 1.5 : Primary healthcare institutions' service delivery supported	Activity 1: Provision of equipment and supplies for key primary healthcare institutions	х	х	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	URDA, MAPs, Intersos, IMC, HCI Lebanon, DAF, PCPM, Rahma
	Activity 2: Provision of staff support for key primary healthcare institutions	х	х	х	х	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	Association, Makassed, LOST, PU, AMI, Caritas, IOM, QRCS, IOCC,
	<u>Activity 3</u> : Provision of capacity building trainings for key primary healthcare institutions	х	х	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	MEDAIR, Common Effort, RI, IR, Al Midan, Fondation Mérieux, UNICEF, ACTED, UNHCR, UNRWA.
Outcome 2: Improve access to hosp	pital (incl. ER care) and advanced referral care (advanced diagnostic laboratory & rad	diology	/ care)				
Output 2.1: Financial support	<u>Activity 1</u> : Provide financial support to targeted population (displaced Syrians and PRS) to access hospital care	х	х	x	x	Health Sector Co-lead (UNHCR) & Health Working Group (HWG)	URDA, MAPs, AVSI, ARCS, ISWA, PU-AMI, Caritas, IOM, SIDC, INARA, Common Effort, RI, IR,
provided to targeted population for improved access to hospital and advanced referral care	<u>Activity 2</u> : Provide financial support to targeted population (displaced Syrians and PRS) to access advanced/specialized diagnostic services (on an outpatient basis)	х	х	х	x	Health Sector Co-lead (UNHCR) & HWG	Taawon, Mercy-USA, SAMS, IDRAAC, UNHCR, MAP-UK, UNRWA, Tahaddi Lebanon.
Output 2.2: Public and private hospital service delivery supported	<u>Activity 1</u> : Provide public hospitals with staffing support	х	х	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	URDA, UNOPS, IOM,
	Activity 2: Provide public hospitals with new/additional equipment	х	х	х	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	QRCS, IOCC, LAECD, INARA, Common Effort, IR, SAMS, UNICEF,
	Activity 3: Provide public (and private) hospital staff with essential capacity building trainings approved by MoPH	х	х	х	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	UNHCR, UNRWA.
Outcome 3: Improve Outbreak & In	fectious Diseases Control						
Output 3.1: The National Early Warning and Response System	Activity 1: Decentralize the Early Warning, Alert and Response System (EWARS) sentinel sites (staffing, logistics, IT system development, equipment and technical support missions)	х	х	x	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	IOM, MEDAIR, Common
(EWARS) expanded and reinforced	Activity 2: Conduct joint trainings for surveillance and response teams	х	х	х	x x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	Effort, WHO, SI, UNRWA.
Output 3.2: Availability of selected contingency supplies ensured	<u>Activity 1</u> : Maintain the availability of contingency supplies including vaccines, laboratory reagents, response kits and personal protective equipment (PPEs)	x				Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	MAPs, Caritas, IOM, MEDAIR, Common Effort, WHO, UNICEF, UNRWA.
	Activity <u>1</u> : Provide testing, diagnosis, care, and treatment for TB under NTP	х	х	х	x	Health Sector Lead (MoPH) & Co-leads (UNHCR & WHO)	

Output 3.3: National Tuberculosis						Health Sector Lead	IOM, Caritas, Common	
& AIDS Programmes Strengthened	Activity 2: Provide testing, diagnosis, care, and treatment for HIV under NAP	х	Х	Х	Х	(MoPH) & Co-leads	Effort, WHO, Fondation	
						(UNHCR & WHO)	Mérieux, UNRWA.	
	Activity 3: Conduct trainings / workshops for health care providers of HIV & TB					Health Sector Lead		
	detection and case management	Х	Х	Х	Х	(MoPH) & Co-leads		
						(UNHCR & WHO)		
Outcome 4: Improve Adolescent &	Youth Health							
							MAPs, AVSI, HCI	
Output 4 1: School Health Program	Activity 1: Implement the various components of the School Health Program in					Health Sector Lead	Lebanon, Caritas, IOM,	
(MoPH/WHO/MEHE) maintained	public schools	Х	Х	Х	Х	(MoPH) & Co-leads	IOCC, LAECD, Common	
((UNHCR & WHO)	Effort, IR, WHO, UNRWA.	
							MAPs, AVSI, ARCS,	
				x			Rahma Association, HI,	
Output 4.2: Equitable access to			x				Makassed, PU-AMI,	
	Activity 2: Conduct outreach activities targeting adolescent and youth specifically				x	Health Sector Lead (MoPH) & Co-leads	Caritas, Plan-	
vulnerable adolescent and youth	working and street children (out of school) and adolescent girls.	Х					International, SIDC, IOCC,	
increased.	working and street emilien (out of school) and deorescent girls.					(UNHCR & WHO)	LAECD, MEDAIR,	
increased.							Common Effort, WHO, Al	
							Midan, UNICEF, Thiqah,	
							UNRWA.	
Inter-Sector / Coordination								
	Populate the PRA with protection risks identified through participatory assessments		R, & su	rveys.		Health Sector		
	Conduct 1 hour PRA session in each region led by the UNHCR Health field coordinate					Coordinator, Health		
Protection Risk Analysis (PRA)	Collate findings into one PRA, highlighting different risks per region, share complete	d versi	on wit	h secto	r	Field Coordinators &		
, , , ,	Description in the definition of the state of the structure in the field of the description					Health Sector	WHO, UNHCR, UNICEF,	
	resent to health core group for prioritization of actions to be included in the LCRP 2020 chapter.					Coordinator & PMO	UNFPA, UNRWA, IMC,	
						Health Sector	Amel	
Strengthening Inclusion	Strengthen health data collection & analysis to allow for disaggregation of data by a	ge, sex	and d	isability	/.	Coordinator		
						Health Sector		
	Review and adapt the Inter-Agency minimum standards on referrals.	Coordinator						
Strengthening Referrals	Adapt information leaflets and health awareness products in consultation with PWS	Health Sector						
	channels and appropriateness of design.	Coordinator						
	Use data collected through referral and Complaint and Feedback Mechanism (CFM)	Health Sector						
	learning, promote adaption and complement other surveys.	Coordinator						
	To assess and monitor the access of PwSN to information on services, to access PHC	Health Sector						
	CFMs through consultations and assessment	Coordinator						
Complaints & Feedback	Review the Inter-Agency minimum standard on complaint & feedback.	Health Sector Coordinator						
Mechanisms								
	eview MoPH CFM SOP from an inclusion perspective and to review alignment to best practices.					Health Sector		
						Coordinator		
	To start discussions on ways to improve the CFM in PHCs.					Health & Protection	MoPH	
	TO Start discussions on ways to improve the crivin erics.					Sectors Coordinators		
						Health & Protection		
Risk to SGBV Survivors						Sectors Coordinators		
	To work with protection sector on advocacy efforts to reduce confiscation of IDs at hospital level, and to)	Health Sector				
	ensure PoCs without CSD or ID have access to PHC & SHCs.					Coordinator		
Advocacy Efforts	To aim for female gynecologist to be available in each health facility.					Health Sector		
		Coordinator						

	To advocate for fully subsidized delivery costs for pregnant women, and to fast-track delivery appointments	Health Sector
	at SHCs.	Coordinator
	Keep the service mapping (5Ws, PHC, MMU, SHC) updated and available to HWG.	Health Sector
	keep the service mapping (5003, FTC, MMO, 51C) updated and available to TWG.	Coordinator
	Update the drop box folder to include all IEC tools/materials developed by Health Partners.	Health Sector
	opate the drop box totale to include an ice tools, indeends developed by reality articles.	Coordinator
	Coordinate partner's activities at the PHC level to avoid duplication and gaps.	Health Sector
		Coordinator
Coordination Efforts	Ensure cross attendance and participation in the other sector's working groups and provide	Health Sector
	important Health updates.	Coordinator
	Keep monitoring of the key indicators to study the impact of the current crisis on different	Health Sector
	population cohort. Publish the data trend. Advise on programme designs according to trends.	Coordinator
	Ensure that all Health partners comply with the guidance of the Ministry of Environment and	Health Sector
	disseminate any environmental guidance to HWG.	Coordinator
	Liaise with WASH sector on water-borne diseases and follow up on outbreaks where WASH	Health Sector
	conditions might be the causes.	Coordinator