2016-2021



Ministry of Health The Republic of Maldives



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Abbreviations

EPA Environment Protection Agency

HCF Health Care Facility

HCWM Healthcare Waste Management

HPA Health Protection Agency

RAHSD Regional and Atoll Health Service Division

MFDA Maldives Food and Drug Authority

MoH Ministry of Health

MoEE Ministry of Environment and Energy

QAD Quality Assurance Division
SOP Standard Operating Procedure
WAMCO Waste Management Cooperation

WHO World Health Organisation

Foreword

Developing an integrated and sustainable health care waste management system is of utmost importance to ensure that all wastes generated within the health sector are managed without adverse effects on human health and environment, as the Republic of Maldives is moving towards the development of an environmentally sound waste management system in the country.

The development of this strategic plan under the "National Healthcare Waste Management Policy (2016)" is a key achievement to improve the present situation of health care waste management in Maldives. This strategic plan will, therefore, guide in enforcing the "National Healthcare Waste Management Policy 2016" and achieving its objectives through the establishment of an integrated countrywide system that is economical, socially and environmentally sustainable. Implementation of this plan in the future will protect the patients, the health of the workers, the health of the public and the environment from hazards associated with health care wastes generated in the country.

I acknowledge that the "Health Care Waste Management Strategic Plan (2016 – 2021)" was developed through extensive consultations with the relevant government institutions, health care facilities in the Male city, and relevant non-governmental organizations. I guarantee that the plan is practical and achievable.

Likewise, effective implementation of this plan requires multi-sectorial effort, cooperation, and engagement at all levels. It requires the involvement of the institutions that generates health care waste, relevant stakeholders of the government, public partner agencies and other institutions, to protect the health of our people and environment.

I would like to extend my gratitude to all the members who worked hard in making this plan a success and call upon all the relevant stakeholders to join hands with Ministry of Health in the successful implementation of the plan.

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Introduction and Justification

Healthcare waste poses risks to human health and to the environment when managed inappropriately. The Ministry of Health (MoH) of the Republic of Maldives, recognies the need to improve the management of healthcare waste in the country. Hence, the "National Healthcare Waste Management Policy 2016" states the following vision:

"Ensuring that all waste generated within the health sector is managed without adverse effects on human health and environment in an integrated manner that is environmentally and economically sustainable."

In this Strategic Plan the gaps of the current healthcare waste management system in the country are identified and accordingly objectives, key statements and priorities of actions are outlined to improve the management of healthcare waste in the country.

Health Master Plan 2016-2025 identifies healthcare waste management as an area of concern for health care quality. It states the enforcement of regulations and standards on the management of waste and waste reduction, including healthcare waste.

The purpose of this Strategic plan is to enforce the "National Healthcare Waste Management Policy" by establishing a countrywide integrated healthcare waste system, which is managed without adverse effects on human health and environment, and that is environmentally and economically sustainable.

Strategic Approaches

This strategic plan and strategic plan was developed in consultation with the following stakeholders;

- 1. Ministry of Health
- 2. Ministry of Environment and Energy
- 3. Ministry of Finance and Treasury
- 4. Environment Protection Agency
- 5. Maldives Food and Drug Authority
- 6. Health Protection Agency
- 7. Faculty of Health Science
- 8. Indira Gandhi Memorial Hospital
- 9. Hulhumale' Hospital
- 10. Villimale Hospital
- 11. Waste Management Cooperation Ltd
- 12. Medica Hospital
- 13. ADK Hospital
- 14. Maldivian Blood Services
- 15. Senahiya
- 16. UNDP

The implementation plan is based on the identified priority areas, objectives, and activities. A phased implementation is envisaged, which will start with the improvement of the legal framework, capacity building, public awareness building activities and the initiation of a pilot project.

This strategic plan is developed in line with the "National Waste Management Policy" and "Waste Management Strategic Action Plan" endorsed by the Ministry of Environment and Energy which envisages the establishment of Waste Centres on each inhabited island and the construction of Regional Waste Management Facilities.

Strategic Priorities

An assessment was done to identify the current practices of health care waste management in Maldives. The following areas were identified based on the findings:

Strategic Priority 1: Improving the legal framework for healthcare waste management Requirements for the safe management of healthcare waste need to be reflected within various legal instruments. Therefore, the revision of the existing legal framework and the development of new instruments which are in line with this strategic plan are needed.

Strategic Priority 2: Improving knowledge management and capacity building

To promote proper knowledge management on healthcare waste by institute training programs and raising awareness among policy makers, healthcare workers, waste handlers, patients and the general public.

Strategic Priority 3: Implementing of an integrated healthcare waste management system In order to improve the safe management of healthcare waste without adverse effects to the human health and environment, an integrated healthcare waste management system will be implemented in line with national waste management requirements and international treaties.

Strategic Priority 4: Improving and adapting of national and local monitoring and evaluation process

Good governance requires periodic monitoring of health care waste management activities and corrective actions.

Strategic Priority 5: Resource Mobilization

Resource mobilization will ensure different types of support such as physical, financial, technical, and human capacity to achieve the strategic plan.

Objectives to implement the strategic priorities

Based on the above-outlined priority areas, the objectives and general activities needed to implement the strategic plan are outlined. The comprehensive approach of this strategic plan needs to aim all different kinds of waste generated in healthcare facilities (general waste, infectious and sharp waste, pharmaceutical waste, pathological waste, hazardous waste and chemical waste) from point of generation to disposal. Here, the measures need to be planned for each waste management step: waste minimization, Segregation, internal transport, storage, treatment, external transport, and disposal.

Strategic Priority 1 Objectives:

Review and revise existing legal documents

Strengthen policy and regulatory structures for HCWM

Strategic Priority 2 Objectives:

Develop national training packages on health care waste management

Implementation of developed HCWM training programs

Increase advocacy awareness for behavioural change

Promote Research, new technologies and innovative methods for sound management of HCW

Strategic Priority 3 Objectives:

Assessment of the current waste management situation

Set up of an integrated system in a pilot Atoll

HCWM Planning

Promote green procurement and minimizing waste

Improvement of Infectious Waste and Sharp Waste Management

Improvement of Pharmaceutical and Chemical Waste Management

Strategic Priority 4 Objectives:

Assessment of current monitoring situation

Strengthen reporting, monitoring, and evaluation mechanism on HCWM

Regular monitoring and evaluation of the Health Care Waste Management System and performance of the equipment

Strategic Priority 5 Objectives:

Establish sustainable sources of funding

Budget completion

Strategic Plan Implementation and Monitoring

The implementation of the strategic plan will be achieved through the development and integration of the proper management of healthcare waste into the current waste management activities. Furthermore, the annual action plans of city/atoll/island councils will contribute to the implementation of the Strategic plan. Decisions on the adjustments of the Plan will be taken on the basis of monitoring and evaluation of the implementation of annual plans.

MOH plays the role of coordination of the process of implementation and monitoring and is responsible for:

a systematic analysis and evaluation of the annual reports on the status of implementation;

- The validity of the necessary costs for the implementation of strategic activities;
- Identify possible sources of funding the implementation of measures;
- Organization monitoring and evaluation system,
- Identify deviations from the stated goals and objectives, analyse the causes and make the necessary adjustments.
- Dissemination of the results of monitoring and reporting to relevant stakeholders.

Implementation Plan 2016 - 2021

1.1 Strategic Priority 1: Improving of the legal framework on healthcare waste management

| # | Objectives | Measures / Actions | Expected results | 2016 | • | | 201 | 7 | | 20 | 18 | | 2 | 019 |) | | 20 | 20 | | 20 | 21 | | | Responsible | Budget |
|---|---|---|--|------|-----|----|-----|-----|-----|-----|-----|----|-----|-----|----|-------|----|-----|-----|----|----|----|----|---|--------|
| | Objectives | Measures / Actions | Expected results | Q1Q2 | 2Q3 | Q4 | Q1(| Q2Q | 3Q4 | 4Q1 | lQ2 | Q3 | Q4Q |)1Q | 2Q | 3 Q 4 | Q1 | Q2Q | 3Q4 | Q1 | Q2 | Q3 | Q4 | agency (ies) | USD |
| 1 | Review and revise exist- ing legal doc- uments | Identify gaps and outdated legal documents, Identify overlapping mandates of authorities and relevant stakeholder | Clear understanding of terminology, overlapping mandates and roles and responsibilities identified | | | | | | | | | | | | | | | | | | | | | НРА, МоН, МоЕЕ | 0 |
| | | Review and revise existing legal documents | Existing legal documents are revised | | | | | | | | | | | | | | | | | | | | | НРА, МоН, МоЕЕ | 3,000 |
| 2 | Strengthen Policy and regulatory structures for HCWM | Develop and update missing and outdated legal documents in the area of healthcare waste management | Legal documents developed and up- dated | | | | | | | | | | | | | | | | | | | | | Foreign Ministry MoH, HPA, Labour relations Authori- ty, WAMCO MoEE, EPA, MoT LGA, | 6,500 |
| | | Disseminate strategic plan and legal docu- ments on HCWM to relevant stakeholders | Relevant stakeholders are informed about the strategic plan and legal documents on HCWM | | | | | | | | | | | | | | | | | | | | | НРА | 3,000 |
| | | Clear definition and approval of roles and responsibilities | Roles and responsibilities are documented and approved | | | | | | | | | | | | | | | | | | | | | Foreign Ministry MoH, HPA, Labour relations Authori- ty, WAMCO MoEE, EPA, MoT | 0 |

| # | Objectives | Measures / Actions | Expected results | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | Responsible | Budget |
|---|------------|--------------------|------------------|------|------|------|------|------|------|-------------|--------|
| | | | | | | | | | | LGA, | |

1.2 Strategic Priority 2: Improving of knowledge management and capacity building

| # | Objectives | Measures / Ac- | Expected results | 201 | 6 | | 2 | 201 | 7 | | 20 | 18 | | 2 | 019 |) | | 20 | 20 | | 2 | 202 | 1 | | Responsible | Budget |
|---|--|---|---|-----|-----|-----|-------------|-----|-----|------|----|-----|-----|-----|-----|------|-----|-----|----|-----|-----|-----|-----|-------|----------------|-------------------------|
| , | Objectives | tions | Expected results | Q1(| Q2(| Q3Ç | 24 (| Q1Q |)2Q | 3 Q4 | Q1 | Q2(| Q3(| Q4Q | 1Q2 | 2 Q: | 3Q4 | 4Q1 | Q2 | Q3Ç | (40 | Q1Q | 2Q3 | 3 Q 4 | agency (ies) | USD |
| 1 | Develop na- tional training packages on health care waste man- agement | Identify gaps and needs of the current training system for healthcare waste management | Gaps and needs are identified | | | | | | | | | | | | | | | | | | | | | | МоН / НРА | 0 |
| | | Develop a training package for health care workers and conduct a trial training for the final revision of the training package. | The training package is available, trial training conducted and training package finalized. | | | | | | | | | | | | | | | | | | | | | | МоН | 16,000 |
| | | Develop an online training tool for regular refresher training activities - trial testing and revision | Online training tool is developed, tested and revised | | | | | | | | | | | | | | | | | | | | | | МоН | 4,000 |
| | | Liaise with relevant government bodies to approve HCWM component to be included in the curriculum | Content approved | | | | | | | | | | | | | | | | | | | | | | НРА | 0 |
| | | Consultative meetings with Universi- | A national train- ing/capacity building | | | | | | | | | | | | | | | | | | | | | | MOH/MNU MOE | ^{&} 11,300 |

| # | Objectives | Measures / Ac- | Expected results | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | Responsible | Budget |
|---|---|---|--|------|------|------|------|------|------|----------------------------|---------|
| | | ty, Education Ministry & Ministry of Health: Develop and incorporate HCWM for various categories of training /assessments | for HC waste management in the education sector is developed | | | | | | | | |
| | | Resource map- ping to identify trainers trained on HCWM | Trained trainers are identified and documented. | | | | | | | НРА | 0 |
| 2 | Implementation of developed HCWM training programs | Train and certify master trainers from MNU campuses and schools, create pool of trainers at regional level | Master trainer and pool of trainers are trained | | | | | | | MNU/HPA/MoH | 130,000 |
| | | Assign a focal point in HCWM in each health facility and train focal points by the master trainers at regional level | Have a trained person in HCWM in each health care facility | | | | | | | MoH / Health facilities | 9000.00 |
| | | Mandatory sensi- tization programs to Policymakers | Policy makers and Hospital managers are trained | | | | | | | HPA with insti- tutions | 2,500 |

| # | Objectives | Measures / Ac- | Expected results | 2016 | 201 | 7 | 20 | 18 | 2019 | į | 2020 | 202 | 21 | Responsible | Budget |
|---|--|--|--|------|-----|---|----|----|------|---|------|-----|----|----------------------------|--------|
| | | and Hospital managers | | | | | | | | | | | | | |
| | | Mandatory basic training for various cadres by the trained focal persons of the healthcare facilities: Attendants / Housekeeping, staff/contractors, waste handlers outside hospital, waste equipment operators, focal points from island councils | Personnel from various cadres are trained on HCWM | | | | | | | | | | | HC facilities | 0 |
| | | Follow up & refresher training on annual basis at regional level | Follow up done and refresher conducted on annual basis | | | | | | | | | | | HPA with insti- tutions | 0 |
| | | Introduce and provide an online mandatory training and assessment module for all levels of staff employed in a health care facility. | The online training introduced and used. | | | | | | | | | | | МоН | 0 |
| 3 | Increase advo- cacy awareness for behavioral | Develop and dis- seminate "Infor- mation, Education | Leaf- lets/posters/Ads developed and dis- | | | | | | | | | | | НРА | 6,500 |

| # | Objectives | Measures / Ac- | Expected results | 2016 | 2017 | 2018 | 2019 | 2020 | Responsible | Budget |
|---|---|---|--|------|------|------|------|------|---------------------------|--------|
| | change | and Communication" materials to create awareness Promote aware- | seminated | | | | | | | |
| | | ness on HCWM for Policymakers (Green and environment-friendly procurement) and waste handlers by pictorial reminders, promote guidelines and SOPs | Improved aware- ness among policy makers and relevant stakeholders | | | | | | HPA / Institu- tions | 6,500 |
| | | Increase awareness by Radio, TV ads and social media, Mobile phone Applications | Improved aware- ness of the public | | | | | | HPA / Institu- tions | 4,000 |
| 4 | Promote Research, new technologies and innovative methods for sound management of HCW | Enhance collaboration between MNU/private colleges faculties and other stakeholders in order to facilitate research in the area of HCWM | Locally adapted methods identified / Global best practices contextualized | | | | | | HPA / MoEE / MNU / MoE | 0 |
| | | Conduct research on healthcare waste incinerator/waste | Research paper is written and disseminated | | | | | | MoEE / EPA / MNU | 10,000 |

| # | Objectives | Measures / Ac- | Expected results | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | Responsible | Budget |
|---|------------|-------------------------------------|------------------|------|------|------|------|------|------|-------------|--------|
| | | burning emission in the Republic of | | | | | | | | | |
| | | Maldives | | | | | | | | | |

1.3 Strategic Priority 3: Implementing of an integrated healthcare waste management system

| # | | | Expected | 20 | 16 | | 2 | 017 | 7 | | 20 2 | 18 | | 2 | 201 | 9 | | 20 | 20 | | 2 | 202 | 21 | | | Responsible | Rudøet |
|---|--|--|--|--------|--------|-----|---|-----|---|---|-------------|-----|---|---|-----|---|---|----|----|-----|-----|-----|----|-----|----------|---------------------|------------|
| | Objectives | Measures / Actions | results | Q 1 | Q (2 3 | Q Q | Q | Q | Q | Q | Q | Q (| Q | Q | Q Q | Q | Q | Q | Q | Q (|) (| 2 | Q | Q (| \sim 1 | - | USD |
| 1 | Assessment of the current waste management situation | Carry out a baseline survey in collaboration with MoEE and disseminate the report (online) | Baseline study on cur- rent hcwm in the Republic is available and dissemi- nated | 1 | 2 3 |) 4 | | | 3 | 4 | 1 1 | 2 | 3 | 4 | 1 2 | 3 | 4 | 1 | 2 | 3 4 | .] | - 4 | | O 2 | | HPA and MoEE | 0 |
| | | Conduct feasibility assessment for non-burn technology | Feasibility Study on non-burn technologies is available and disseminated. | | | | | | | | | | | | | | | | | | | | | | | HPA / MNU | 0 |
| | | Identification and detailed assessment of pilot area | Assessment was done and report disseminated | | | | | | | | | | | | | | | | | | | | | | | UNDP / WHO / MoH | 6,500 |
| 2 | Set up of an integrated system in a | Planning, purchase, commissioning and training for needed waste equipment | Equipment available and installed | | | | | | | | | | | | | | | | | | | | | | | UNDP / WHO / MoH | 130,000 |
| | pilot Atoll | Planning and building of needed infrastructure | Infrastruc- ture available and opera- tional | | | | | | | | | | | | | | | | | | | | | | | UNDP / WHO / MoH | 20,000 |
| | | Capacity building and raising awareness | Relevant council staffs | | | | | | | | | | | | | | | | | | | | | | | UNDP / WHO | 32,500.00(|

| # Objectives | Measures / Actions | Expected | 20 | 016 | 201 | . 7 | 201 | 8 | 2 | 2019 |) | 202 | 0 | 20 |)21 | Responsible | Budget |
|--|--|--|----|-----|-----|------------|-----|---|---|------|---|-----|---|----|-----|--|--------------------|
| | | and health facility staffs trained and awareness created | | | | | | | | | | | | | | / МоН | 6,500 pe atoll) |
| | Conduct stakeholders' meeting to share the results of the pilot project | Pilot project result shared with relevant stakeholders | | | | | | | | | | | | | | UNDP / WHO / MoH | 2,000 |
| | Development of HCWM plans templates specific to the kind and level of institution | Templates on HCWM plans are developed and dissemi- nated | | | | | | | | | | | | | | Health Facili- ties | 0 |
| Improving HCWM Plan- | Develop a proper procurement plan (annual plan) | Annual plans are available | | | | | | | | | | | | | | RAHSD / MOH | 0 |
| ning and pro- curement process | Disseminate the specifications of the consumables/commodities/supplies | Specifica- tions are available and disseminated | | | | | | | | | | | | | | RAHSD / MOH | 0 |
| | Calculation of annual budget needed for HCWM at each HCF and provided as a separate budget line. | Annual operation and maintenance costs are calculated and available. | | | | | | | | | | | | | | Healthcare facilities, councils, MoH MoFT | 0 |
| Promote green procurement and minimizing | Developing a Resource Toolkit for Green procurement | Green procurement toolkit developed | | | | | | | | | | | | | | HPA and MoEE / EPA | 2,500 |

| # | Objectives | Measures / Actions | Expected | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | Responsible | Budget |
|---|--|--|--|------|------|------|------|------|------|---|--|
| | waste | Develop an E-Library for Green Procurement | E-Library for Green Pro- curement is accessible to for all facili- ties | | | | | | | Need basis | 3,500 |
| | | Developing Case Studies and Best practices | Sharing of knowledge among stakeholders through annual forums | | | | | | | All relevant stakehold- ers/HCF | 0 |
| | | Develop and share institutional SOP's of a proper stock management to utilize the medicines before the expiry date by exchanging within the units and wards (Hospital level) | Institutional SOPs devel- oped and shared | | | | | | | MFDA / MoH | 0 |
| 5 | Improvement of Infectious Waste and Sharp Waste Management | Set up a waste segregation system based on guideline | Proper segregation systems are available in all HCF | | | | | | | Health facili- ties / MoH / RAHSD | 1 |
| | | Establishment of waste storage facilities in accordance with national guideline (based on the needs) | Storage areas for infectious and sharp waste are available in all HCF | | | | | | | RAHSD, MoH / HPA | 206,800.00 (For one hospital 51,700.00) |
| | | Establish treatment technologies depending on the waste | Treatment technologies | | | | | | | | 460,000.00 (per year |

| # | Objectives | Measures / Actions | Expected | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | Responsible | Budget |
|---|---|---|---|------|------|------|------|------|------|------------------------------|-----------|
| | | generated | for infectious and sharp waste are available and operational for all HCF | | | | | | | | 115000.00 |
| 6 | Improvement of Pharma- ceutical and Chemical Waste Man- agement | Establishment of storage areas for pharmaceutical and chemical waste in the HCF in accordance with national guideline | Storage areas for pharmaceutical and chemical waste are available in all HCF | | | | | | | MoH/ RAHSD/HPA | 0 |
| | | Ensure regular collection and treatment of pharmaceutical and chemical waste on regional/national level | Regular collection contracted and contracts available | | | | | | | MoH/MFDA / RAHSD / HPA | 0 |

1.4 Strategic Priority 4: Improving and adopting of national and local monitoring and evaluation process

| # | Ohioativos | Magazines / Astions | Expected re- | 201 | 16 | | 2017 | | | | 2018 | | | | 2019 | | | 2020 | | | | | Responsible | Budget |
|---|---|--|--|-----|------|-----|------|-----|-----|-----|------|-----|-----|-----|------|----|-----|------|-----|----|-----|------|------------------|--------|
| | Objectives | Measures / Actions | sults | Q1 | Q2Q3 | 3Q4 | Q1(| Q2(| Q3Q | 4Q1 | Q2(| Q3(| Q4(| Q1(| Q2Q3 | Q4 | Q1C | 2Q: | 3Q4 | Q1 | Q2(|)3Q4 | agency (ies) | USD |
| 1 | Assessment of the current monitoring situation | Develop assessment tools and user guideline (e.g. ques- tionnaire, survey forms) | Tools and guide- line developed | | | | | | | | | | | | | | | | | | | | HPA / QAD | 0 |
| | | Conduct the assessment of current monitoring situation | Assessment report is available and disseminated | | | | | | | | | | | | | | | | | | | | HPA / QAD | 0 |
| 2 | Strengthen reporting, monitoring, and evaluation mechanism on HCWM | Develop monitoring tools and auditing tool | Monitoring and auditing tools are available and shared with relevant stakeholder | | | | | | | | | | | | | | | | | | | | HPA / QAD | 1,500 |
| | | Trial testing of the tool in 1 Atoll | Trial test conducted and weak points identified | | | | | | | | | | | | | | | | | | | | HPA / QAD | 3,500 |
| | | Finalize the monitoring and auditools | Tools are finalized and ready to use | | | | | | | | | | | | | | | | | | | | HPA / QAD | 0 |
| | | Training of focal points from all the health care facilities | Focal points are trained and certified | | | | | | | | | | | | | | | | | | | | HPA / QAD | 9,000 |
| 3 | Regular monitor- ing and evaluation of the Health Care Waste Manage- | Monitoring and providing feedback at least every 12 months | Monitoring reports generated and shared | | | | | | | | | | | | | | | | | | | | HPA/ RAHSD/QA | 0 |
| | ment system and | Develop and main- | Web-based sys- | | | | | | | | | | | | | | | | | | | | HPA/MoH/NCIT | 0 |

| # | Objectives | Measures / Actions | Expected re- | 2016 | 2017 | 2018 | 2019 | 2020 | 2021 | Responsible | Budget |
|---|--------------------|----------------------|-------------------|------|------|------|------|------|------|-------------|--------|
| | performance of the | tain the web-based | tem developed / | | | | | | | | |
| | equipment | information system | Information inte- | | | | | | | | |
| | | / Integrate infor- | grated into Na- | | | | | | | | |
| | | mation into National | tional Infor- | | | | | | | | |
| | | Information System | mation System | | | | | | | | |

1.5 Strategic Priority 5: Resource Mobilization

| # | Objectives | Measures / Actions | Expected re- | | 2016 | | 2 | 2017 | | | 2018 | | | | 2019 | | | 2020 | | | | 2021 | | | esponsible | Budget |
|---|-----------------------------|---|--|---|-------|-----|-----|------|-----|-----|------|----|-------|----|------|-----|-----|------|-----|-----|-----|------|------|-----|-------------------|--------|
| | Objectives | Measures / Actions | sults | ζ | Q1 Q2 | Q3(| Q4(| Q1(| Q2C | Q3Q |)4Q | 1Q | 2 Q 3 | Q4 | Q1(| Q2Q |)3Q | 4Q1 | 1Q2 | Q3(|)4Q | 1Q2 | 2Q3Q | 4ag | ency (ies) | USD |
| 1 | Establish sustainable fund- | Listing down pipeline projects | Pipeline pro- jects identified | | | | | | | | | | | | | | | | | | | | | HF | PA / stakeholders | 0 |
| | ing sources | Identify co-financing possibilities | Co-financing possibilities identified | | | | | | | | | | | | | | | | | | | | | HI | PA / stakeholders | 0 |
| | | Donor Forum (local and international) | Sustaining HCWM system | | | | | | | | | | | | | | | | | | | | | Mo | oH/WAMCO/MoEF | E5,000 |
| | | Undertake resource mapping of all health facilities and identify gaps in funding | Resource map- ping was done and gaps identi- fied | | | | | | | | | | | | | | | | | | | | | HI | PA/RAHSD, MoH | 0 |
| 2 | Budget completion | Complete budget cal- culation of the strate- gic plan | Budget calculation completed and reviewed | | | | | | | | | | | | | | | | | | | | | Mo | оН/НРА | - |
| | | Approval of budget | Budget ap- proved | | | | | | | | | | | | | | | | | | | | | Mo | oH / MoFT | - |