

## Service delivery

### Minimum Service Delivery Standards (MSDS)

TRF conducted a situation analysis of MNCH related health service packages and Minimum Service Delivery Standards at primary and secondary level facilities in all the provinces, and supported plans for their implementation. The assessment covered design and relevance; context (political commitment, enabling environment); mechanisms and outcomes; status of implementation; and level of achievement.

- Lessons from the MSDS situation analysis have informed the strategy for resource allocation and MSDS implementation by the provinces.

### Essential Health Service Package

TRF supported the development of the primary level essential health service package (EHSP) for Punjab, KP and Sindh. The EHSPs synchronise services with the required infrastructure, drugs, supply and equipment. They have been costed for each type of facility, and costing sheets were developed as living document that can be adapted according to the expected facility load. It is envisioned that the Social Health Insurance Concept under discussion in Punjab will include the EHSP as the base foundation for provision of health services. The Punjab Health Care Commission will observe the package as baseline for service registration; licensing and accreditation of health care facilities.

- The EHSP has been approved in Punjab and Khyber Pakhtunkhwa
- The EHSPs are an integral part of the contracts for outsourcing the services established through TRF support.

### Infection control guidelines

TRF provided technical assistance for institutionalising systems for effectively implementing infection control guidelines. Protocols, monitoring tools and training guidelines were adapted or developed up to secondary level facilities. These protocols are being implemented in 10 public sector facilities in one district each of Punjab and Khyber Pakhtunkhwa, and in six private sector facilities in Karachi; implementation is being regularly monitored to improve skills and address implementation barriers.

- Infection control protocols have been incorporated into the EHSP in Punjab and KP
- Based on the results of the implementation pilot in Gujranwala, a pool of service providers of Gujrat and Vehari have received training.

### Implementing communication plans

TRF contributed to developing communication plans, and building the capacity for their implementation at federal, provincial, special areas and district level (in 36 selected districts). The TRF communication initiative, Sehat Zindagi ("Health is Life"), saw the active participation of MNCH Programme communication staff (from federal to district level), local NGOs, key development partners and communication experts. The Sehat Zindagi initiative comprised two components: Advocacy and Behaviour Change Communications. Communication Officers and Social Organizers of 36 selected districts were given a thorough orientation on basic concepts of communication, and hands on support for developing plans and linkages with partners. TRF is also supporting the development of TV and radio programmes raising awareness about improved maternal and child health related practices among the general population.

- Implementation and monitoring plans for 36 districts have been developed.
- The MNCH Programme was introduced through morning shows of various TV channels.
- Fourteen episodes each of TV and radio programmes are being aired.
- A series of five drama episodes, six TV and radio commercials and a short film on community midwives were developed.
- Communication training was provided to Social Organizers of 36 selected districts.

### **Expanded Program on Immunization, Balochistan**

This TA was commissioned by the DoH in Balochistan following a sharp drop in immunization coverage in the province. The TRF identified problems at the supply and demand side, made suggestions for re-design of the programme, and translated this into a PC-1.

- Implementation of the PC-1 is expected to improve Programme approach, management, and demand side interventions to improve immunization coverage.

### **PC-1 for non-communicable diseases (NCDs)**

The Sindh Health Strategy includes a response to NCDs, and the DoH is planning to develop three NCD centres. TRF supported the DoH Sindh in prioritizing the NCDs to be addressed, developing costed project designs and translating them in a PC-1, which will provide preventive, promotive and curative services.

### **Mapping of nutrition initiatives**

The development of provincial health sector strategies after devolution, and discussions on reorganization of the DoHs provided an opportunity to fill in programmatic gaps related to nutrition, specifically through MNCH related programmes. In this context, TRF commissioned the mapping of key nutrition initiatives in all provinces and special areas.

- The findings are being used by both policy makers and development partners in identifying appropriate, evidence-based and scalable interventions for improving the nutritional status of women and children in poor and marginalized communities.

### **Environment and medical waste management**

TRF supported the development of a costed environment and waste management plan to mitigate any expected risks from the upcoming Reproductive, Maternal, Neonatal and Child Health Project in Punjab.

- This analytical work helped DoH Punjab in finalizing its health sector operational plan and setting a roadmap for averting environment hazards and preventing infections at public sector facilities.