Uniting Knowledge, Resources and Solidarity

Gaza Health Initiative Conference Amsterdam

KIT INSTITUTE

Gaza Health Initiative
مبـادرة صحـة غـزة

Revitalizing & Rebuilding the Health Information System

Zaher Whaidi

Director of Health Information Center Ministry of Health

Dr. Paul Spiegel

Director of Johns Hopkins Centre for Humanitarian Health

Dr. Amrish Baidjoe

Director of MSF-LuxOR

Wafaa Zeidan

Health Information & Systems Officer at UNRWA

Moderated by

Dr Ente Rood

KIT

Nima Yaghmaei

KIT

Uniting Knowledge, Resources and Solidarity

Gaza Health Initiative Conference Amsterdam

KIT INSTITUTE

Gaza Health Initiative

Ministry of Health

HEALTH INFORMATION SYSTEM

In GAZA STRIP – Palestine 2023-2024

Health Information Unit

Ministry of Health

Health information systems before the Israel Aggression

An integrated information system that covering all basic services: medical records, hospital system, primary care, healthcare staff, supply chains, financial system, maternal and child health.

Computerized Programs
36

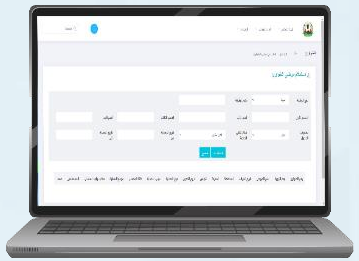
Public Services
15

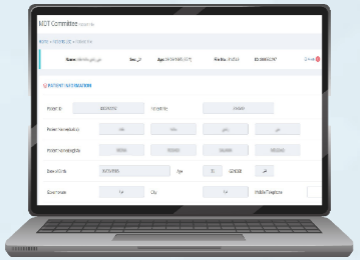
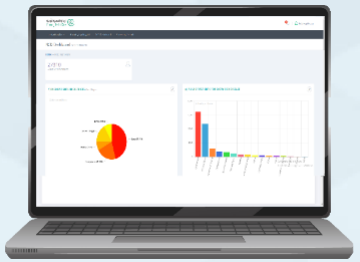
Smartphone Applications
4

PHIC | MoH

Ministry of Health

Health information systems before the Israel Aggression



Birth Registry

Trauma Registry

Death Registry

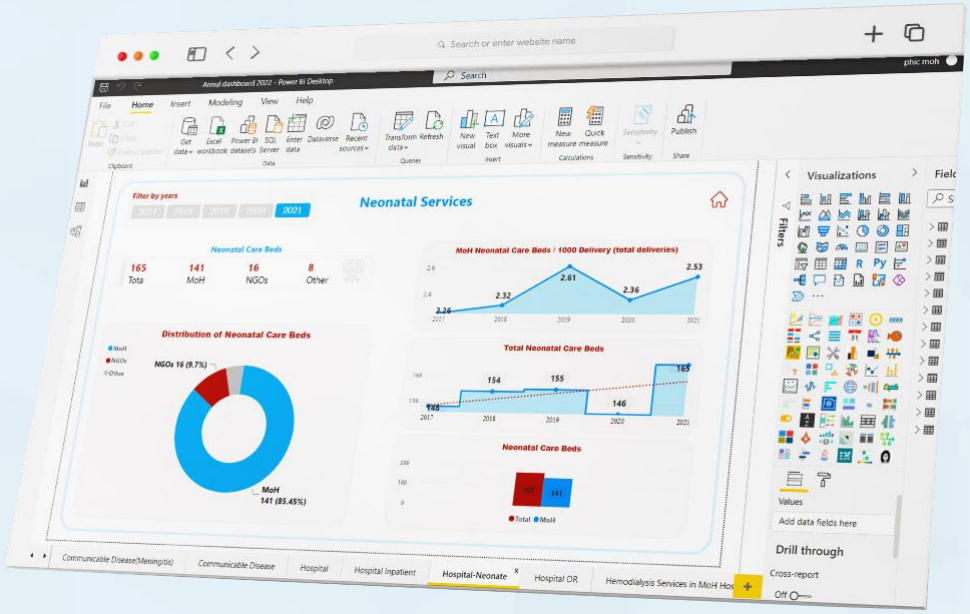
Cancer Registry

NCD Registry

PHIC | MoH

Ministry of Health

Health information systems before the Israel Aggression



Health Indicators

Health national indicators	87
Governance indicators	62
Strategic plan indicators	160

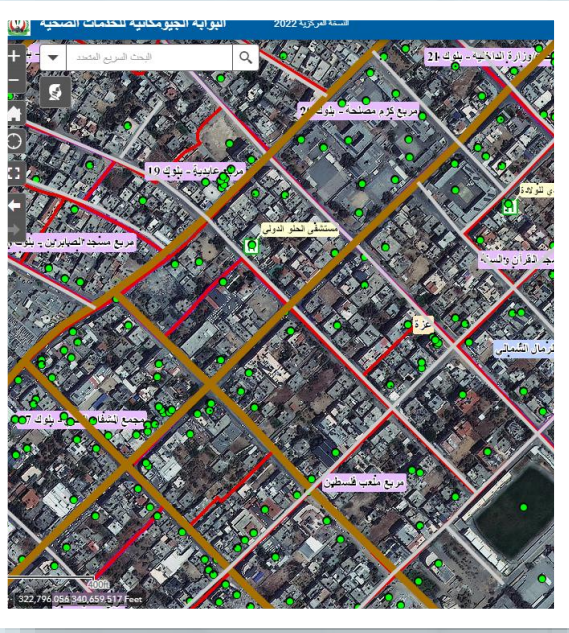
PHIC | MoH

Ministry of Health

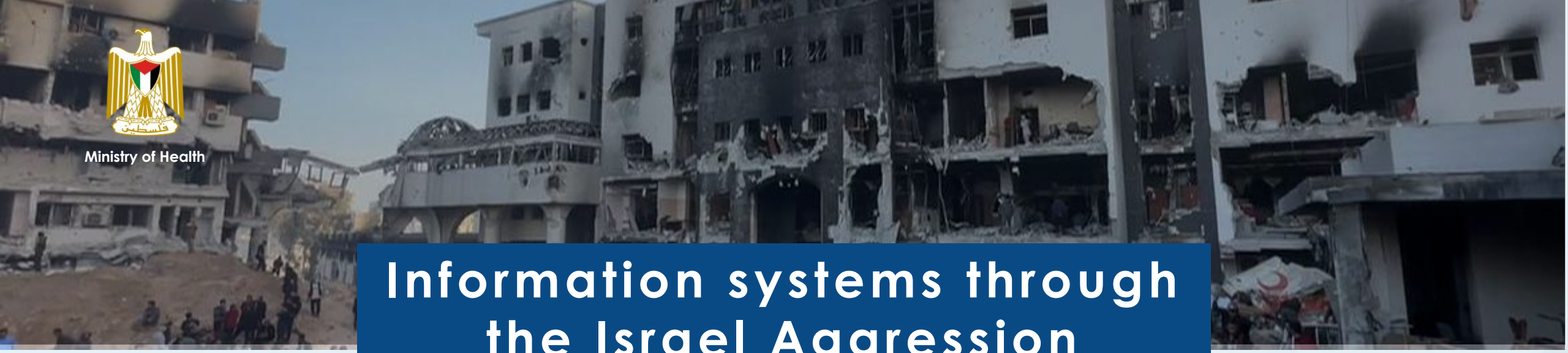
Health information systems before the Israel Aggression

GIS System

- Facilities
- Phc centers
- Oncology patients
- Catchment area
- Ncd diseases



PHIC | MoH



Ministry of Health

Information systems through the Israel Aggression

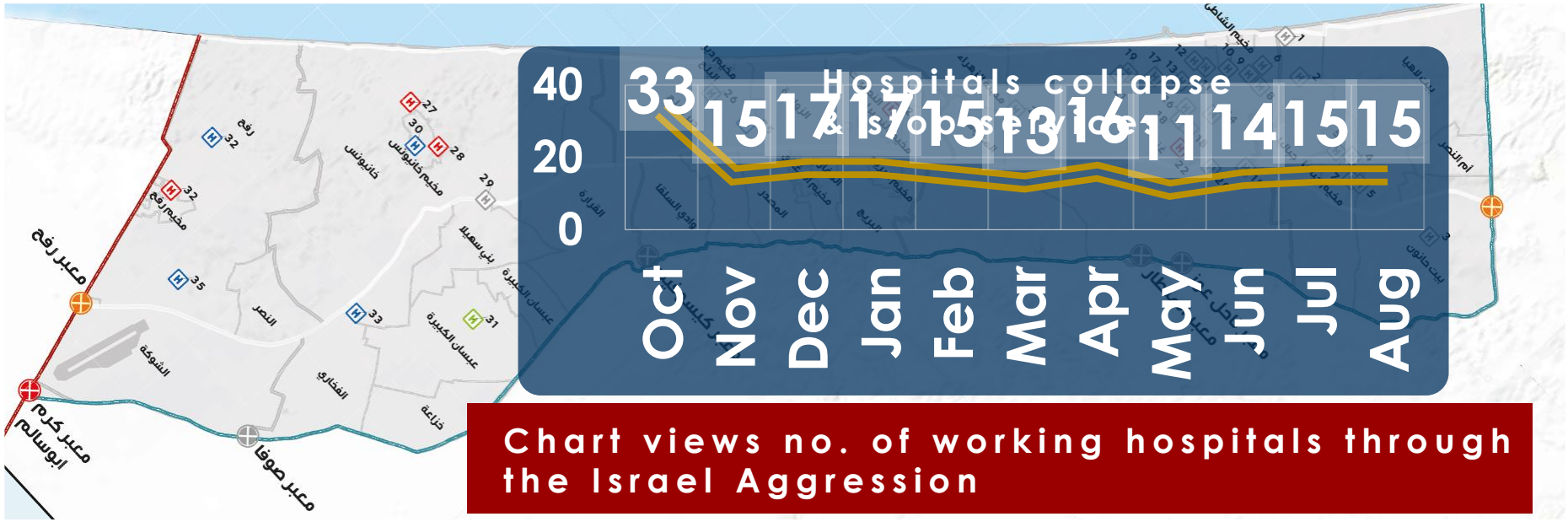
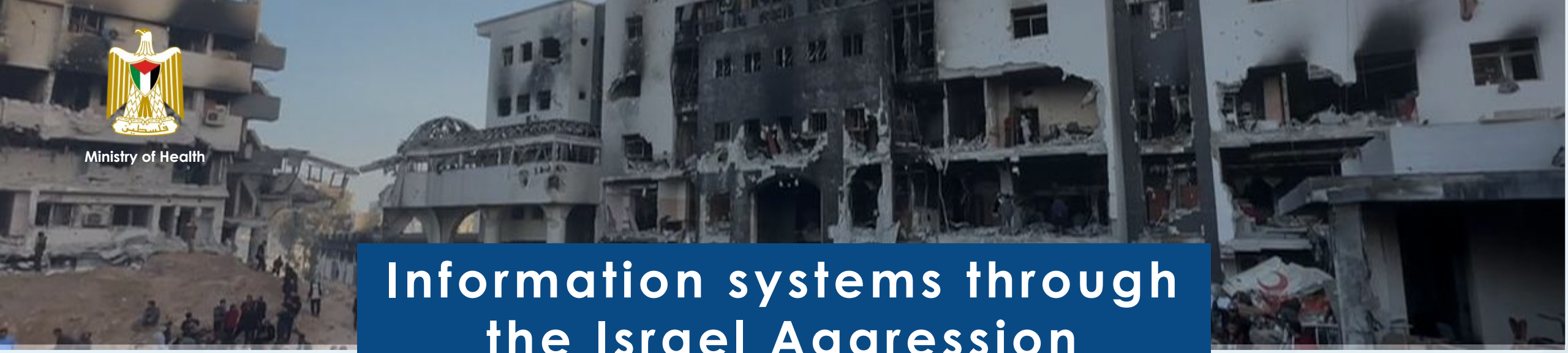


Chart views no. of working hospitals through the Israel Aggression



Ministry of Health

Information systems through the Israel Aggression

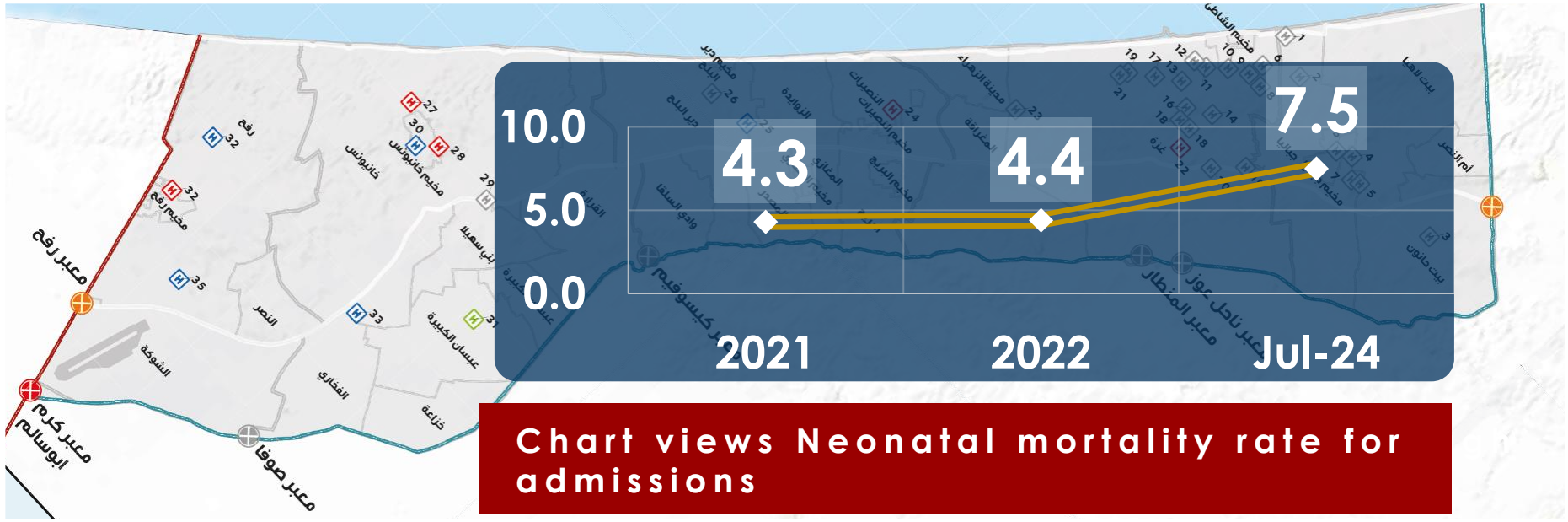


Chart views Neonatal mortality rate for admissions

PHIC | MoH

Ministry of Health

MOH efforts to rise health information center

- Murdered registry and judge committee
- Epidemiological surveillance system
- System for referral abroad reports
- Sehaty system for Employee Services
- Amputation and spinal cord injury registry
- Smart system for NGOS & field hospitals

PHIC | MoH

Ministry of Health

The most important needs for restarting the emergency information system

The strategic needs for building an information system capable of meeting the critical indicators for maternal and child health, the availability of essential services, and areas for disease monitoring

The urgent needs in the first phase	Cost M$	The strategic needs for the second phase	Cost M$	Total
The needs for operating hospitals and essential services	8 M	The needs for hospitals to complete the systems	4 M	12M
The primary care needs for level 3 and 4 centers	1.3 M	The needs of operating all primary care centers	1.4 M	2.7M
The main data center, phase one	0.15	Primary Data Center Phase 2	0.1	0.25
Pack system for primary hospitals	1.7	Pack system for other hospitals and centers	6	2.3
Supporting and Developing Software and Information Systems	1.2		1	2.2
Total	12.35		7.1	19.45

Ministry of Health

THANK YOU

Health Information Unit

UNRWA Health Information Systems

Presented by : Wafa'a Zeidan

Health Information and Systems Officer

Outline & Context

- Overview of UNRWA Health Information System
- Key Achievements.
- Current health Information System in Gaza
- Surveillance System.
- Main Challenges

Current status of health information system

- **EMR first introduced in 2009**, alongside the FHT approach to improved efficiency and enabled the collection of high-quality data through:
- **139/141 clinics** are implementing the e-Health by accessing the central servers using different types of connectivity.
- **Maternal & child health, NCDs, general clinics, specialists, dental, pharmacy, and lab** services are fully integrated and functional within the e-health system
- **Generate routine reports from e-health** (Paperless).
- **Developed the Dashboards into (BI)** to monitor and evaluate performance indicators (KPIs).
- **Surveillance system** (monitoring and reporting 19 diseases).

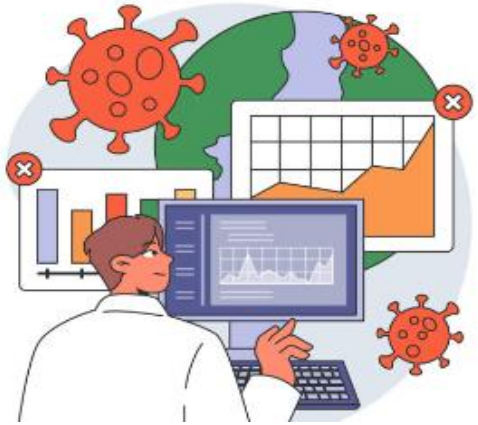
Health centers before and after introduced EMR

Main Key Achievements

Integration with (RRIS)

Integration with eHealth

Generated Reports from eHealth (Paperless)



Surveillance covers 19 diseases

eHealth Online Training

eNCD Mobile application

eMCH application

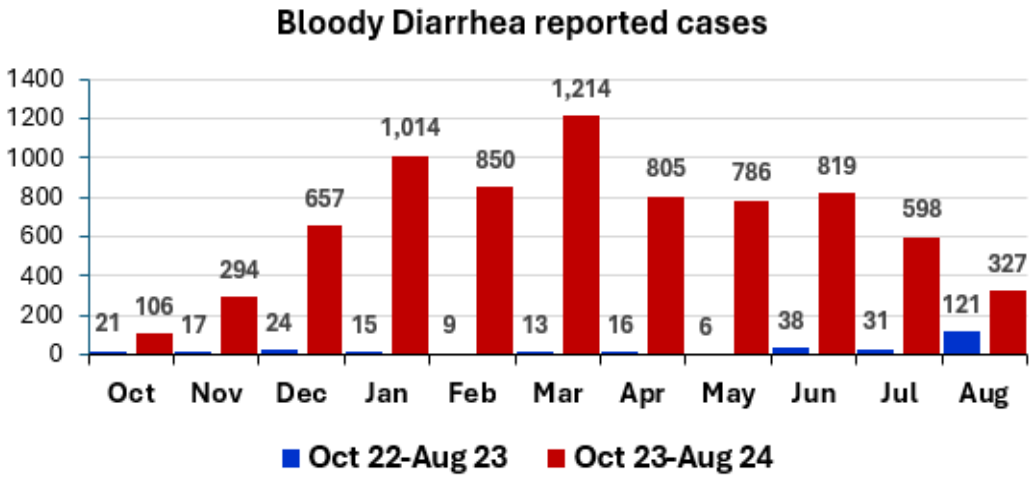
Built in appointment System

Health Information System (After 7th Oct-23)

- The health system has collapsed and the infrastructure.
- Disruption of electronic health systems due to infrastructure damage, affected the entire health service provision, including surveillance.
- Healthcare workers record patient data on hard copies and statistical tables, uploading to SharePoint.
- Surveillance system to fit the context and focus on 10+1 diseases with pandemic potential.
- EWARS is running 44 UNRWA sites across all governorates (North, Gaza,, Kh, Younis, Rafah and, MA) reporting on the EWARS platform. water testing results, case investigation, Nutrition MUAC, follow-up, and cholera line list incorporated into EWARS.
- Developed UNRWA Gaza crisis dashboard

Active Nutrition, WASH, Facility Monitoring & Disease Surveillance

Example: Disease Surveillance

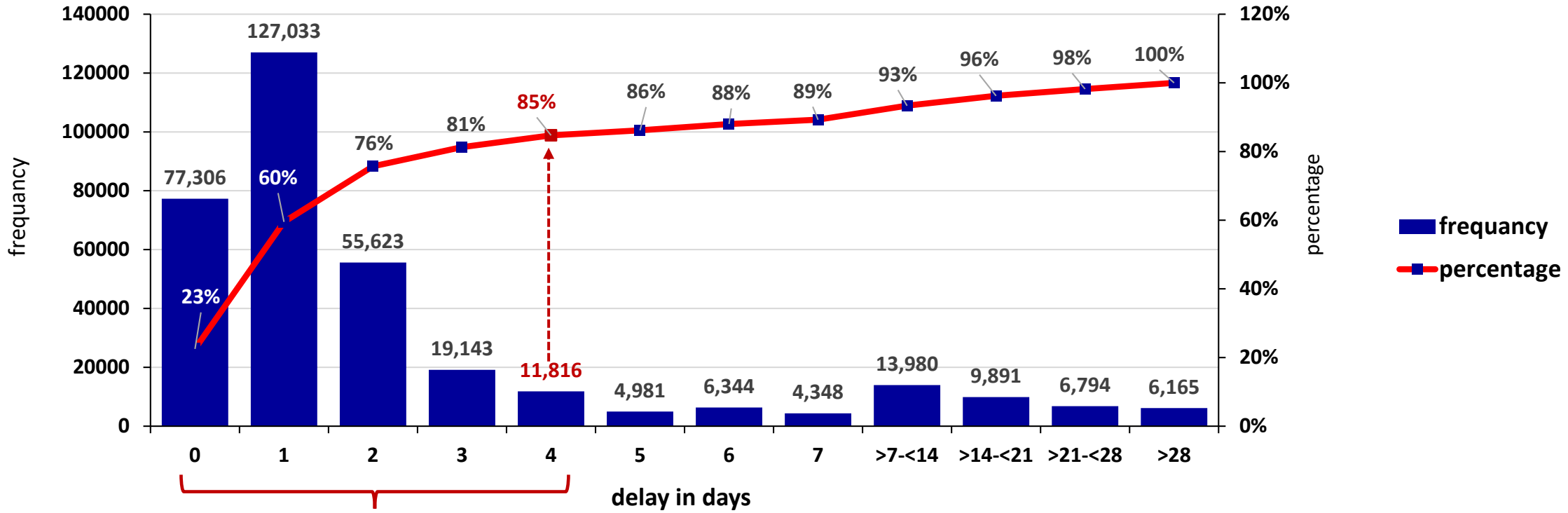


Watery diarrhea, Bloody diarrhea and Acute Jaundice cases before and after the war

Diseases of Epidemic	Oct-2023 - August-2024	Oct-2022- August-2023	Increase/ times
Bloody diarrhea	7,470	311	24
Acute Jaundice	41,891	108	388

Data timing: measuring the delay between data collection and submission.

(EWARS Data source)



UNRWA reaches 85% of reports by Day 4.

Operational Standard: 85% represents a point where most data submissions are expected to be completed, indicating acceptable reporting performance

Main challenges of HIS

- Instability of the HIS (interrupted use of E health) , timely data collection and timely reporting and manual record-keeping affected accuracy.
- Frequent population displacement complicates the accurate calculation and monitoring of health indicators due to the difficulty in determining the exact population size
- Overburdened Health Workers: Staff are focused on emergency care, which delays data entry and reporting processes.
- Difficult to track the prevalence of common diseases due to disruption of health information system.
- Difficult to monitor key health indicators such as maternal/child mortality rates, injuries treated, and vaccination coverage.
- Temporary funding can make it hard for HIS projects to continue long-term.
- Different health systems don't work together, making data hard to share.