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UZB: Primary Healthcare Improvement Project (PHIP)



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Background of PHIP

- Almost two-thirds of country population (21 mln. out of 32 mln.) live in rural areas
- Inequalities and differences in the health status and ability of the population to access health services between people living in urban and rural areas
- Large number of migrant workers – employability of returning migrant workers

Government Strategy

- Uzbekistan Development Strategy 2017– 2021
- National Action Strategy on Five Development Priority Areas 2017-2021 – linked to achievement of SDGs:
 - *Improving the social security and health care system, improving the socio-political activity of women*
- Presidential Decree outlined the design for restructured health service delivery, which will see the reduction of rural healthcare points (*selskiy vrachebniy punkt*) from approximately 2900 to 813 and the establishment of 793 family polyclinics.

Decree of the President of the Republic of Uzbekistan of 29 March 2017, No. PP-2857 "On measures of improving the organization of activities of primary medico-sanitary care institutions in the Republic of Uzbekistan".



- Provision of mandatory social guarantees to the population, strengthening of the social protection of vulnerable groups, and of the state support for the elderly and persons with disabilities, improvement of social services, development of public-private partnerships in the provision of social services to the population;
- *Further reform of health care sphere, especially primary health care, first aid and emergency medical services, aimed at improving the availability and quality of health and social healthcare services to the population, promotion of a healthy way of life among the population, strengthening the material and technical resources of medical institutions;*
- Further implementation of comprehensive measures to strengthen family's health, mother and child health protection, greater access of mothers and children to quality health care services, provision of specialized and high-tech health care, reduction of infant and child mortality;
- Increasing the socio-political activity of women, strengthening their role in the state and public administration, promotion of women's employment, and employment of women graduates of professional colleges; work towards widely involving them in entrepreneurial activities; further strengthening of the foundations of the family;
- Further development and improvement of the system of medical and social aid for pensioners, the disabled, single elderly and other vulnerable groups to ensure that they lead a full-fledged life;
- Further development of the pharmaceutical industry and improving provision to the population and health care institutions of affordable, high-quality medicines and medical products, the implementation of measures to prevent unjustified increase of their prices;
- Ensuring reduced rates of population's morbidity and increased life expectancy.

Loan Modality and Financing

- \$45 million ADB loan
- Concessional Loan financing
- Investment Loan
- Implementation period: 2018 – 2021
- Attached technical assistance - \$0.8 million (TA-9148-UZB, 2016-2018)

Implementation Arrangements

- Executing Agency
 - Ministry of Health (MOH)
- Implementation
 - Project Implementation Unit under the MOH with close support of:
 - ✓ Tashkent Institute of Postgraduate Medical Education; and
 - ✓ UzMedInfo (HMIS pilot development)
- Implementation Period
 - 2017-2021 (4 years)

Impact, Outcome, and Outputs

- **Impact:**
 - level of hospitalization, incidence, and disability of populations in service areas reduced
- **Outcome:**
 - availability of PHC services in rural areas expanded
- **Outputs:**
 - Health services in family polyclinics in rural areas strengthened
 - Capacity of polyclinics staff enhanced
 - PHC monitoring tools institutionalized

Rural Family Policlinics

- Provide general and specialist health services (paediatric, obstetric, dental, surgical, and emergency), an outpatient basis (ideally, 60-70% of the population's health needs)
- 793 newly established RFPs with new key equipment and training for the staff to increase the chances of overcoming Uzbekistan's key health challenges, including related to CVD, antenatal care, and disease prevention.
- Diagnostic and therapeutic skill of PHC staff increased, which contributes to more equitable distribution of the health workforce, increase the quality of diagnosis and reduce the irrational use of drugs, reduce inappropriate hospital admissions, and increase the availability of health services in rural areas.

Uzbekistan



Output 1: Health services in family polyclinics in rural areas strengthened

- (i) a digital diagnostic ultrasound unit for antenatal care or noninvasive examination of internal organs or vessels;
- (ii) a 12-lead electrocardiograph for noninvasive routine examination of the heart;
- (iii) an ophthalmoscope and otoscope;
- (iv) surgical instruments for minor surgical procedures;
- (v) gynecology and midwifery instruments;
- (vi) a dental chair and basic dental equipment
- (vii) a home-visit bag and equipment for nurses to provide home patient care;
- (viii) a weighing scale with height measurement;
and
- (ix) office equipment.

Output 2: Capacity of polyclinic staff enhanced

- Training to about 2,700 health technology operators, doctors, and nurses at family polyclinics;
- 70% of the polyclinic health technology operators certified to use standard set of equipment. 90% of women technical and professional staff of polyclinics (or 1000 women) participate in the training on the use of the equipment
- Tashkent Institute for Postgraduate Medical Education (with two other campuses in Andijan and Samarkand) to lead and coordinate the training

**Output 3:
PHC monitoring
tools
institutionalized**

Pilot-test a digital Health Management Information System to incorporate clinic management, in the rural region of Sirdaryo, one of the country's 12 regions