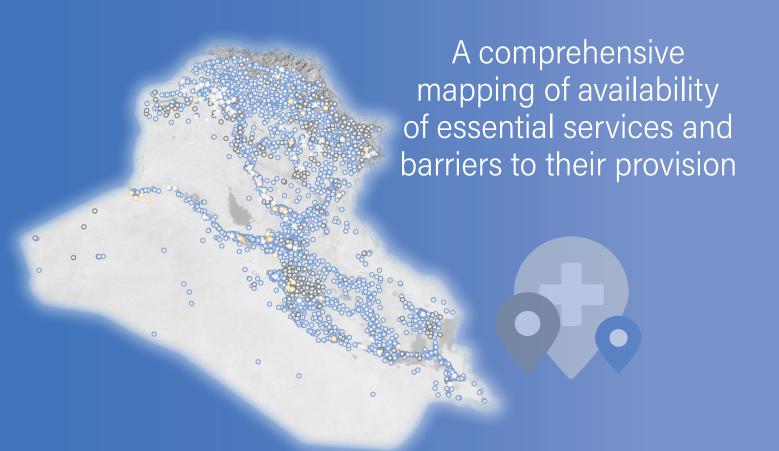
# HeRAMS Iraq Baseline Report 2023 Part 1







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# HeRAMS IRAQ BASELINE REPORT 2023 PART 1

# General clinical and trauma care services

A comprehensive mapping of availability of essential services and barriers to their provision









# Table of Content

Acronyms	VI
Disclaimer	VII
Part I: Availability of general clinical and trauma care services	1
How to read the charts	
Overview of health facilities evaluated	
Service availability and main barriers by health facility type	
Service availability by catchment population	
Main barriers impeding service delivery	
Part II: In-depth analysis by health service	21
How to read the charts and the maps	
Request for ambulance services by the patient	
Recognition of danger signs	26
Acuity-based formal triage	
WHO basic emergency care by prehospital provider	30
WHO basic emergency care	
Advanced syndrome-based management	34
Monitored referral	
Referral capacity	38
Acceptance of referrals	40
Acceptance of complex referrals	42
Outpatient services for primary care	44
Outpatient department for secondary care	46
Home visits	48
Minor trauma definitive management	50
Emergency and elective surgery	52
Emergency and elective surgery with at least two operating theatres the surgery with at least two operating theatres	
Orthopedic/trauma ward	
Short hospitalization capacity	58

20 inpatient bed capacity	60
50 inpatient bed capacity	62
Inpatient critical care management	64
Intensive care linit	hh
Basic laboratory	68
Laboratory services secondary level	70
Laboratory services tertiary level	72
Laboratory services secondary level  Laboratory services tertiary level  Blood bank services	74
Hemodialysis unit  Basic x-ray service  Radiology unit	76
Basic x-ray service	78
Radiology unit	80
Medical evacuation procedures	82
Procedures for mass casualty scenarios	84
Annex	87
Annex I: HeRAMS service definitions	88
Annex II: Population estimates	90



# **A**CRONYMS

**HeRAMS** Health Resources and Services Availability Monitoring System

PHCC B Primary Health Care Center - Branch

PHCC F Primary Health Care Center - Family Medicine Health Care Center

PHCC M Primary Health Care Center - Main

**SP Center** Specialized Center

**UN** United Nations

WHO World Health Organization





# DISCLAIMER

Disruptions to health systems can impede provision of and access to essential health services. Communities' vulnerability to increased morbidity and mortality substantially increases when a lack of reliable information prevents sound decision-making, especially in rapidly changing environments requiring continued assessment. The Health Resources and Services Availability Monitoring System (HeRAMS) aims to provide decision-makers and health stakeholders at large with vital and up-to-date information on the availability of essential health resources and services, help them identify gaps and determine priorities for intervention.

HeRAMS draws on the wealth of experience and knowledge gathered by the World Health Organization (WHO) and health sector actors, including non-governmental organizations (NGOs), donors, academic institutions and other technical bodies. It builds on a collaborative approach involving health service providers at large and integrating what is methodologically sound and feasible in highly constrained, low-resourced and rapidly changing environments such as humanitarian emergencies. Rapidly deployable and scalable to support emergency response and fragile states, HeRAMS can also be expanded to - or directly implemented as - an essential component of routine health information systems. Its modularity and scalability make it an essential component of emergency preparedness and response, health systevms strengthening, universal health coverage and the humanitarian development nexus.

HeRAMS has been deployed in Iraq since July 2022 and has allowed for the assessment of 3478 health facilities across the selected governorates (see below), against 3763 health facilities targeted.

This analysis was produced based on the data collected up to November 8<sup>th</sup> 2022 and while the deployment of HeRAMS, including data verification and validation, continue. Hence, this analysis is not final and is produced solely for the purposes of informing operations.

This is the first part of the second report of the HeRAMS Iraq Baseline Report 2023 series focusing on the availability of essential clinical and trauma care services in the Governorates of Anbar, Babylon, Baghdad-Karkh, Baghdad-Resafa, Basrah, Diwaniya, Diyala, Kerbala, Kirkuk, Missan, Muthanna, Najaf, Ninewa, Salah-Al-Din, Thi-Qar, and Wassit. It is a continuation of the first report on the operational status of the health system¹ and should always be interpreted in conjunction with results presented in the first report. Additional reports are available covering, child health and nutrition services², communicable disease services³, sexual and reproductive health services⁴, and non-communicable disease and mental health services⁵.

Caution must be taken when interpreting the results presented in this report. Differences between information products published by WHO, national public health authorities, and other sources using different inclusion criteria and different data cut-off times are to be expected. While steps are taken to ensure accuracy and reliability, all data are subject to continuous verification and change.

For additional information, please see <a href="https://www.who.int/initiatives/herams">https://www.who.int/initiatives/herams</a> or contact <a href="https://www.who.int/initiatives/herams">herams@who.int</a>.

<sup>&</sup>lt;sup>1</sup> HeRAMS Iraq Baseline Report 2023 Part 1 - Operational status of the health system: A comprehensive mapping of the operational status health facilities, <a href="https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-operational-status-of-the-health-system">https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-operational-status-of-the-health-system</a>

<sup>&</sup>lt;sup>2</sup> HeRAMS Iraq Baseline Report 2023 Part 1 - Child health and nutrition services: A comprehensive mapping of availability of essential services barriers to their provision, <a href="https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-child-health-and-nutrition-services">https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-child-health-and-nutrition-services</a>

<sup>&</sup>lt;sup>3</sup> HeRAMS Iraq Baseline Report 2023 Part 1 - Communicable disease services: A comprehensive mapping of availability of essential services and barriers to their provision, <a href="https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-communicable-disease-services">https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-communicable-disease-services</a>

<sup>&</sup>lt;sup>4</sup> HeRAMS Iraq Baseline Report 2023 Part 1 - Sexual and reproductive health services: A comprehensive mapping of availability of essential services and barriers to their provision, <a href="https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-sexual-and-reproductive-health-services">https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-sexual-and-reproductive-health-services</a>

<sup>&</sup>lt;sup>5</sup> HeRAMS Iraq Baseline Report 2023 Part 1 - Non-communicable disease and mental health services: A comprehensive mapping of availability of essential services and barriers to their provision, <a href="https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-ncd-and-mental-health-services">https://www.who.int/publications/m/item/herams-iraq-baseline-report-2023-Part1-ncd-and-mental-health-services</a>

# Part I:

AVAILABILITY OF GENERAL CLINICAL AND TRAUMA CARE SERVICES



# How to read the charts

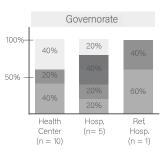
# Service availability

The first part of the report provides an overview of availability of general clinical and trauma care services. It should be noted that the analysis was limited to operational health facilities. A summary of health facilities assessed and their operational status is available on page 3. Further details on the operational status of health facilities can be found in the first report of the **HeRAMS Iraq Baseline Report 2022** series.

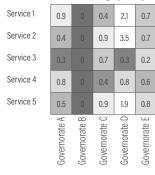
### Bar chart

Overall availability of general clinical and trauma care services is shown disaggregated by governorate and health facility type. The number of health facilities included is displayed below the health facility type name.

It should be noted that the number of services included was limited to health services expected based on national guidelines and depends on the type of health facility. Further details on services included for each type of health facilities is shown in <a href="mailto:annex1">annex I</a>.



# Service availability per population (heat map)

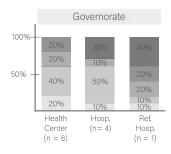


A more detailed overview of availability of individual services is shown as heat maps. Each cell indicates the number of health facilities providing a given service in relation to the catchment population. It should be noted that different catchment areas were used for referral and specialized health services (i.e. governorat vs. national population estimates). For more details on population estimates, see annex II.

To account for partially available services, a weighing was applied with a weight of 1 given to services reported as fully available and 0.5 for partially available services.

# Main barriers impeding service availability

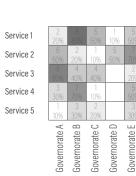
## Bar chart



For services not or only partially available, main barriers impeding service delivery are displayed as percentage of all barriers reported. Alike for service availability, bar charts display main barriers disaggregated by health facility type and governorate. For each health facility type, the total number of barriers reported across the health service domain is indicated below the health facility type name. Note that for each service, up to three barriers could be reported. Hence, the percentages shown in these charts should not be used to make any conclusion on the percentage of health facilities having reported a barrier. For a conclusion on the frequency of health facilities reporting a given barrier, please refer to the heat map below.

## Heat map

Heat maps provide additional insights on main barriers for individual services by catchment area. Cell opacity levels indicate the percentage of health facilities in the catchment area reporting a given barriers. The integer inside the cell denotes the number of health facilities reporting a given barrier while the percentage indicates the percentage of health facilities reporting the barrier. Note that health facilities not reporting a barrier (i.e. health facilities where the service is fully available or not normally provided) were excluded from these charts.



type



# OVERVIEW OF HEALTH FACILITIES EVALUATED

Summary of health facilities evaluated

targeted health facilities



Closed

health facilities assessed





9999999999999999999999999 AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA 



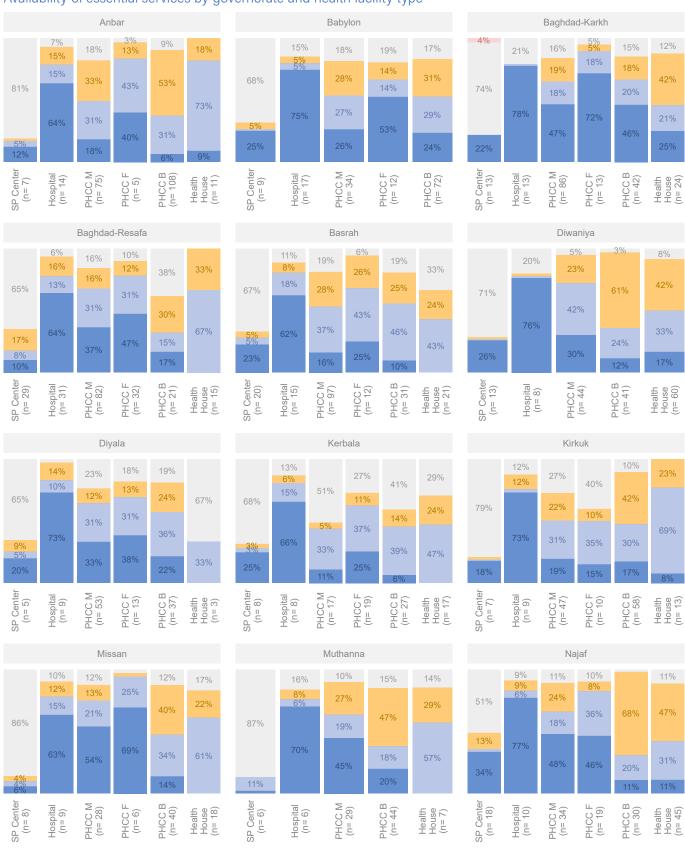
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# Service availability and main barriers by health facility type

Availability of essential services by governorate and health facility type<sup>6</sup>



<sup>&</sup>lt;sup>6</sup> Number of services included may vary from one health facility type to another. The "Other" HF type has been excluded as it includes very different and specialized HFs. See Annex I for a full description of the services included for each health facility type and for the HFs included in "Other".

# Availability of essential services by governorate and health facility type (cont.)

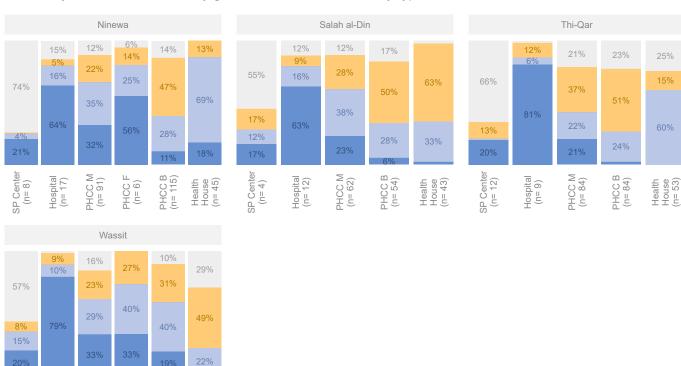
PHCC M (n=42)

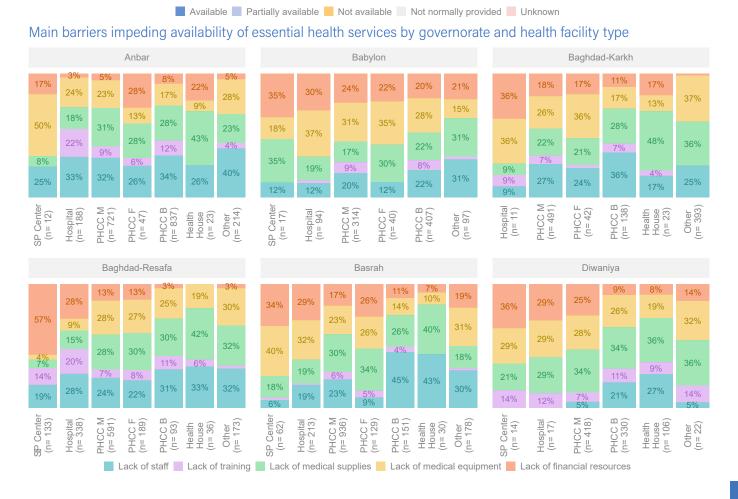
(n=8)

PHCC F (n= 5)

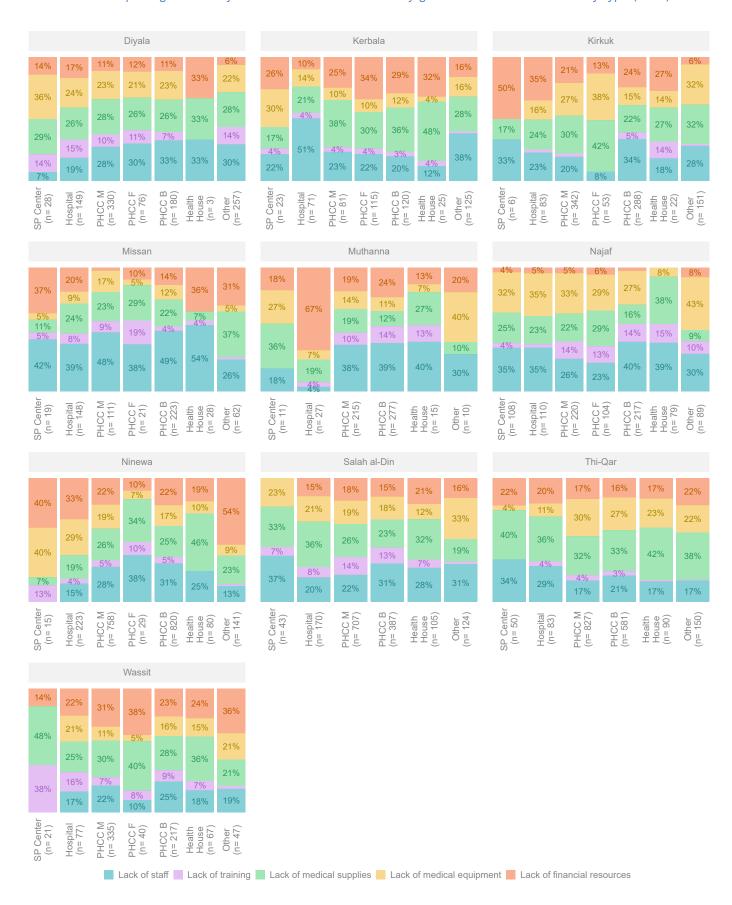
PHCC B (n= 34)

House (n= 41)



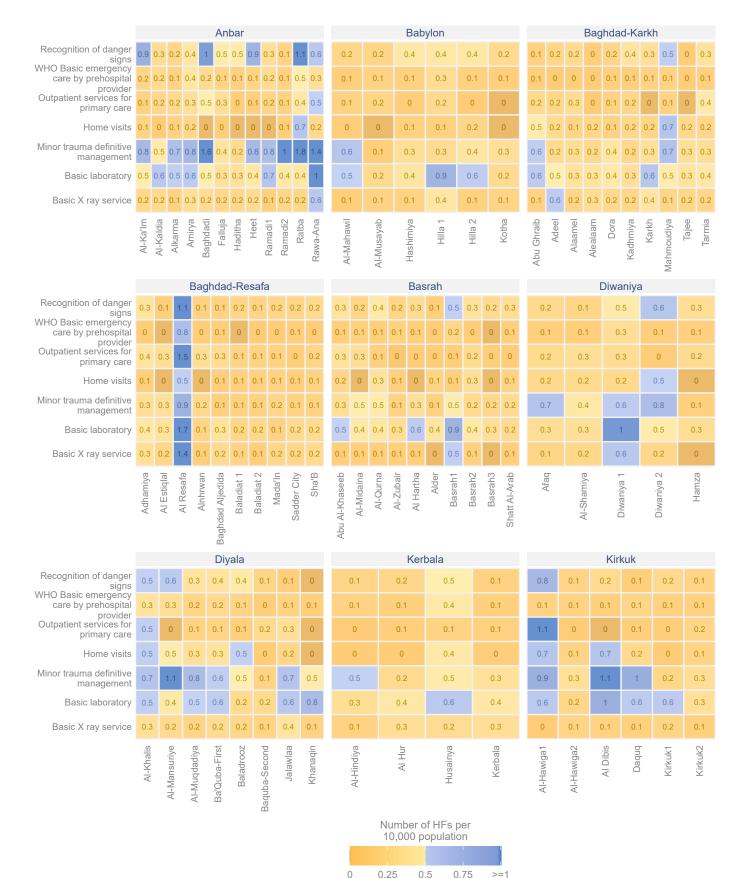


# Main barriers impeding availability of essential health services by governorate and health facility type (cont.)



# SERVICE AVAILABILITY BY CATCHMENT POPULATION

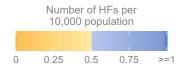
Number of health facilities providing essential community and primary services per 10,000 population<sup>7</sup>



<sup>&</sup>lt;sup>7</sup> See annex II for population estimates.

# Number of health facilities providing essential community and primary services per 10,000 population (cont.)

					N	liss	an				Muthanna																N	aja	f					
Recognition of danger		0.4			1		0.	.7		0.3		0	.9	0.		0.			.8	0.	1	(	).1	(	).5		0.9	i	0.6		0.2		0.5	
signs WHO Basic emergency care by prehospital		0.1			0	t	0.			0.1			)	0.		0.			.2	(			).1		).1	H	0.2		0		0.1		0.1	
provider Outpatient services for primary care		0.5			0.4		0.	.7		0.2		0	.6	0.	.6	0.	7	0.	.5	0.	1	(	).1	(	).1		0.6		0.2		0.1		0.4	
Home visits		0.3			0		0.	.3		0.3		0	.1	0.	.2	0.	7	0.	.3	0.	1	(	).2		0		0.3		0.2		0.2		0	
Minor trauma definitive management		0.5		(	0.5		0.	.5		0.4		0	.6	0.	.5	0.	3	0.	.6	0.	5	(	0.2	(	0.3		1		1		0.3		0.3	
Basic laboratory		0.5		(	0.6		0.	.5		0.4		0	.5	0.	.4	0.	9	0.	.8	0.	2	(	0.3	(	).6		8.0		0.3		0.2		0.6	
Basic X ray service		0.2			0.2		0.	.2		0.1		0	.2	0.	.1	0.	2	0.	.2	(	)	(	).1	(	).2		0.4		0.1		0.2		0.4	
		Al-Mejar Al-Kabir			Ali Al-Gharbi		V	Allala		Qal'At Saleh		:: 	E E E E E E E E E E E E E E E E E E E	C IV	Al-Kumalma	0	במאמון מאמון מ	COMO	Al-Callawa Z	ON CALL	VVGING		Abbasia		Al-Manathera		Kufa		Mishkab		North Najaf		South Najaf	
					N	ine	wa	va 0.2 0.2 0.3 0.2 0.3							Sa	alah	al-D	in									Th	-Qa	ar					
Recognition of danger signs	0.1	0.2	0.1	0.2	0.2	0.4	0.2	0.2	0.3	0.2	0.3	0.4	0.5	0.3	0.5	0.5	0.2	0.2	0.2	0.3	0.4	0.1	0.1	0.3	0.3 0.	.1 (	0.	1 0	0	0.1	0.1	0	0.3	).6
WHO Basic emergency care by prehospital	0.1	0	0.2	0.1	0.1	0.1	0.1	0.2	0.1	0.1	0	0.2	0.2	0.1	0.1	0.2	0.1	0.2	0.1	0.2	0.3	0	0 (	0.1	0 0.	.1 0	.1 0.	1 0	0	0.3	0.1	0	0 0	).2
provider Outpatient services for primary care	0	0.2	0.6	0.4	0.3	0.5	0.2	0.2	0.2	0.2	0.3	0.3	0	0.1	0	0.2	0.1	0.2	0.2	0.2	0.3	0.2	0.1	0	0 0.	.1 0	.1 0	0	0	0.3	0.1	0	0 0	).1
Home visits	0	0	0	0	0.1	0.1	0.1	0.1	0.1	0	0	0.3	0	0.2	0.1	0.4	0.2	0.1	0	0.3	0.5	0.1	0.3	0.3	0.3	) (	0.	1 0	0.3	0.2	0	0	0 0	).1
Minor trauma definitive management	0.1	0.9	0.8	0.3	0.3	0.5	0.2	0.2	0.3	0.7	0.5	0.2	0.8	0.3	0.6	0.5	0.6	0.4	0.2	0.4	0.7	0.4	0.6	0.1	0.6 0.	4 0	.5 0.	4 0.7	0.4	0.3	0.1	0.4	1.2	).6
Basic laboratory	0.2	0.4	0.4	0.3	0.3	0.3	0.2	0.3	0.3	0.4	0.3	0.2	0.8	0.3	0.6	8.0	0.5	0.5	0.3	0.5	0.4	0.8	0.2	0.7	0.4 0.	4 0	.4 0.	4 0.6	0.4	0.7	0.7	0.4	0.4	).3
Basic X ray service	0.1	0.2	0	0.2	0.2	0.2	0.2	0.2	0.1	0.1	0.1	0.3	0.5	0.1	0.2	0.1	0.2	0.1	0.1	0.2	0.2	0.2	0.2	0.2	0.3 0.	.1 0	.1 0.	3 0.1	0.4	0.2	0.2	0.1	0.4	).1
	Al-Ba'Aj	Al-Hamdaniya	Al-Shikhan	Aymen	Ayser	Gayara	Hatra	Makhmur	Sinjar	Telafar	Tilkaif	Al-Alam	Al-Daur	Al-Shirqat	Aldhulloia	Baiji	Balad	Dijel	Samarra	Tikrit	Tooz	Al-Chibayish	Al-Dawaya	Al-Eslah	Al-Naser	Al-Niai	Al-Shatia Al Faier	Alahiraf	Karmat Beni Saed	Nassriya1	Nassriya2	Qalat Sekkar	Saaddakhyil	Sug Al-Shoyokh
Dii					V	Vas	sit																											
Recognition of danger signs WHO Basic emergency	0.	.2	0.	3	0.4		0.2		0.5	C	).2																							
care by prehospital provider Outpatient services for	0.		0.		0.2		0.1	$\pm$	0.2		0																							
primary care  Home visits																																		
Minor trauma definitive management	0.		0.		0.3		0.1		0.3		0.1																							
Basic laboratory	0.	.7	0.	5	0.5		0.4		0.7	C	).6																							
Basic X ray service											).2																							



Kut2

Kut1

Azizyia

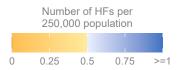
Al-Na'Maniya

Al-Suwaira



# Number of health facilities providing specialized services per 250,000 population<sup>8</sup>

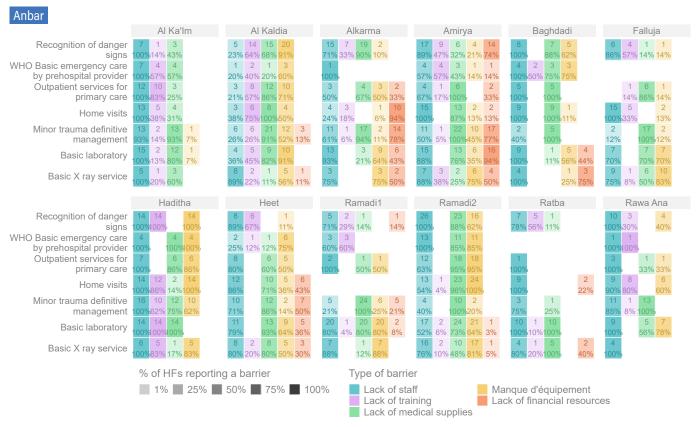
	Anbar	Babylon	Baghdad Karkh	Baghdad Resafa	Basrah	Diwaniya	Diyala	Kerbala	Kirkuk	Missan	Muthanna	Najaf	Ninewa	Salah al Din	Thi Qar	Wassit
Request for ambulance services by the patient	6.2	3.7	1.8	1.7	2.3	4.4	6.9	3.5	3	2.3	3.9	1.6	2.8	6.3	2.9	2.5
Acuity based formal triage	1.3	4.3	3.3	3.1	3.1	3.7	5.9	2.6	2.1	3.4	6.6	7.4	2	7.8	1.8	5.6
WHO Basic Emergency Care	3.4	3.7	2	1.4	2	4.5	3.9	3.2	1.6	2.5	2.9	2.8	2.4	4.6	2.3	2.5
Advanced Syndrome based management	1.5	1.5	0.8	0.9	1	1	1.8	1	1.1	1.3	1.7	1.5	1.1	1.4	1.1	1.4
Monitored referral	7	3.9	4.7	2.4	3.1	5	6.3	5.1	4.2	2.4	6	4.4	2.5	6.1	3.2	2.9
Referral capacity	8.3	4.3	2.5	2.5	2.9	5.2	6.8	5	2.6	2.5	8.7	7.3	3.4	7.2	3.1	3.6
Acceptance of referrals	2.6	3.9	1.7	2.1	2.8	3.1	3.9	4.7	2.6	1.5	6.1	6.4	1.9	4.5	2	1.8
Acceptance of complex referrals	0.6	1.7	0.8	1.2	1.2	2.4	1.4	1.5	1.1	1.3	1.2	2.7	1	1.8	1.2	1.6
Outpatient department for secondary care	2.2	1	0.8	1.9	0.7	2.7	1.6	1.5	0.6	1.4	5.7	3.2	1.8	3.2	1.3	3.1
Emergency and elective surgery	1.3	1.1	0.8	0.9	0.9	0.7	1.2	1.3	0.6	0.9	1	1.4	0.8	1.3	1.1	1.2
Emergency and elective surgery with at least two operating theatres	1.2	1	0.7	0.8	0.8	0.5	1	1.4	0.6	0.9	1	1.3	0.8	1.3	0.8	1.1
Orthopedic/trauma ward	0.8	0.9	0.5	0.6	0.5	0.5	0.8	0.6	0.3	0.8	0.8	0.9	0.5	0.7	0.7	0.9
Short hospitalization capacity	2	1.9	0.9	1.6	1.6	2.4	1.3	1.6	1.2	1.8	1.4	2.8	1.2	1.6	1.1	1.6
20 Inpatient bed capacity	1.8	1.9	0.9	1.5	1.2	2.4	1.4	1.4	1.1	1.8	1.1	2.6	0.9	1.6	1	1.5
50 inpatient bed capacity	1.3	1.7	0.9	1.4	0.8	1.3	1.1	1	1.1	1.4	1.1	2.5	0.7	1	0.5	1.3
Inpatient critical care management	1.8	1.6	0.7	0.9	0.7	1.6	1.1	1.3	0.4	1.8	0.8	2.5	0.6	1.4	1	1.6
Intensive care unit	1	0.9	0.8	1.1	1	1.2	0.4	1.2	1.1	0.8	1.2	1.5	0.9	0.7	1	1.1
Laboratory services secondary level	3.1	2.7	1.2	2.2	2.1	2.7	3.1	4.4	2.3	2.4	2.8	4.1	2.3	6.2	1.7	2.9
Laboratory services tertiary level	0.9	1.7	0	1.3	0.8	0.8	1	0.8	1	1	1	2.8	0.5	2.1	0.5	0.7
Blood bank services	1.7	1.7	0.9	1.5	1.5	1.2	1.2	1.9	1	1.2	1.4	2	0.9	1.6	1.2	1.5
Hemodialysis unit	1.1	0.2	0.4	0.6	0.3	0.4	0.6	0.6	0.1	0.2	0.8	1	0.3	0.3	0.3	0.4
Radiology unit	1.3	2.3	0.9	1.5	1.2	1.5	0.8	1.4	1.4	0.9	1.8	1.5	0.8	1.1	1.8	1.7
Medical evacuation procedures	0.5	1.7	0.7	1.2	0.5	2	1.5	1.6	1.3	1.8	1.5	2.9	1.1	0.9	1.1	1.6
Procedures for mass casualty scenarios	0.4	1.6	0.8	1.2	1.4	2.4	0.8	1	1.1	1.6	1.5	1.7	0.8	1.5	1	0.7

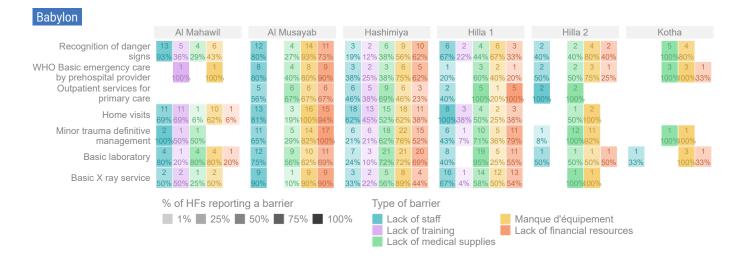


<sup>8</sup> See annex II for population estimates.

# Main barriers impeding service delivery

Main barriers impeding availability of essential community and primary health services by district



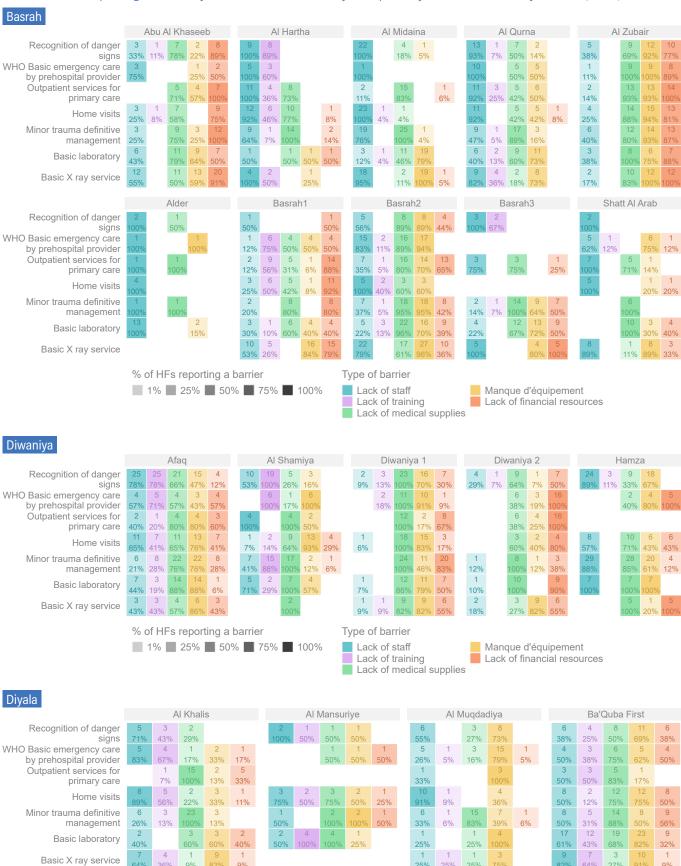






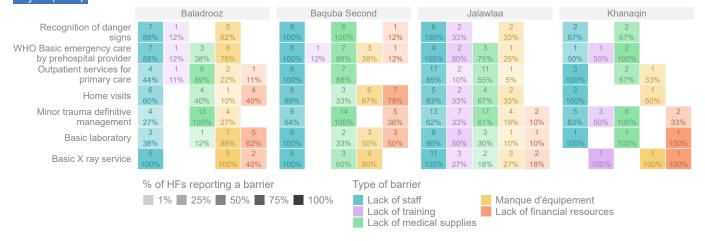
36%

# Main barriers impeding availability of essential community and primary health services by district (cont.)





# Diyala (cont.)

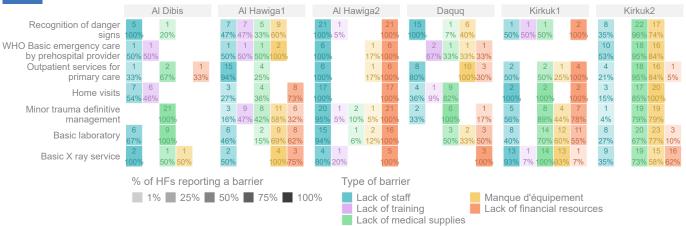


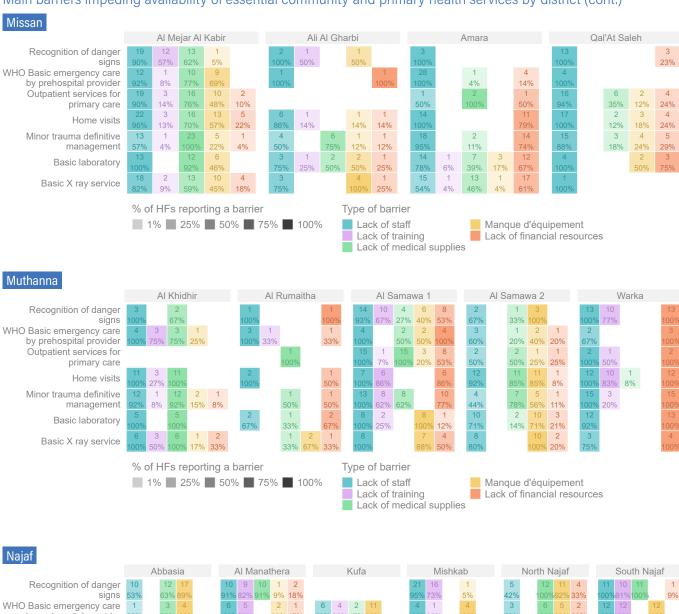
## Kerbala

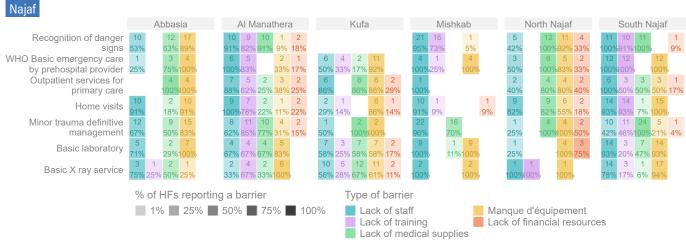


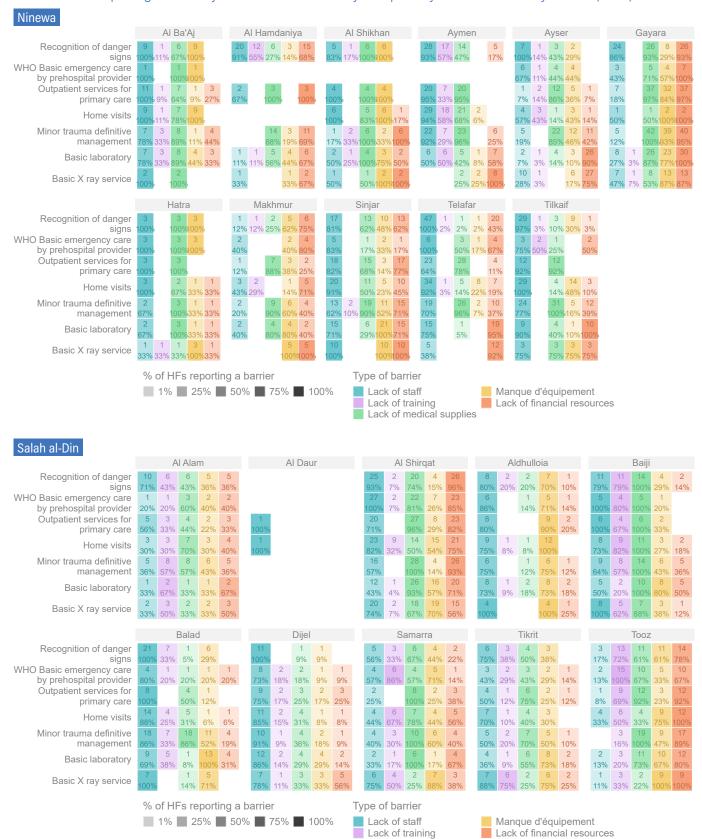
Lack of medical supplies



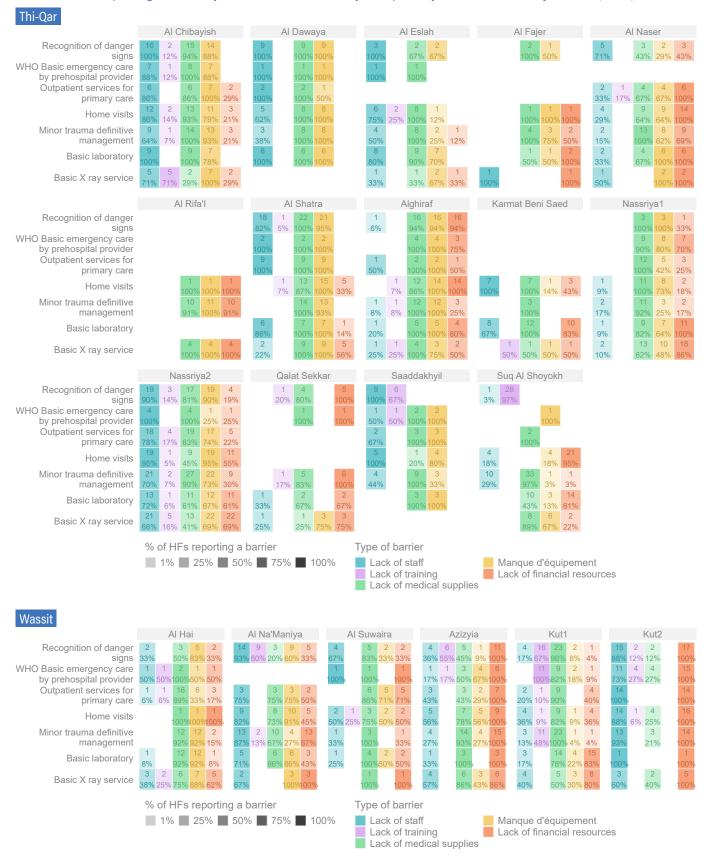








Lack of medical supplies





# Main barriers impeding availability of specialized services by governorate

			Anbar				Е	Babylo	n					Bagh	dad R	esafa				
Request for ambulance services by the patient	77 72%	19 18%	61 57%	91 85%	3 3%	16 29%	1 2%	7 12%	53 95%	15 27%	37 46%	12 15%	18 22%	66 82%	36 45%	38 78%	24 49%	14 29%	32 65%	13 27%
Acuity based formal triage	38 79%	18 38%	27 56%	27 56%	9 19%	17 65%	7 27%	9 35%	22 85%	13 50%	46 92%	15 30%	28 56%	36 72%	25 50%	29 67%	23 53%	17 40%	18 42%	6 14%
WHO Basic Emergency Care	41 89%	13 28%	38 83%	27 59%	5 11%	14 33%	2 5%	23 55%	35 83%	22 52%	37 61%	12 20%	36 59%	45 74%	25 41%	47 82%	27 47%	33 58%	24 42%	17 30%
Advanced Syndrome based management	4 133%	3 100%	1 33%			1 33%		1 33%	2 67%	1 33%			2 67%	3 100%	3 100%	9 45%	7 35%	3 15%	3 15%	6 30%
Monitored referral	61 68%	28 31%	39 43%	71 79%	13 14%	20 38%	4 8%	7 13%	50 96%	28 54%	39 57%	17 25%	27 39%	32 46%	34 49%	44 71%	25 40%	16 26%	33 53%	20 32%
Referral capacity	47 57%	22 27%	48 58%	86 104%	13 16%	18 27%	3 5%	9 14%	63 95%	31 47%	33 42%	9 11%	25 32%	61 77%	38 48%	33 52%	8 13%	15 24%	57 90%	28 44%
Acceptance of referrals	13 62%	7 33%	14 67%	18 86%	1 5%	6 50%		5 42%	8 67%	7 58%	5 167%	5 167%	4 133%	4 133%	3 100%	10 38%	6 23%	6 23%	7 27%	19 73%
Acceptance of complex referrals	4 400%		2 200%			2 67%		1 33%	3 100%	2 67%				1 100%	1 100%	5 50%		1 10%	1 10%	4 40%
Outpatient department for secondary care	41 91%	10 22%	34 76%	20 44%	3 7%	12 50%	5 21%	14 58%	17 71%	10 42%	37 76%	6 12%	28 57%	32 65%	23 47%	38 95%	10 25%	23 58%	23 58%	10 25%
Emergency and elective surgery	3 100%		1 33%	2 67%				1 100%		1 100%	1 100%	1 100%	1 100%			7 44%	4 25%	6 38%	4 25%	4 25%
Emergency and elective surgery with at least two operating theatres	4 133%		2 67%	3 100%				1 100%		1 100%						7 41%	4 24%	4 24%	3 18%	7 41%
Orthopedic/trauma ward	5 167%	1 33%	3 100%	4 133%		1 100%			1 100%					1 100%	1 100%	12 86%	3 21%	2 14%	2 14%	4 29%
Short hospitalization capacity	1			1 100%					1	1 100%						1				1 100%
20 Inpatient bed capacity	1 100%			1 100%		1 100%			1 100%	1 100%						2 67%			1 33%	2 67%
50 inpatient bed capacity						1 100%			1 100%	1 100%						2 100%		1 50%		2 100%
Inpatient critical care management	1 100%		1 100%	2 200%	1 100%			2 67%	2 67%	2 67%						11 79%	6 43%	5 36%	1 7%	3 21%
Intensive care unit	6 200%		1 33%	7 233%				2 67%	1 33%	1 33%				1 100%	1 100%	2 18%	1 9%	2 18%		8 73%
Laboratory services secondary level	8 89%	2 22%	8 89%	4 44%	6 67%	1 10%		9 90%	5 50%	5 50%	1 100%		1 100%	2 200%	2 200%	6 25%	3 12%	6 25%	6 25%	16 67%
Laboratory services tertiary level	1 17%		9 150%	12 200%	2 33%			1 33%	3 100%	1 33%		1 100%		1 100%		3 16%	2 11%	6 32%	3 16%	18 95%
Blood bank services	1 100%		2 200%	3 300%					3 100%	2 67%		1 100%		1 100%	1 100%	1 17%	1 17%		1 17%	5 83%
Hemodialysis unit	1 100%			2 200%		3 75%	1 25%	4 100%		1 25%	1 100%	1 100%				1 11%		1 11%	1 11%	10 111%
Radiology unit	7 100%	1 14%	1 14%	10 143%	3 43%	9 50%		3 17%	16 89%	14 78%	1 20%	1 20%	2 40%	5 100%	2 40%	17 40%	11 26%	3 7%	13 31%	33 79%
Medical evacuation procedures	2 67%	10 333%		1 33%	1 33%				1 100%	1 100%	1 100%		1 100%			1 20%	3 60%		1 20%	1 20%
Procedures for mass casualty scenarios	3 100%	11 367%							1 100%	1 100%	1 100%				1 100%	3 33%	10 111%			
				_	barrie % <b>■</b>	er 75% <u> </u>	100%		Lac Lac	of barr ck of st ck of tra ck of m	aff	supplie			ue d'équ of financ			S		

# Main barriers impeding availability of specialized services by governorate (cont.)

			Basrah	1			D	iwaniy	/a				Diyala				ŀ	Kerbala	3	
Request for ambulance services by the patient	40 61%	11 17%	37 56%	45 68%	28 42%	15 18%	17 20%	44 52%	57 68%	35 42%	30 58%	4 8%	15 29%	48 92%	9 17%	21 88%		8 33%	15 62%	7 29%
Acuity based formal triage	35 59%	20 34%	32 54%	34 58%	32 54%	4 13%	13 42%	29 94%	12 39%	23 74%	22 65%	11 32%	16 47%	25 74%	6 18%	28 90%	10 32%	6 19%	1 3%	13 42%
WHO Basic Emergency Care	39 93%	16 38%	41 98%	34 81%	17 40%	5 14%	10 28%	30 83%	30 83%	18 50%	34 59%	20 34%	33 57%	27 47%	7 12%	22 59%	12 32%	20 54%	10 27%	10 27%
Advanced Syndrome based management	6 150%	2 50%	3 75%	2 50%	2 50%						3 100%	2 67%	2 67%	4 133%	1 33%	3 100%		1 33%		1 33%
Monitored referral	43 64%	14 21%	37 55%	48 72%	22 33%	13 16%	14 18%	37 47%	56 71%	30 38%	29 60%	7 15%	14 29%	42 88%	9 19%	12 86%	2 14%	2 14%	10 71%	2 14%
Referral capacity	42 58%	13 18%	34 47%	58 79%	29 40%	15 22%	10 15%	38 56%	55 81%	32 47%	24 48%	7 14%	18 36%	43 86%	17 34%	18 69%	3 12%	3 12%	21 81%	5 19%
Acceptance of referrals	8 57%	9 64%	6 43%	6 43%	12 86%			5 31%	1 6%	16 100%	17 52%	1 3%	13 39%	26 79%	8 24%	20 77%	7 27%	8 31%	7 27%	9 35%
Acceptance of complex referrals	3 300%		2 200%	1 100%	1 100%						4 133%	4 133%	6 200%	3 100%	2 67%	1 100%				
Outpatient department for secondary care	42 58%	13 18%	54 74%	33 45%	33 45%	10 23%	2 5%	35 80%	13 30%	29 66%	21 95%	1 5%	16 73%	5 23%	2 9%	22 92%	5 21%	16 67%		9 38%
Emergency and elective surgery	3 100%		5 167%	3 100%	2 67%			1 100%	1 100%	1 100%	4 133%	5 167%	4 133%	4 133%	1 33%	3 100%	1 33%	1 33%	1 33%	1 33%
Emergency and elective surgery with at least two operating theatres		1 100%	2 200%	2 200%	2 200%			1 100%			3 75%	1 25%	6 150%	5 125%	3 75%	2 100%		1 50%		
Orthopedic/trauma ward	5 167%	1 33%	3 100%	7 233%	3 100%						4 133%	4 133%	6 200%	2 67%	1 33%	4		2 67%		
Short hospitalization capacity											1 33%		3	4 133%	3 100%	2 100%	1 50%	1 50%		
20 Inpatient bed capacity	1 100%			1 100%									1 100%	2 200%	2 200%	3 100%	1 33%	1 33%	1 33%	1 33%
50 inpatient bed capacity	1 33%		1 33%	3 100%	4 133%			1 25%	4 100%	4 100%	1		2 200%	2 200%	1 100%	3 100%	1 33%	2 67%	2 67%	1 33%
Inpatient critical care management			2 67%	2 67%	2 67%						1 33%		3 100%	3 100%	2 67%	1 100%		1 100%		
Intensive care unit	1 33%			3 100%	3 100%		1 100%	2 200%	1 100%	2 200%	5 167%	2 67%	5 167%	3 100%	2 67%	1 100%				
Laboratory services secondary level	7 64%	1 9%	9 82%	14 127%	6 55%	2 40%	1 20%	7 140%	3 60%	2 40%	8 35%	6 26%	15 65%	27 117%	7 30%	9	2 7%	28 100%	7 25%	19 68%
Laboratory services tertiary level	3 43%		13 186%	11 157%	2 29%		2 67%	4 133%	3 100%	2 67%	5 36%	4 29%	9 64%	12 86%	8 57%	7 58%		10 83%	3 25%	7 58%
Blood bank services	1 100%			1 100%	1									1 100%						
Hemodialysis unit	4 133%			3 100%	2 67%			2 200%	1 100%	1	1 20%	1 20%	3 60%	5 100%	1 20%	1		1 100%		
Radiology unit	20 43%	4 9%	20 43%	45 96%	25 53%	1 17%	4 67%	4 67%	5 83%	6 100%	17 74%	7 30%	6 26%	22 96%	7 30%	4 100%	2 50%		5 125%	4 100%
Medical evacuation procedures	12 120%		2 20%	9	5 50%				1 100%		1	1 100%		1 100%		2 33%	3 50%		4 67%	2 33%
Procedures for mass casualty scenarios			1 100%	1 100%	1 100%						3 75%		1 25%	5 125%	1 25%	2 100%	1 50%		1 50%	
				_	barrie	er 75% <b>=</b>	100%		La La	of barri ck of st ck of tra ck of m	aff	supplie				quipeme		S		



# Main barriers impeding availability of specialized services by governorate (cont.)

			Kirkuk			Missan						N	luthanı	na				Najaf		
Request for ambulance services by the patient	12 24%		20 40%	43 86%	11 22%	11 85%	1 8%		6 46%	4 31%	36 90%	3 7%	6 15%	23 58%	29 72%	50 68%	27 37%	10 14%	66 90%	8 11%
Acuity based formal triage	7 70%	6 60%	2 20%	3 30%	7 70%	28 187%	7 47%	8 53%	5 33%	2 13%	10 91%	5 45%	1 9%	1 9%	9 82%	17 68%	6 24%	12 48%	16 64%	4 16%
WHO Basic Emergency Care	8 67%	2 17%	10 83%	3 25%	9 75%	11 100%	1 9%	5 45%	3 27%		17 94%	4 22%	10 56%	10 56%	9 50%	23 53%	22 51%	17 40%	30 70%	12 28%
Advanced Syndrome based management	2 67%	1 33%	3 100%	2 67%		3 300%	2 200%	1 100%		1 100%	2 100%	2 100%			2 100%					
Monitored referral	19 43%	5 11%	21 48%	41 93%	18 41%	11 100%	3 27%	1 9%	1 9%	1 9%	40 133%	5 17%	6 20%	23 77%	19 63%	52 71%	26 36%	15 21%	65 89%	8 11%
Referral capacity	17 39%		22 50%	35 80%	12 27%	10 91%	1 9%		7 64%	2 18%	34 89%	4 11%	1 3%	20 53%	21 55%	53 63%	22 26%	19 23%	78 93%	13 15%
Acceptance of referrals	1 17%		2 33%	5 83%	3 50%	5 125%	3 75%	1 25%	1 25%		2 67%				3 100%	14 140%	4 40%	11 110%	13 130%	1 10%
Acceptance of complex referrals						4 133%	2 67%	3 100%			1 100%					4 100%		3 75%	3 75%	1 25%
Outpatient department for secondary care	18 86%	1 5%	5 24%	12 57%	12 57%	12 100%		3 25%		5 42%	8 100%	3 38%	5 62%	1 12%	7 88%	31 115%	15 56%	16 59%	24 89%	4 15%
Emergency and elective surgery	5 83%		2 33%	1 17%	4 67%	4 400%		3 300%	1 100%	2 200%					1 100%	6 200%	1 33%	3 100%	5 167%	
Emergency and elective surgery with at least two operating theatres	3 100%		2 67%	1 33%	1 33%	4 400%	1 100%	3 300%		1 100%					1 100%	5 100%		4 80%	5 100%	
Orthopedic/trauma ward	8 114%		2 29%	2 29%	7 100%	5 167%	1 33%	3 100%	1 33%	1 33%				1 100%	1 100%	3 100%		2 67%	3 100%	
Short hospitalization capacity	2 67%		1 33%	1 33%	2 67%											2 200%		2 200%	2 200%	
20 Inpatient bed capacity											1 100%				1 100%	2 67%		1 33%	3 100%	
50 inpatient bed capacity						300%		2 200%	1 100%	2 200%					1 100%	2 67%		1 33%	2 67%	2 67%
Inpatient critical care management	3 300%		3 300%	1 100%	3 300%								1 100%		2 200%	4 100%		4 100%	3 75%	2 50%
Intensive care unit	1 100%		1 100%	2 200%	1 100%	5 167%	1 33%	1 33%	1 33%	2 67%					1 100%	9 112%		9 112%	8 100%	1 12%
Laboratory services secondary level	1 20%		4 80%	2 40%	4 80%	2 67%		3 100%		3 100%	4 57%	1 14%	3 43%	3 43%	3 43%	6 60%	5 50%	6 60%	12 120%	5 50%
Laboratory services tertiary level	1 33%		3 100%	3 100%	3 100%			1 100%	1 100%	1 100%		1 33%	3 100%		2 67%	2 67%		2 67%	3 100%	1 33%
Blood bank services			1 100%	1 100%	2 200%	2 200%		2 200%	2 200%						1 100%	1 100%		1 100%	1 100%	
Hemodialysis unit	4 100%	1 25%	6 150%	3 75%	7 175%	6 200%		4 133%	1 33%	7 233%					1 100%	3 100%		2 67%	3 100%	
Radiology unit	6 27%		11 50%	13 59%	21 95%	4 67%		5 83%	4 67%	5 83%	8 114%	1 14%	1 14%	3 43%	7 100%	5 100%	1 20%	3 60%	6 120%	1 20%
Medical evacuation procedures	1 100%		1 100%	2 200%	2 200%						1 33%				3 100%	1 100%			1 100%	
Procedures for mass casualty scenarios			1 100%	1 100%										1 100%	1 100%					
			repor 25%	0		er 75% <b>=</b>	100%			of barri ck of st				Manq	ue d'éq	uipeme	nt			
					_	_				ck of track of m	0	suppli			of financ			S		

# Main barriers impeding availability of specialized services by governorate (cont.)

		1	Vinewa	1						7	Γhi Qa	r			,	Wassi	t				
Request for ambulance services by the patient	33 62%	1 2%	22 42%	44 83%	33 62%	51 69%	15 20%	27 36%	64 86%	39 53%		23 96%	1 4%	19 79%	29 121%	6 25%	22 32%	12 18%	28 41%	44 65%	41 60%
Acuity based formal triage	17 81%	9 43%	5 24%	13 62%	18 86%	58 69%	38 45%	41 49%	33 39%	48 57%		18 78%	2 9%	25 109%	26 113%	5 22%	15 42%	13 36%	23 64%	5 14%	21 58%
WHO Basic Emergency Care	23 62%	7 19%	30 81%	20 54%	14 38%	53 57%	29 31%	67 72%	37 40%	47 51%		21 64%	3 9%	41 124%	33 100%	9 27%	17 59%	11 38%	18 62%	4 14%	21 72%
Advanced Syndrome based management	4 133%	2 67%	6 200%	4 133%	5 167%	6 150%	3 75%	4 100%	4 100%	3 75%		2 50%	1 25%	5 125%	3 75%	1 25%	2 200%	1 100%	3 300%	1 100%	2 200%
Monitored referral	46 87%	11 21%	17 32%	38 72%	29 55%	65 97%	29 43%	30 45%	59 88%	43 64%		20 87%	3 13%	19 83%	27 117%	3 13%	25 46%	21 39%	22 41%	13 24%	31 57%
Referral capacity	36 52%	3 4%	16 23%	59 86%	53 77%	55 79%	31 44%	28 40%	66 94%	49 70%		19 58%		23 70%	31 94%	15 45%	23 38%	15 25%	20 33%	30 50%	40 67%
Acceptance of referrals	3 75%	1 25%	7 175%	5 125%	7 175%	44 66%	12 18%	30 45%	26 39%	38 57%		3 38%	1 12%	10 125%	8 100%	6 75%	11 65%	6 35%	4 24%	3 18%	13 76%
Acceptance of complex referrals	4 100%		2 50%	3 75%	4 100%	6 86%		5 71%	3 43%	1 14%		3 75%	1 25%	4 100%	1 25%	1 25%	2 200%	2 200%	2 200%		2 200%
Outpatient department for secondary care	28 70%	2 5%	30 75%	10 25%	18 45%	63 89%	12 17%	58 82%	35 49%	43 61%		37 95%	2 5%	49 126%	41 105%	11 28%	26 72%	3 8%	21 58%	6 17%	31 86%
Emergency and elective surgery	7 88%	1 12%	6 75%	9 112%	7 88%	5 100%	1 20%	6 120%	5 100%	2 40%		3 100%	1 33%	6 200%	1 33%	2 67%	1 100%	1 100%	4 400%	3 300%	
Emergency and elective surgery with at least two operating theatres	3 60%		3 60%	6 120%	3 60%	4 80%		5 100%	4 80%	3 60%		3 75%		4 100%	1 25%		2 200%		2 200%	1 100%	1 100%
Orthopedic/trauma ward	4 50%		7 88%	9 112%	6 75%	7 117%		7 117%	5 83%	3 50%		3 300%	1 100%	5 500%		1 100%	2 67%	4 133%	3 100%		1 33%
Short hospitalization capacity	3 100%		3 100%	1 33%	3 100%	3 75%	1 25%	5 125%	2 50%	2 50%		2 67%		3 100%		2 67%			1 100%	1 100%	1 100%
20 Inpatient bed capacity	3 100%	1 33%	2 67%	2 67%	5 167%	3 60%	2 40%	5 100%	1 20%	2 40%		1 100%		3 300%		2 200%					
50 inpatient bed capacity	2 33%		4 67%	6 100%	6 100%	3 100%	2 67%	6 200%	2 67%	3 100%		1 100%				4 400%					
Inpatient critical care management	2 67%		2 67%	2 67%	5 167%	1 100%	2 200%	1 100%		1 100%				1 100%	1 100%				1 100%	1 100%	1 100%
Intensive care unit			1 100%	1 100%	2 200%	2 67%		3 100%	3 100%	3 100%		1 100%	1 100%			2 200%	1 33%	1 33%	3 100%		2 67%
Laboratory services secondary level	21 58%	12 33%	29 81%	12 33%	12 33%	38 57%	9 13%	46 69%	33 49%	35 52%		4 44%		7 78%	3 33%	5 56%	1 6%	1 6%	16 100%	12 75%	13 81%
Laboratory services tertiary level			2 50%	3 75%	4 100%	43 74%	9 16%	35 60%	31 53%	24 41%		10 91%		12 109%	1 9%	4 36%	5 56%	3 33%	14 156%	3 33%	5 56%
Blood bank services		1 50%		2 100%	3 150%	6 75%		6 75%	3 38%	2 25%				1 100%	1 100%						
Hemodialysis unit			1 100%	1 100%	1 100%	3 75%		2 50%	3 75%	2 50%		4 100%		5 125%	1 25%	5 125%	1 14%	1 14%	4 57%	1 14%	5 71%
Radiology unit	3 27%		3 27%	11 100%	11 100%	43 86%	11 22%	34 68%	32 64%	17 34%		4 67%		4 67%	2 33%	4 67%	7 58%	1 8%	6 50%	8 67%	11 92%
Medical evacuation procedures	1 33%		3 100%	6 200%	6 200%	3 100%	3 100%	4 133%	5 167%	2 67%					1 100%			1 100%	1 100%	1 100%	
Procedures for mass casualty scenarios	1 33%			3 100%	4 133%			1 100%	2 200%			1 100%		1 100%	1 100%			2 33%	3 50%	4 67%	2 33%
			repor	0		er 75% 🔳	100%		Lac Lac	of barı ck of s ck of tr ck of n	taff ain		upplie			ue d'équ of financ			6		

# Part II:

IN-DEPTH ANALYSIS BY HEALTH SERVICE



# How to read the charts and the maps

## Indicator status

## Arc charts

For each indicator, an arc chart provides an overview of the overall status (i.e. functionality, availability, sufficiency, etc.), hereafter referred to as "availability". The total number of health facilities included in the analysis of an indicator is shown inside the arc chart. It is important to note that the total number of health facilities included in the analysis of an indicator can vary due to the exclusion of non-operational and non-reporting health facilities from subsequent analyses (see page 3 for details).



The status of an indicator is further broken down by governorate and or type of health facility.

## Column charts

Column charts display the status of an indicator by governorate. The number of health facilities in a governorate is shown below the governorate's name.



## Donut charts

Each donut chart represents a type of health facility. The percentage of health facilities for which the indicators was available or partially available is shown inside the donut while the total number of health facilities included is shown at the bottom of the



chart, below the health facility type name. If an indicator was not available in any health facility, the number inside the chart will display the percentage of health facilities for which the indicator was partially or not available.

## Maps



Maps display the availability of an indicator at the Governorate level. In contrast to charts and to highlight areas not reporting, respectively the impact of non-operational health facilities, maps depict all health facilities included in the HeRAMS assessment. The outermost circle corresponds to the cumulative number of health facilities in a Governorate. Each circle may be divided into multiple smaller circles, with each

color representing the proportion of health facilities of a specific availability status.

For each circle, the corresponding Governorate name is shown in the map label together with the total number of health facilities evaluated (excluding non-reporting health facilities and health facilities where the indicator is not applicable or not relevant). The second number displays be default the percentage of evaluated health facilities for which the indicator was fully available. Any deviation from this is clearly stated in the map legend.

## Map label:

Governorate name X / X%



# Reasons of unavailability

If an indicator was not or only partially available, main reasons of unavailability (i.e. causes of damage, reasons for non-functionality, etc.) were collected. Similarly, indicators assessing availability and sufficiency of basic amenities may have a sub-question gathering additional information on the type of amenity available. Alike reasons of unavailability, types of amenities are only evaluated if the amenity was at least partially available. For simplicity reasons, causes of damage, non-functionality and inaccessibility, reasons of unavailability, types of basic amenities, and type of support provided by partners are hereafter commonly referred to as "reasons".

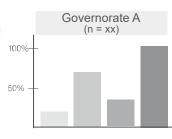
### Donut charts



Each donut chart indicates the percentage of health facilities having reported a given reason. The total number of health facilities reporting at least one reasons is shown below the chart header.

## Bar charts

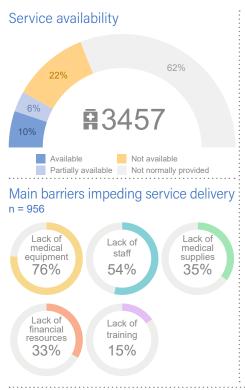
Bar charts depicting reasons follow the same logic as donut charts and exclude health facilities where the indicator was fully available. The number of health facilities reporting at least one reason is displayed below the governorate's name.

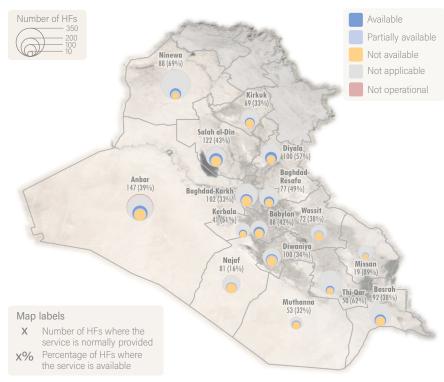


Important: The denominators for reasons charts exclude health facilities where the indicator was fully available or in the case of basic amenities not available. It should further be noted that health facilities could report up to three reasons for each indicator. Thus, the sum of all reasons may exceed 100%.



# Request for ambulance services by the patient





# Service availability by type of HF







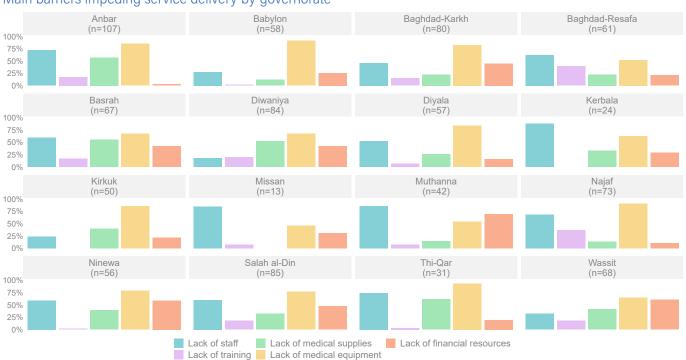




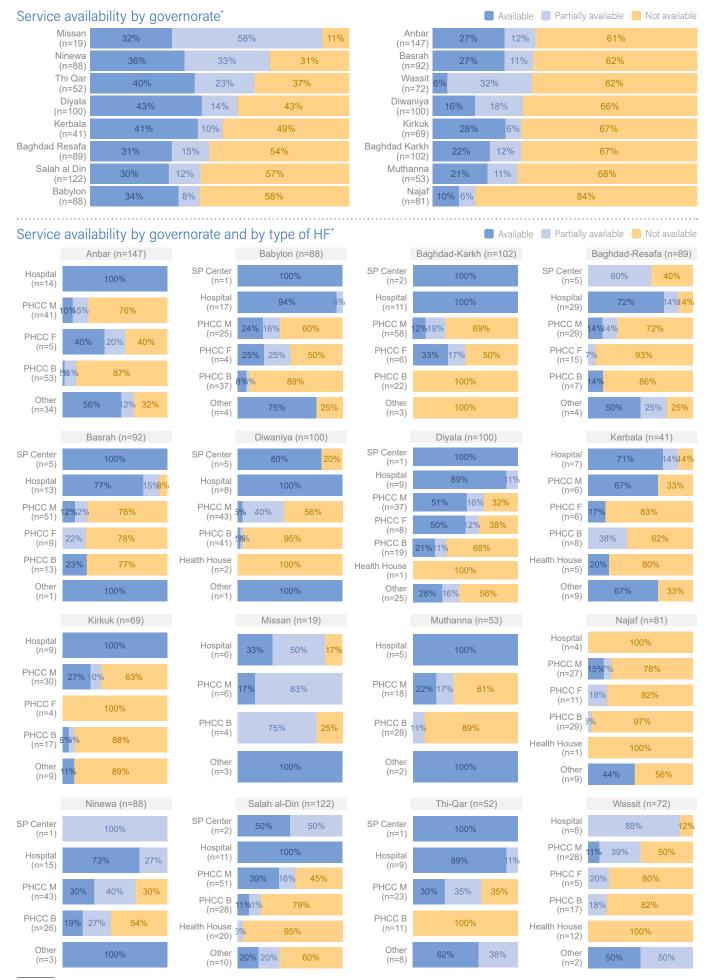




## Main barriers impeding service delivery by governorate

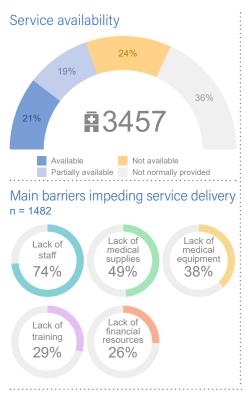


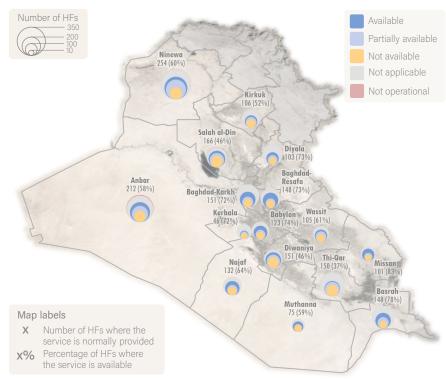




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# RECOGNITION OF DANGER SIGNS





# Service availability by type of HF











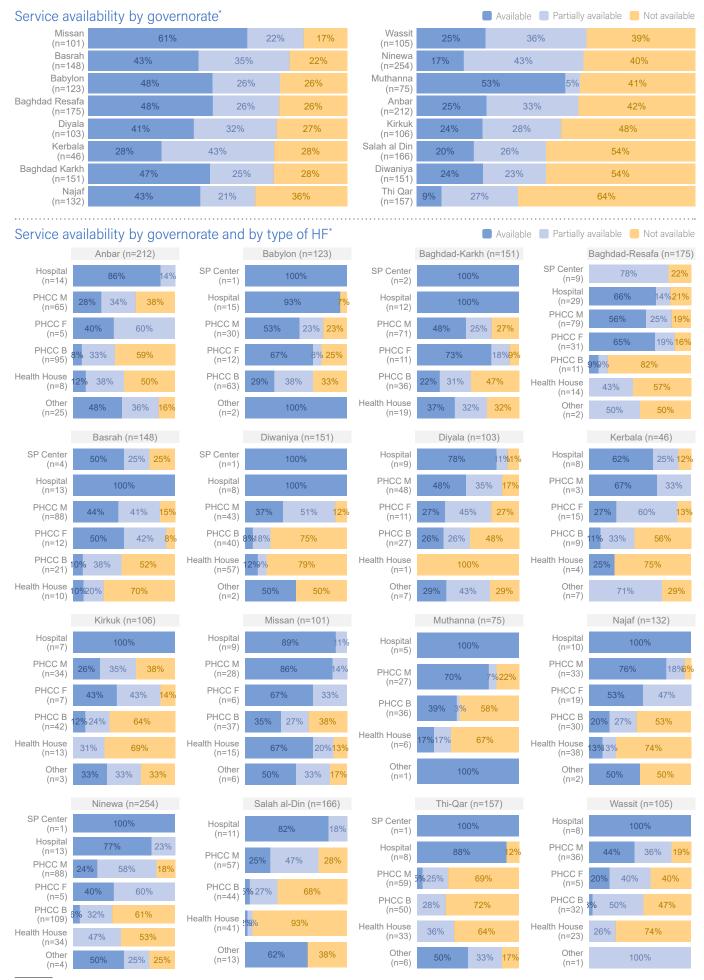




# Main barriers impeding service delivery by governorate

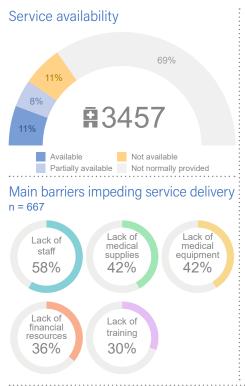


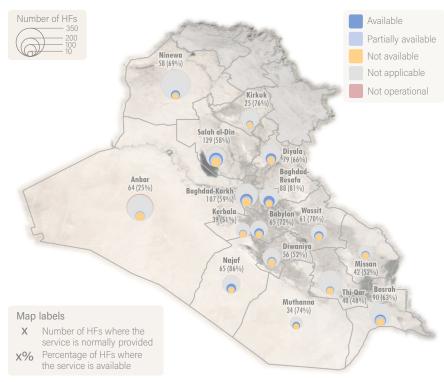




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# ACUITY-BASED FORMAL TRIAGE





# Service availability by type of HF











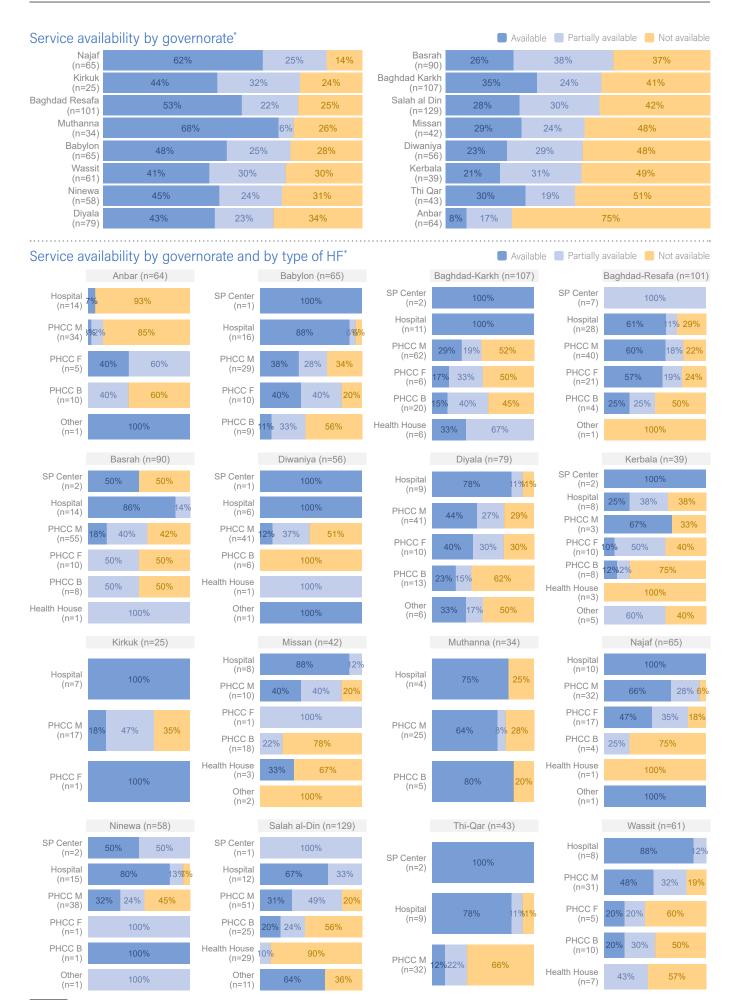




# Main barriers impeding service delivery by governorate

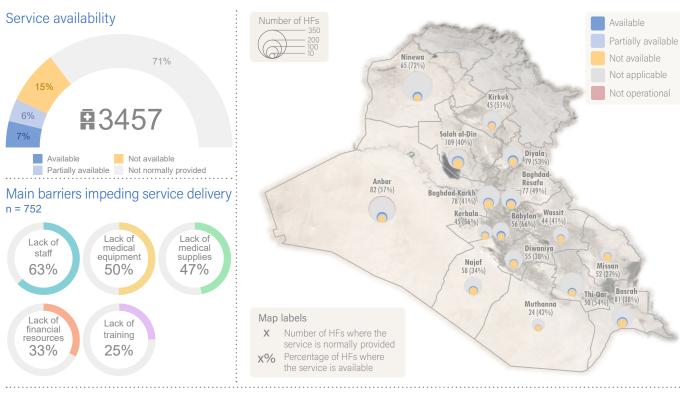




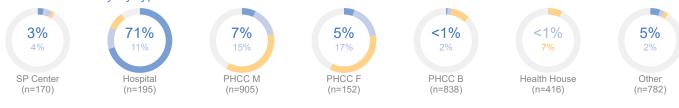


<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# WHO BASIC EMERGENCY CARE BY PREHOSPITAL PROVIDER

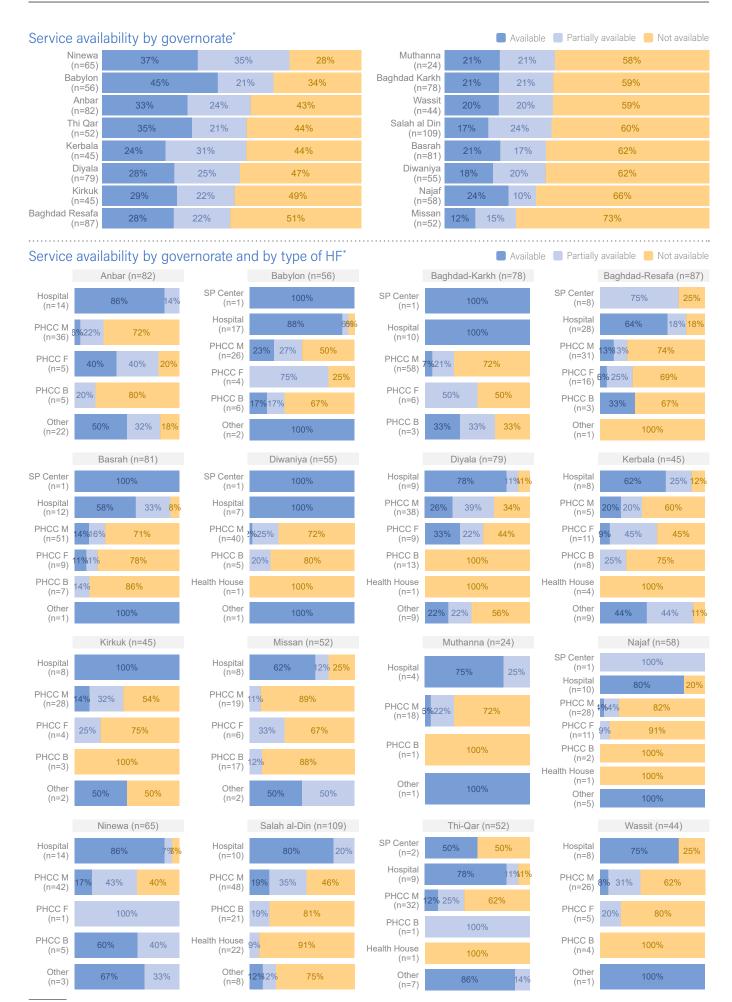






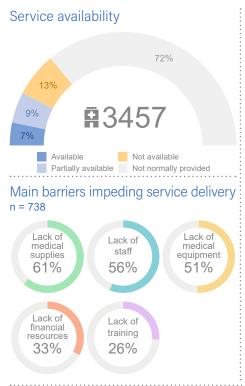


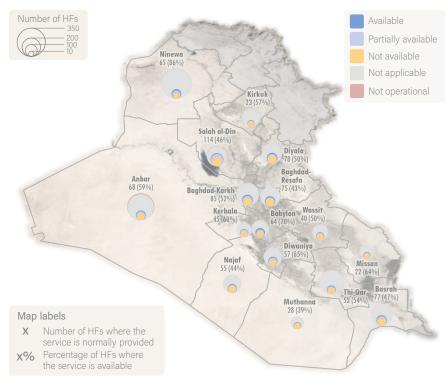




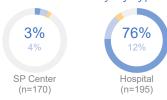
<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# WHO BASIC EMERGENCY CARE





### Service availability by type of HF



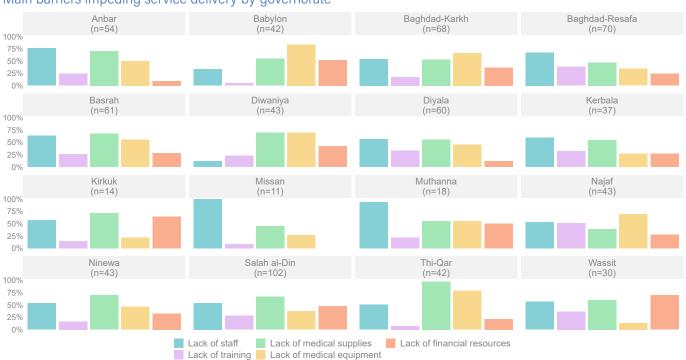




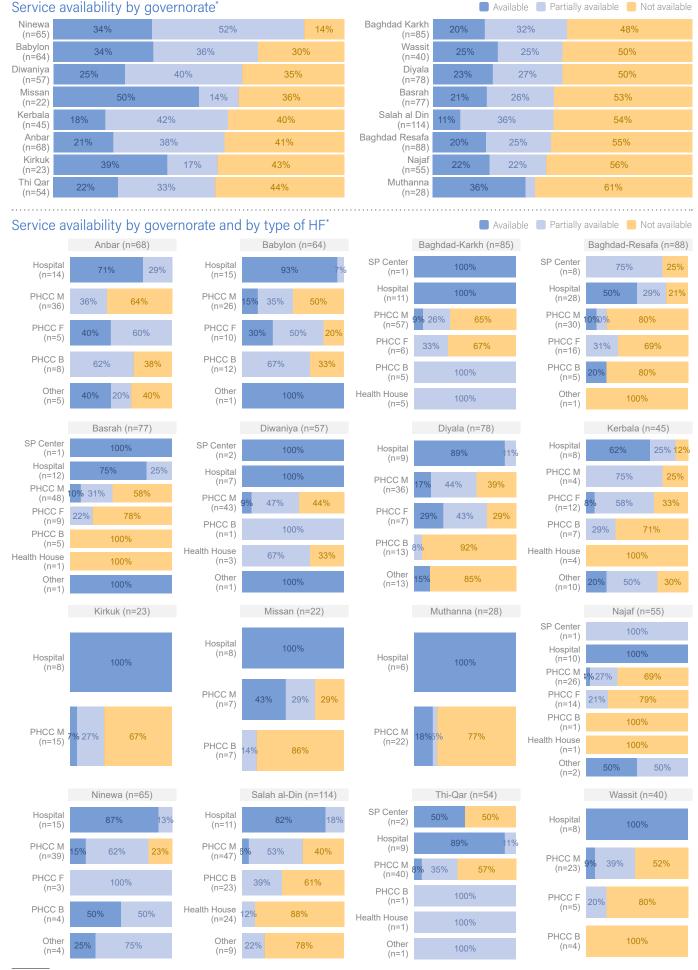






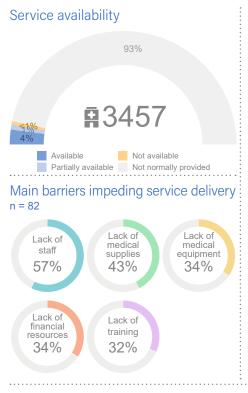


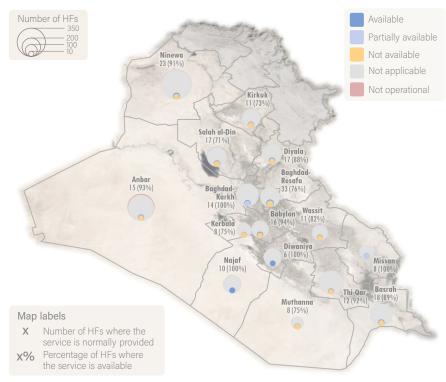




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# ADVANCED SYNDROME-BASED MANAGEMENT



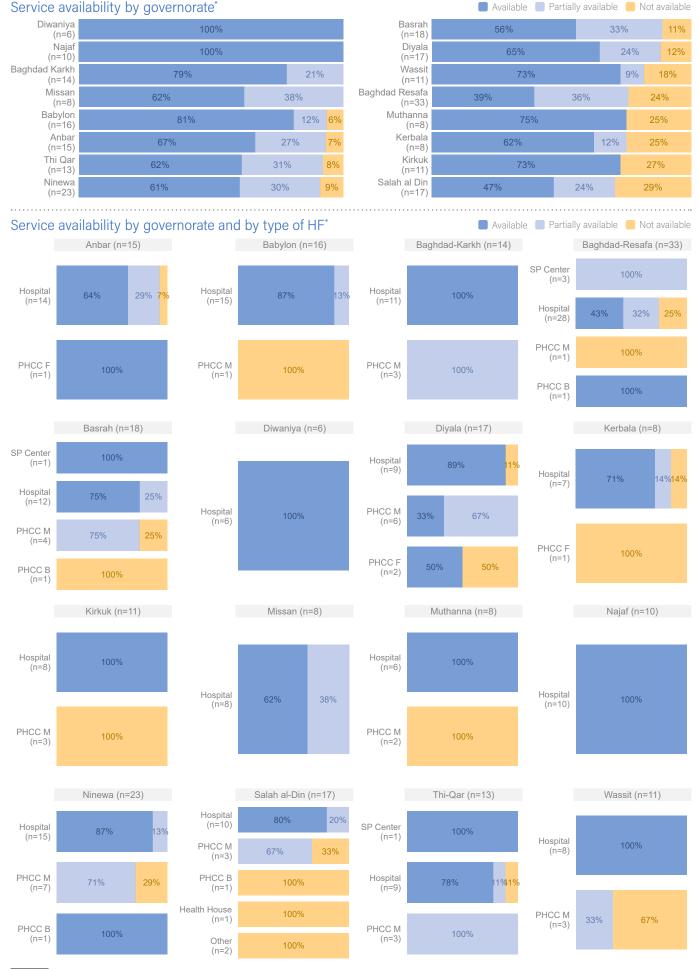


### Service availability by type of HF



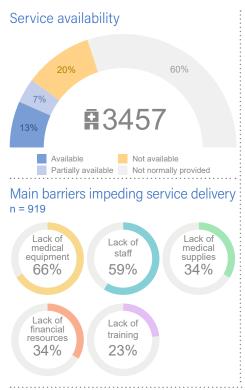


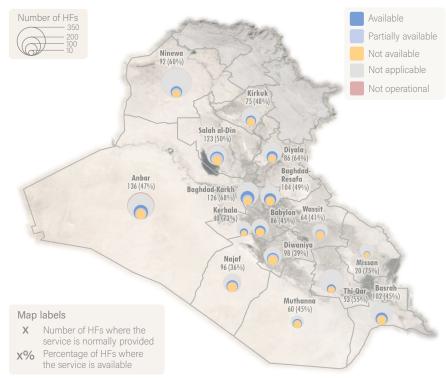




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

## MONITORED REFERRAL





### Service availability by type of HF





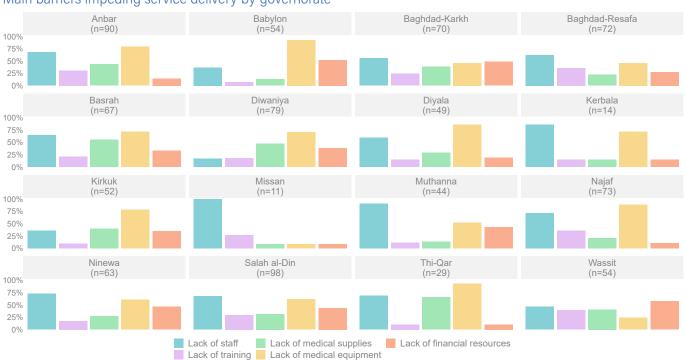




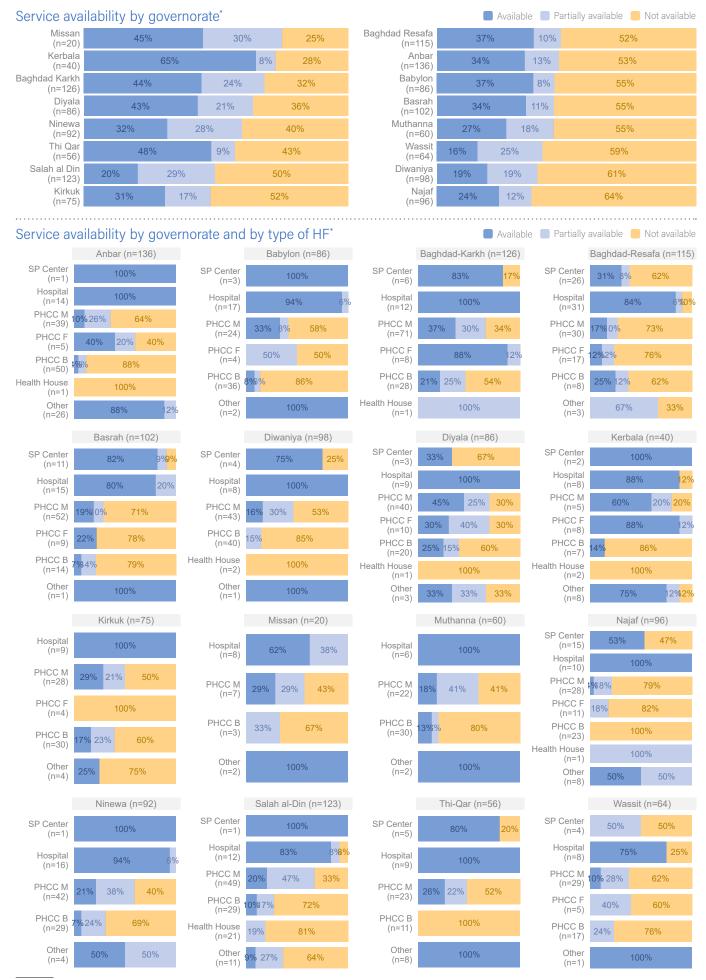






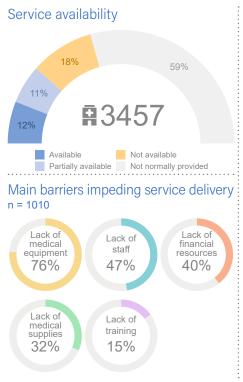


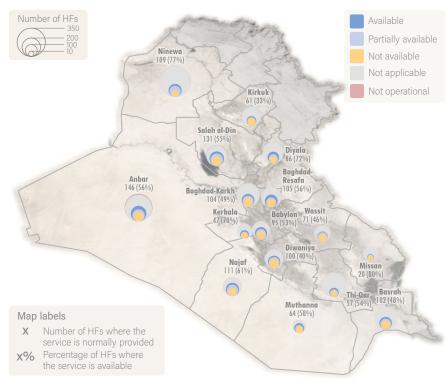




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

## REFERRAL CAPACITY





### Service availability by type of HF





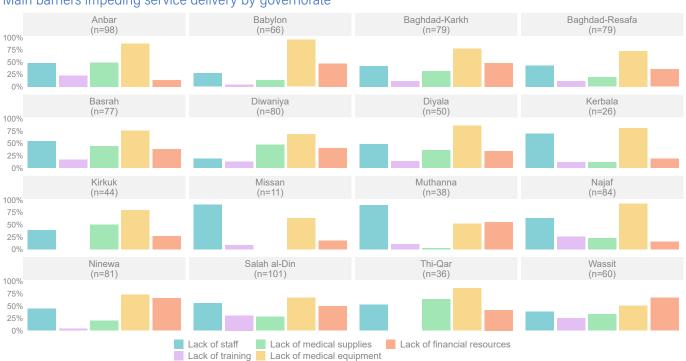




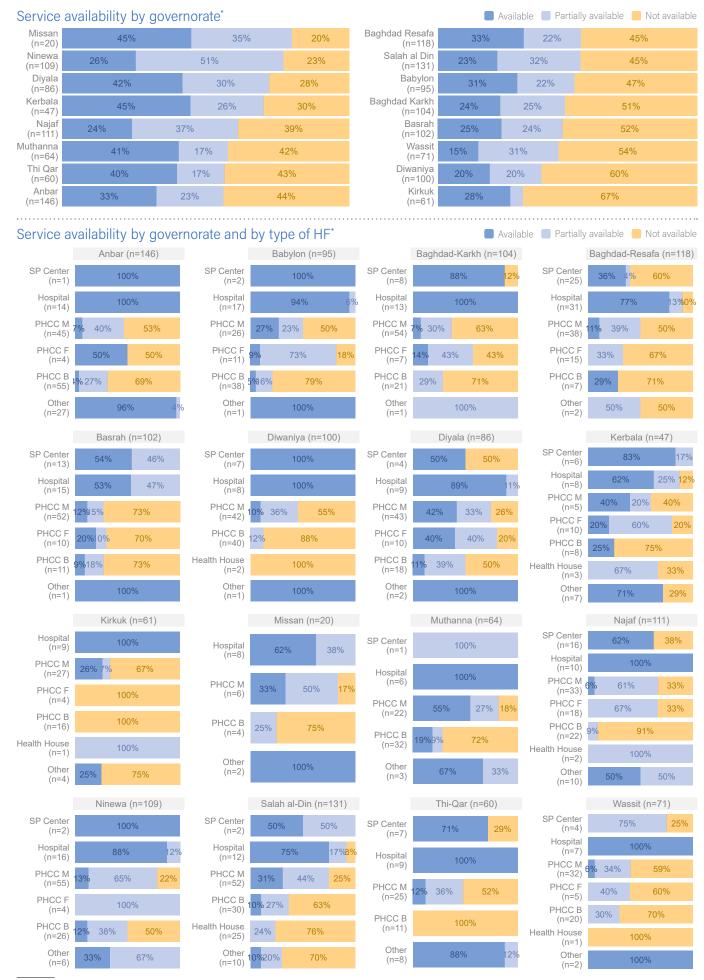






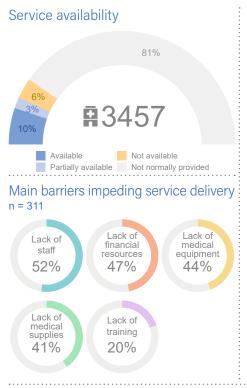


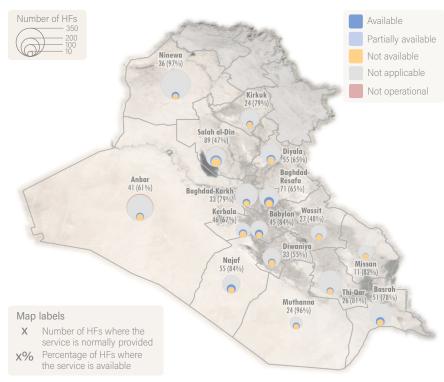




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# ACCEPTANCE OF REFERRALS





### Service availability by type of HF









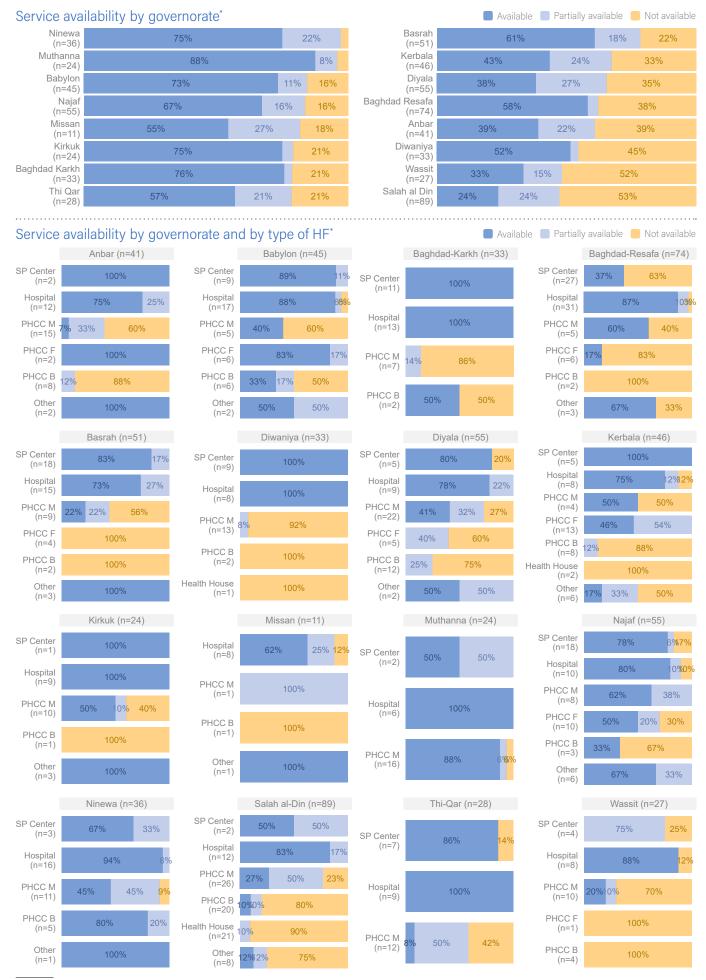








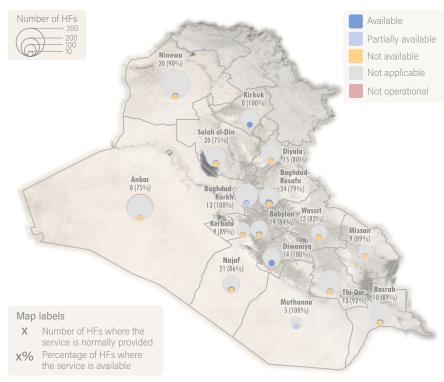




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# ACCEPTANCE OF COMPLEX REFERRALS



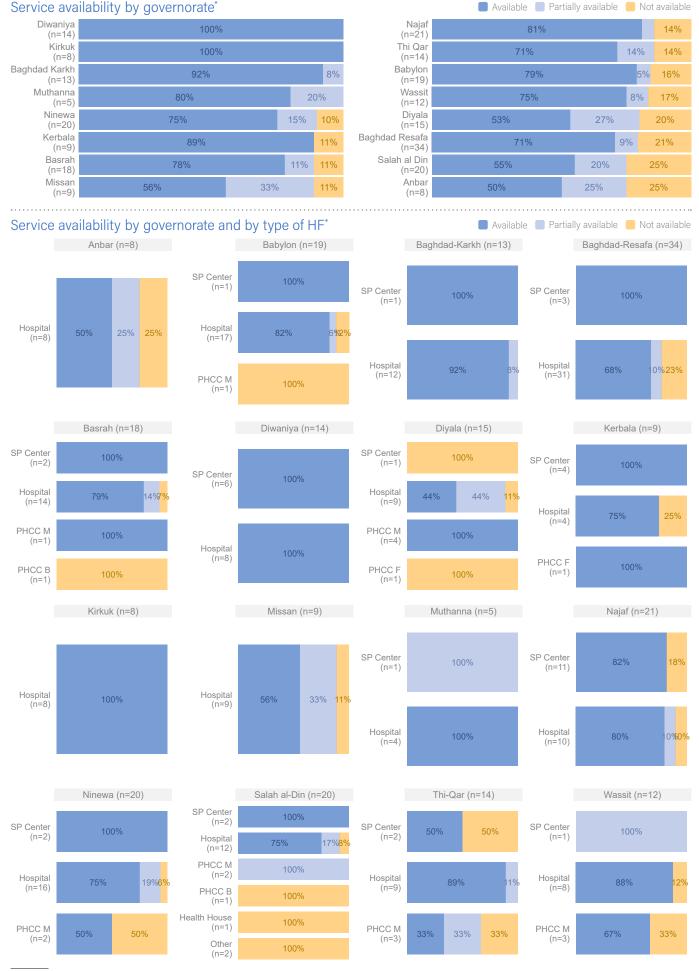


### Service availability by type of HF



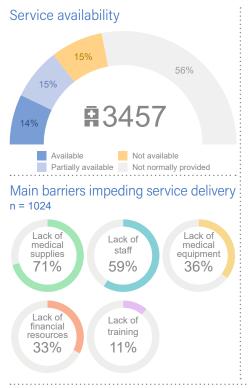


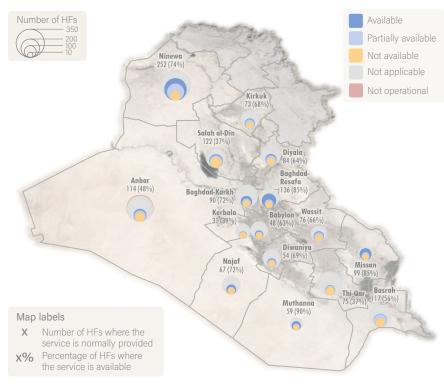




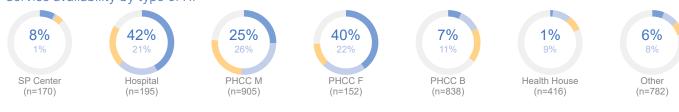
<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### OUTPATIENT SERVICES FOR PRIMARY CARE



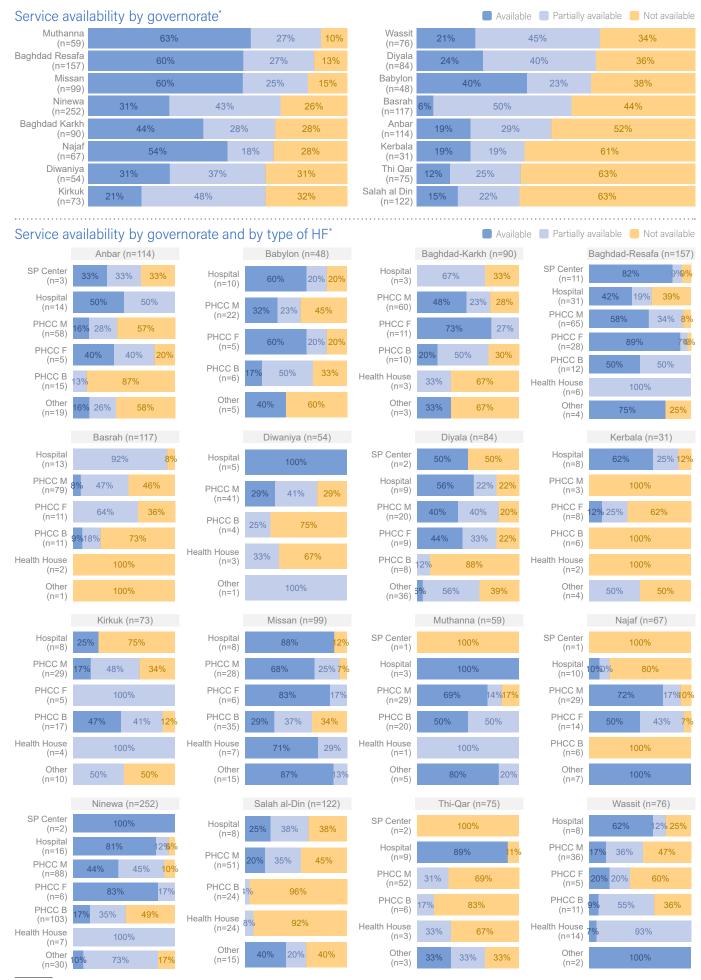


### Service availability by type of HF



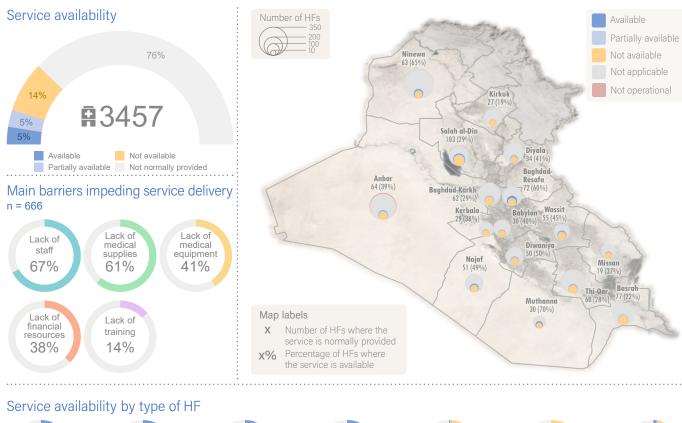


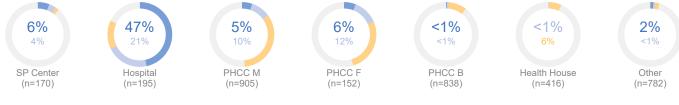




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

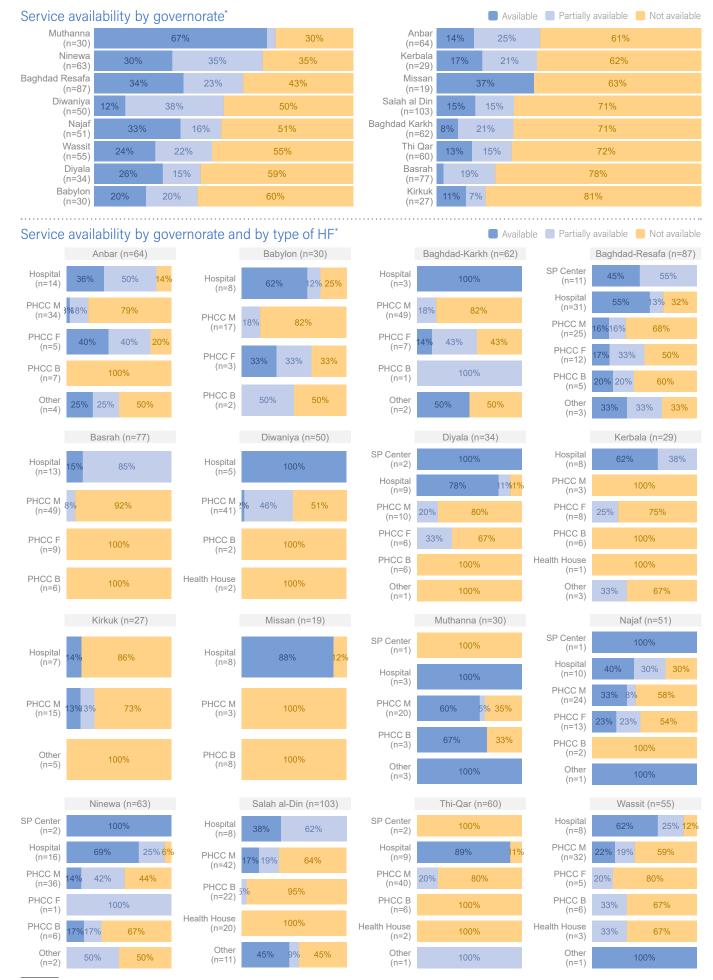
### OUTPATIENT DEPARTMENT FOR SECONDARY CARE





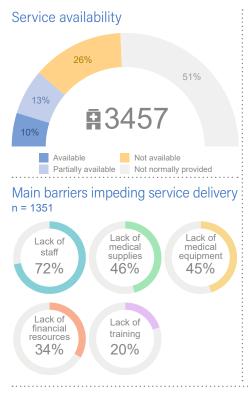


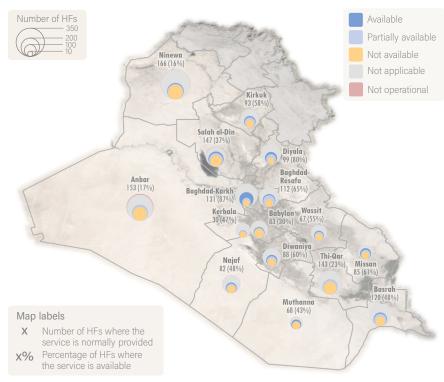




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### HOME VISITS





### Service availability by type of HF







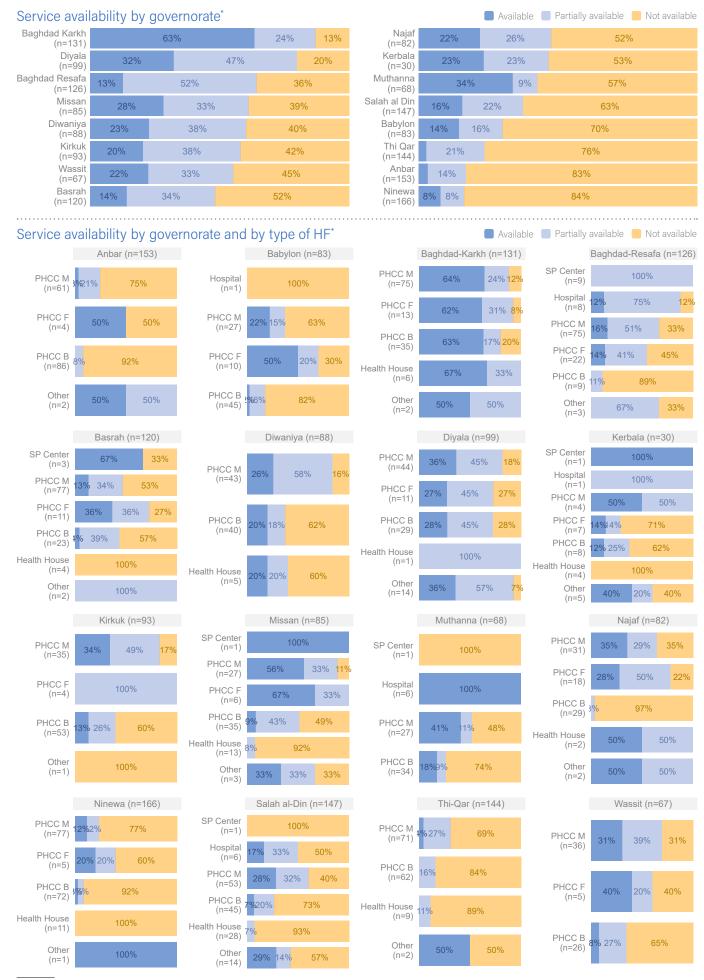






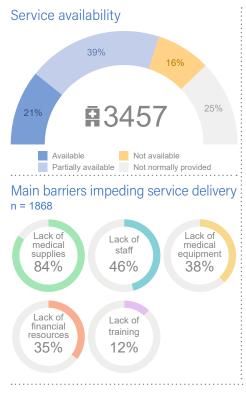


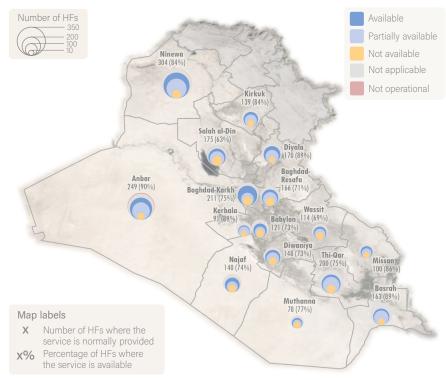




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# MINOR TRAUMA DEFINITIVE MANAGEMENT





### Service availability by type of HF





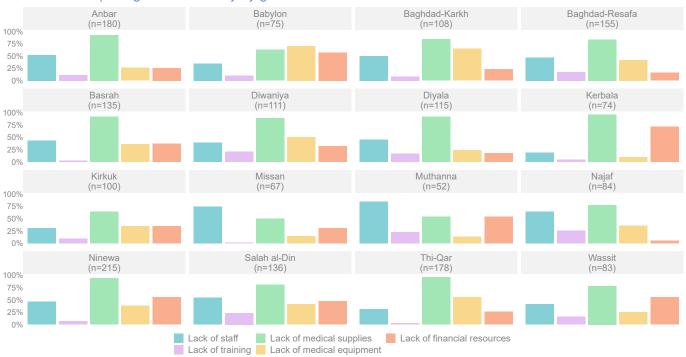




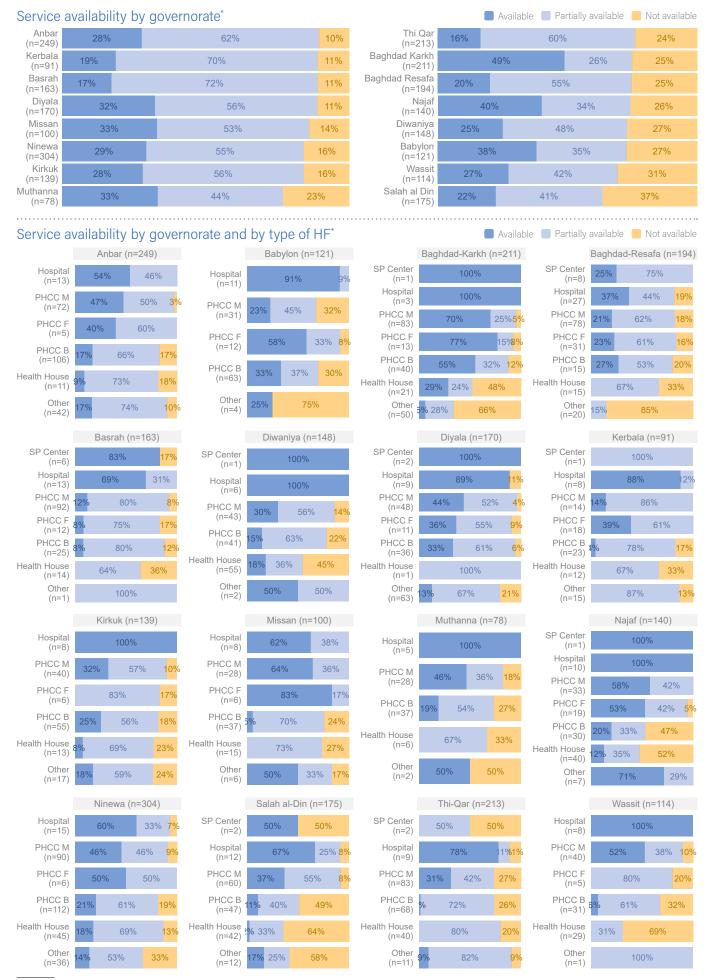






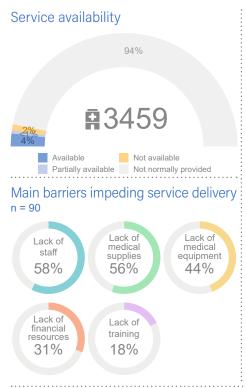


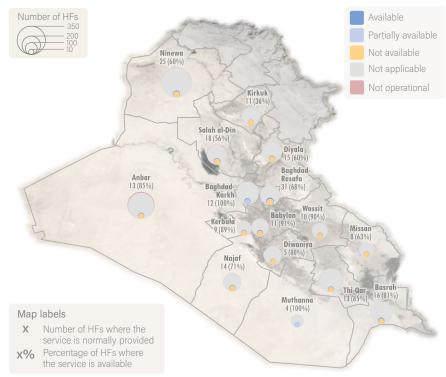




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# **EMERGENCY AND ELECTIVE SURGERY**





### Service availability by type of HF









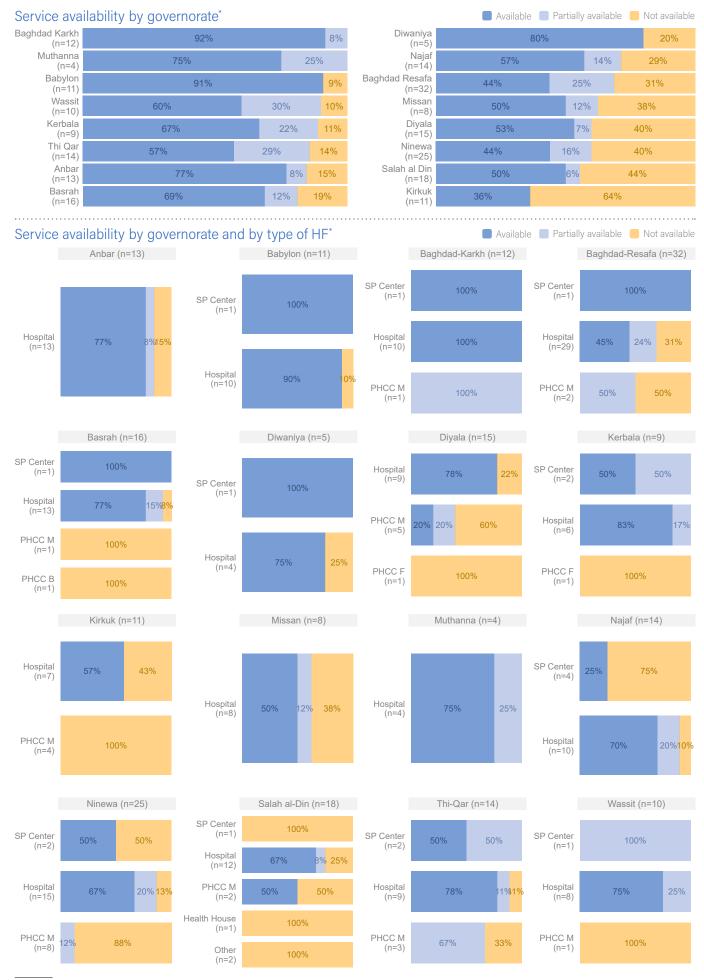






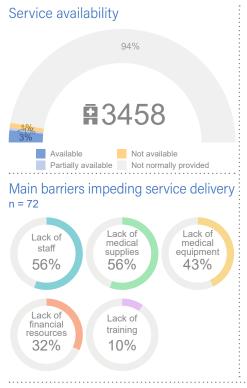


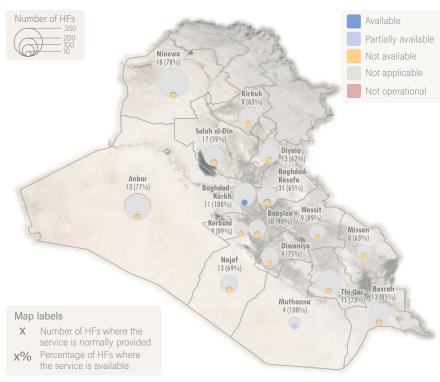




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

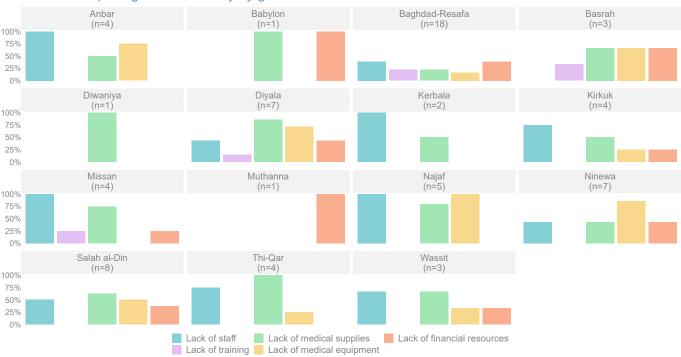
# EMERGENCY AND ELECTIVE SURGERY WITH AT LEAST TWO OPERATING THEATRES



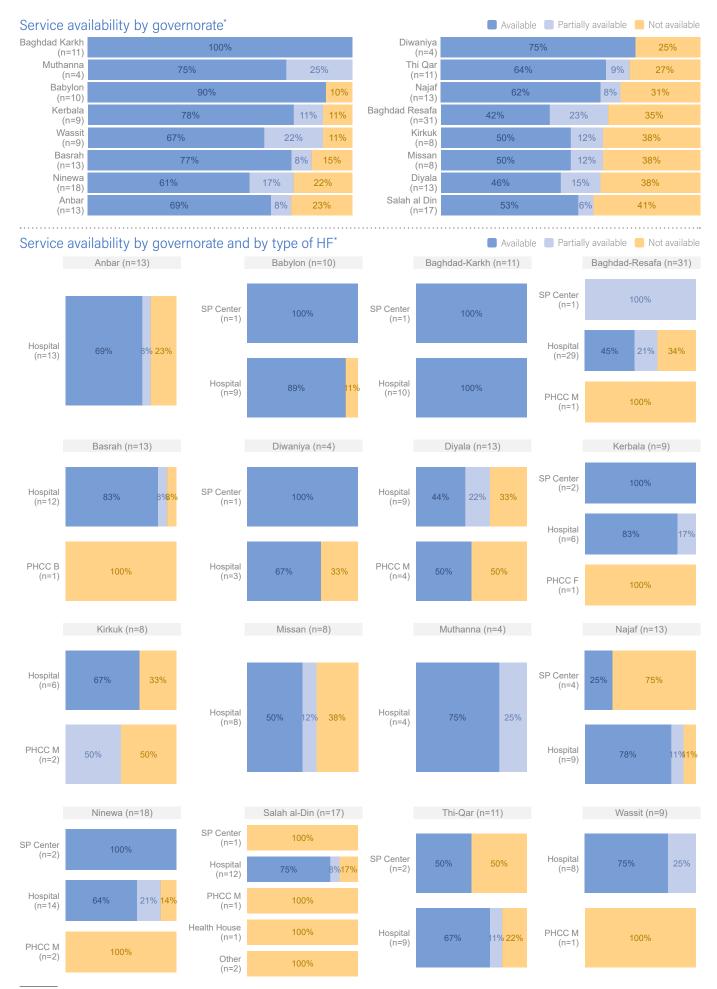


### Service availability by type of HF



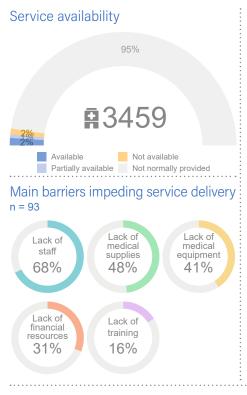


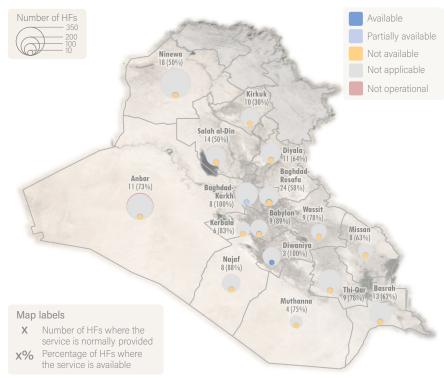




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

## ORTHOPEDIC/TRAUMA WARD





### Service availability by type of HF



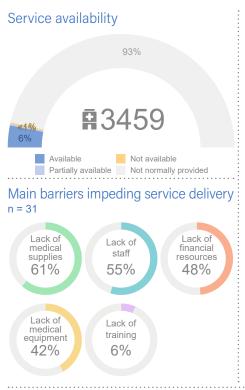


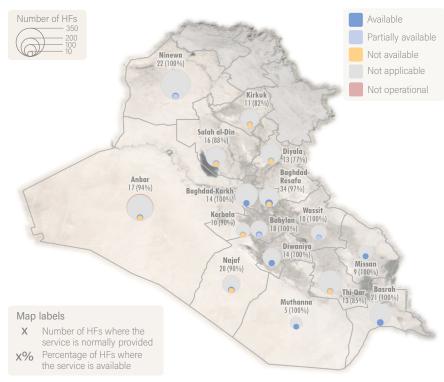




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

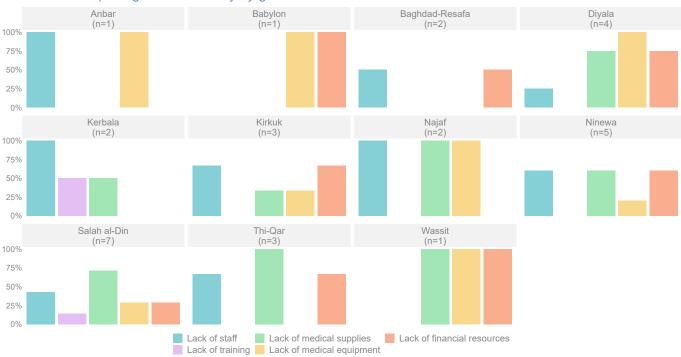
# SHORT HOSPITALIZATION CAPACITY



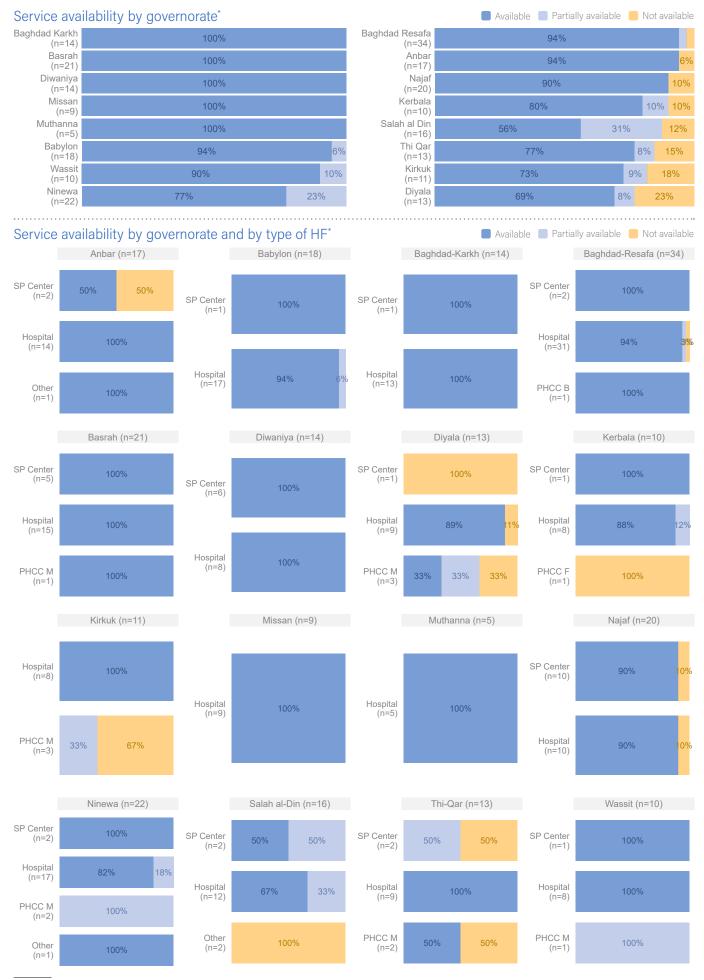


### Service availability by type of HF



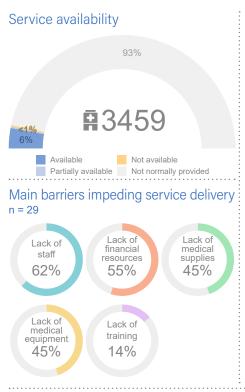


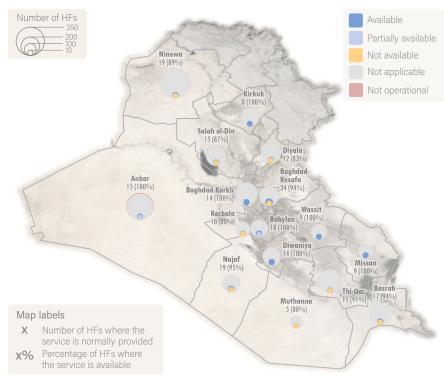




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# 20 INPATIENT BED CAPACITY



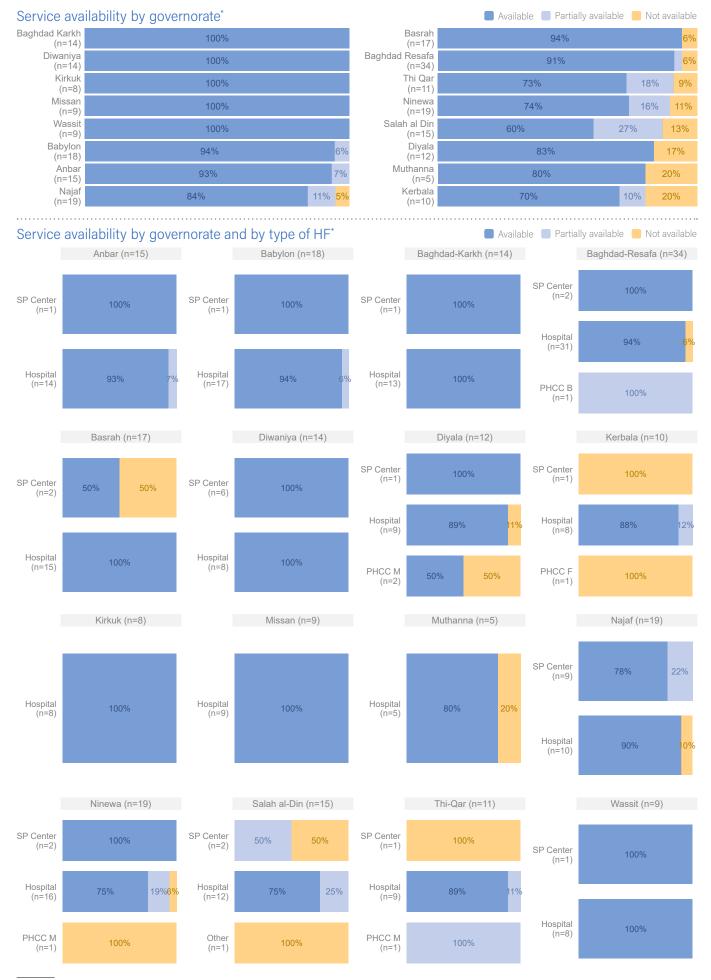


### Service availability by type of HF





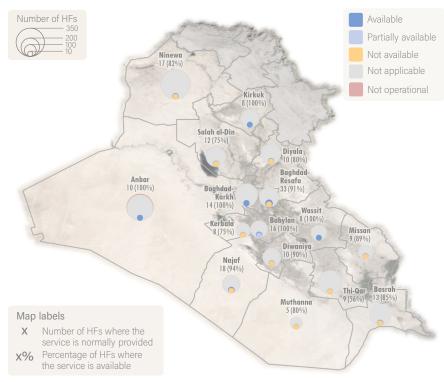




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

# 50 INPATIENT BED CAPACITY





### Service availability by type of HF





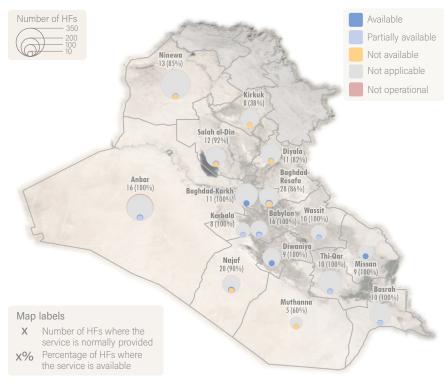




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

## INPATIENT CRITICAL CARE MANAGEMENT



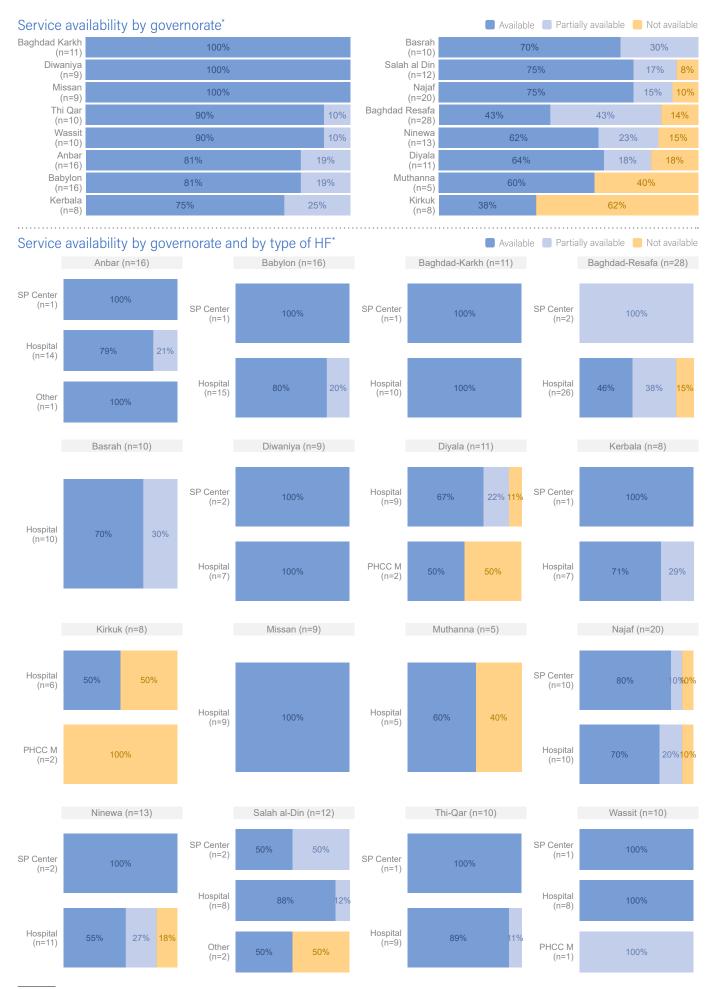


### Service availability by type of HF



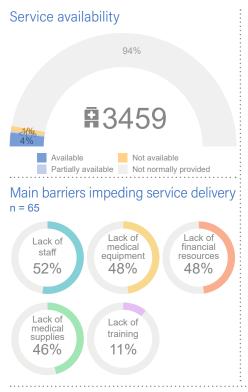


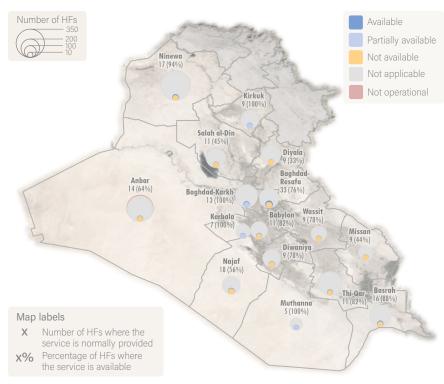




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

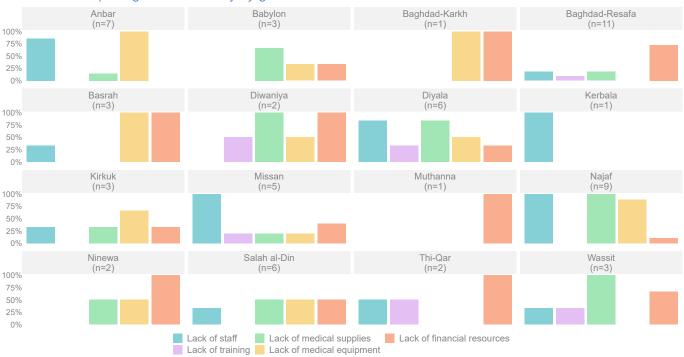
### INTENSIVE CARE UNIT





### Service availability by type of HF



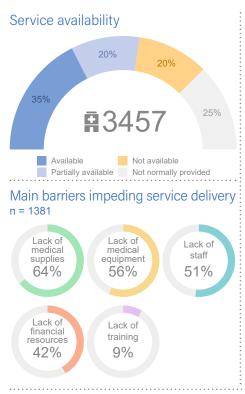


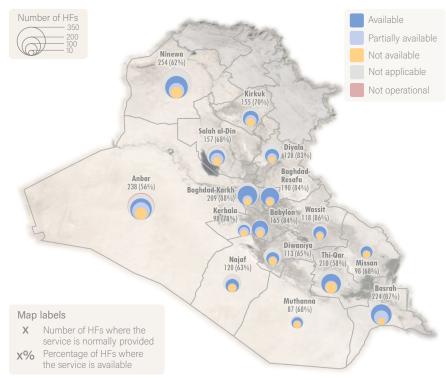




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### BASIC LABORATORY





### Service availability by type of HF





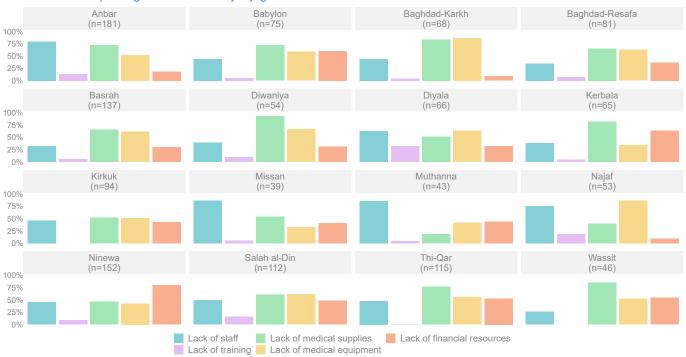




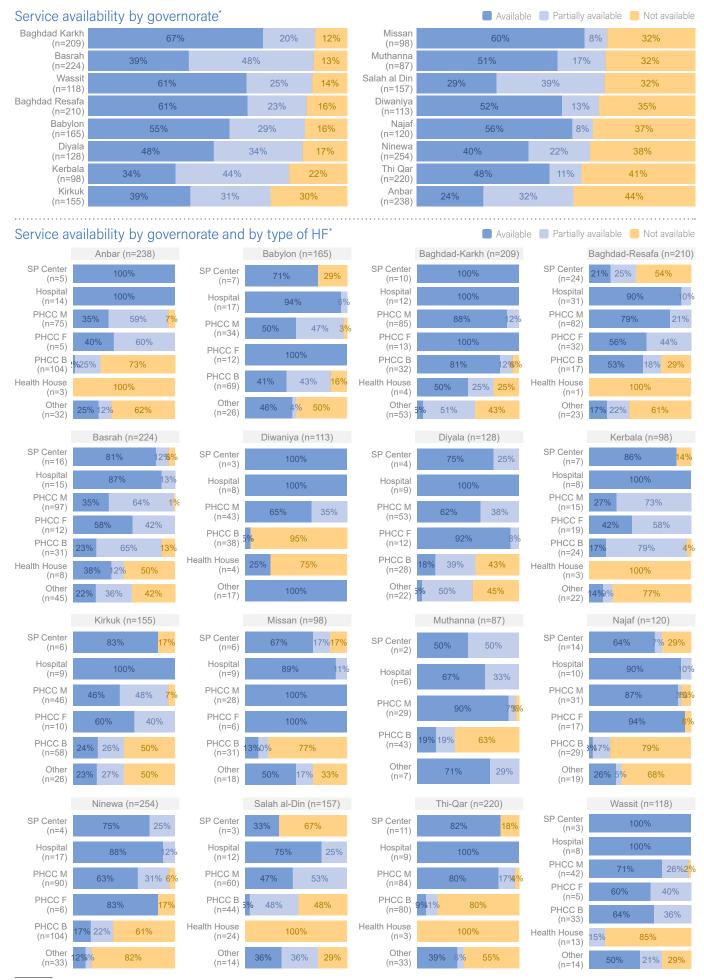






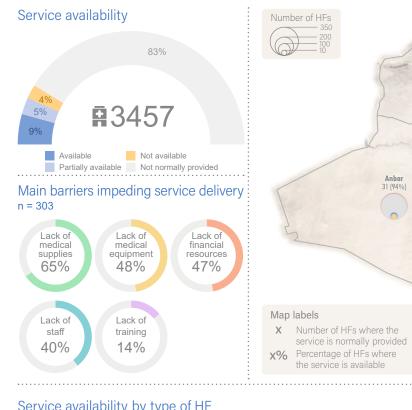


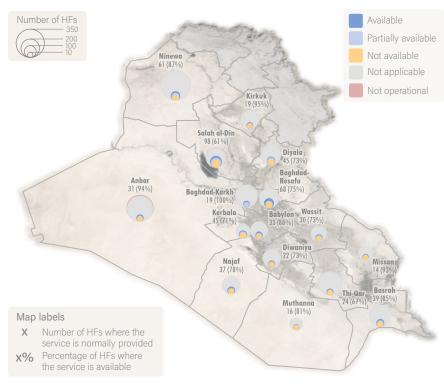




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### \_ABORATORY SERVICES SECONDARY LEVEL





4%

Other

(n=782)

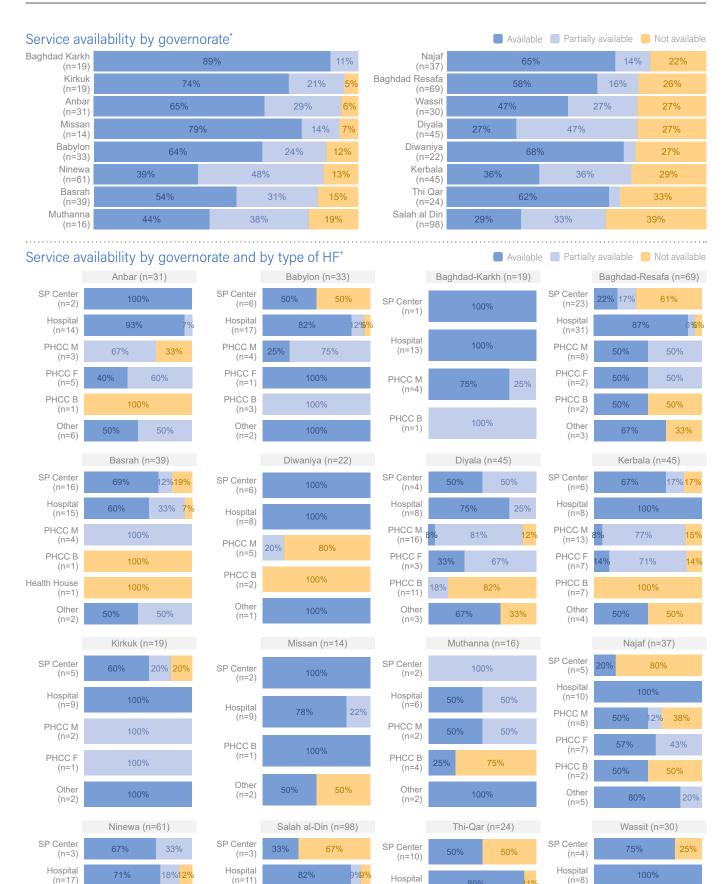
5%

### Service availability by type of HF









82%

100%

30%

62%

34%

40%

35%

PHCC M (n=32)

PHCC B

Health House

(n=23)

(n=19)

Other

(n=10)

9%9%

30%

(n=9)

PHCC M

PHCC B

(n=1)

Other

(n=2)

89%

100%

100%

50%

71%

80%

67%

33%

74%

67%

20%

33%

PHCC M

PHCC F

PHCC B

(n=27)

(n=5)

(n=6)

Other

(n=3)

100%

45%

33%

67%

45%

67%

33%

PHCC M

PHCC F

PHCC B

(n=11)

(n=1)

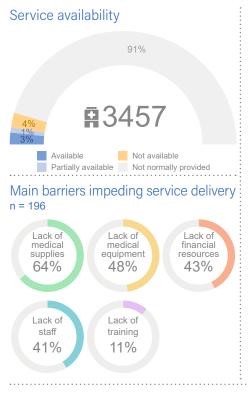
(n=3)

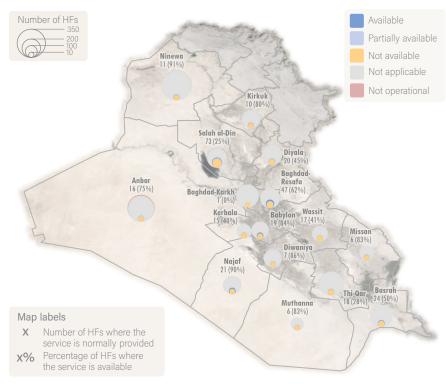
Other

(n=3)

<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### LABORATORY SERVICES TERTIARY LEVEL





### Service availability by type of HF

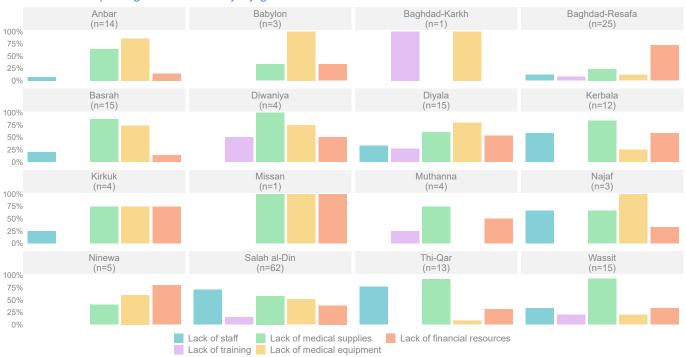




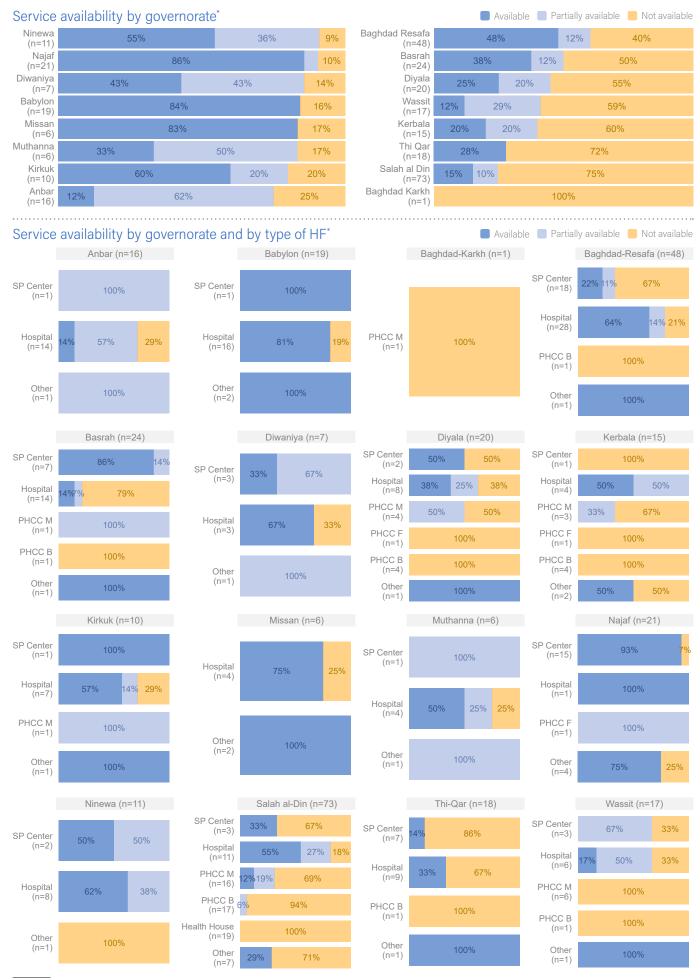








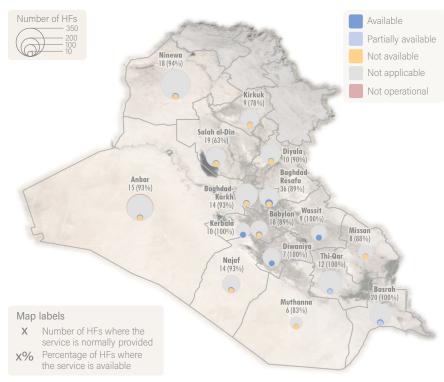




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### **BLOOD BANK SERVICES**



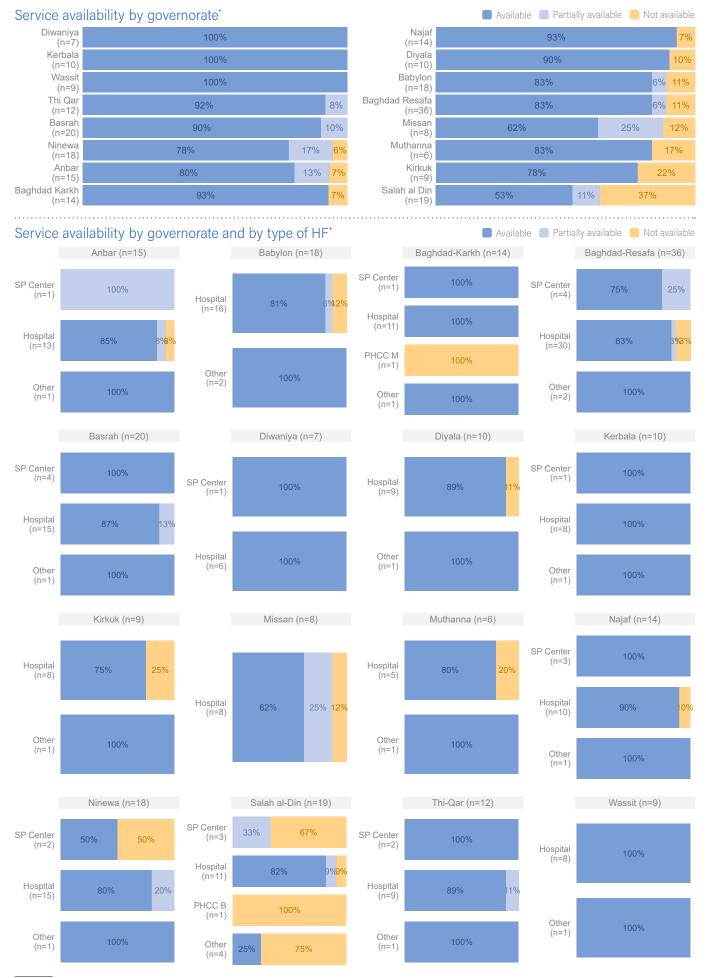


### Service availability by type of HF





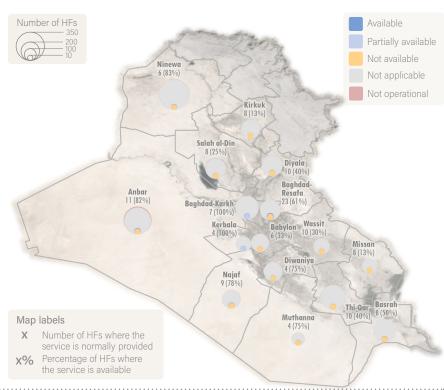




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

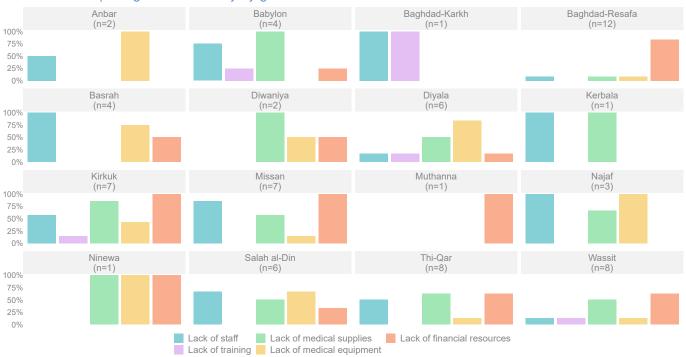
### HEMODIALYSIS UNIT



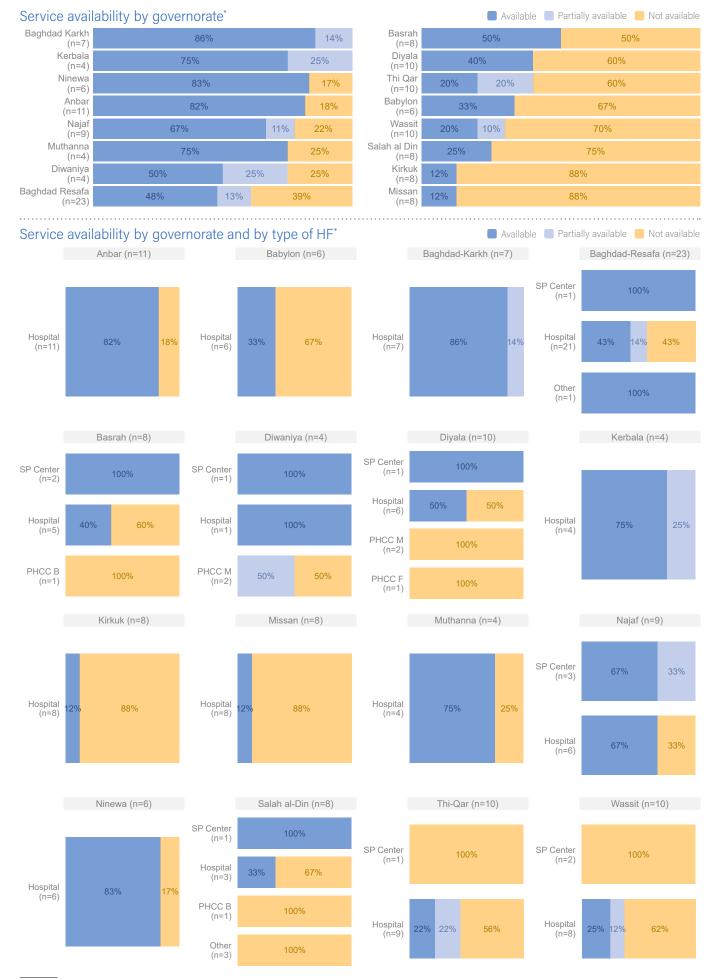


### Service availability by type of HF



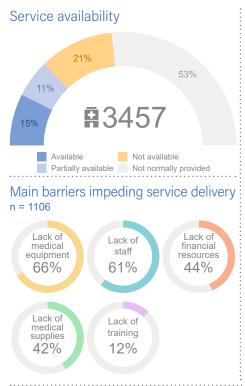


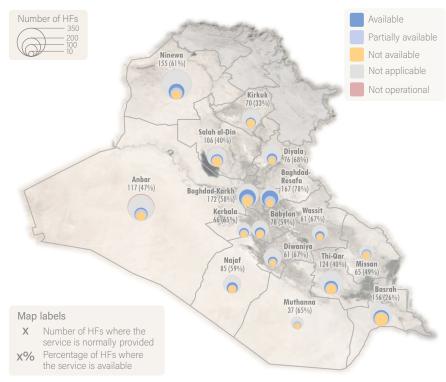




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### BASIC X-RAY SERVICE





### Service availability by type of HF









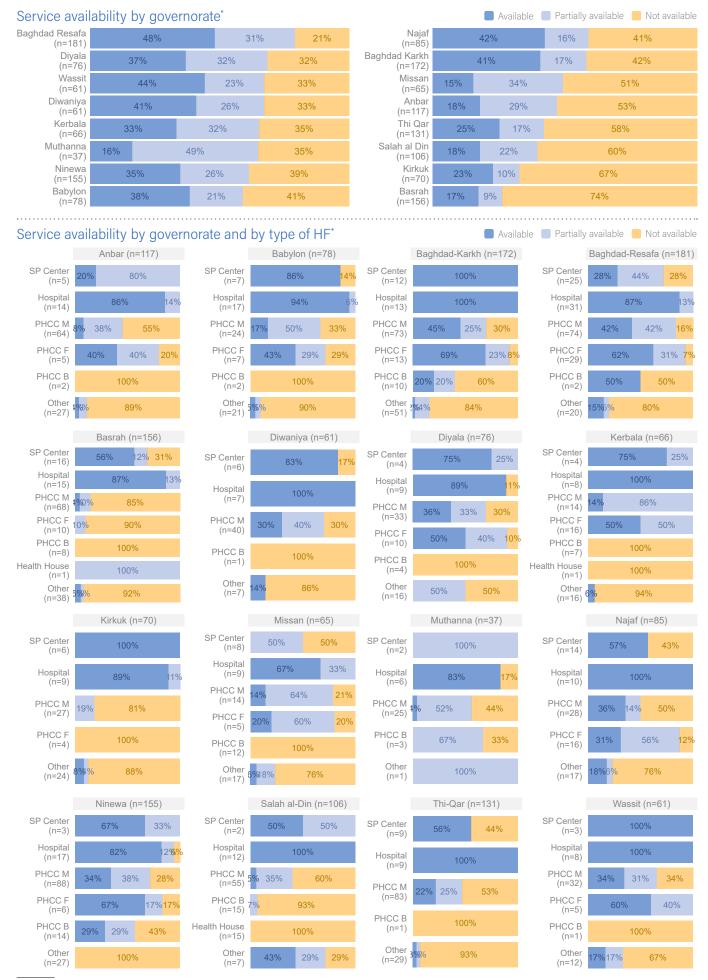






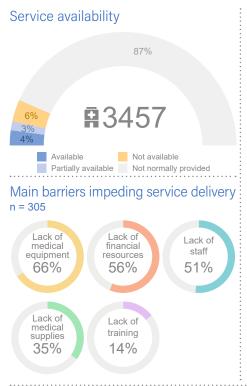


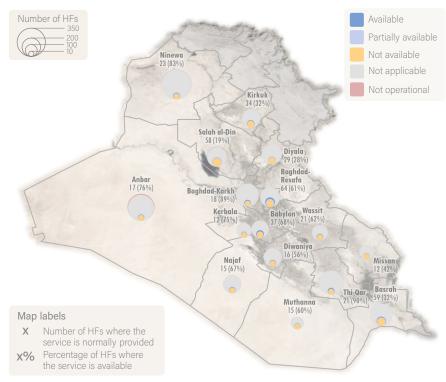




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### RADIOLOGY UNIT





### Service availability by type of HF





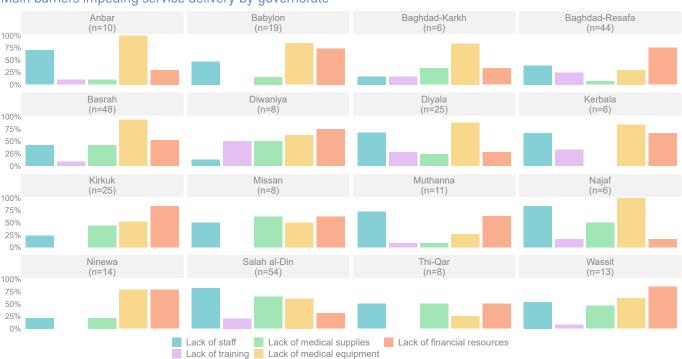




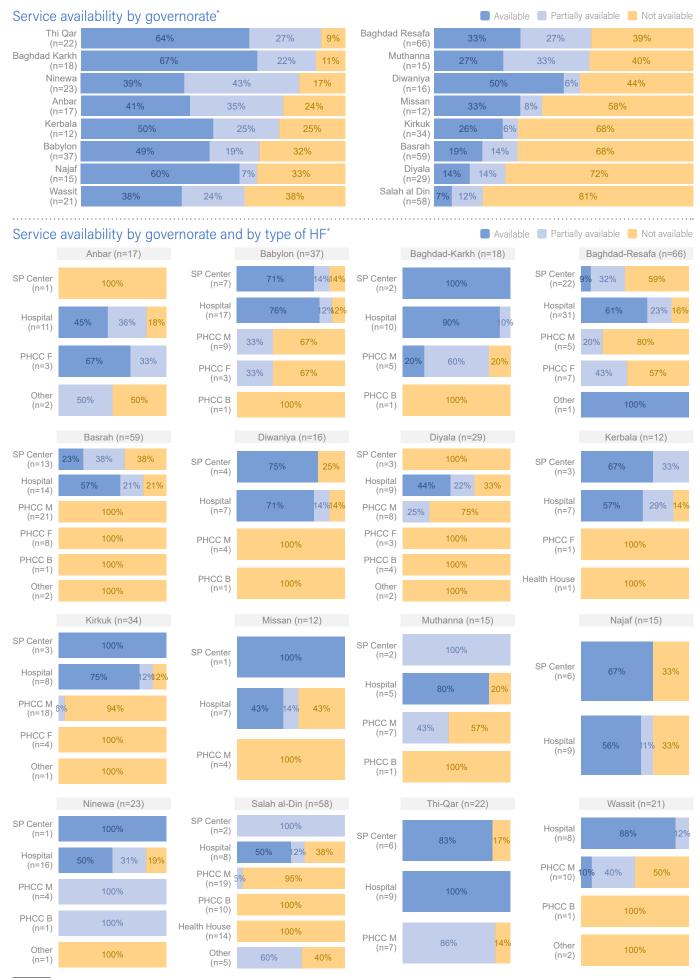






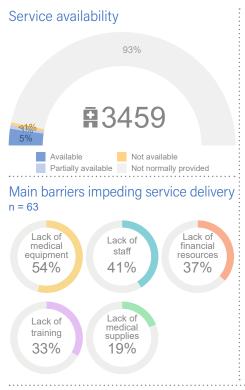


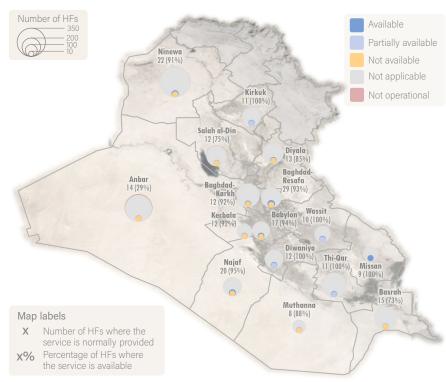




<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

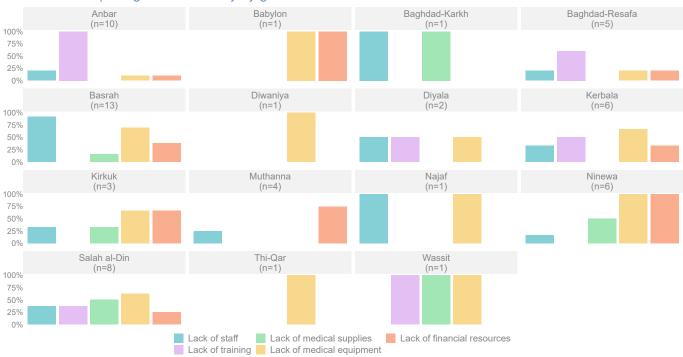
### MEDICAL EVACUATION PROCEDURES



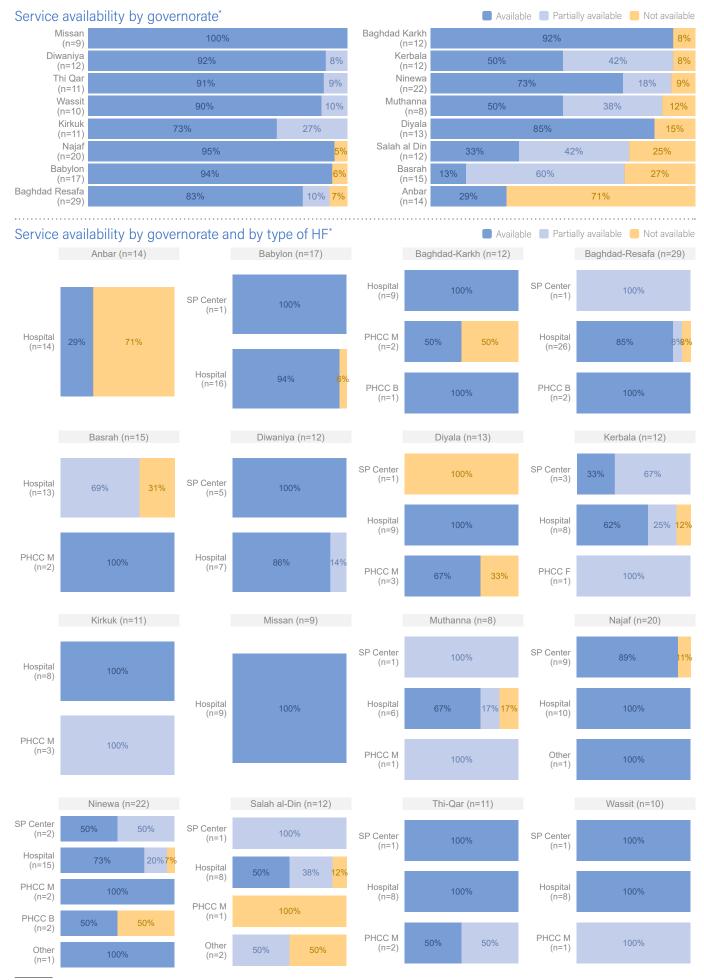


### Service availability by type of HF



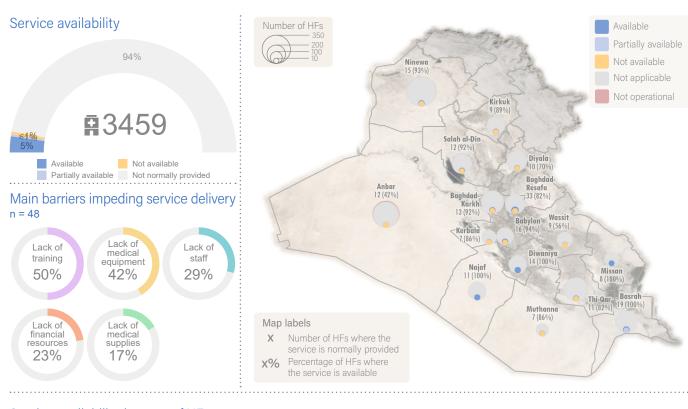






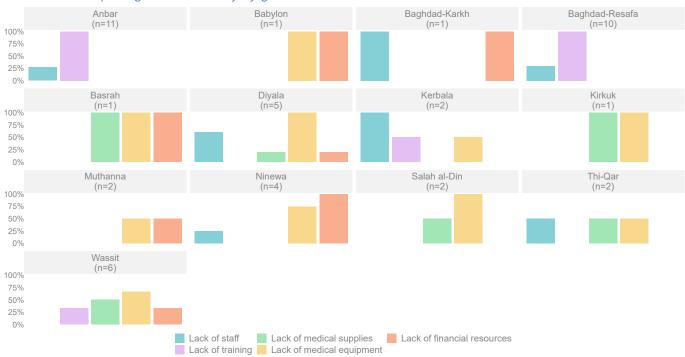
<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.

### Procedures for mass casualty scenarios

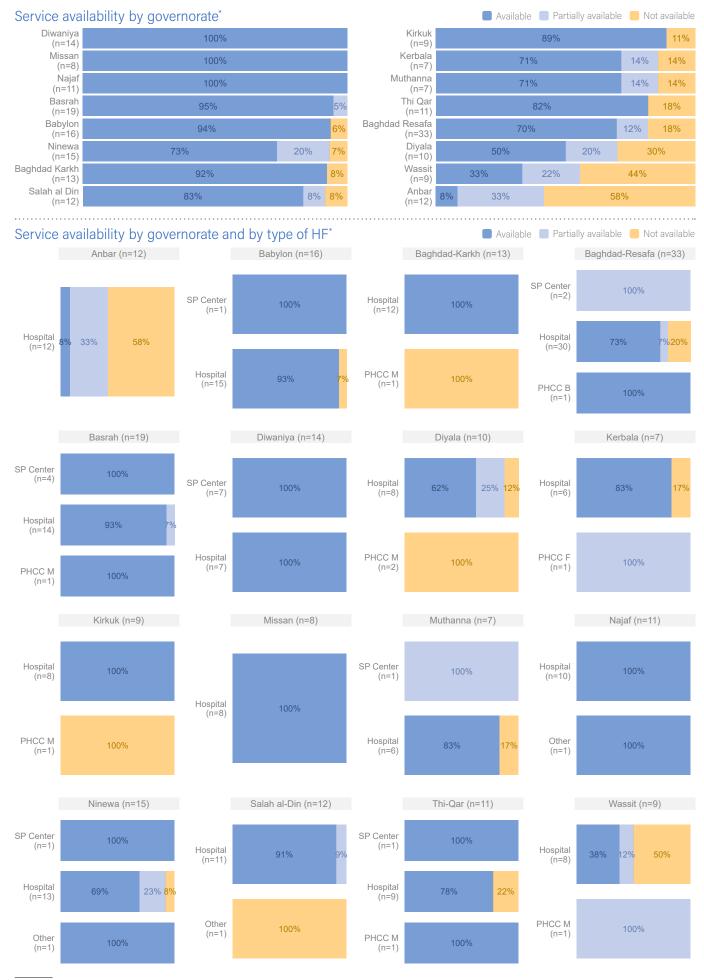


### Service availability by type of HF









<sup>\*</sup> Health facilities where the service availability is unknown or where the service is not normally provided are excluded.



# ANNEX



## Annex I: Herams service definitions

		Service expected						
SERVICE NAME	Definition	SP Center	Hospital	PHCC M	PHCC F	PHCC B	Health House	Other*
REQUEST FOR AMBULANCE SERVICES BY THE PATIENT	Request for ambulance services by the patient: User- activated dispatch of basic ambulance services from district- level staging center (e.g., ambulance pool)		Х					Х
RECOGNITION OF DANGER SIGNS	Recognition of danger signs: in neonates, children and adults, including early recognition of signs of serious infection, with timely referral to higher-level care.		Х	Χ	Χ	Χ		
ACUITY-BASED FORMAL TRIAGE	Acuity-based formal triage: of children and adults at first entry to the facility (with a validated instrument such WHO/ICRC Interagency Triage Tool)		Χ					
WHO BASIC EMERGENCY CARE BY PREHOSPITAL PROVIDER	WHO Basic emergency care by prehospital provider: Initial syndrome-based management at scene by prehospital providers for difficulty breathing, shock, altered mental status, and polytrauma.			X				X
WHO Basic Emergency Care	WHO Basic Emergency Care: Basic syndrome-based management of difficulty breathing, shock, altered mental status, and polytrauma for neonates, children and adults		Х					
Advanced Syndrome- BASED MANAGEMENT	Advanced Syndrome-based management: of difficulty breathing, shock, altered mental status, and polytrauma in dedicated emergency unit, including for neonates, children and adults (Interventions include intubation, mechanical ventilation, surgical airway, and placement of chest drain, hemorrhage control, defibrillation, administration of IV fluids via peripheral and central venous line with adjustment for age and condition, including malnutrition; administration of essential emergency medications)		Χ					
Monitored referral	Monitored referral: Direct provider monitoring during transport to appropriate healthcare facility and structured handover to facility personnel.		Х					Х
REFERRAL CAPACITY	Referral capacity: referral procedures, means of communication, access to transportation		Χ					
ACCEPTANCE OF REFERRALS	Acceptance of referrals: acceptance of referral with remote decision support for prehospital providers and primary-level facilities, and condition-specific protocol-based referral to higher levels	Х	Χ					
ACCEPTANCE OF COMPLEX REFERRALS	Acceptance of complex referrals: with remote decision support for prehospital providers and lower-level facilities	Х	X					
OUTPATIENT SERVICES FOR PRIMARY CARE	Outpatient services for primary care: with availability of all essential drugs for primary care as per national guidelines.			Х	Χ			
OUTPATIENT DEPARTMENT FOR SECONDARY CARE	Outpatient department for secondary care: Outpatient department (OPD) with availability of all essential drugs for secondary care as per national guidelines (including NCD and pain management), and at least one general practitioner.		Χ					
Home visits	Home visits: including promotion of self-care practices, monitoring of noncommunicable diseases (NCD) medication compliance and palliative care.			Χ	Χ	Χ		Х
MINOR TRAUMA DEFINITIVE MANAGEMENT	Minor trauma definitive management: pain management, tetanus toxoid and human antitoxin, minor surgery kits, suture absorbable/silk with needles, disinfectant solutions, bandages, gauzes, cotton wool.		Х	Х	Х	Х	Х	Х



		Service expected						
Service name	Definition	SP Center	Hospital	PHCC M	PHCC F	PHCC B	Health House	Other*
EMERGENCY AND ELECTIVE SURGERY	Emergency and elective surgery: full surgical wound care, advanced fracture management through at least one operating theatre with basic general anesthesia (with or without gas)	Х	Х					
EMERGENCY AND ELECTIVE SURGERY WITH AT LEAST TWO OPERATING THEATRES	Emergency and elective surgery with at least two operating theatres: with pediatric and adult gaseous anesthetic	Х	Χ					
ORTHOPEDIC/TRAUMA WARD	Orthopedic/trauma ward: for advanced orthopedic and surgical care, including burn patient management	Χ	Χ					
SHORT HOSPITALIZATION CAPACITY	Short hospitalization capacity (maximum 48 hours)	Х	Χ					
20 INPATIENT BED CAPACITY	20 Inpatient bed capacity: at least 20 inpatient bed capacity with 24/7 availability of medical doctors (MD), nurses and midwives, and 4–5 beds for short observation before admission, or 24/48-hour hospitalization	Х	Χ					
50 INPATIENT BED CAPACITY	50 inpatient bed capacity: with pediatric and ob-gyn wards with 24/7 availability of doctors and/or specialists (general surgeon, ob-gyn, pediatrician, others)		Χ					
INPATIENT CRITICAL CARE MANAGEMENT	Inpatient critical care management: with availability of mechanical ventilation, infusion pumps, and third-line emergency drugs	Х	Χ					
INTENSIVE CARE UNIT	Intensive care unit: with at least 4 beds	Χ	Χ					
Basic Laboratory	Basic laboratory: with general microscopy	X	Χ	Χ	Χ	Х		Χ
LABORATORY SERVICES SECONDARY LEVEL	Laboratory services secondary level	Х	Χ					Χ
LABORATORY SERVICES TERTIARY LEVEL	Laboratory services tertiary level: including electrolyte and blood gas concentrations, public health laboratory capacities	Х	X					X
BLOOD BANK SERVICES	Blood bank services		Χ					Χ
HEMODIALYSIS UNIT	Hemodialysis unit	X	Χ					
BASIC X-RAY SERVICE	Basic X-ray service: X-ray service (basic radiological unit) and ultrasound	Х	X	Χ	X			X
RADIOLOGY UNIT	Radiology unit: with X-ray with stratigraphy, intraoperation X-ray intensifier, ultrasound, MRI and/or CT scan	Х	X					
MEDICAL EVACUATION PROCEDURES	Medical evacuation procedures (medevac): means of transport and referral network for patients requiring highly specialized care		Χ					
PROCEDURES FOR MASS CASUALTY SCENARIOS	Procedures for mass casualty scenarios: Procedures in place for early discharge of post-surgery patients through referral to secondary hospitals, in mass casualty scenario		Х					

<sup>\*</sup> Other includes: Blood Bank Center - Branch (1), Blood Bank Center - Main (15), Central Public Health Laboratory (14), Chest and Respiratory Diseases Unit (30), Division of the Department of Public Health (1), Emergency Center (3), Forensic Medicine Center (15), Health Sector (125), Health insurance (2), Immediate First Aid Center (52), Immunodeficiency Center (2), Institute (2), Mobile Clinic (36), Mobile Team (230), Public Health Clinic (326), Tuberculosis Unit (1).

# Annex II: Population estimates

GOVERNORATE	DISTRICT	Population estimates
Anbar		1,963,346
	AL-Ka'lm	154,190
	AL-KALDIA	153,768
	Alkarma	174,683
	AMIRYA	168,819
	Baghdadi	40,481
	Falluja	371,995
	Haditha	127,617
	НЕЕТ	141,361
	Ramadi1	225,242
	Ramadi2	295,961
	Rатва	60,538
	Rawa-Ana	48,691
Babylon		2,288,456
	AL-Mahawil	247,692
	AL-MUSAYAB	399,383
	Hashimiya	571,533
	Hilla 1	491,357
	HILLA 2	428,659
	Котна	149,832
Baghdad-Karkh		3,815,810
	Abu Ghraib	436,127
	Adeel	271,415
	Alaamel	339,497
	Alealaam	430,167
	Dora	400,949
	Kadhmiya	760,512
	Karkh	355,912
	Mahmoudiya	387,193
	Tajee	265,751
	Tarmia	168,287
Baghdad-Resafa		5,190,191
	Adhamiya	249,129
	Al Estiqual	430,786
	AL RESAFA	238,749
	Mada'In	352,933
	ALNHRWAN	347,743
	Baghdad Aljedida	415,215
	BALADIAT 1	721,437
	BALADIAT 2	638,393
	SADDER CITY	1,188,554
	Sha'B	607,252

GOVERNORATE	DISTRICT	Population estimates
Basrah		3,223,158
	ABU AL-KHASEEB	315,869
	AL HARTHA	299,754
	Alder	145,042
	Al-Midaina	283,638
	AL-Qurna	196,613
	AL-ZUBAIR	654,301
	Basrah1	338,432
	Basrah2	425,457
	Basrah3	354,547
	SHATT AL-ARAB	209,505
Diwaniya		1,430,714
	Afaq	200,300
	AL-SHAMIYA	314,757
	Diwaniya 1	271,835
	Diwaniya 2	386,292
	Намzа	257,530
Diyala		1,814,368
	AL-KHALIS	290,299
	AL-Mansuriye	127,005
	Al-Muqdadiya	248,568
	Baladrooz	181,437
	Ba'Quba-First	381,018
	Baquba-Second	333,844
	Jalawlaa	168,736
	Khanaqin	83,461
Kerbala		1,350,577
	AL Hur	297,105
	AL-HINDIYA	310,645
	Husainya	162,060
	Kerbala	580,767
Kirkuk		1,770,765
	AL DIBIS	136,350
	Al-Hawiga1	180,450
	AL-Hawiga2	182,650
	Daquq	169,600
	Kirkuk1	544,865
	Kirkuk2	556,850
Missan		1,233,053
	Ali Al-Gharbi	96,959
	AL-MEJAR AL-KABIR	279,699
	Amara	664,468
	Qal'At Saleh	191,927

GOVERNORATE	DISTRICT	Population estimates
Muthanna		902,480
	AL-KHIDHIR	135,372
	AL-RUMAITHA	247,280
	AL-SAMAWA 1	182,300
	AL-SAMAWA 2	187,728
	Warka	149,800
Najaf		1,630,807
	Abbasia	139,584
	AL-Manathera	139,063
	Kufa	314,418
	Міѕнкав	154,152
	North Najaf	547,194
	South Najaf	336,396
Ninewa		4,133,536
	AL-BA'AJ	101,705
	Al-Hamdaniya	232,063
	AL-SHIKHAN	50,479
	Aymen	959,419
	Ayser	1,075,782
	Gayara	396,968
	Hatra	77,682
	Makhmur	123,247
	Sinjar	220,565
	Telafar	572,431
	Tilkaif	323,195
Salah al-Din		1,767,837
	AL-ALAM	118,262
	AL-Daur	61,770
	Aldhulloia	101,613
	AL-SHIRQAT	264,130
	Ваш	129,310
	Balad	186,781
	DIJEL	152,487
	Samarra	300,379
	Tikrit	265,125
	Tooz	187,980



GOVERNORATE	DISTRICT	POPULATION ESTIMATES
Thi-Qar		2,321,851
	Al-Dawaya	104,640
	AL FAJER	70,260
	Karmat Beni Saed	95,172
	AL-NASER	117,600
	AL-CHIBAYISH	120,600
	AL-ESLAH	49,951
	Alghiraf	144,540
	Al-Rifa'I	179,400
	AL-SHATRA	278,088
	Nassriya1	256,632
	Nassriya2	464,940
	Qalat Sekkar	113,112
	Saaddakhyil	54,816
	Suq Al-Shoyokh	272,100
Wassit		1,527,911
	Al-Hai	193,128
	Al-Na'Maniya	178,155
	Al-Suwaira	264,634
	Azizyia	255,620
	Кит1	328,806
	Кит2	307,568
Total		42,248,883

