

iCCM 2014

Action Points to Include in Country Plan

What Are our most critical priorities across thematic areas? how do they link to existing

- **HR - Gap-filling training for HEWs**– 1. Pre-service training in iCCM 2. In-service trainings for HEWs already deployed.
- **Supervision and Quality**- Explore m-Health for stock management, referral monitoring to determine what is best in Ethiopian context.
- Strengthen the primary health care unit (1 health center supervising 5 health posts).
- **Demand and Social Mobilization** – Educate the community about what “appropriate treatment” should be and where it can be found.
 - Strengthen CM-BCC (operational research, training, job aids, materials)
- **Innovations** - m-health for supervision, logistics to be initiated
- **Supply chain management**: Public private partnership- cola-life approach explore and test
- **Policy**: explore the admin of corticosteroid (clarify level)
- **Monitoring and evaluation: explore** m-health
- **Cost and cost effectiveness**: GAVI and GF resources to integrate iCCM (work on the concept paper and strategic plan)
Proper use of HEW time for health
- **iCCM for the newborn**: Revise our severe disease (sepsis) treatment protocol when the findings have been reviewed and final recommendations received. Expand Community Based Newborn Care Package as quickly as possible.
- **Private Sector** – Capacity building for the private sector staff on IMNCI. Encourage social marketing for some commodities. Local production of essential commodities.

ETHIOPIA Elfinesh Bekle, Hailemariam Legesse, Penny Dawson

What is achievable to in the next 6 months	in next year
<ul style="list-style-type: none">- Co-Packaging of ORS and Zinc- GF to integrate iCCM- Proper use of HEW time for health- Revise case management of YI protocol- Expansion of CBNC in the learning 7 zones- Capacity building of private medium clinic workers	<ul style="list-style-type: none">- Pre-service training HEW- m-health exploration- Educate the community about what “appropriate treatment” should be and where it can be found.- Starting the use of antenatal corticosteroid use to prevent premature lung complications- Starting distribution of chlorhexidine through HEWs- GAVI to integrate iCCM- Local production of essential drugs

What additional resources will need for each priority area?
<ul style="list-style-type: none">- Financial resource for expansion iCCM in the pastoralist areas- Financial and TA for the m-health for iCCM and CBNC- Additional resource for the national scale up CBNC- Financial and TA for local production of essential commodities amoxicillin DT and zinc DT,- Resource and TA to do operational research , capacity building and material production and distribution

iCCM 2014

Action Points to Include in Country Plan

What what are our next steps as a country to implement these nest steps ?

- Convening partners and building out action plans: Convene at the FMOH (TWG) and disseminate the outcome of the symposium
- Reporting back to Ministry of Health/Ministry of Finance

Summary statement on approach and next steps:

Although Ethiopia already has extensive experience in the implementation of iCCM and the introduction of Community based Newborn Care, we have learned about some new areas for further exploration and possible relevance to Ethiopia –e.g. m-health, social marketing (cola-life),public-private partnership which will help us to further strengthen our programs.