

National workshop on strengthening health system support for improving child health and nutrition

Tashkent, Uzbekistan March 17-18, 2009

RESOLUTION

Participants of the workshop on strengthening the health system support for improving child health and nutrition in Uzbekistan resolved that:

Considering this workshop to be timely and relevant, and reaffirming the significance of child nutrition as well as the implementation of integrated management of child illnesses (IMCI) in Uzbekistan as the prioritized strategy of basic child care on primary level of healthcare included in the government programmes of Uzbekistan,

Having conducted a review of the findings of the studies for assessment of the health system barriers in implementation of the IMCI, assessment of the infant feeding practices, and assessment of community activities,

Being aware of the importance of improving the awareness of the managers of healthcare system, the representatives of higher educational institutions, managers of programmes and partners on main issues related to child nutrition, management and quality of health services for children under 5 and community work relations,

Having identified the main barriers to providing health services for children and infant feeding practices, including quality improvement, enhancement of systematic control, monitoring, assessment, and utilization of the findings for making informed decisions by managers of different levels, drug supply, etc,

Having reached the agreement on the barriers influencing the implementation of integrated programs for improved child health and nutrition in Uzbekistan,

THE WORKSHOP PARTICIPANTS

- I. Recommend that the Ministry of Health and local authorities:
 1. Finalize the development of, approve, and implement national standards for providing health services to children under 5 (based on the IMCI strategy) on outpatient level. Include the following issues in the document:
 - Transfer table of IMCI classifications into the ICD 10;
 - Revision of records for examination of a sick child according to the IMCI standards (Form 112);
 - Unified indicators and mechanisms of assessment of the quality of health services for children;
 - List of essential medications (according to the IMCI clinical standards) for providing health services at outpatient level;
 - Standards of admissions of children before they are seen by a doctor (content of work to be conducted by nurses).

2. Conduct analysis and improvement of the monitoring tools of IMCI implementation. Conduct regular monitoring, analysis of the data received and discussion of the findings with all stakeholders.
3. Develop a statute on supportive supervision of the pediatric services (content, functions, level, tools, etc.)
4. Review the relevant policy and regulations involving key SES specialists to determine the provisions which are contradicting with evidence-based medicine.
5. Provide training for chief pediatricians/specialists responsible for management of child care, on the management foundations of child health and development programmes, using the WHO Guidelines on Managing Programmes to Improve Child Health, 2008 as the basis.
6. Include IMCI standards and nutrition of children of early age into attestation and licensing of primary healthcare workers, pediatricians, and management staff.
7. Determine the funding required for procurement of medications according to the supply standards of medications to provide health services for the children at the level of outpatient health services. Train/inform managers of outpatient health services about the importance and significance of the supply of drugs recommended by national IMCI policy.
8. Optimize the system of financial incentives of health workers by introducing indicators of the quality of health services.
9. Introduce an updated standard curriculum for pre-service training of health workers for all medical universities including modern standards of care for children. Introduce unified methods of monitoring and assessment of the quality of teaching at all universities nationwide.
10. Train the faculties of universities in the programmes on child health and nutrition. Provide universities with an adequate supply of updated learning materials
11. Conduct assessment of the quality of training for general practitioners and based on the assessment develop the programme to improve training standards.
12. Conduct assessment of the training for mid-level health workers on nutrition and health services for child population. Based on the findings of the assessment, prepare a plan of activities focused on implementation of modern technologies of child health services into pre- and post-diploma education of mid-level health workers.
13. Ensure that medical universities and colleges are informed in a timely manner about the changes in healthcare policies.
14. As soon as possible set up a working group under MoH for development and pilot-testing of national recommendations on complementary feeding. The key specialists from the Paediatric Institute, departments of nutrition, hygiene and department of pediatrics of Tashkent Medical Academy, Tashkent Pediatric Medical Institute, Tashkent Institute of Postgraduate Education, Sanitary Epidemiological Service, Institute of Health, international organizations and nongovernmental organizations to be included in the working group. The following objectives should be set for the working group:
 - Development and testing of national recommendations on complementary feeding of infants and young children based on WHO recommendations;
 - Include the feeding recommendations of infants and young children based on WHO recommendations into the prikaz # 145;

- Development of draft domestic food fortification programme (sprinkles) for infants and young children based on the review of experience of other countries;
- Development of information and educational materials (guidelines, booklets, banners, video-clips) based on rational nutrition of infants and children in early age;
- Regularly update feeding recommendations for infants and young children incorporating new international data based on the principles of evidence-based medicine;
- Coordinate and submit the issues of nutrition of infants and children in early age to the Steering Committee on Nutrition under the Cabinet of Ministers;

15. Ban the advertisement of commercial baby food products by health workers; conduct monitoring of child feeding corners at child care facilities;

16. Spearhead the issue of marketing and promotion of commercial complementary food for infants and young children to the Steering Committee on Nutrition under the Cabinet of Ministers;

17. Promote active involvement of the health centres, nongovernmental organizations, communities, local authorities, and the media in the efforts on feeding and improving the health of children in families and communities utilizing inter-sectoral approach with the involvement of health, educational, cultural, and information sectors.

2. Appeal to the MoH, based on the recommendations of the workshop, to draft and send an appropriate report to the workshop participants, stakeholders, and organizations, informing them of the decisions of this workshop to develop a detailed plan for integration of IMCI strategy at all levels by prioritized areas, envisaging strengthening of the critical aspects of the health system.