Governorates which have started implementing IMCI
Districts which have started implementing IMCI
Health facilities implementing IMCI Graphs
Health providers trained in IMCI
IMCI case management training courses conducted
INTRODUCTION PHASE
IMCI strategy endorsed by the Minister of Health
2002
IMCI focal point appointed
January 2003
National IMCI orientation meeting held

Establishment of a national IMCI working group and task force

WHO EMRO | Implementation of IMCI in Jordan

July - August 2004
Situation analysis of health facilities and community-based initiatives
October 2004
EARLY IMPLEMENTATION PHASE
Adaptation of IMCI clinical guidelines and training materials: draft completed
January 2005
Establishment of IMCI community working group May 2005
EXPANSION PHASE
Expansion to new districts and governorates 2006
IMCI training
Targeted coverage of providers at health facility

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Course duration

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Materials

Targeted coverage of providers at health facility

Physicians and nurses at Primary Health Care (PHC) facilities are targeted for training.

Course duration

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Physicians: 11-day courses

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Nurses: 5 days (planned)

Materials

Different training materials to be used for physicians and nurses, to reflect their different responsibilities. Materials for nurses not yet developed.

National training courses with the Jordan adaptation of IMCI guidelines and materials will start once the adaptation process is completed. A total of 9 physicians have attended training courses in IMCI case management (see graph) outside the country, as of the end of 2005, to build national capacity. Top

1.

Selection of districts for IMCI implementation

2.
Situation analysis and preparation of health facilities
Systematic approach to IMCI implementation at district level: key steps and
tools
1. Selection of districts for IMCI implementation
1.
Interest in the IMCI strategy
2.
Availability of recent information on the health situation in the district
3.
Presence of health facilities with high/moderate caseload and regular drug supply
4.
Access of PHC facilities to referral facilities
5.
Easy accessibility to the central team for follow-up
Lady addeddismity to the dentral team for follow up
2. Situation analysis and preparation of health facilities
1.
Review of drug supply and availability at the health facility pharmacy, to ensure that all essentia drugs required for IMCI are available

2.

Organization of work and arrangement of flow of patients in line with the IMCI tasks

3.

Assessment of health provider's case management practices for the sick child and approach to the healthy child $\underline{\mathsf{Top}}$

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