

Never put off till
tomorrow what can be
done today





Primary Health Care

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World Health
Organization

Lecture objectives

Levels of care

Primary Health Care

Referral system

Alma Ata Declaration

- is an international declaration on improving health through comprehensive primary health care. It was adopted by WHO member states at the International Conference on Primary Health Care held at Alma Ata, Kazakhstan in 1978.

ALMA ATA DECLARATION

1. Health is a fundamental human right.
2. The existing gross inequality in the health status of the people is politically, socially and economically unacceptable.
3. Economic and social development is of basic importance to the fullest attainment of health for all and to the reduction of the gap between the health status of the developing and developed countries.
4. The people have the right and duty to participate individually and collectively in the planning and implementation of their health care.

Provision of Health Care for The Community

Health has been declared as
a fundamental human right
(UN)

- Everyone has the right to
standard of living.

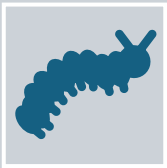
- Motherhood and childhood
are entitled to special care and
assistance.

- National governments all over
the world are of their people.

Criticisms Against Health Care Services Especially in Developing Countries



- Predominantly urban oriented.



- Mostly curative in nature.



- Inaccessible for most of the population.

N.B:



1- The present concern in both developed and developing countries is not only to reach whole population with adequate health care services , but also to secure an **acceptable level** of health for all.



2- This can be achieved through the application of *Primary Health Care Program*.

3- **Health services** are designed to meet health needs of the people through proper use of available knowledge and resources .

Two basic issues in health care delivery to be considered

1. **Health services** should be organized to meet needs of entire population and not merely selected groups,
2. **Covering full range of:**
 - Preventive,
 - Curative
 - Rehabilitative Services.

- Provision of health care to vast majority of **underserved** rural and urban poor is through Developing Effective Primary Health Care services supported by an appropriate Referral System

Levels of Health Care services

Health services for individuals or for the community as a whole are **3 levels** :-

Primary care level.

Secondary care level.

Tertiary care level.

Effective health care services need a **powerful referral** system **to organize services** between these 3 levels.

This should be :-

1. **Well Organized:** Well-defined pathways and guidelines for referrals.
 2. **Efficient:** Quick and streamlined processes for patient transfers.
 3. Competent:
 4. Respectable
-

1. Primary Care Level

- It is **the 1st level of contact** between individuals, family and community with the national health services.
- Primary health care or essential health care is provided through this level.

1. Primary Care Level



- It is very close to people nearby their residential places.



- Most of health problems can be dealt with and solved as its early pre-complicated stages.



- (PHC facilities).

2- Secondary care level



It is the next higher level of care.-



-Mildly and moderately complicated health problems are referred from primary level.



- (District hospitals).

3.Tertiary care level :

- It is a specialized , highly technical level of care.
- It includes diagnosis and treatment of disease and disability.
- Specialized intensive care units, advanced diagnostic support services and highly specialized personnel are available.

3.Tertiary care level :



-It offers highly centralized care to pop. of a large region or whole country.



- Central or Governorate level .



- E . g . : - Specialized hospitals.



- Specialized health institutes.



- University hospitals.

Referral System



- Necessary for proper function of health care system.



- Should be a two – way exchange of information and returning patients to those who referred them for follow – up of care.



- This will ensure continuity of care and encourage confidence of consumer in system.

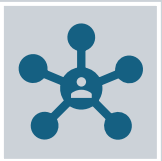


- It is very weak or not practically existent.

Referral System



Effective referral requires clear communication.



Referral form is designed to facilitate communication in both directions.

Primary Health Care (PHC)

Definition: It is essential health care made Accessible to individuals and families by means Acceptable to them, through their Full participation and at a cost the community and the country can Afford.

Primary Health Care (PHC)

It is the **first contact** between health system and population served.

It is the **first element** of a continuing health care process.

Primary Health Care (PHC)

It includes
the following:

**Health
promotion**

**Illness
prevention**

**Care of the
sick**

Advocacy

**Community
development**

Primary health care

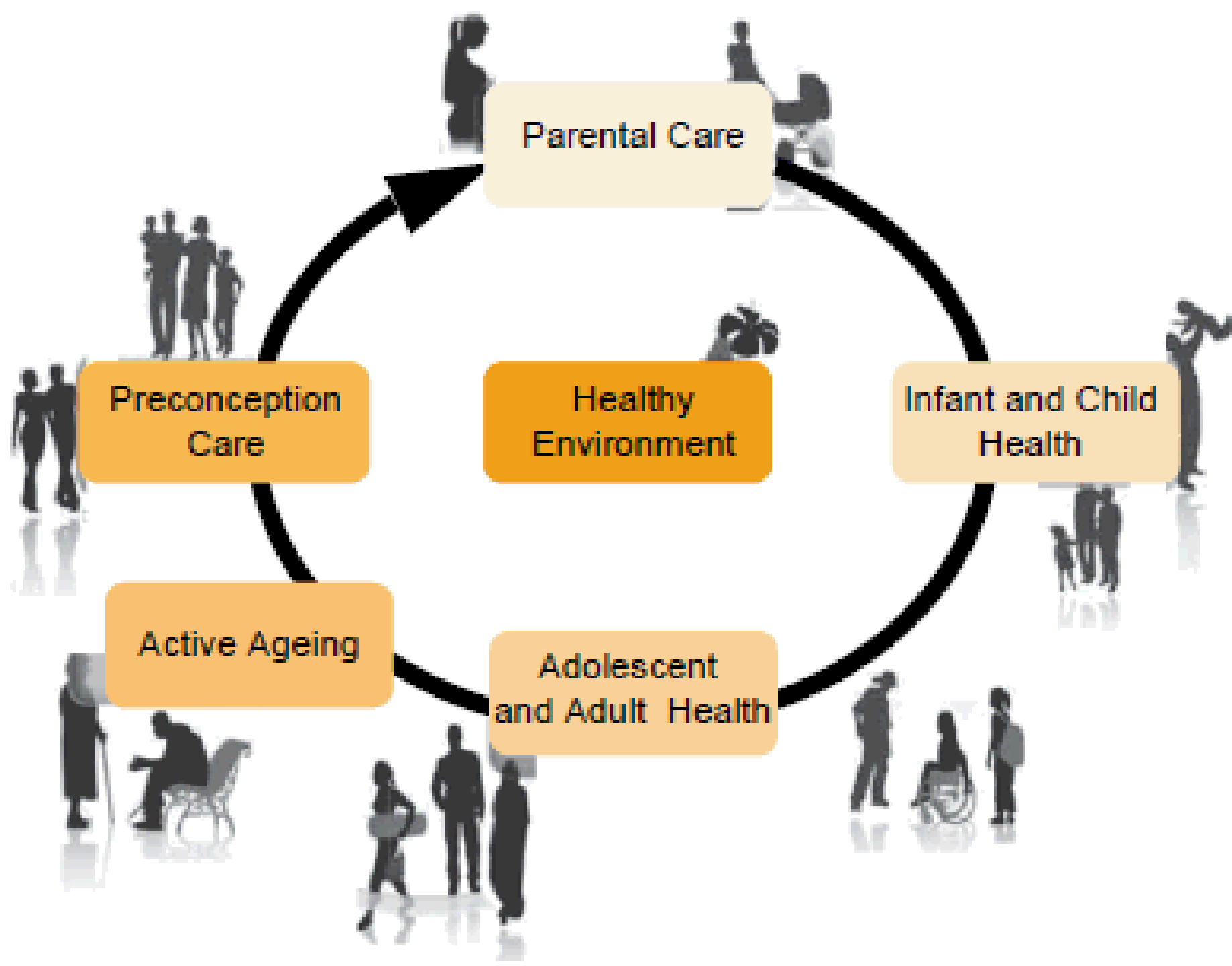
Total health care of:

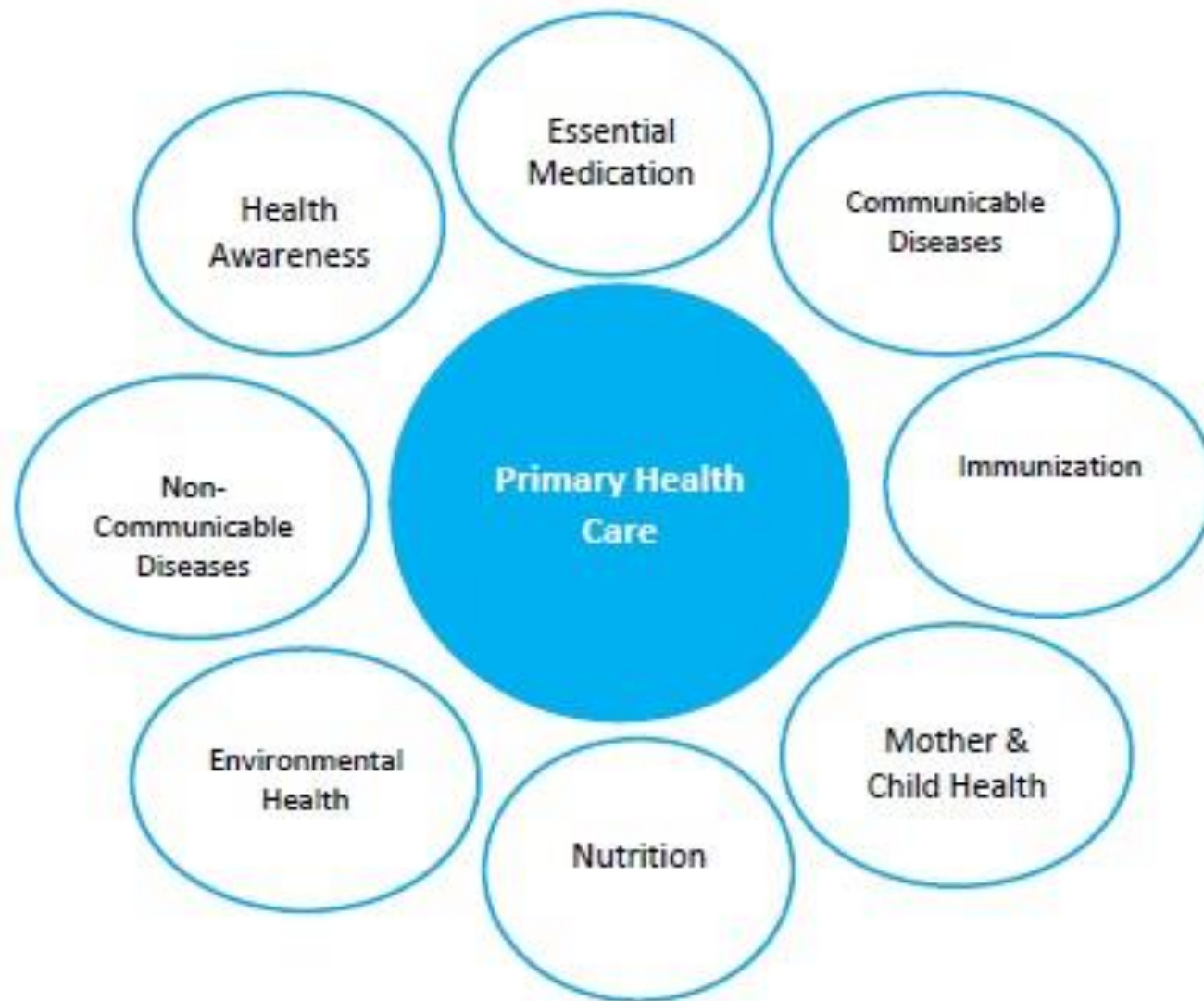
- Individuals,
- Families,
- Communities,

Extending to investigation and management of:

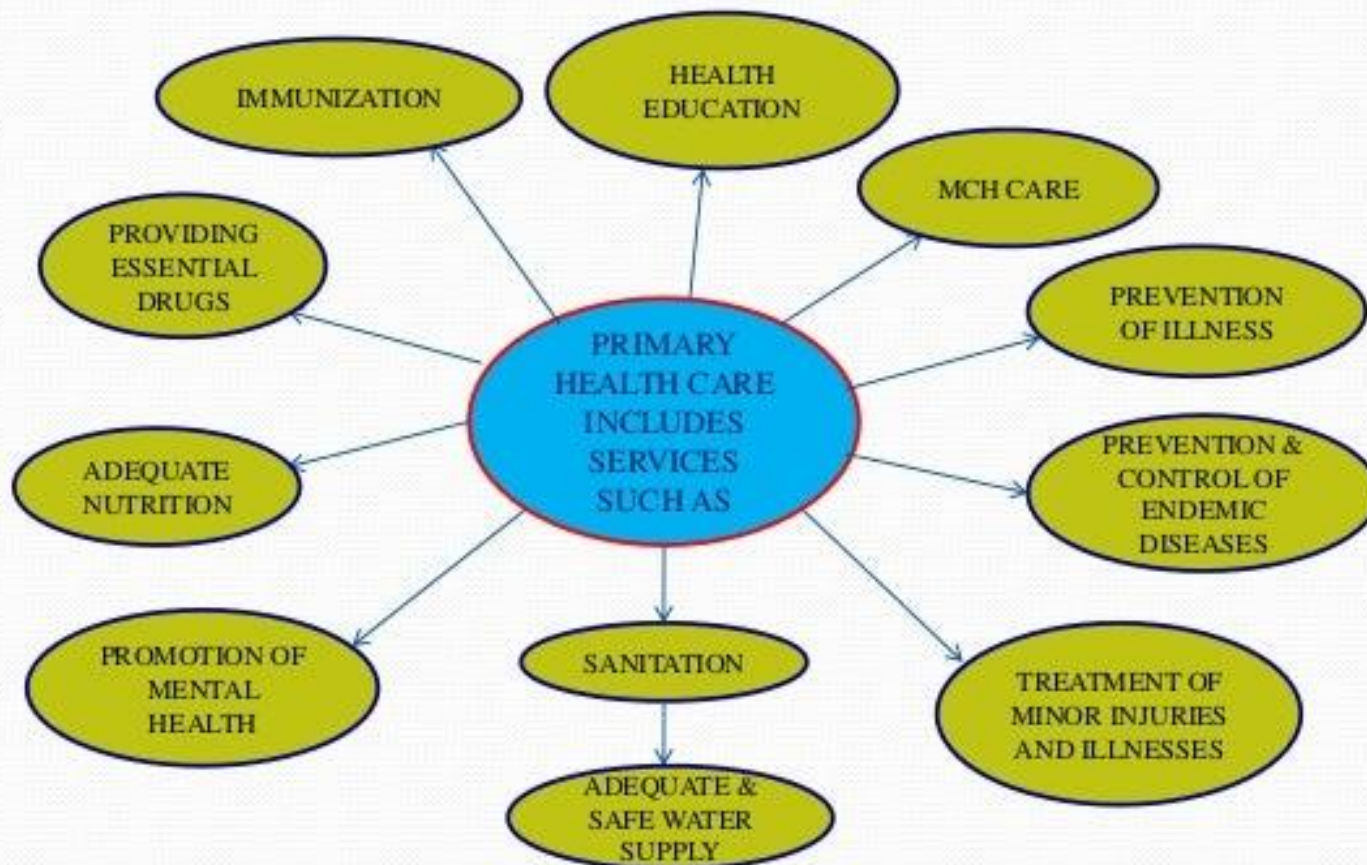
- Physical,
- Social
- Cultural

environment of beneficiaries which would also include primary medical care .





Elements



Elements of PHC

1. Education concerning prevailing health problems (P&C):

Aim: To empower individuals and communities with knowledge about health and disease prevention.

- Teaching proper hygiene practices (e.g., handwashing, safe food handling).
- Raising awareness about infectious diseases
- Promoting healthy lifestyles (e.g., balanced diet, regular exercise).

2- Promotion of food supply and proper nutrition.

Aim: To ensure access to adequate and nutritious food for all.

- Programs to combat malnutrition (e.g., micronutrient supplementation).
- School feeding programs to improve child nutrition.
- Promoting breastfeeding and proper infant feeding practices.

Elements of PHC

3- An adequate supply of safe water and basic sanitation.

Aim: To prevent waterborne diseases and improve public health.

- Building and maintaining water supply systems.
- Promoting proper waste disposal and sanitation practices.
- Educating communities on water purification methods

4- Maternal and child health care, including family planning.

Aim: to improve health outcomes for mothers and children.

- Antenatal and postnatal care services.
- Immunization programs for children (e.g., polio, measles).
- Family planning and reproductive health services.



Elements of PHC

5- Immunizations against the major infectious diseases.

Aim: To prevent vaccine-preventable diseases.

- National immunization schedules (e.g., hepatitis B, diphtheria).
- Outreach programs to reach underserved populations.
- Surveillance systems to monitor vaccine coverage and disease outbreaks.

6- Prevention and control of locally endemic diseases.

- Establishing disease surveillance systems.
 - Training healthcare workers to recognize and report cases.
 - Vector control programs (e.g., malaria, dengue).
-

Elements of PHC

7- Appropriate treatment of common diseases and injuries.

Aim: the provision of evidence-based, cost-effective, and culturally acceptable healthcare services for common illnesses and injuries.

- Use of standardized treatment protocols (e.g., WHO guidelines).
- Prescribing appropriate medications (e.g., antibiotics for bacterial infections).

8- Provision of essential drugs (for common prevailing diseases.

Aim: To ensure availability and affordability of basic medications.

- Establishing a list of essential medicines.
- Ensuring supply chain management for medicines.
- Providing free or subsidized medications for low-income populations.

PHC features (A horizontal multi-problem approach)

1- Reflects and evolves from economic, socio-cultural and political characteristics of the country and its communities and is **based on** the application of the relevant results of **social, medical and health services**.

2- **Addresses the main health problems in the community**, providing promotive, preventive, curative and rehabilitative services

PHC features

(A horizontal multi-problem approach)

3- **PHC includes at least eight elements.**

4- **PHC involves inter-sectoral cooperation of all related sectors at the national, regional and local levels in particular:-**

- ✓ Agriculture.
- ✓ Animal Husbandry.
- ✓ Food.
- ✓ Industry.
- ✓ Education.
- ✓ Housing.
- ✓ Public Works.
- ✓ Communication.
- ✓ Other Sectors.

PHC features (A horizontal multi-problem approach)

5-Community participation and mobilization of society for active community involvement and self-reliance, making the maximum use of local, national and other available resources.

PHC features (A horizontal multi-problem approach)

6- Should be sustained and supported by integrated, functional and mutually supportive system leading to:-

- progressive improvement of comprehensive health care for all.
- giving priority to those most in need.

PHC features (A horizontal multi-problem approach)

7- PHC is run by a health team.

Health team: Group of personnel who work together in cooperation and harmony to provide health services.

PHC Team

1- Medical personnel

- Qualified GP.
- Pharmacist.
- Dentist.

2. Paramedical personnel.

- Qualified nurse (s)
- Nurse- midwives.
- Health visitor.
- Laboratory technician.
- X-ray technician .
- Rehabilitation technician.

PHC Team

3- Health – related personnel.

- Social workers.
- Sanitarian (H . Inspector)
- Food inspector.

4- Others.

- PHC clerk.
- Security workers.
- Cleaning workers.

PHC Facilities

(Places where PHC services are provided)

Urban areas :

- PHC centers.
- MCH centers.
- Family health centers.

Rural areas :

- Rural h. Centers.
- Rural h. units.
- Combined units.
(Family h. unit.+ Rural h. unit)
- Rural h. hospital.
- Integrated hospitals and mobile clinics.

Principles (Standards) of PHC

1- Accessibility :-

a- Geographical: (5-15 minute walking 1 hour of travel)

b- Social: reflects acceptability.

c- Functional: right kind of care is available on continuous basis for right kind of need .

d- Financial: being affordable.

Principles (Standards) of PHC

2- Affordability:-

- People can pay cost.
- i.e services are to be provided within the available resources or within purchasing power of individuals and community to the PHC services.

3- Acceptability:-

- Measured by utilization.
- i.e good quality of PHC services that meets requirements of approved standards.

4- Equity

Equitable distribution of health services.

Health services must be shared by all people irrespective of their abilities to pay “ rich or poor or urban or rural”.

5. Appropriate technology:-

Scientifically sound.

Acceptable to those who apply it and for those whom is used .

Criteria for appropriateness include:-

- sensitivity .
- cost.
- easy to use and maintain.
- culturally acceptable.
- capable of being adapted
- further development locally.

6- Multispectral or inter-sectorial coordination approach:

There must be cooperation in planning between different sectors to avoid duplication of activities.

7-Community participation:-

There must be continuing effort to secure meaningful involvement of the community in

1. planning,
 2. implementing and
 3. maintenance of health services,
- beside maximum reliance on local resources such as manpower, money and materials.

8- Support from higher levels of care.

Orientation of different kind of hospital
“district – general – specialized –
educational“ towards PHC

so as to share the social goal of **making
essential health services available to
all.**

Also, referral system is established.

9- Instruments in delivery of PHC.

- Community survey and diagnosis.

- Family health record.

- Team approach.

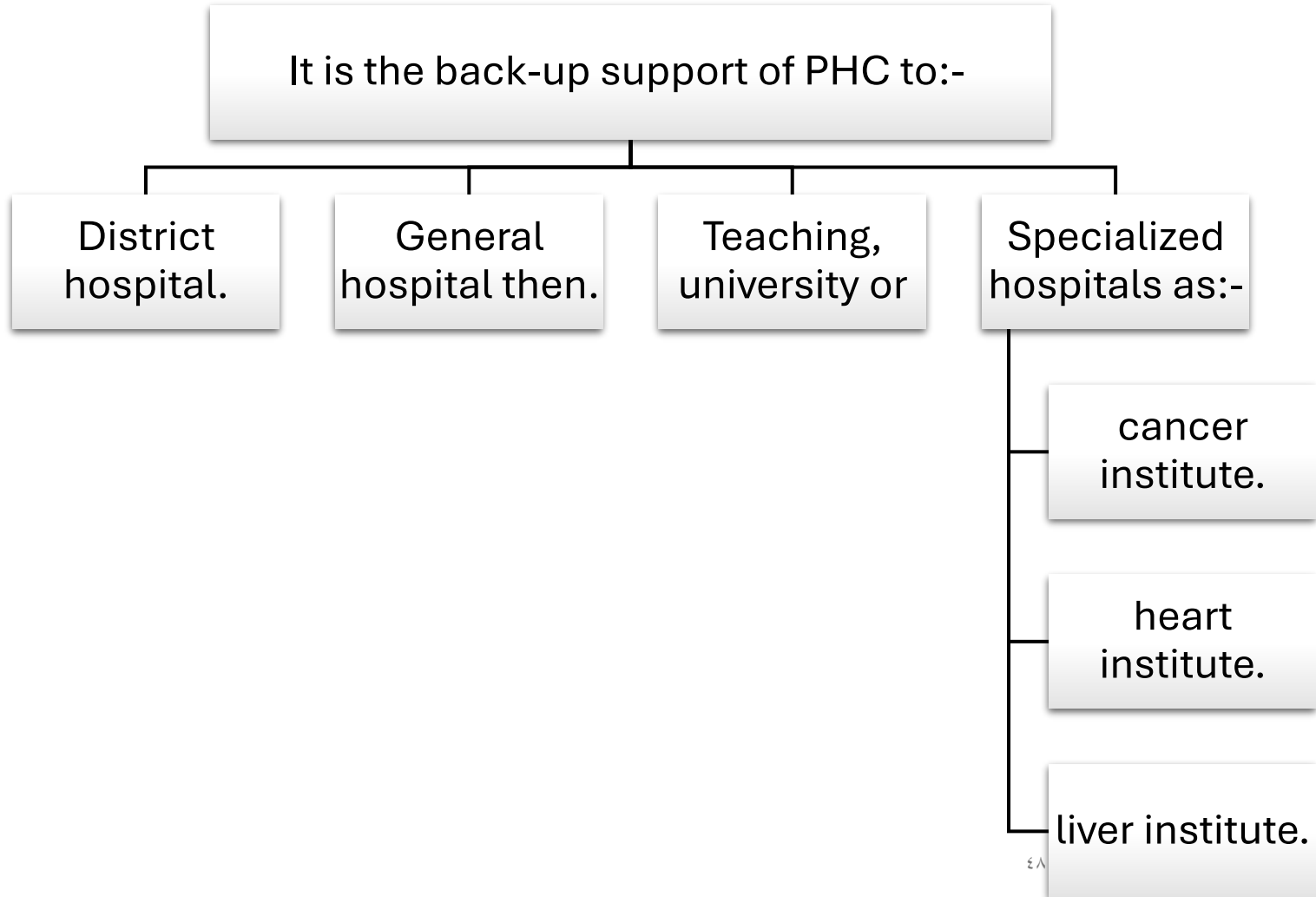
- PHC information system to be linked with other levels of health information system.

N.B: To fulfill principles and meet characteristics of PHC
workers have to :-

1. Assess community health needs.
2. Understand the community.
3. Know how to work and mobilize community.

In order to get them involved in PHC activities and achieve self-reliance.

Referral system



Referral system

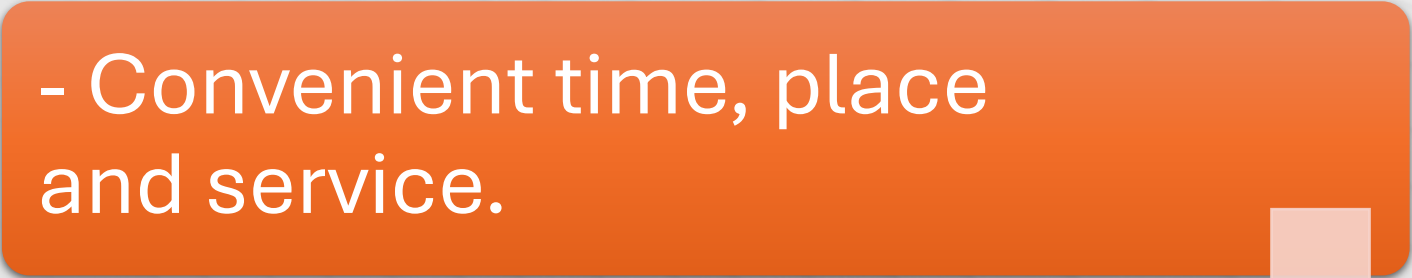
Cases in need of :

- Specialized Medical Consultation.
- Investigation.
- Treatment
- Hospitalization

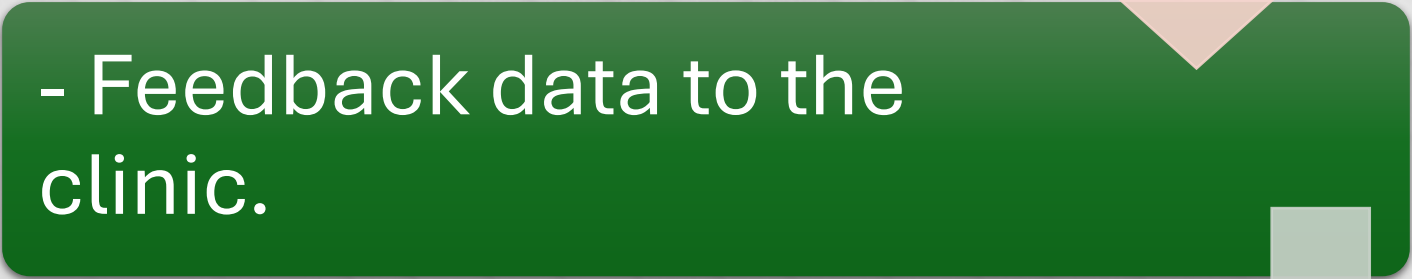
are referred by PHC physician.

Requirements of efficient referral system:

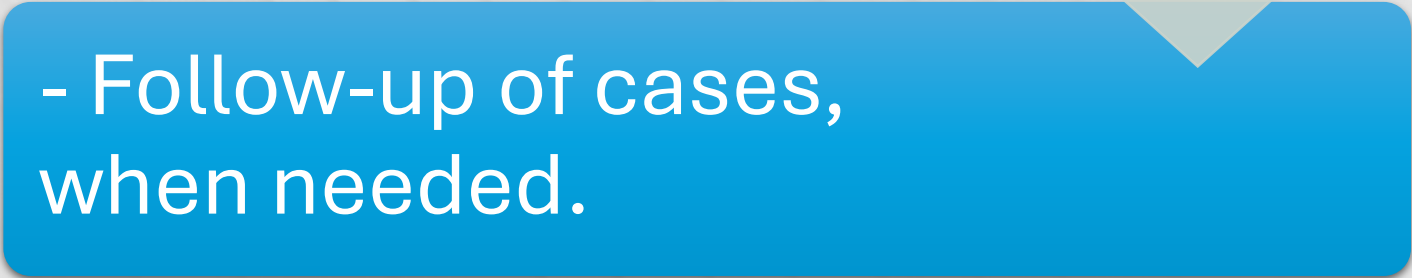
- Convenient time, place and service.

An orange rounded rectangular box containing the text '- Convenient time, place and service.' A light orange arrow points downwards from the bottom right corner of this box towards the top right corner of the green box below it.

- Feedback data to the clinic.

A green rounded rectangular box containing the text '- Feedback data to the clinic.' A light green arrow points downwards from the bottom right corner of this box towards the top right corner of the blue box below it.

- Follow-up of cases, when needed.

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Resources of PHC

Manpower:

- Human resources (personnel of health team).

Equipment:

- drugs,
- 1st aid and emergency requirements,
- records, files and file-keeping system.

Place:

- centers,
- units,
- outpatient clinics.

PHC Programs

Maternal health care

Child health care

School health care

Reproductive health care

Occupational health care

Geriatric health care



Thank you all