



# HeRAMS Gaza

## SNAPSHOT SEPTEMBER 2024

Field hospitals

### HOSPITAL STATUS\*



2  
0  
1

Partially damaged  
Fully damaged  
Not applicable



2  
0

Partially damaged  
Fully damaged



4  
3  
0

Partially functioning  
Non-functioning  
Fully damaged

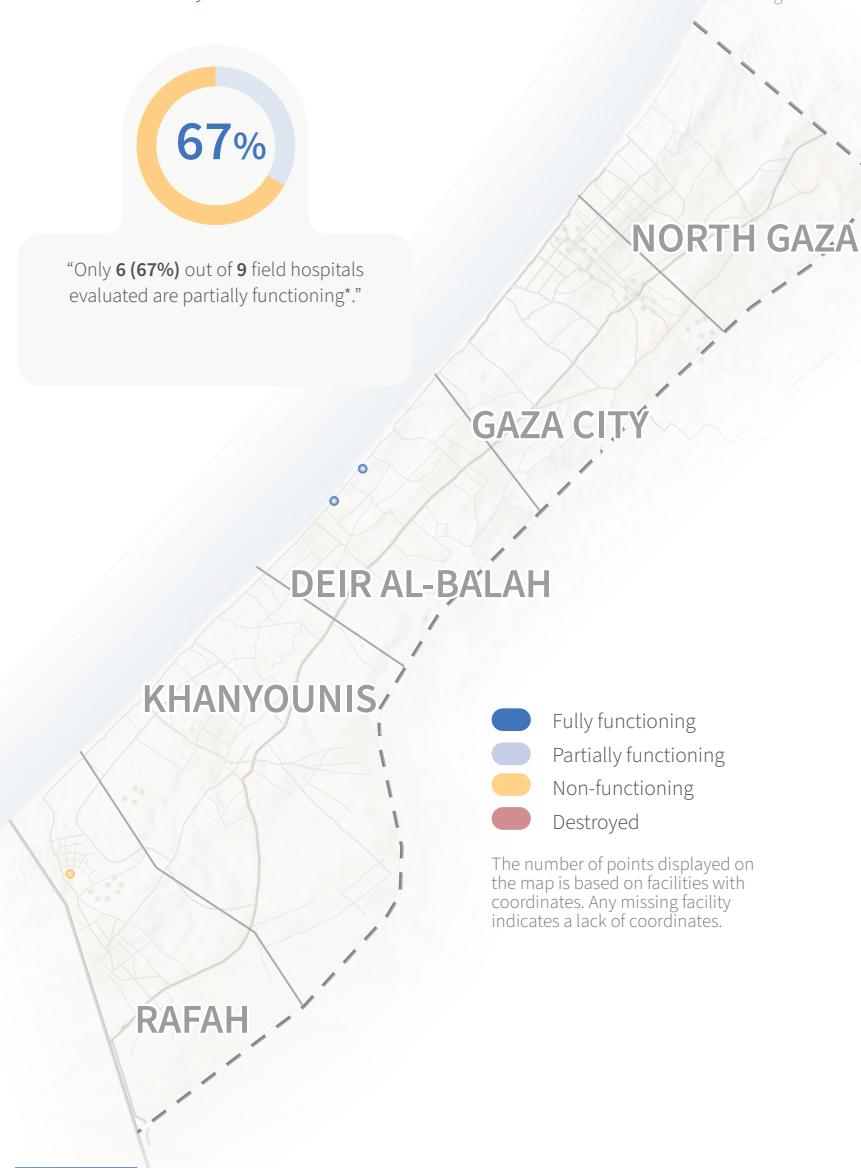


5  
0  
3

Partially accessible  
Inaccessible  
Destroyed/non-functioning



"Only 6 (67%) out of 9 field hospitals evaluated are partially functioning\*."



\* Hospitals reported as destroyed are considered non-functioning and are excluded from the functionality assessments.

\*\* Five functioning reporting entities have opted not to share their data in compliance with data privacy laws enforced by their respective NGOs or were unable to provide information beyond the hospital status section. This restriction is in place to protect sensitive information and adhere to organizational policies on data confidentiality. Consequently, while these entities do exist and provide health services, their data has not been included in this report.

### MAIN CAUSES OF...

#### Building damage

The primary cause for building damage as reported by 2 partially damaged field hospitals.



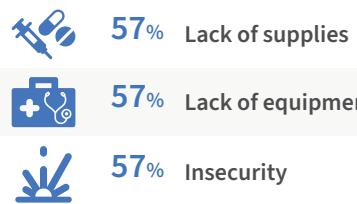
#### Equipment damage

The primary cause for equipment damage as reported by 2 partially damaged field hospitals.



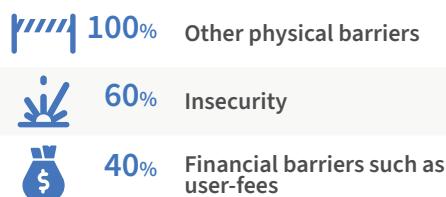
#### Functionality constraints

The 3 primary causes for functionality constraints as reported by 4 partially functioning and 3 non-functional field hospitals.



#### Accessibility constraints

The 3 primary causes for accessibility constraints as reported by 5 partially accessible field hospitals.



#### Partner Support

Major support  
Partial support  
No support



##### Partner support types

Out of 5 field hospitals supported by partners.



# BASIC AMENITIES\*

● Available ● Partially available ● Not available ● Not normally provided

## Inpatient bed capacity

### Availability



Out of 3 field hospitals expected to provide intensive care beds 1 (33.3%) do not have sufficient bed capacity.



Out of 3 field hospitals expected to provide maternity beds 2 (66.7%) do not have sufficient bed capacity.



Out of 6 field hospitals expected to provide inpatient beds 2 (33.3%) do not have sufficient bed capacity.



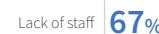
Out of 3 field hospitals expected to provide incubators 1 (33.3%) do not have sufficient bed capacity.



Out of 5 field hospitals expected to provide emergency beds 2 (40%) do not have sufficient bed capacity.

### Main barriers\*

Out of the 3 field hospitals where inpatient bed capacity is not available up to standards.



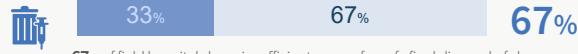
## Waste management

### Waste segregation



67% of field hospitals have insufficient means to follow proper waste segregation practices.

### Final disposal of sharps



67% of field hospitals have insufficient means for safe final disposal of sharps.

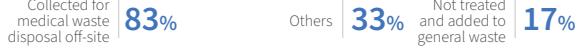
### Final disposal of infectious waste



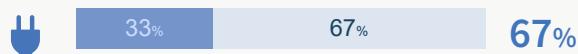
67% of field hospitals have insufficient means for safe final disposal of infectious waste.

### Waste disposal methods

Out of the 12 field hospitals where final disposal of sharps or infectious waste are at least partially available.



## Power



67% of field hospitals have insufficient or unreliable power available.

### Power sources

Out of the 6 field hospitals where power is at least partially available.



## Cold chain



50% of field hospitals have insufficient cold chain capacity.

### Cold chain sources

Out of the 4 field hospitals where cold chain is at least partially available.



## WASH

### Water



67% of field hospitals have insufficient water available.

### Main water sources

Out of the 6 field hospitals where water is at least partially available.



### Sanitation facilities



67% of field hospitals have insufficient improved sanitation facilities.

Out of the 4 field hospitals where sanitation facilities are at least partially available.

### Sanitation facilities types\*



### Sanitation facilities accessibility\*

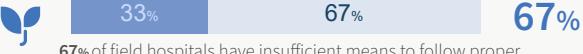


### Hand hygiene



50% of field hospitals have insufficient means to follow proper hand hygiene practices.

### Environmental cleaning



67% of field hospitals have insufficient means to follow proper environmental cleaning practices.

## Personal Protective Equipment (PPE)



67% of field hospitals have insufficient personal protective equipment.

## Communication



67% of field hospitals have insufficient means of communication.

### Communication equipment types

Out of the 6 field hospitals where communication is at least partially available.



## Transportation of patients



33% of field hospitals have insufficient means for patient transportation.

### Transportation types

Out of the 5 field hospitals where transportation of patients is at least partially available.



## Health Information Management Systems

### Facility-based diseases reporting systems



Not available up to standard in 60% of field hospitals.

### Facility-based information system



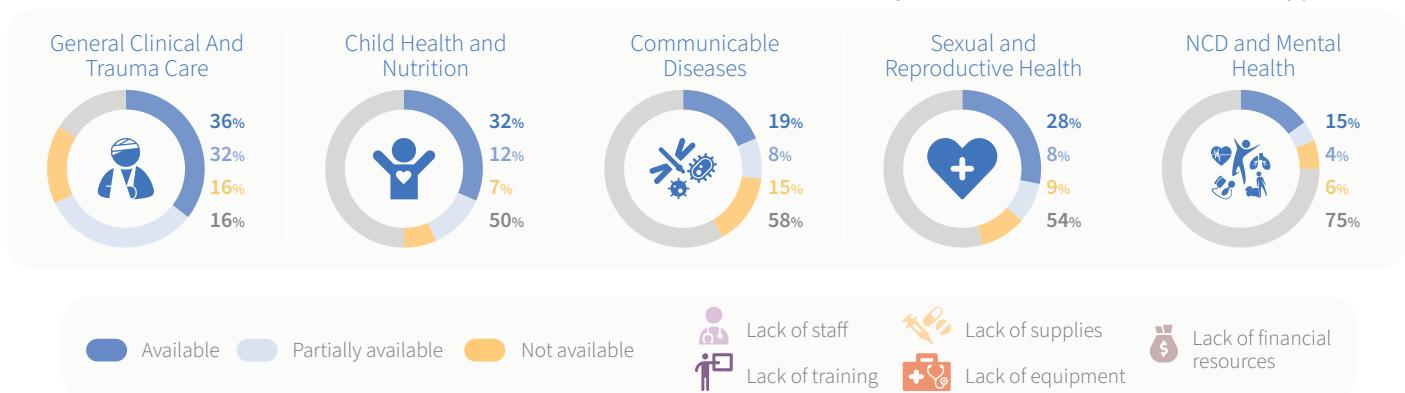
Not available up to standard in 67% of field hospitals.

\* Out of 6 field hospitals, those reported as destroyed, non-functioning, or inaccessible are considered unable to provide health services in their current state and are therefore excluded from this section as reporting ends upon confirmation of their inability to provide any health services.

# ESSENTIAL HEALTH SERVICES\*

## Service Domain Overview

● Available ● Partially available ● Not available ● Not normally provided



## General Clinical And Emergency Care Services

Recognition of danger signs	80%	20%	100% 100% 100%	Acuity-based formal triage	50%	50%	100% 100% 67%
Not available up to standard in 1 (20%) out of the 5 field hospitals expected to provide the service.				Not available up to standard in 3 (50%) out of the 6 field hospitals expected to provide the service.			
Initial syndrome-based management at scene	67%	33%	100% 100% 50%	WHO Basic Emergency Care	80%	20%	100% 100% 100%
Not available up to standard in 2 (33.3%) out of the 6 field hospitals expected to provide the service.				Not available up to standard in 1 (20%) out of the 5 field hospitals expected to provide the service.			
Advanced Syndrome-based management	60%	40%	50% 50%	Monitored referral	67%	33%	100% 100% 50%
Not available up to standard in 2 (40%) out of the 5 field hospitals expected to provide the service.				Not available up to standard in 2 (33.3%) out of the 6 field hospitals expected to provide the service.			
Referral capacity	67%	17%	17%	Acceptance of referrals	33%	33%	100% 100% 75%
Not available up to standard in 2 (33.3%) out of the 6 field hospitals expected to provide the service.				Not available up to standard in 4 (66.7%) out of the 6 field hospitals expected to provide the service.			
Acceptance of complex referrals	25%	25%	50%	Essential services primary health care	50%	50%	100% 50% 50%
Not available up to standard in 3 (75%) out of the 4 field hospitals expected to provide the service.				Not available up to standard in 2 (50%) out of the 4 field hospitals expected to provide the service.			
Specialized services at primary health care	40%	60%	100% 67% 67%	Home visits			
Not available up to standard in 3 (60%) out of the 5 field hospitals expected to provide the service.				Not expected in any operational field hospital.			
Minor trauma definitive management	40%	60%	100% 67% 33%	Emergency Department	50%	33%	17%
Not available up to standard in 3 (60%) out of the 5 field hospitals expected to provide the service.				Not available up to standard in 3 (50%) out of the 6 field hospitals expected to provide the service.			
Inpatient surgery ward with atleast one operating theater	67%	17%	17%	Inpatient surgery ward with at least two operating theatres	20%	20%	60%
Not available up to standard in 2 (33.3%) out of the 6 field hospitals expected to provide the service.				Not available up to standard in 4 (80%) out of the 5 field hospitals expected to provide the service.			
Burns treatment	75%	25%	100% 75% 50%	Orthopedic/ trauma ward	33%	33%	33%
Not available up to standard in 4 (100%) out of the 4 field hospitals expected to provide the service.				Not available up to standard in 4 (66.7%) out of the 6 field hospitals expected to provide the service.			
20 Inpatient bed capacity	67%	33%	100% 100% 50%	50 inpatient bed capacity	17%	83%	60%
Not available up to standard in 2 (33.3%) out of the 6 field hospitals expected to provide the service.				Not available up to standard in 5 (83.3%) out of the 6 field hospitals expected to provide the service.			
Inpatient critical care management	17%	50%	33%	Intensive care unit	40%	20%	40%
Not available up to standard in 5 (83.3%) out of the 6 field hospitals expected to provide the service.				Not available up to standard in 3 (60%) out of the 5 field hospitals expected to provide the service.			
Basic laboratory	50%	50%	100% 100% 33%	Secondary laboratory services	83%	17%	50%
Not available up to standard in 3 (50%) out of the 6 field hospitals expected to provide the service.				Not available up to standard in 6 (100%) out of the 6 field hospitals expected to provide the service.			

\* Out of 6 field hospitals, those reported as destroyed, non-functioning, or inaccessible are considered unable to provide health services in their current state and are therefore excluded from this section as reporting ends upon confirmation of their inability to provide any health services.

Available

Partially available

Not available



Lack of staff



Lack of supplies



Lack of financial resources

Lack of training

Lack of equipment

### Laboratory services tertiary level

67% 33%

Not available up to standard in **6 (100%)** out of the **6** field hospitals expected to provide the service.

### Hemodialysis unit

50% 50%

Not available up to standard in **2 (100%)** out of the **2** field hospitals expected to provide the service.

### Radiology unit

67% 33%

Not available up to standard in **3 (100%)** out of the **3** field hospitals expected to provide the service.

### Blood bank services

25% 25% 50%

Not available up to standard in **3 (75%)** out of the **4** field hospitals expected to provide the service.

### Basic X-ray service

60% 40%

Not available up to standard in **2 (40%)** out of the **5** field hospitals expected to provide the service.

### Procedures for mass casualty scenarios

67% 33%

Not available up to standard in **2 (33.3%)** out of the **6** field hospitals expected to provide the service.

## Child health and nutrition services

### Pediatric first aid

50% 33% 17%

Not available up to standard in **3 (50%)** out of the **6** field hospitals expected to provide the service.

### Integrated Management of Newborn and Childhood Illnesses (IMNCI)

67% 33%

Not available up to standard in **1 (33.3%)** out of the **3** field hospitals expected to provide the service.

### IMNCI Under 5 Clinic

75% 25%

Not available up to standard in **1 (25%)** out of the **4** field hospitals expected to provide the service.

### Management of children classified as severe or very severe diseases

60% 40%

Not available up to standard in **2 (40%)** out of the **5** field hospitals expected to provide the service.

### Inpatient surgical care for newborns and children

33% 33% 33%

Not available up to standard in **2 (66.7%)** out of the **3** field hospitals expected to provide the service.

### Infant, Young, and Child Feeding

100%

Available up to standard in all **2** field hospitals expected to provide the service.

### Integrated management of acute malnutrition

100%

Available up to standard in all **2** field hospitals expected to provide the service.

### Growth monitoring

67% 33%

Not available up to standard in **1 (33.3%)** out of the **3** field hospitals expected to provide the service.

### Stabilization center for severe acute malnutrition

100%

Available up to standard in all **1** field hospital expected to provide the service.

## Communicable Diseases

### Syndromic surveillance

50% 25% 25%

Not available up to standard in **2 (50%)** out of the **4** field hospitals expected to provide the service.

### Event-based surveillance

67% 33%

Not available up to standard in **1 (33.3%)** out of the **3** field hospitals expected to provide the service.

### Diagnosis and treatment of tuberculosis (TB) cases

100%

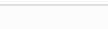
Not available up to standard in **1 (100%)** out of the **1** field hospital expected to provide the service.

### Multidrug-resistant TB (MDRTB)

Not expected in any operational field hospital.

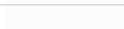
### Information, Education, and Communication (IEC) on local priority diseases

67% 33%

Not available up to standard in **1 (33.3%)** out of the **3** field hospitals expected to provide the service.

### Locally relevant diseases

75% 25%

Not available up to standard in **1 (25%)** out of the **4** field hospitals expected to provide the service.

### Isolation unit or room

50% 50%

Not available up to standard in **2 (100%)** out of the **2** field hospitals expected to provide the service.

### Management of severe/ complicated diseases

33% 67%

Not available up to standard in **3 (100%)** out of the **3** field hospitals expected to provide the service.

## Sexual And Reproductive Health

### Free access to condoms

100%

Available up to standard in all **2** field hospitals expected to provide the service.

### IEC on STI/HIV

100%

Available up to standard in all **2** field hospitals expected to provide the service.

### Syndromic management of sexually transmitted infections (STIs)

100%

Available up to standard in all **2** field hospitals expected to provide the service.

### HIV counselling and testing

100%

Available up to standard in all **2** field hospitals expected to provide the service.

### Prevention of mother-to-child HIV transmission (PMTCT)

100%

Available up to standard in all **2** field hospitals expected to provide the service.

### Antiretroviral treatment

100%

Available up to standard in all **2** field hospitals expected to provide the service.

### Family planning

50% 50%

Not available up to standard in **2 (50%)** out of the **4** field hospitals expected to provide the service.

### Antenatal care

50%

50%

Not available up to standard in **2 (50%)** out of the **4** field hospitals expected to provide the service.

Available

Partially available

Not available



Lack of staff



Lack of supplies

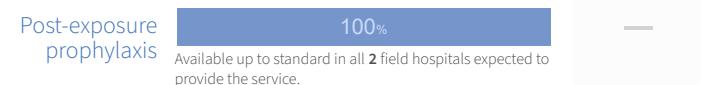


Lack of financial resources

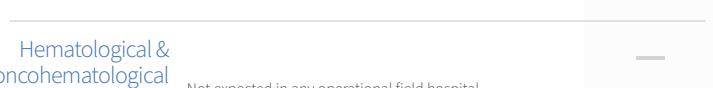
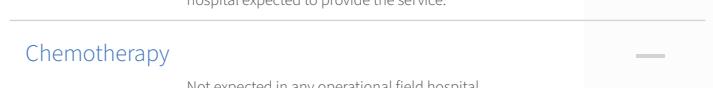
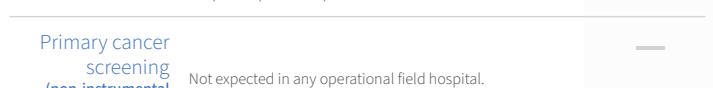
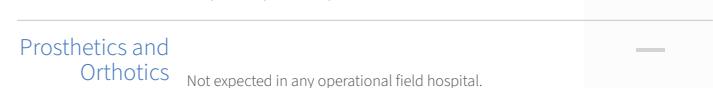
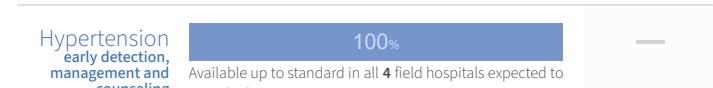
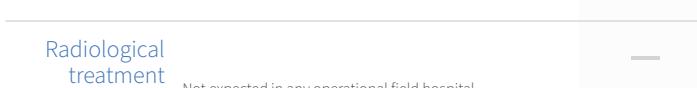
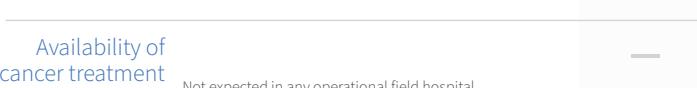
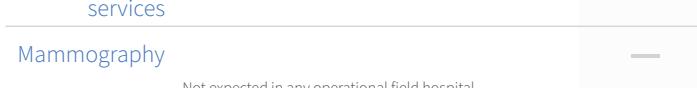
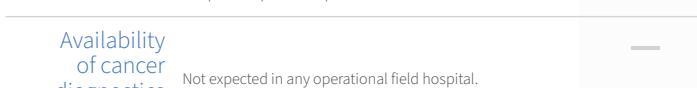
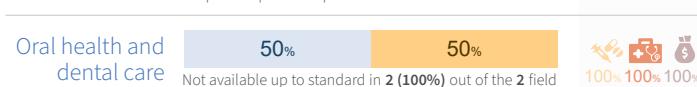
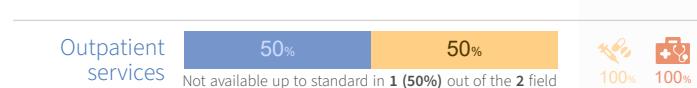
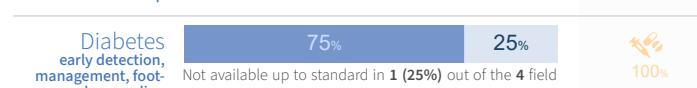
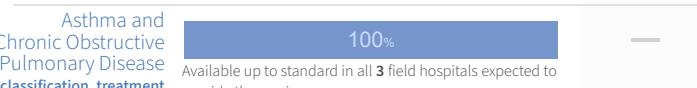
Lack of training



Lack of equipment



## Noncommunicable Diseases and Mental Health



This analysis was produced based on the information reported into HeRAMS up to 30 September 2024 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.

There are currently 14 field hospitals serving Gaza. Of those, five functioning reporting entities have opted not to share their data in compliance with data privacy laws enforced by their respective NGOs or were unable to provide information beyond the hospital status section. This restriction is in place to protect sensitive information and adhere to organizational policies on data confidentiality. Consequently, while these entities do exist and provide health services, their data has not been included in this report.

The designations employed and the presentation of the material in this report do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city, or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.



**Data source:** HeRAMS occupied Palestinian territory  
**Date data:** 30 September 2024  
**Date created:** 18 October 2024  
**Contact:** herams@who.int



### Note:

- Causes of non-functionality, basic amenity types, and barriers impeding service availability, was limited to the top three most frequently reported responses.
- The second page provides a restricted overview of essential health services, highlighting selected priority services.
- The analysis of barriers impeding service availability was limited to hospitals where the health service is not available up to standard.

