



HeRAMS Gaza

SNAPSHOT SEPTEMBER 2024

Field hospitals

HOSPITAL STATUS*

Out of 9 field hospitals evaluated.



67%

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





NORTH GAZA

GAZA CITY

DEIR AL-BALAH

KHANYOUNIS

RAFAH

-  Fully functioning
-  Partially functioning
-  Non-functioning
-  Destroyed

The number of points displayed on the map is based on facilities with coordinates. Any missing facility indicates a lack of coordinates.

MAIN CAUSES OF...

Building damage

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



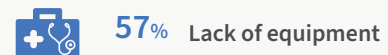
Equipment damage

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



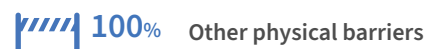
Functionality constraints

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.



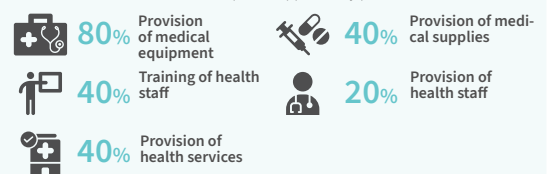
Partner Support

-  Major support
-  Partial support
-  No support



Partner support types

Out of 5 field hospitals supported by partners.



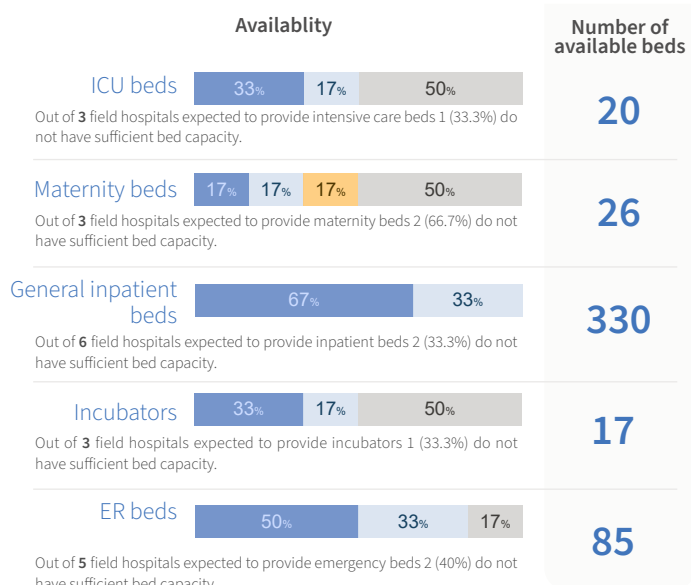
* Hospitals reported as destroyed are considered non-functioning and are excluded from the functionality assessments.

** 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.

BASIC AMENITIES*

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

Inpatient bed capacity



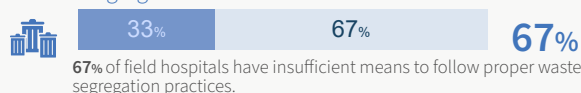
Main barriers*

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

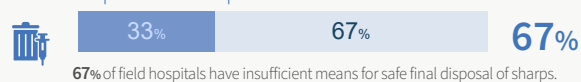


Waste management

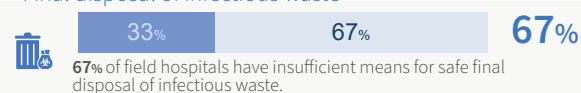
Waste segregation



Final disposal of sharps

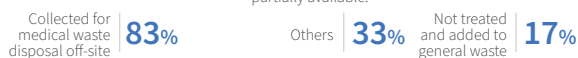


Final disposal of infectious waste

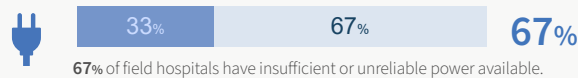


Waste disposal methods

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



Power

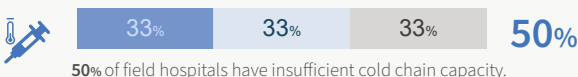


Power sources

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



Cold chain



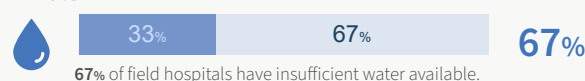
Cold chain sources

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



WASH

Water

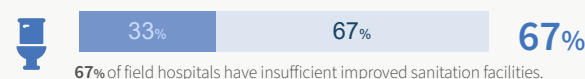


Main water sources

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



Sanitation facilities



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

Sanitation facilities types*



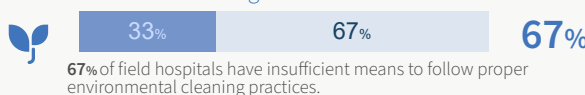
Sanitation facilities accessibility*



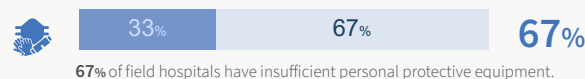
Hand hygiene



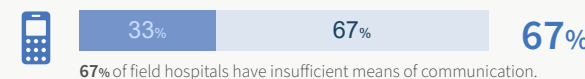
Environmental cleaning



Personal Protective Equipment (PPE)



Communication

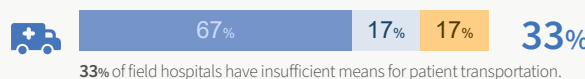


Communication equipment types

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



Transportation of patients



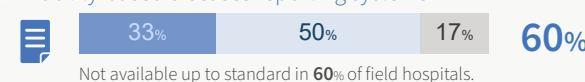
Transportation types

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



Health Information Management Systems

Facility-based diseases reporting systems



Facility-based information system

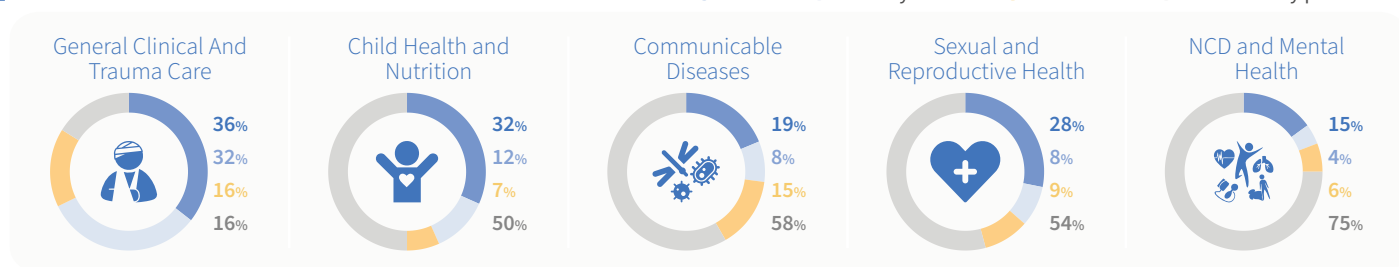


* Out of 6 field hospitals, those reported as destroyed, non-functioning, or inaccessible are considered unable to provide health services in their current state and are therefore excluded from this section as reporting ends upon confirmation of their inability to provide any health services.

ESSENTIAL HEALTH SERVICES*

Service Domain Overview

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



● Available ● Partially available ● Not available



Lack of staff
Lack of training



Lack of supplies
Lack of equipment



Lack of financial resources



General Clinical And Emergency Care Services

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

* 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 training



Lack of supplies

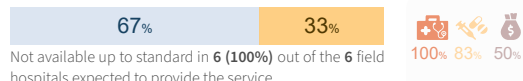


Lack of equipment

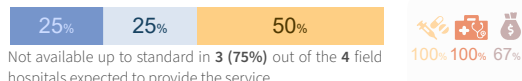


Lack of financial resources

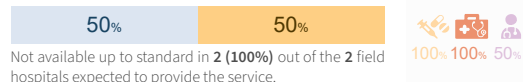
Laboratory services tertiary level



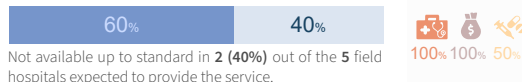
Blood bank services



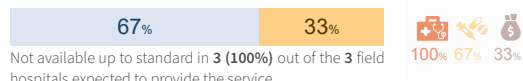
Hemodialysis unit



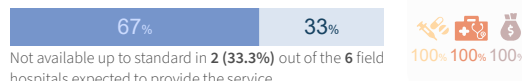
Basic X-ray service



Radiology unit

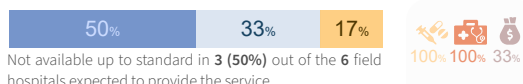


Procedures for mass casualty scenarios

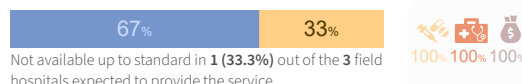


Child health and nutrition services

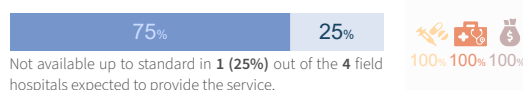
Pediatric first aid



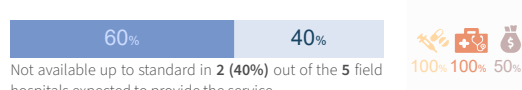
Integrated Management of Newborn and Childhood Illnesses IMNCI



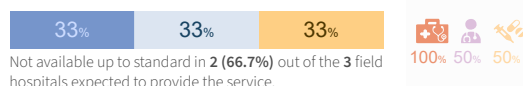
IMNCI Under 5 Clinic



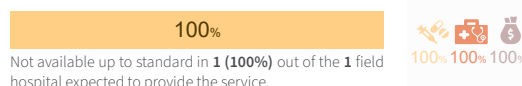
Management of children classified as severe or very severe diseases



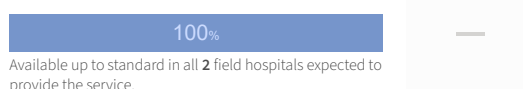
Inpatient surgical care for newborns and children



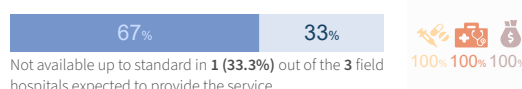
Expanded Programme on Immunization



Infant, Young, and Child Feeding



Growth monitoring



Integrated management of acute malnutrition

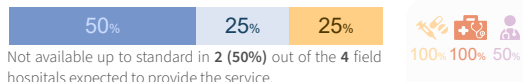


Stabilization center for severe acute malnutrition

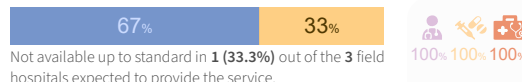


Communicable Diseases

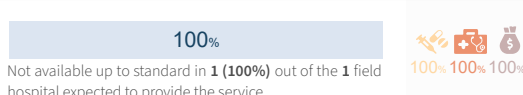
Syndromic surveillance



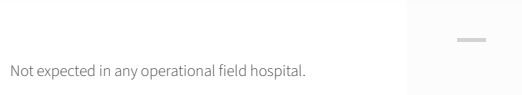
Event-based surveillance



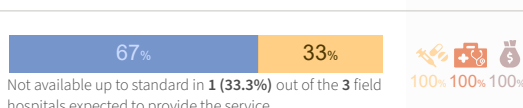
Diagnosis and treatment of tuberculosis (TB) cases



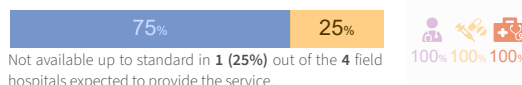
Multidrug-resistant TB (MDRTB)



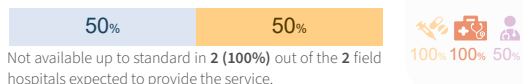
Information, Education, and Communication (IEC) on local priority diseases



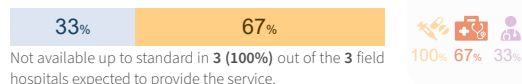
Locally relevant diseases



Isolation unit or room



Management of severe/complicated diseases



Sexual And Reproductive Health

Free access to condoms



IEC on STI/HIV



Syndromic management of sexually transmitted infections (STIs)



HIV counselling and testing



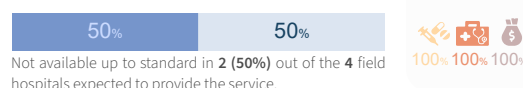
Prevention of mother-to-child HIV transmission PMTCT



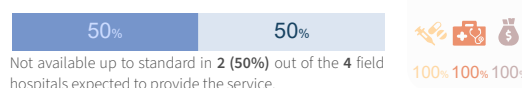
Antiretroviral treatment



Family planning



Antenatal care



Available Partially available Not available



Lack of staff

Lack of training



Lack of supplies



Lack of equipment



Lack of financial resources

Skilled care during childbirth	33%	33%	33%	100% 50% 50%	Basic emergency obstetric care	25%	25%	50%	100% 100% 33%
Not available up to standard in 2 (66.7%) out of the 3 field hospitals expected to provide the service.					Not available up to standard in 3 (75%) out of the 4 field hospitals expected to provide the service.				
Comprehensive Emergency Obstetric Care	25%	25%	50%	100% 67% 33%	Postpartum care	33%	33%	33%	100% 100% 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 (66.7%) out of the 3 field hospitals expected to provide the service.				
Comprehensive abortion care	33%	67%		100% 50%	Clinical management of rape survivors	100%			—
Not available up to standard in 2 (66.7%) out of the 3 field hospitals expected to provide the service.					Available up to standard in all 2 field hospitals expected to provide the service.				
Emergency contraception	67%	33%		100% 100%	Post-exposure prophylaxis	100%			—
Not available up to standard in 1 (33.3%) out of the 3 field hospitals expected to provide the service.					Available up to standard in all 2 field hospitals expected to provide the service.				



Noncommunicable Diseases and Mental Health

Promote self-care	100%	—	Noncommunicable Diseases (NCD) Clinic	100%	—					
Available up to standard in all 2 field hospitals expected to provide the service.			Available up to standard in all 2 field hospitals expected to provide the service.							
Asthma and Chronic Obstructive Pulmonary Disease classification, treatment and follow up	100%	—	Hypertension early detection, management and counseling	100%	—					
Available up to standard in all 3 field hospitals expected to provide the service.			Available up to standard in all 4 field hospitals expected to provide the service.							
Diabetes early detection, management, foot-care, and counseling	75%	25%	100%	Inpatient acute rehabilitation	33%	33%	33%	100%	100%	
Not available up to standard in 1 (25%) out of the 4 field hospitals expected to provide the service.				Not available up to standard in 2 (66.7%) out of the 3 field hospitals expected to provide the service.						
Outpatient services	50%	50%	100%	100%	Prosthetics and Orthotics	—				
Not available up to standard in 1 (50%) out of the 2 field hospitals expected to provide the service.				Not expected in any operational field hospital.						
Oral health and dental care	50%	50%	100%	100%	Psychological first aid	67%	33%	100%	100%	100%
Not available up to standard in 2 (100%) out of the 2 field hospitals expected to provide the service.				Not available up to standard in 1 (33.3%) out of the 3 field hospitals expected to provide the service.						
Management of mental disorders	67%	33%	100%	33%	33%	Inpatient care for management of mental disorders	100%	100%	100%	100%
Not available up to standard in 3 (100%) out of the 3 field hospitals expected to provide the service.				Not available up to standard in 1 (100%) out of the 1 field hospital expected to provide the service.						
Availability of cancer diagnostics services	—		—	Primary cancer screening (non-instrumental methods)	—					
Not expected in any operational field hospital.				Not expected in any operational field hospital.						
Mammography	—		—	Colonoscopy	100%	100%	100%	100%		
Not expected in any operational field hospital.				Not available up to standard in 1 (100%) out of the 1 field hospital expected to provide the service.						
Availability of cancer treatment services	—		—	Chemotherapy	—					
Not expected in any operational field hospital.				Not expected in any operational field hospital.						
Radiological treatment	—		—	Hematological & oncohematological care in all settings	—					
Not expected in any operational field hospital.				Not expected in any operational field hospital.						

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.

Note:

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



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

