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A Community anchored health system for sustainable health sector development

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List of abbreviations

BPHNS	Basic Package of Health and Nutrition Services
CHD	County Health Department
СРА	Comprehensive Peace Agreement
CWH	Community Health Worker (include Community Midwifes)
DHIS	District Health Information System
DPT3	Third dose of Diphtheria, Pertussis and Tetanus vaccine
Penta	DPT3 combined with Haemophilus Influenza & Hepatitis B vaccines
HIV	Human Immune deficiency Virus
HMIS	Health Management Information System
IDP	Internally Displaced Persons
IDS&R	Integrated Disease Surveillance and Response
IEC	Information, Education and Communication
JANS	Joint Assessment of National Health Systems
LB	Live Birth
M&E	Monitoring and Evaluation
MCHW	Maternal and Child Health Worker
NGO	Non-Governmental Organisation
OPD	Out patients Department of a Health facility
РНС	Primary Health Care
PHCU	Primary Health Care Unit
RHFA	Rapid Health Facilities Assessment
SOP	Standard Operating Procedure

SSDP South Sudan Development Plan

TB Tuberculosis

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Undersecretary Ministry of Health; Republic of South Sudan

Foreword

Over two decades of liberation war weakened the health system in South Sudan and has negatively impacted on the health status of the people. Upon attainment of independence, the Republic of South Sudan has the ultimate responsibility to strengthen the health system for improving health outcomes.

Strengthening the national health system necessitates health sector reforms: Health policies, institutional structures, capacities, and processes will have to be reviewed and realigned for better health service delivery. The development of the National Health Policy 2015-2024 is the first step in this direction.

Consequently, the National Health Policy 2015-2024 defines new paradigms for health service delivery, health financing, strategic information, leadership and governance, human resources for health, and access to essential medicines to ensure improved health services. This is consistent with the country's resolve to transition from emergency health systems support to sustainable health systems development.

The National Health Policy 2015-2024 draws its mandate from the Transitional Constitution of the Republic of South Sudan (2005), Vision 2040, the South Sudan Development Plan (2011-13), and is cognizant of global health agenda such as; Paris Declaration of Aid Effectiveness, the Millennium Development Goals, the Agenda for Sustainable Development among others to enrich the primary health care philosophy.

The development of this policy was government led, with inputs from all levels of government and development partners. The government envisages that implementation of the strategies in this policy shall transform the health system in South Sudan and sustainably improve the poor health indicators.

Successful implementation of this policy is contingent on ownership by government and engagement of all stakeholders, the extent of dissemination, alignment of strategic plans, guidelines and annual work plans to the policy; commitment of resources to support the plans; and their efficient and prudent use.

I call upon all stakeholders, both internal and external, to support and synchronise their programs with the policy directions defined here in for efficient and effective use of resources to ensure durable improvements in health outcomes of the people of the Republic of South Sudan.

Minister of Health, Republic of South Sudan

Chapter One: Introduction

1.1 Background

The transitional constitution of the Republic of South Sudan (2005) recognises health services as a basic human right to be respected, promoted and protected. The health policy for the Government of South Sudan 2006-2011 provided guidance for its implementation.

At independence, the Government developed the South Sudan Development Plan 2011-2013 that prioritised access to quality basic health services to promote health, economic productivity and poverty eradication by strengthening the health system. These aspirations were detailed in the Health Sector Development plan 2012-2016.

This policy, the Second National Health Policy, builds upon the achievements of the previous policies while addressing the limitations and responding to the new post-independence realities in the health sector.

The evidence base for the Second National Health Policy was generated through reviews of local literature and extensive bottom up consultations involving county, State and national health system stakeholders; technical and political leadership, health development partners, Non-Governmental Organisations, Civil Society Organisations, Civil Society and special interest groups.

This process generated policy and implementation issues synthesised into health sector needs and priorities that informed the Second National Health Policy 2015-2024.

This abridged version of the National Health Policy is intended for quick reference and high advocacy. It supported by the National Health Situation Analysis 2014, and the detailed Version of the National Health Policy 2014-2024.

1.2 Health Needs and Priorities 2015-2024

The poor health status of the population, coupled with the heavy burden of maternal and child health conditions, communicable and non-communicable diseases, including malnutrition, emergencies and disaster necessitate deliberate efforts to improve health service delivery, additional and improved management of health system resources, and strengthened health partnerships. These needs are further detailed as;

- 1. Improved service delivery needs:
 - a. Targeted and scaled up interventions on the major causes of morbidity

and mortality and other determinants of health for improving the health status of the people.

- b. Improved service organisation, infrastructure development to attain universal coverage through increased access to quality health services.
- c. Responsive inter-sectoral collaboration that targets individuals, families and communities to take responsibility for the determinants of health; for instance, food security and nutrition, education, poverty, water and sanitation, environmental and climatic conditions, housing, socio-cultural and gender related barriers to access to health services, all forms of violence, traffic and urban planning, in addition to sustained behaviour change campaigns.
- 2. Additional and improved management of health resources urgently needed to realise sustainable improvements in the health sector. These include;
 - a. Human Resources for Health:
 - i. Improved capacity of Health Training Institutions to increase intake and range of health professional to deliver the basic health services.
 - ii. Improved staffing of health facilities and better management of health workers.
 - b. Medicines and Health Supplies:
 - i. Increased budgetary allocation for medicines and rational use of medicines and health supplies.
 - ii. Improved management of medicines and the supply chain logistics
 - iii. Regulation of the pharmaceutical sector
 - c. Financial resources
 - i. Increased health allocations and financial aid that is better aligned to national priorities.
 - ii. Efficient allocation, better planning and prudent management of financial resources
 - iii. Financial and social risk protection of the poor and the vulnerable when accessing care.
 - d. Health Management Information System:
 - i. A consolidated reporting system that captures reliable information for decision making
 - ii. A strengthened facility and community based surveillance and information system that that reports in a complete, accurate and a timely manner.
 - e. Leadership and Governance:
 - i. A clear long term policy framework that allows leadership to direct, delegate, monitor and control health action.
 - ii. Empowered governance (oversight) committees and boards that support management functions at all levels of the health system.
 - iii. Consolidated decentralisation of the health system and improved organisational structure of the health system for improved

effectiveness.

- iv. Exercise of regulatory authority in the sector and
- v. Provision of leadership for partnerships in the health sector.
- 3. Strengthened health Partnerships
 - a. Long term planning and strategic partnerships that create synergies and enhanced aid effectiveness for efficient resource use, strengthened systems and better health outcomes.

Chapter 2: Vision, Mission, Goal, Objectives, values & guiding Principles:

2.1 Vision:

A healthy and productive population living a dignified life

2.2 Mission:

To improve health status of the people by effective delivery of the BPHNS; through provision of health promotion; disease, injury and disability prevention; treatment and rehabilitation services, with full participation of the people.

2.3 Goal:

A strengthened national health system with partnerships that overcomes barriers to effective delivery of the BPHNS; and efficiently responds to quality and safety concerns of communities while protecting the people from impoverishment and social risk.

2.4 General Policy Objectives

Policy Objective 1: To strengthen health service organisation and infrastructure development for effective and equitable delivery of the Basic Package of Health and Nutrition Services.

Policy Objective 2: To strengthen leadership and management of the health system and increase health system resources for improved health sector performance.

Policy Objective 3: To strengthen partnerships for healthcare delivery and health systems development.

2.5 Values:

- 1) Health is a human right; equitable access to health services shall be pursued.
- 2) Patient, Staff and community Safety shall drive quality improvement decisions.
- 3) Honesty, integrity, transparency and accountability shall govern use of resources in the implementation of NHP.
- 4) Commitment to the vision, mission, goals and objectives shall be reflected in resource allocation, planning and prudent management.
- 5) Dignity and respect for all individuals seeking health care services shall be guaranteed
- 6) Team work and Professional ethics shall underpin health service delivery.
- 7) The environment shall be protected and sustained.

2.6 Guiding Principles

The guiding principles for collective action in achieving the national health policy objectives are:

1. Health and Health Services as a Human Right

The interim constitution of the Republic of South Sudan recognises health and health services as a human right. Government shall promote, respect and protect the people's right to health and health services.

2. Primary Health Care approach

Primary health care shall remain the principal philosophy in developing the health system in the Republic of South Sudan and shall inform the BPHNS.

3. Decentralisation

To ensure equitable access, the health services in South Sudan shall be delivered and managed in a decentralised framework to increase the responsiveness of the health system to local needs and allow for community participation in health services delivery.

4. Partnerships

Successful implementation of the National Health Policy is dependent on effective partnerships. Government shall establish platforms and mechanisms for efficient partner coordination, Inter-sectoral collaboration and synergies for better results.

5. International Conventions and guidance

The principles of Paris Declaration on AID effectiveness and its subsidiary Accra Agenda for action; Millennium Development Goals and the intervening Abuja declaration; the Joint assessment tools for attributes and essential ingredients of competent national strategies and plans (JANS 2013); the WHO guidelines for development of National Health Policies and Strategic plans (2010), the Post 2015 agenda for sustainable development, and the principles of Primary Health Care have informed the orientation in this policy.

6. Gender Mainstreaming

Health service programming and delivery shall be gender sensitive. Deliberate efforts shall be made to protect the rights of women; children; the elderly; people with special needs; physically and mentally impaired; Refugees and IDP in transit; minority groups, and the poor to health care.

7. Community Participation

Communities shall participate in health service delivery, health promotion and disease prevention activities such as door to door community mobilisation and health action through Community Resource Persons and community leaders.

Communities as owners of health services shall participate directly or by representation in the governance of health care institutions.

8. Efficiency and Effectiveness

Evidence based policy formulation; implementation; planning and service delivery shall be promoted to increase effectiveness of interventions and efficient use of resources to achieve results.

9. Respect for Values and Cultures

Cultural values and practices of the people of South Sudan that promote health shall be respected. Communities shall be dissuaded from harmful practices in culturally sensitive manner.

Chapter 3: Policy and Specific Objectives

3.1 Policy Objective 1: Basic Package of Health and Nutrition Services

To strengthen health service organisation and infrastructure development for effective and equitable delivery of the Basic Package of Health and Nutrition Services

3.1.1 Specific Objective 1: Universal coverage with BPHNS

To ensure universal coverage of all communities in South Sudan with the BPHNS.

To achieve this policy objective, government shall:

a) Define and provide the Basic Package of Health and Nutrition Services (BPHNS) for health promotion, disease prevention, treatment and rehabilitation to improve health, reduce mortality and morbidity among all communities of South Sudan.

- i) Ensure improved health determinants and address health inequities through inter-sectoral collaboration and developing community health structures, to effectively deliver health promotion services and community participation.
- ii) Ensure reduction of high Infant and Child mortalities and morbidities by adopting high impact and cost effective preventive and curative interventions against the most common causes of childhood illnesses.
- iii) Ensure reduction of maternal and neonatal mortalities, and morbidities through effective delivery of maternal, sexual and reproductive health services and rights with particular attention to vulnerable populations.
- iv) Ensure reduction of mortality and mortality due to priority communicable diseases through provision of health promotion, treatment and rehabilitation services.
- v) Ensure reduction of mortality and morbidity due to non-communicable diseases through establishment of health promotion, treatment and rehabilitation interventions.

vi) Build Epidemics, Emergency and Disaster Preparedness; and response capability for International Health Regulation, disaster risk reduction, prompt response, and recovery as a means to mitigate impact of adverse events.

b) Ensure rational development of the health system and consolidate the functionality of PHCUs, PHCCs and Hospitals at Boma, Payam, County, State and national levels respectively.

The Ministry of Health shall;

- i) Ensure equitable coverage of the BPHNS
- ii) Increased access to communities where they leave.
- iii) Develop the community health system based at the Boma level.

3.1.2 Specific Objective 2: Quality and Safety of BPHNS

To ensure quality and safety of health services delivery at all levels of care (Hospitals, PHCC, PHCU and community health services)

In order to achieve this policy objective, government shall:

a) Institutionalize Quality of care and safety measures in health service delivery in all health facilities to improve health outcomes and protect patients, staff and communities from hazards associated with health care.

- i. Set service standards; develop guidelines, protocols, and Standard Operating Procedures for every level of care for assurance of quality of health services.
- ii. Establish quality assurance and continuous quality improvement mechanisms to ensure compliance with set quality standards and improve quality through innovation.
- iii. Regularly carry out comprehensive health sector performance reviews with key stakeholder and partners; to keep track of quality of interventions, progress towards set targets in the strategic plan and health policy for timely corrective actions
- iv. Increase adequacy of healthcare inputs, quality of processes and management capacity of healthcare/system managers to achieve quality and safety

objectives.

3.1.3 Specific Objective 3: Quality of Secondary care

To improve quality of secondary health care by investing in, diagnostics, blood transfusion and ambulance services.

In order to achieve this policy objective government shall:

a) Ensure the development of diagnostic services appropriate for every level of care.

The Ministry of health shall;

Invest in enhanced diagnostic capability of health facilities to improve the quality of health care in the country.

b) Ensure development of the National Blood Transfusion Services that guarantees availability of safe blood whenever needed.

The Ministry of Health shall;

- i. Establish voluntary blood donation system that recruits volunteers to sustain blood supply.
- ii. Establish Regional blood banks to improve on blood collection and management of safe blood transfusion services closure to service points.
- c) Ensure the Development of a National Ambulance Service with clear referral linkages across all levels of the health system based at County, State and National Level.

The Ministry of Health shall;

Ensure development of ambulance services and invest in appropriate types of ambulances suitable for continuation of care in transit.

3.1.4 Specific Objective 4: Infrastructure for quality and safety

To develop essential health infrastructure to ensure quality and safety of health services delivery.

In order to achieve this policy objective, government shall:

a) Set standards for health service infrastructure to support delivery of quality health services.

The Ministry of health shall;

Provide detailed specifications for buildings, equipment, furniture, transport, communication, water, electricity and waste management in Hospitals, PHCCs, PHCUs to cater for patient, staff and attendant safety and privacy concerns.

b) Ensure commitment of funds to develop health infrastructure that supports delivery of quality and safe health services.

The Ministry of health shall;

- i) Advocate for every level of government to finance health infrastructure with funds transferred by central government or locally generated by local governments to improve health infrastructure.
- ii) Construct and consolidate health infrastructure development to increase access to the BPHNS and improve quality of health services.

3.2 Policy objective (2): Health Systems Resources

To strengthen leadership and management of the health system; and increase health system resources for improved health sector performance

3.2.1 Specific Objective 1: Human Resources for Health

To scale up the production; strengthen management and development of the Human Resources for Health required for effective delivery of the BPHNS

In order to achieve the policy objective government shall:

a) Ensure adequate staffing of health institutions, equitably distributed in the country, and well-motivated for effective delivery of the BPHNS.

The Ministry of health shall;

- i) Advocate for increased wage allocation to states to enable recruitment of health workers to fill vacancies in health institutions.
- ii) Recruit qualified staff, from within and, diaspora or from neighbouring countries on contract, sufficient for the delivery of the BPHNS.
- iii) Provide contingency recruitment plan/budget annually to absorb sponsored graduates who qualify under the *training scale up program* upon completion.
- b) Develop a motivation strategy for increased staff productivity; and retention strategy that fosters equitable distribution of health workers across all geographical regions and levels of care.

The Ministry of health shall;

- i) Collaborate with related ministries to improve HRH management to motivate staff, improve work environment and job security.
- ii) Establish a robust Human Resources Information System (HRIS) to manage HRH information and performance.
- iii) Build the capacity of health workers in technical skills to deliver the BPHNS and health managers in management of health resources with particular attention to HRH management; for staff motivation and performance management.

c) Ensure establishment of robust professional development schemes through preserve training and work based continuous professional development to produce human resources for health required for delivery of the BPHNS.

- i) Explore establishment new training institutions and strengthen the capacity of the current HTI to scale up production (numbers and skill mix) of the human resources for health.
- ii) Ensure equitable selection of candidates from across the Country for admission to the HTI and mandatory bonding for an agreed period to work in the recommending public health facilities

- iii) Adopt task shifting, in the short to medium term, for the delivery of BPHNS in order to address skills needs; while exploring commensurate compensation for the staffs who have acquired the requisite skills.
- iv) Establish functional collaboration with Ministries of Education, and Finance to determine alternative financing mechanisms for scaling up admissions in HTI
- v) Adopt short term training approaches in response to HRH Crisis to increase numbers of health workers where Secondary school leavers or CHW are trained in specific skills to perform specific tasks under supervision. The curriculum shall provide for further progression into full professions.
- vi) Institute work based distance learning programs in Health Training Institutions.
- vii)Take affirmative action to develop Community Health Workers into health professionals following eligibility criteria.
- viii) Introduce additional courses to broaden the perspectives of students on the work and life realities to produce a critical mass of competent staff with skills, attitudes and conscientiousness.
- ix) Establish regulatory and legal frameworks to enable professional councils promote adherence to professional standards, professional codes of practice for health workers and national accreditation for HTI.

3.2.2 Specific objective 2: Medicines and Health Supplies

To ensure equitable access and rational use of quality essential medicines, health supplies and vaccines consistent with the delivery of the BPHNS

In order to achieve this policy objective government shall;

a) Ensure adequate quantities of quality essential medicines and health supplies are stocked according to the level of health facilities rationally used to deliver the BPHNS.

- i) Institute measures for rational use of medicines, guide procurement and donations of medicines in public health facilities.
- i) Engage Hospitals, counties, and states to quantify, forecast and plan for medicines and health supplies to guide procurement for sustained stock

levels.

b) Adopt efficient methods of procurement, storage and distribution of medicines and health supplies to the health facilities

The Ministry of Health shall;

- i. Strengthen the capacities at CMS, SMoH, and CHD for efficient procurement, storage, distribution of essential medicines in line with the respective mandates.
- ii. Strengthen the stock management systems in CMS, and Health facilities to minimize expiries, damages, pilferage, and wastage.
- iii. Integrate parallel supply chain systems for efficiencies and economies of scale.

c) Regulate the pharmaceutical sector for assurance of quality, protection of the population and public health.

The Ministry of Health Shall;

- i) Strengthen the capacity of Drugs and Food Control Authority to register, license and control quality of products, premises and practice in the pharmaceutical sector.
- ii) Institute mechanisms for the management and safe destruction of expired medicines in health facilities.

3.2.3 Specific Objective 3: Health Financing

To secure adequate healthcare financing that fosters universal health coverage

To ensure the achievements of this policy objective government shall;

a) Expand health financing mechanisms and progressively increase public expenditure in health budget allocation towards Abuja commitments, as initial steps towards universal health coverage.

- i) Advocate for increased private and public funding of health budget.
- ii) Ensure harmonization and alignment of development assistance for health funding with national policies, strategies and priorities

- iii) Explore options for prepayment schemes to hasten achievement of universal coverage where insurance options such as; Private insurance, social insurance, insurance for specialised care, community health insurance etc. shall be considered.
- iv) Introduce User fees in private wings of public hospitals.
- b) Ensure conformance to strategic plans to guide long term investments in the health sector at national and state ministries of health, and counties in accordance with the National Health Policy.

The Ministry of Health shall

- i) Support participatory and bottom up planning as the basis for the aggregate national health sector plans and budgets.
- ii) Ensure development of an efficient and equitable resource allocation formula within the health sector that recognises levels of care, workload and functionality; and ring-fenced funding streams for infrastructure, operations, wages, and projects.

c) Ensure budget discipline, efficiency, transparency and accountability in planning, implementation and use of funds.

- i) Promptly transfer funds to institutions within the health sector (MOH departments; (SMOH; CHD; Hospitals; PHCC; PHCU) against plans approved by the respective governance committees or boards and governments.
- ii) Strengthen public financial management systems within the health sector to promote transparency, efficiency and accountability.
- iii) Establish mechanisms for enhancing financial accountability and transparency through institutionalizing tracking of resource flows within the sector.

3.2.4 Specific Objective 4: Health Management Information System

To set up a robust information system that generates strategic information for timely decision making, monitoring and evaluation of the National health policy and health sector strategic plan.

To achieve this policy objective, government shall;

a) Strengthen the HMIS to generate reliable information for management and assessment of health sector performance; health system performance, determinants of health, and health status.

- i) Establish an integrated national HMIS that adequately captures the information needs for a fair assessment of the health sector performance.
- ii) Establish a central repository at the MOH accessible to reporting entities for decision making and monitoring sector performance.
- iii) Support and strengthen all health service delivery points to generate, and report data through the national HMIS that is complete, timely and accurate.
- iv) Invest in appropriate ICT, mobile applications and web based systems including the DHIS to improve reporting, analysis, dissemination and use of data within the HMIS.
- v) Explore use of ICT for voice communications, social media, Disease Surveillance, telemedicine, distance learning, patient follow up in chronic care, and feedback from communities among others.
- vi) Explore mechanisms to capture private sector data through the Private Public Partnership for Health desk and health data from health facilities of partners, Military, Police, and Prisons.
- vii)Use research, surveys, and specific data sets to generate relevant evidence for decision making; assessment of outcomes and impact of interventions where routine HMIS data is insufficient within the health sector.
- viii) Develop/strengthen community based health information systems to capture community level data to inform decision making and programming.

3.2.5 Specific Objective 5: Leadership and Governance

To strengthen the stewardship of the health sector to provide an enabling environment for effective service delivery and health system development

To achieve this policy objective the government shall;

a) Ensure effective oversight of the health sector guided by long term strategic frameworks, and institutionalise appropriate governance mechanisms at every level of the health system and points of care.

The ministry of health shall;

- i) Develop the prerequisite strategic frameworks; policies, strategies, guidelines, SOPs and Protocols, to guide the overall and long term development of the health system.
- ii) Strengthen the governance capacity of oversight committees of the National and State Assemblies, County and Payam councils to provide oversight to management of the respective level of the health system.
- iii) Strengthen the governance of health facilities and institutions by establishing management committees for health centres and management boards for Hospitals and health institutions;

b) Ensure the development of institutional capacity and structures to effectively manage and develop the health system.

- i) Review the organisational structure of the health system to be consistent with the policy and the strategic plan for improved effectiveness; outlining the roles, responsibilities and the relationships within and between the different levels of the health system.
- ii) Build the capacity of health system managers at all levels of the health system; for planning, supervision, and strategic information for monitoring implementation of health interventions.
- iii) Delegate administrative authority to National Referral and Teaching hospitals for self-governance as semiautonomous bodies; defining the role of hosting states; and the roles of the Ministries of Health and Education.

c) Provide enabling legal and regulatory frameworks that support the development of a strong health system, health service delivery and professional development.

The Ministry of Health shall;

- i) Develop relevant bills for the parliament and provide guidance to states and counties on formulation of ordinances and bye laws that promote health and protect public health.
- ii) Reinforce the work of professional councils, health inspectors, and local authorities in protecting public health through appropriate legislation and enforcement of health laws.
- iii) Establish and develop an integrated health professional's council for a comprehensive regulation of professions, professional development and practice; including; Doctors, Pharmacists, Nurses and Midwifes and Allied Health Professionals
- iv) Establish a regulatory body for regulation of health systems research and promotion of biomedical research that conforms to ethical standards and good clinical practice.

3.3 Policy Objective (3): Stronger partnerships

To strengthen partnerships for health services delivery and sustainable health systems development

To achieve this policy objective government shall;

a) Ensure health partnerships are aligned with national health development program priorities as laid in the national health policy and health sector strategic plan.

- i. Strengthen coordination with health development partners and collectively work towards supporting the interventions outlined in the health sector strategic plan to promote Aid effectiveness.
- ii. Enlist the support of health development partners to align funding with the strategic plan and sign the commitments into a health compact.
- iii. Introduce the national health account to track sources of funding, the program areas supported and the beneficiaries of the funds as a mechanism for transparency and mutual accountability for inputs, processes and results.

iv. Ensure local evidence and local presence in states as a basic principal for projects funding and implementation in local governments.

b) Explore mechanisms for inter sectoral collaboration, public private partnership for health, and traditional medicine for efficient use of health resources, and complementary attainment of health sector goals.

The ministry of health shall;

- i) Provide leadership for inter-ministerial and inter-sectoral collaboration for addressing the determinants of health including but not limited to ministries responsible for; education, housing, environment, nutrition, water and sanitation, infrastructure, agriculture, gender, culture, disasters, among others.
- ii) Develop a public private partnership for health (PPPH) policy to harness the complementary benefits of the private health sector.
- iii) Ensure strengthened partnerships to include delegation, contracting, and collaboration among other forms of partnerships. The private sector encompasses key actors that includes; private for profit health providers; NGOs (national and international); complimentary medicines practitioners; faith based institutions.
- iv) Organise traditional practitioners into associations to promote traditional practices and herbal medicines that are beneficial to health; including research into traditional medicines.
- v) Regulate traditional and complimentary practice of medicine to protect the public from known harmful practices, exploitation, and spread of diseases and disruption of social order.

c) Ensure Partnership with universities to contribute to the development of a strong health system

- ii) Collaborate with universities to establish a platform for carrying out research, share academic work to inform policy and management the health system.
- iii) Delegate regulation of research to research council of Universities; reporting to the ministry of health.

Chapter Five: Implementation framework

The National health policy 2015-2024 shall be implemented by development of two five year strategic plans, 2015-19 and 2019-24. Each strategic plan will be operationalized through annual work plans developed by all the planning entities of the health sector: MOH; SMOH; CHD and Hospitals and Health care centres.

Bottom up approach in the development of the annual plans and budgets shall allow for inputs from all stakeholders. All planning entities shall be responsible for implementation of their plans with oversight of the relevant governance bodies.

All stakeholders and institutional arrangements critical for the successful implementation of this policy shall be identified, their roles, responsibilities and relationships clarified.

Projects and program developed to implement this policy shall be appraised against the policy statements in this policy for competence of the project designs by the policy analysis unit.

Chapter Six: Monitoring and evaluation mechanisms

Progress in attaining the National Health Policy objectives shall be tracked by development and implementation of a comprehensive monitoring and evaluation framework of the two health sector development plans by all stakeholders.

Chapter Seven: Conclusion

The government of the Republic of South Sudan envisages that the effective implementation of the strategic directions outlined in this policy shall significantly improve the performance of the health system to sustainably improve the health outcomes and health status of the people of South Sudan.

The development of this policy was government led with participation of all stakeholders at national and sub national levels. Critical to the success of this policy is the extent of dissemination; alignment of strategic and annual plans; and commitment and efficient use of resources in implementation of the plans.

The communication strategy for this policy will include dissemination workshops for all stakeholders including policy makers and implementers at national, state and county levels. Printed copies and electronic versions of this policy shall be widely disseminated.