

HEALTH

1- Overview of the Health Sector

The Lebanese health system is mainly oriented toward curative care (treatment). It has witnessed a rapid growth in the number of private hospitals and high-tech medical centers.

The Lebanese government has made significant efforts to strengthen the capacities of its institutions and promote the public health sector role in providing health services. However, the private sector still accounts for over 90% of hospital beds and the bulk of healthcare infrastructure with a 17% of hospitalization rate that depends on medical insurance coverage. Also, most emergency services are either provided by the private sector or by private clinics, and most of the primary health care services are provided by health centers run by NGO's. Only 5% of the public health sector expenditures are allocated for primary health care services.

Due to the lucrative nature of health services, the health sector favored the large, high-income cities at the expense of poor communities, where 8% of Lebanese households live below the poverty line, something that led to a disproportionate access to health services and treatments.

However, the Ministry of Public Health (MOPH) -being the last resort for covering the treatment fees of non-insured citizens and supporting the primary health services through a network of primary health centers in collaboration with NGO's - has largely contributed to the improvement of access to treatment by the disadvantaged, which led to an increase in life expectancy to 74 years and a decrease in

infant mortality rate to 5.1 per 1000, despite regional disparities and the uneven provision of health services.

Several initiatives were launched in order to improve the management and quality of health services, in particular the classification of hospitals and the establishment of advanced primary health centers. Initiatives also included the public hospitals autonomy law, the project on Child and Maternal Health in the Akkar region, the establishment of the Control Program for Tuberculosis, the National Program against AIDS, and the National Program for Non-Contagious Diseases etc. Efforts were also made to set up and implement programs about health awareness and medical staff training in the private and the public sectors.

Attempts to improve health information systems were also made, including several national studies (household spending study and health accounts study).

Studies have shown that the overall spending of the Treasury through the Ministry's budget and its share of insurance spending, as well as the budget of other insurance funds, including state employees and military hospitalization, do not exceed 20% of total spending on health. The budget of the MOPH does not exceed 3% of the government's budget.

Six government health funds cover around 38% of the population, while 8% are covered by private insurance companies.

As for the remaining 54% of the population, it is the MOPH that covers their high-cost hospital and pharmaceutical services.

Scattered funding and the lack of control over the private market seriously impede MOPH and public insurance funds from purchasing health services at a good price from the public sec-

tor.

Actually, the use of the primary health care network is shy, and it seems to be motivated by the availability of free medications. This clearly indicates that current expenditure is ineffective, since the majority of health revenues are secured through prevention and primary care rather than through treatment.

However, MOPH planned to introduce performance assessment for primary health care centers. Attempts have been made to implement the mandatory transfer system, from health centers to hospitals.

MOPH spends 68% of its budget on hospitalizations and medications which constitute half of the bill, but the major source of health funding remains family budgets, constituting 44% of overall health spending. This poses a heavy burden on low-income families. Expenditure on health services and goods constitutes an average 14% of family budgets. However, this percentage varies between 20% for the poorest families and 8% for high-income families.

Concerning the health reform, the self-evident question is: will the current health expenditure remain the same?

The major reforms of the health sector carried out by the Ministry of Public Health, in order to control health expenditures, provide efficient and equal health services, reduce the burden on families, control the increase in consumption and reduce medication prices while ensuring quality services and boosting primary health care services at a reasonable, are summarized in the below goals:

- Rationalizing the public expenditures by consolidating the multiple insurance coverage funds.

- Improving the performance of the health system in all regions through a better al-



lotment of the resources of both the public and the private health sectors, in addition to providing sustainable development of the health coverage system

- Increasing the Ministry's capacity to control health services quality and rationalize the Lebanese health sector financing, to cutback the cost of healthcare in proportion to GDP.

- Improving the provision of health services, especially primary health care, which is the cornerstone for improving health levels for citizens, to provide it as an alternative for services provided by the private sector, including checkups, medications, and tests, to be affordable to low-income citizens.

- Audit the quality of pharmaceutical products and decrease the medication bill.

- Promoting and developing a comprehensive strategy for the health sector, with the public sector contributing to health funding.

2- The main achievements of the (1992-2014) period

Health sector policy studies and technical assistance:

Several important studies dealing with health policy have been completed namely the following:

- Study on hospital classification (phases 1 and 2), that resulted in the classification of Lebanese hospitals in line with MOPH's standards.

- Setting out the medical protocol related to the majority of surgical procedures paid by MOPH in public and private hospitals.

- Hospital autonomy study (phase I), pertaining to the formation of autonomous management boards for public hospitals. The Law on Hospital Autonomy law is implemented in all new hospitals with regard to financial and administrative structures of such hospitals.

Within the framework of the reform strategy adopted by MOPH, the following major

achievements were carried out:

- Creating a new management system for MOPH that meets current demands, while awaiting the formulation of a relevant draft law.

- Creating a unified database for beneficiaries of health coverage of all insurance funds, which helped put an end to duplicity in public services.

- Creating a primary healthcare network in cooperation with the civil society which provided comprehensive services to citizens, especially in the neediest areas.

- The MOPH reviewed the medication registration system and added new requirements, such as analysis certificates from internationally recognized laboratories. It also adopted new guidelines in the pricing of medications.

- Conducting workshops and drafting remedial protocols, which improved the level of primary healthcare services.

- Working towards adopting the health card which has become a symbol of the health system efficiency and fairness.

- Enhancing the primary health care through the expansion of the network of primary health care centers: Twenty eight (28) health care centers were constructed and completed in all Lebanese regions. These projects were financed by several donors among which:

- A grant by the Kuwaiti government, to finance the establishment of eight (8) health centers.

- A grant by Prince Al Waleed Bin Talal, to finance the establishment of eight (8) health centers.

- A loan from the World Bank, to finance the renovation and equipping of eight (8) health centers were rehabilitated and equipped.

- The Lebanese government renovated three health centers, which were also supplied with necessary equipment through a financial assistance

from the Italian government.

- Providing hospitalization services to all Lebanese regions.

- Works pertaining to Beirut Governmental University Hospital (BGUH) were completed (540 beds). The construction of four (4) new public hospitals was also completed in the following regions: Nabatieh (75 beds), Tannourine (40 beds), Rachayya (40 beds) and Sir al Diniyeh (40 beds). These hospitals are in full operation now. These four hospital are fully operational.

- The renovation of Tibnine Governmental Hospital (75 beds), Jezzine hospital (40 beds), Hasbaya Hospital (40 beds), and Marjeyoun Governmental Hospital (40 beds) was completed.

- Construction works of three (3) new public hospitals were completed: Halba hospital (75 beds), Sibline Hospital (75 beds) and Hermel hospital (75 beds).

- Expansion and renovation works of four (4) governmental hospitals were completed within the framework of the health sector renovation project. These are: Tripoli, Baalbek, Shahhar el Gharbi and Dahr el Basheq hospitals.

- Zahlé Hospital: (125 beds): works in Zahlé Hospital were completed through a grant provided by the Kingdom of Saudi Arabia and the Islamic Development Bank (IDB).

- Sidon Hospital (125 beds): works in Sidon Hospital was completed through a grant provided by the Kingdom of Saudi Arabia and IDB.

- Keserouan Hospital (75 beds): construction works and major equipment installation, financed by OPEC Development Fund and IDB, were completed. The remaining equipment instal-



lation will be funded by the IDB.

- BintJbeil Governmental Hospital: The State of Qatar committed to implement the BintJbeil Governmental Hospital project. The equipping process started in April 2008 and ended in April 2009.

- A dispensary was established and equipped in Batroun, with a financial assistance from Prime Minister Saad el Hariri.

- Finalization of Phase II of Jezzine Governmental Hospital (40 beds): renovations started in February 2006. Equipment installation started in October 2009 and ended in July 2011. Negotiations are in process to equip the hospital with an intensive care unit.

- Keserouan Governmental Hospital: A contract was awarded to outsource the procurement of (3) lots of medical equipment for Keserouan Government Hospital through a grant by IDB and OPEC. Installation of the first lot of equipment started in January 2008. Installation of all three lots was achieved in July 2010.

- Specialized hospital for the treatment of war and accident casualties in Sidon: A hospital specialized in the treatment of war and accident casualty (US\$ 20 million) was established in Sidon, financed by a grant from the Turkish government. Works started in August 2009 and ended in February 2011. The Turkish government was the implementing partner.

- Becharreh Governmental Hospital: The CDR renovated and equipped the Becharreh Governmental hospital through a grant provided by the Kingdom of Saudi Arabia. Works began in June 2008 and ended in May 2011.

- Renovation and provision of equipment to Tibnine Governmental Hospital (75 beds): renovations works, financed in

the form of a grant provided by the Belgian government, began in February 2009 and ended in June 2011. Procurement and installation of equipment started in April 2009 and ended in June 2011, and were financed by IDB.

- A field hospital of 40 beds was constructed and equipped in Minieh with a grant from the Kuwaiti Red Crescent. Works started in November 2009 and ended in July 2011.

- Renovation range Nassau Governmental hospital, financed by a grant from KSA, started in May 2009 and was completed in April 2012.

- In coordination with MOPH, two feasibility studies were conducted for the construction and equipment of two governmental hospitals, one in Sarafand and one in Sour.

- Feasibility study for the renovation and provision of equipment to the Qarantina Governmental Hospital. The relevant studies started in March 2010 and were completed in mid-2011.

- Laboueh Health Center: the construction of Laboueh Health Center was completed by the end of September 2007. Equipment installation started in December 2010 and ended in April 2011.

- Medical equipment will be supplied to the Laboueh Health Center through a local financial assistance. The equipping process is expected to start in August 2015 and end in 2016.

- Renovation of Kherbet Kanafar Health Center and Sidon Medical Center

- The Sidon Medical Center and part of Kherbet Kanafar Health Center were renovated with a financial assistance from the Government of Lebanon and the government of Belgium. Works started in January 2011 and ended in April 2013. The two centers were fully equipped and works were completed in September 2013.

- Renovation of Baabda Governmental Hospital: The renovation and equipping of Baabda Gov-

ernmental hospital was financed by the IDB. Works started in February 2012 and ended in June 2013

3- Progress, during 2014, in contracts awarded before 2014:

- Construction of a new building for the MOPH:

The construction of new MOPH building has started in collaboration with the MOPH. Phase 1 works started in September 2010 and were completed in September 2011. Phase 2 works began in May 2012 and are scheduled for completion in May 2015. Phase 3 works will kick in April 2015 and scheduled to finish within one year.

- Tibnine Government Hospital Renovations and restorations of Tibnine Government hospital kicked off in January 2009 and were completed in January 2014.

The CDR prepared the tender document to outsource the construction and equipping of Tyre Governmental Hospital. Works kicked off in May 2011 and were completed in August 2014.

The equipping of Rmeich Medical Center is underway with a financial assistance from The Islamic Development Bank (IDB).

The main studies underway are: the national nurses training program which aims to a) develop a study to upgrade the medical institutions activities by training nurses, b) establish a national nursing authority and c) formulate a study on health sector reform to improve the primary health system that will be adopted by the MOPH.

4- Main contracts awarded in 2014:

An Environmental Impact Assessment (EIA) is underway to evaluate the likely environmental impacts of the proposed project related to the construction of Beirut Governmental Hospital – Qarantina. Works kicked off in



June 2014 and were completed in February 2015.

The renovation of the building annexed to Becharre Governmental Hospital is underway. Works started in May 2014 and are scheduled for completion in January 2015.

Construction and equipping of a new hospital in Deir el Qamar

A study was prepared to construct and equip a new hospital in Deir el Qamar. The CDR is currently in the process of releasing tenders to outsource works execution. Works kicked off in June 2014 and are expected to finish within two years. The CDR will continue its efforts to secure the funds necessary for the equipment procurement.

5- Main projects under preparation for the (2014-2016) period

- Renovation and equipment of Baabda Hospital (125 beds): the renovation of the second part of Baabda hospital, financed by an Italian Government grant will kick off soon after the donor has approved the tender document. Works are scheduled for August 2015 and are expected to finish within one year. The medical equipment, procured with funds granted by the AFD and the Lebanese University will be installed as soon as renovation works are finalized.

- Renovation of Qarantina Hospital: a detailed study has been launched to transform the Qarantina Hospital into a public hospital with a specialized Child Care Division, according to a decision taken by MOPH. Works are scheduled for September 2015 and are expected to end in September 2018.

- Maifouq Governmental Hospital – Phase 1: Works for the construction of Maifouq Governmental Hospital – Phase 1 are scheduled for March 2015 and are expected to finish within one year.

Within the framework of improv-

ing the quality of public services in the Lebanese regions hosting Syrian refugees, preparations are underway to develop a project to support emergency rooms in public hospitals, and to renovate and equip health centers across different Lebanese regions, through a financial assistance from the Kuwait Development Fund. Works are scheduled for beginning of 2016 and are expected to finish within one year.

- Tripoli, Tannourine and Syr al Dannieh Hospitals:

The CDR has prepared a study for the additional renovation and equipping of the above-mentioned hospitals, as well as six other governmental hospitals that were constructed by the CDR. Works are expected to start as soon as the necessary funding is secured.

- Sour Governmental Hospital:

The CDR has prepared a study for the construction and equipping of a new Hospital in Sour (75 beds), after a feasibility study for the project was conducted.

Works are scheduled for August 2015 and are expected to last three years.

- Sarafand Governmental Hospital:

Following the elaboration of the feasibility study pertaining to the construction and equipping of Sarafand Governmental Hospital, the CDR prepared the construction and equipping study. Works are scheduled for August 2015 and are expected to last 3 years.

- The radiology and lab divisions in Orange Nassau Hospital were equipped though a grant offered by the Kuwaiti Development Fund.

- Construction, renovation and equipment of Health Centers in Saksakieh, Khalwat, Jbaa, Boudai, Terbol, Damour, Ghobeiri, Qana, Ghazeer and Aamchit, funded by IDB.

- Preparations are underway to establish a blood bank in the Rafik Hariri Governmental Hospital and will potentially be financed by IDB.

- Fundraising is underway to secure the necessary funds for the construction of two governmental hospitals, in the city of Aley and in Berti town.



Karantina Public Hospital



Karantina Public Hospital



Sarafand Public Hospital



Tyre Public Hospital



Main contracts awarded in 2014

Project	Value (US\$)	Source of Funding	Start Date	Scheduled Completion
Environmental Impact Assessment (EIA) to evaluate the likely environmental impacts of Beirut Governmental Hospital - Qarantina	22,000	IDB	Jun-14	Feb-15
Supervision of execution of the project related to Sour Governmental Hospital	435,600	Lebanese Government	Aug-14	Aug-17
Construction of Deir el Qamar Governmental Hospital – Phase 1		Lebanese Government	Jun-14	Jul-16
Renovation of building annexed to Becharre Governmental Hospital	1,112,552	Lebanese Government	May-14	Jan-15

Main projects under preparation for the (2014-2016) period

Project	Value (\$US)	Source of Funding	Start Date	Scheduled Completion
Renovation of Baabda Governmental Hospital – Phase 2	4,000,000	(Italy (grant	Jun-15	Dec-16
Construction and equipping of Sarafand Governmental Hospital	9,000,000	IDB	Sep-15	Sep-18
Construction and equipment of Sour Governmental Hospital	10,500,000	IDB	Aug-15	Aug-18
Construction and equipping of a hospital in Maifouq – Phase 2	5,352,000	Saudi Development Fund	May-16	May-19
Construction and equipping of a governmental hospital in Deir El-Qamar	6,000,000	Lebanese Government	Jul-16	Jul-18
Construction and equipping of a hospital Maifouq – Phase 1	2,803,705	Lebanese Government	Mar-15	Mar-16
Renovation of Qarantina Hospital	7,000,000	IDB	Oct-15	Oct-18



