**Concept note for the Verification of Health Workers active in clinical settings around the country**

**Background:**

The Health Sector in South Sudan is characterized by the involvement of a large number of actors, whom are partnering with the Ministry of Health (MoH) to ensure the availability of health services. This situation resulted from the relatively long years of political turmoil and internal conflicts that were exacerbated by the ongoing economic crises. Approximately 7.1 million people (58% of the population) have been affected by this complex situation, and are being assisted to get health services by the humanitarian, transition/recovery, and development program partners in various parts of the country. Those ‘partners’ are not just responsible for a significant proportion of service delivery, but also for provision of medical supplies, capacity building and other various kind of support to the health sector. There are more than 200 health and nutrition partners whom lie across a wide of range of spectrum including a large number of NGO’s (International and National), UN agencies and Multilateral organizations, as well as faith based and civil society organizations.

Effectively overseeing and coordinating the health sector had always been a challenge for the MoH. Partners interventions are typically provided through delivery systems that have separate administration and budgets from the wider health system. Currently, there is reduced visibility regarding partners activities and projects, which increase the risk of duplication and fragmentation of the health system in the country. Recruitment of health workers had been one of those activities that are solely exercised by partners with no involvement of the MoH. Moreover, the absence of an integrated design for the recruitment and effective selection of health workers amongst implementing partners made the process more chaotic and ambiguous.

One of the MoH priorities which is outlined explicitly in the National Health Strategy is the strengthening and mobilization of the human resources for health. South Sudan is challenged by worker shortage, skill mix imbalance, maldistribution, negative work environment, and weak knowledge base. Although the crisis in human resources for health is a shared problem amongst low-income countries, the country’s fragmented health system is further burdened by huge irregularities in the health profession and practice. The number of health professionals in the country is not known, the majority being not registered in the system.

The South Sudan General Medical Council (SSGMC) is an agency established in response to the Health Professional act with a mandate to regulate medical practice. However, with zero support, their challenge remains to fulfil this entitlement by implementing professional regulation effectively. In order to achieve that, the MoH had planned to verify all health workers in the country that are working in clinical settings. Those include Doctors, Pharmacist, Lab Technicians, clinical officers, Nurses and Midwives. This exercise will be carried out in partnership with the SSGMC and the College of Physician and Surgeons (CPS) with technical support from the Relief and Rehabilitation Services (RRC) and the South Sudan NGO Forum. Moreover, the verification process should be financed by our friendly implementing partners IPs.

**Objectives:**

* To ensure that all health workers had met the minimum levels of education and experience required to practice in the country.
* To recognize and register all health workers in the country, thereby identifying the gaps and needs regarding different specialties.
* To ensure that health workers are adhered to professional standards and professional codes of practice.
* To map the health workforce around the country to provide insight on the proportion of international and national workers.
* To ensure that there is matching between specialties needed in various facilities with the available health workers in them.
* To assist the SSGMC in presiding over its responsibilities for professional conduct, and its role of comprehensive regulation of professions.
* To ensure that services provided by IP’s are of standard quality, and thus protect the interest of the uninformed healthcare consumers.

**Approach:**

A conceptional framework was developed to ensure that this one-off activity yield comprehensive and genuine results. This includes mapping of partners activities in health, as well as health facilities in the country. Furthermore, the verification process will follow a geographical scope starting with IP’s active in Equatoria region, followed by Bahr Ghazal and Upper Nile regions. Every organization should present the CV’s and certificates of qualifications of their health professions to the Directorate of International and Coordination at the MoH. These credentials will then be verified and assessed by a team that is assembled from various entities including the MoH, SSGMC, CPS and the University of Juba. There is also a possibility of interviewing any health professional if the committee felt the need to further assess him/her. The whole process is projected to finish in not more than two weeks, starting on the 15th march and ending before the end of the month.

**Deliverables:**

* The number of genuine health workers in those facilities will be shared with various stakeholders detailing their specialties.
* Health professionals who are not registered with the SSGMC will be coerced to do so (that is a different procedure).
* Health professionals who are not qualified to work in health facilities in the country will have their contracts terminated instantly.
* Facilities that lack crucial specialties will be advised to recruit competent professionals to fill the gap.