

label	Answers
General feedback	
Are there any topics you wish had been covered in more depth?	<ul style="list-style-type: none"> . RAS . I was interested in learning more about the challenges of supporting the continuous operation of medical oxygen plants in developing countries. . Increase of the generation of oxygen . None . More use of case studies may be more effective in reinforcing workshop content . IPC related topics . tools for country/context assessment and SOP to proceed such assessment . Le rôle des parties prenantes . All topics of the agenda . Multistakeholder Landscape . All good , and your are doing a massive mission , we are all responsible to collaborate altogether to safe lives. . Oui. comme l'élaboration de la feuille de route . Les appels d'offre se doivent d'être Clean lors des attributions de marché aux Sociétés locales opérant dans les installations d'unité de production d'oxygène type PSA. Cas de Madagascar: on dirait un marché de gré à gré . Oxygen quantification . Collaborative approach with MoHPs to promote sustainability plans in terms of access and availability of oxygen for all throughout the region through reliable maintenance and management plan for oxygen system and ecology in long run. . I think after roadmap, it would be important that these things feature in country budgets. This is not about estimation, but with limited resources, what could be used and prioritization for the country . My name is Nasib Ahmad Faqirzada who collected oxygen related data in 2023 more then 19 provinces of Afghanistan and report it. I gained alot of experince and right now I have all data about exisiting capacity of oxygen product and gap in Afghanistan. In December, 2023 for non-reason my contract was non-renewal So, I awered 3 months ago oxygen work start again and there is another engineer who move on with oxygen scale up project work who weren't even involved in data collection and physical assessment. This is question in my mind why these work should be start with another engineer who dont have experience in these area and not with me who have traveled over 19 provinces of Afghanistan physical for collecting dtat? I wish your attention to this issue regards Nasib Ahmad . Funciones del ingeniero biomédico . Presentación de más casos de éxito en diferentes regiones del Mundo
Based on this workshop, what steps do you plan to take next in developing a national medical oxygen scale-up plan?	<ul style="list-style-type: none"> . RAS . I am not responsible for developing national medical oxygen plans. . Join the leaders, stakeholders and PPP with funding agencies as well as advocacy groups to chose and design the achievable roadmap . Since my country Nigeria already has a National Strategy for the Scale-Up of Medical Oxygen (2023 -2027), I'm available to support any country to develop its medical oxygen scale-up plan. . Since my country Nigeria currently has a National Strategy for the Scale-Up of Medical Oxygen, i'm available to provide technical support for any country that wants to develop its national medical oxygen scale-up plan. . Se requiere sensibilización de los gobiernos, por lo que debería de haber una resolución e incluir el tema como prioridad en las oficinas país y hacer un censo general de la situación actual de los países, y generar indicadores para hacer comparaciones. Generar una publicación por país. . discuter avec les autres parties prenantes . Approfondir l'analyse situation Revoir les priorités . There is no need to develop a new National Medical Oxygen Scale-up Plan for Nigeria, as the country already has a comprehensive and valid framework: the "National Strategy

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	<p>for the Scale-Up of Medical Oxygen in Health Facilities (2023-2027)". However, the priority now lies in improving and strengthening the multistakeholder medical oxygen landscape to ensure effective implementation and impact. Through my current role supporting the National Oxygen Desk, I am committed to making meaningful contributions toward achieving this goal.</p> <p>. Is there any contact focal point in the WHO office in Aden , who we can work with developing our own oxygen scale-up plan in Yemen, Aden area.</p> <p>. Pour élaborer un plan national et élargir l'accès à l'oxygène médical, il est mieux que le ministère de santé soit représenté et que tout soit fait pour être mise en pratique dans le pays entier.</p> <p>. Pour notre cas (Madagascar), tant qu'il n'y aura qu'une seule société qui A La fois effectue l'installation et la maintenance des unités de production d'oxygène, et que ce même société vend des bouteilles d'oxygène à l'hôpital lors des pannes, lors des maintenances préventives, il est INUTILE pour Madagascar d'élaborer un plan National.</p> <p>. To stress more on the need for these plants to be there and accessible in different parts of the country</p> <p>. Work with MoH and local partners in shaping the scale-up initiatives</p> <p>. The gap analysis and MoHPs critical role to fill the gap, especially by mobilizing and utilizing the subject related professionals at every level for better implementation.</p> <p>. My name is Nasib Ahmad Faqirzada who collected oxygen related data in 2023 more then 19 provinces of Afghanistan and report it. I gained alot of experince and right now I have all data about exisiting capacity of oxygen product and gap in Afghanistan. In December, 2023 for non-reason my contract was non-renewal So, I awered 3 months ago oxygen work start again and there is another engineer who move on with oxygen scale up project work who weren't even involved in data collection and physical assessment. This is question in my mind why these work should be start with another engineer who dont have experience in these area and not with me who have traveled over 19 provinces of Afghanistan physical for collecting dtat? I wish your attention to this issue regards Nasib Ahmad</p> <p>. Informarme y formarme mejor para implicarme en el trabajo</p> <p>. Ampliar el análisis situacional del acceso al oxígeno medicinal en el sector público (gubernamental) de salud. Presentar alternativas para producción de oxígeno a través de plantas PSA. Colaborar con PAHO y autoridades sanitarias en acciones concretas para generar política pública sobre acceso al oxígeno</p>
<p>What changes or improvements would you suggest for future workshops in the series?</p>	<p>. More webinars for extended understanding and development of an international task force dor this</p> <p>. RAS</p> <p>. I would like to see some typical support and maintenance data (costs, resources, supplies, parts, etc.) for plants classified according to production capacity ranges (small, medium, large). A tool that could give the leaders making acquisition and deployment decisions an idea of the long-term financial commitments required to achieve full benefits from their investments. In some cases, it may require to scale-down the original plans to make them consistent with their ability to effectively support continuous operations.</p> <p>. More use of case studies should be adopted for the session on workplan development, considering varying oxygen landscape.</p> <p>. More use of case studies</p> <p>. Mejorar la traducción al español</p> <p>. Prolonger la durée</p> <p>. To be much more detailed on clear steps that MoH or partners must do</p> <p>. The workshop was very insightful, with the use of case studies making the content easily comprehensible.</p> <p>. Share the material ppr presentation with us before and after to participate and contribute more during the sessions.</p> <p>. Detailler les points nécessaires d'une feuille de route concernant l'accès à l'oxygène</p> <p>. Band participants per region for ease of knowledge exchange and even post-workshop learnings</p> <p>. I think the format was great and interactive</p>

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What topic is a priority for you that should be covered in this series?	<p>. RAS</p> <p>. Educate the attendees on the costs and resources needed to maintain continuous operations during the the total life-cycle of medical oxygen plants. The initial acquisition and deployment planning receives significant attention, but the ongoing maintenance and support critical to maintain plants operational is not covered with the same level of detail and attention.</p> <p>. Quality of oxygen and therapy styles</p> <p>. Workplan development</p> <p>. Developing Terms of Reference for the sub-groups/committees of national oxygen task force.</p> <p>. GBV, Migrant health</p> <p>. Determinación de costos del proceso de producción de oxígeno. Generación de indicadores</p> <p>. How to build oxygen plant in a country especially LMICs</p> <p>. Rol del ingeniero biomédico en las políticas del plan de oxígeno medicinal</p> <p>. La quantification</p> <p>. Multistakeholder Landscape</p> <p>. As a biomedical, In Yemen, we lack any opportunities of hands-on training, supporting us to get an opportunity will be paramount important.</p> <p>. Personnes qui travaillent sur l'oxygène et leurs attributions</p> <p>. modification of employment contract for national oxygen focal person with updated TOR that should be aligned with objectives of developing national medical oxygen scale-up plans.</p> <p>. Le rôle des Techniciens de maintenance biomédicale travaillant au sein du Ministère de la Santé lors des travaux de maintenance des unités de production d'oxygène.</p> <p>. Countries like ours(Lesotho) don't have more than 2 plants, how best can we have these plants?Who makes sure we have such if the government can't fund?</p> <p>. Landscaping and quantification</p> <p>. Maintenance and management approach for oxygen system for its sustainability and optimal utilization</p> <p>. I just mentioned it above</p> <p>. My name is Nasib Ahmad Faqirzada who collected oxygen related data in 2023 more then 19 provinces of Afghanistan and report it. I gained alot of experince and right now I have all data about exisiting capacity of oxygen product and gap in Afghanistan. In December, 2023 for non-reason my contract was non-renewal So, I awered 3 months ago oxygen work start again and there is another engineer who move on with oxygen scale up project work who weren't even involved in data collection and physical assessment. This is question in my mind why these work should be start with another engineer who dont have experience in these area and not with me who have traveled over 19 provinces of Afghanistan physical for collecting dtat? I wish your attention to this issue regards Nasib Ahmad</p> <p>. Regulación en cada país</p> <p>. Rol de la industria de producción de oxigeno medicinal</p>