

COMMISSION ON MEDICAL OXYGEN SECURITY

SPOTLIGHT BRIEF

Access to Medical Oxygen Scorecard (ATMO₂S)

Introduction

The Lancet Global Health Commission on Medical Oxygen Security has developed a new scorecard for governments to monitor and report progress to the World Health Organization (WHO) Resolution:

Increasing Access to Medical Oxygen.

The Access To Medical Oxygen Scorecard (ATMO₂S) includes performance indicators addressing all 20 items in the WHO oxygen resolution. The Commission recommends that any information shared is made publicly available in the interests of transparency and accountability.

For more information, see the Commission report:

Reducing global inequities in medical oxygen access: The Lancet Global Health Commission on medical oxygen security.

For further information, contact Dr Carina King, carina.king@ki.se.

A new tool for governments to measure progress to pulse oximetry and medical oxygen access...



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Access to Medical Oxygen Scorecard (ATMO ₂ S) Indicators		WHO Oxygen Resolution item
Architecture		
1.1	<i>We include medical oxygen in national essential medicine lists (or equivalent e.g., pharmacopoeia)</i>	1, 5
1.2	<i>We have included medical oxygen in national strategic and operational health plans (e.g., a National Oxygen Strategy) which includes a realistic costing and financing plan</i>	2
1.3	<i>We include medical oxygen in our approved national emergency and disaster preparedness and response plans and drills</i>	8
1.4	<i>We have coordination mechanisms in place across state and non-state actors to support effective partnerships, evidence use, advocacy, and leveraged capabilities to increase and sustain oxygen access</i>	18, 19
Availability		
2.1	<i>We can produce or acquire sufficient medical oxygen supply to meet need during routine conditions</i>	11, 13
2.2	<i>We can promptly increase medical oxygen supply to meet surges in demand at national and sub-national-levels (e.g., outbreaks and disasters)</i>	8
2.3	<i>We have an up-to-date quantification of national medical oxygen need and this is linked to production and procurement</i>	4, 11
2.4	<i>We have guidance documents and contracts to connect production (e.g., gas companies, distributors) and end-user organisations (e.g., hospitals, district health boards) at national and sub-national levels</i>	13
2.5	<i>We have regulatory processes for ensuring medical oxygen and oxygen-related devices meet quality and safety standards and accountability mechanisms for those responsible for supply</i>	3, 17
2.6	<i>We have mechanisms for safe distribution of medical oxygen that cover all facilities, to ensure minimal gaps in availability at the point of care for all patients in need of medical oxygen</i>	13, 17
Affordability		
3.1	<i>We have budget allocations for key priorities within the national medical oxygen plans and are able to access and release funds in a timely way</i>	15
3.2	<i>Our procurement and tendering processes for medical oxygen supplies, services, and devices are transparent and reflect a competitive market price</i>	15
3.3	<i>We have mechanisms in place that ensure that provision of medical oxygen services at the point of care is affordable to providers and uses appropriate technologies (devices, spare parts, consumables, servicing, etc.)</i>	16
3.4	<i>We have mechanisms in place that ensure oxygen is affordable to all patients who need it (e.g., insurance, financial assistance, subsidies)</i>	11



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Access to Medical Oxygen Scorecard (ATMO ₂ S) Indicators cont.		WHO Oxygen Resolution item
Adoption		
4.1	We have sufficient trained and equipped healthcare workers to provide medical oxygen services safely and effectively to patients	9
4.2	We have sufficient trained biomedical engineers/technicians, with access to appropriate equipment and supplies, to manage medical oxygen technology safely and effectively	10
4.3	We have indicators for monitoring and evaluating medical oxygen systems, including financing, supply, need, patient access, and quality of care (safety and appropriateness) at national, sub-national, and health facility levels	4, 6, 7, 11, 20
4.4	We have reliable public health information being communicated to the population about medical oxygen services availability	12
4.5	We have systems (e.g., guidelines) in place to ensure appropriate use of oxygen for those who need it	6, 7

More about the WHO Oxygen Resolution...

- In May 2023, the World Health Assembly (WHA) adopted the WHO Resolution, **Increasing Access to Medical Oxygen**, committing all Member States to 20 actions to ensure medical oxygen is accessible to all people who need it - including during future public health emergencies.
- Governments are required to report their progress to the resolution in 2026, 2028, and 2030 and the Commission recommends they use the Access to Medical Oxygen Scorecard (ATMO₂S) to fulfill their obligations by scoring each item using the latest government policies, plans, regulations and guidelines and data from the last full calendar or financial year.
- Lack of availability of data for any of the indicators is not a barrier for completion of the scorecard.

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ABOUT THE COMMISSION

Announced in September 2022, *The Lancet Global Health* Commission on Medical Oxygen Security provides a thorough exploration of medical oxygen coverage gaps, with recommendations to ensure that no patient dies for lack of access to this essential medicine, including during public health emergencies like COVID-19.

The Commission was led by 18 Commissioners – multi-disciplinary academics with clinical, economic, engineering, epidemiological, and public policy expertise – representing all regions of the world. Forty Advisors representing United Nations and global health agencies, donors, academic institutions, and non-governmental organizations provided guidance. A large global network of Oxygen Access Collaborators provided constant input to the Commission and included representatives from industry and Ministries of Health. Special consultations were conducted with patients, caregivers, and clinicians to ensure that their voices and experiences shaped the Commission's recommendations.

An Executive Committee coordinated the work of the Commission and included representatives from **Makerere University**, Uganda; **International Centre for Diarrheal Disease Research (icddr,b)**, Bangladesh; **Murdoch Children's Research Institute (MCRI)**, Australia; **Karolinska Institutet**, Sweden; and **Every Breath Counts Coalition**, USA.

You can find the Commission report [here](#) and the advocacy package [here](#), including:

- **Report with Comments**
- **Policy Brief (English, French, Spanish, Arabic, Chinese, and Russian)**
- **Spotlight Brief: Access to Medical Oxygen Scorecard (ATMO₂S)**
- **Spotlight Brief: Patient and Caregiver Testimonials**
- **Spotlight Brief: 10 Oxygen Coverage Indicators**
- **Spotlight Brief: 20 Priority Areas for Oxygen Innovation**
- **Country Case Studies**