

NATIONAL MALARIA CONTROL PROGRAM ROTARIANS AGAINST MALARIA FIELD TRIP REPORT QUARTER ONE (1) 2025

MANUS PROVINCE



Report by: Eustin Torot

Regional Malaria Coordinator: WNB/MANUS/HELA

QUARTER ONE (1) FIELD TRIP REPORT

Name of Officer:	Eustin Torot
Destination:	Manus Province
Date Travelled:	14 of March 2025
Date Returned to Port Moresby:	28th of March 2025
Nights away from the office:	14 Nights
Type of documents attached:	Ticket Bud
PHO Accompanying Officer:	Mr. Julius Binamb Mr. John Lelai
Purpose of Travel:	Quarter One (1) 2025 Malaria Supervisory Visit and Drug Distribution

PEOPLE MET WITH:

- Ms Ella – Provincial Health Information Officer
- James Popon – Transit store Manager
- Julius Binamb- Provincial Malaria Supervisor
- Officers in Charge and staff of Health Facilities visited in the Province

OBJECTIVE

- Distribution of malaria RDT Kits, ACTs and Primaquine
- Ensure all health facilities are implementing Primaquine single dose policy
- Onsite refresher training on malaria diagnosis and malaria treatment protocol, IPTp
- NHIS Training on malaria reporting updates in revised NHIS Monthly Reporting form
- Ensure correct reporting of malaria cases in eNHIS
- Collection and follow-up on outstanding ANC net reports, NHIS Monthly Reports
- Stock takes on RDTs/ACTs, antenatal LLINs and all other malaria commodities
- Ensure that HF medical stock cards are updated and maintained at health facilities

BRIEF BACKGROUND OF MANUS PROVINCE

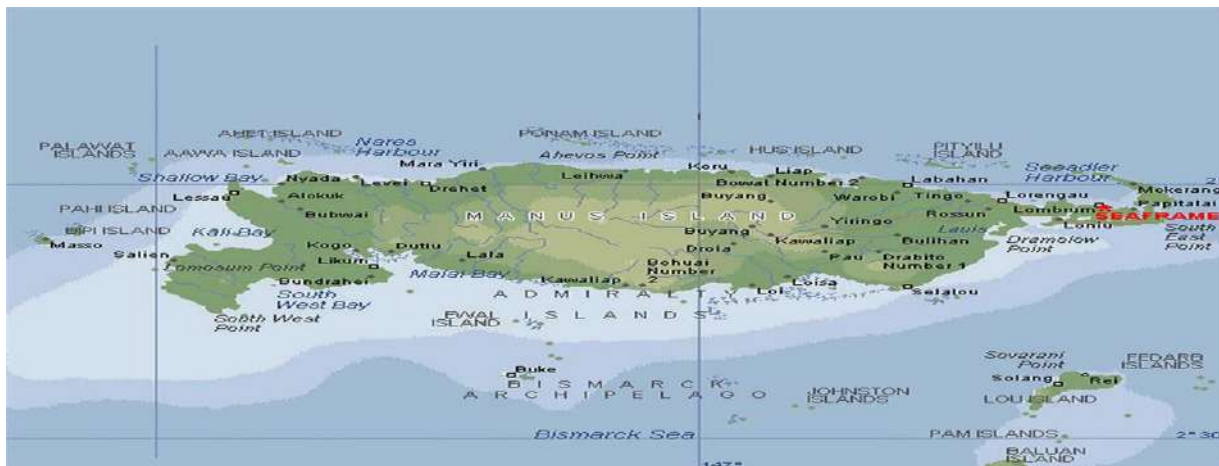
Manus Province is the smallest province in Papua New Guinea in terms of both land area and population, with a land area of 2,100 square kilometers (810 sq. mi), but with more than 220,000 square kilometers (85,000 sq. mi) of water, and the total population is 60,485 (2011 census). The provincial town of Manus is Lorengau.

The province consists of only one district (Manus District; with identical boundaries to those of the province), 12 Local Level Governments (LLGs) and 127 Wards.

The province is made up of the Admiralty Islands (a group of 18 islands in the Bismarck Archipelago), as well as Wuvulu Island and nearby atolls in the west, which collectively are referred to as the Western Islands. The largest island in the group is Manus Island, where Lorengau is located.

Manus has a single district which contains of one urban (Lorengau) and eleven rural local level government (LLG) arears. Manus district has the highest number of LLGs than any other districts in Papua New Guinea. For census purposes the LLG arears are subdivided into wards and those into census units.

Figure 1. Map of Manus Province



TRIP SUMMARY

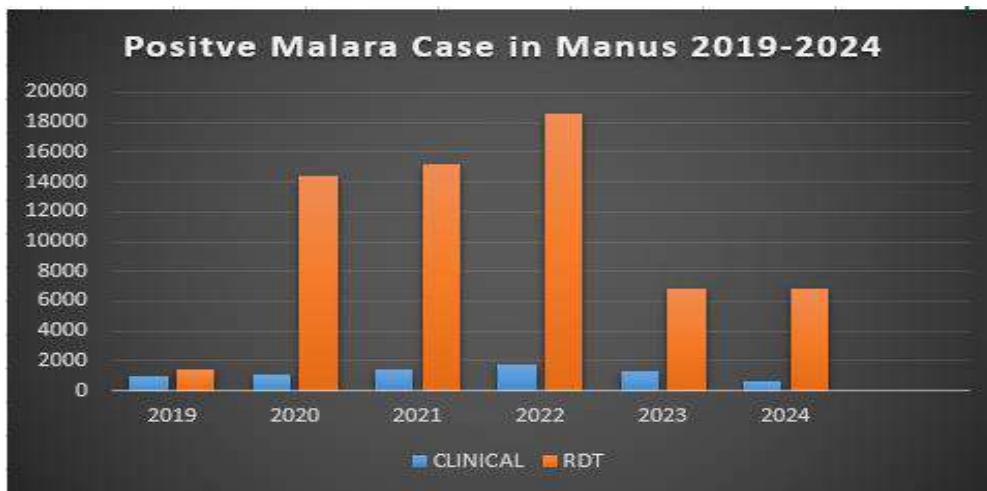
This report summarizes the activities conducted during Q1 2025 supervisory and drug distribution visit to Manus Province on the 14th March to the 28th of March. In this quarter we were again able to cover all 11 accessible facilities in the Province. The two inaccessible facilities, Mal and Wuvulu HC was not visited. Their supplies were kept at the Medical Transit store under the care Provincial Malaria Supervisor for pickup.

A courtesy visit was done to Manus PHA CEO, Deputy Director Public Health, Director Curative and other officers at Manus PHA before the Health Facility visit. All facility visited have improved greatly on their stock management and clinical case reporting. All facilities are keeping stock card except for Paneselu HC, the reason being that they misplace their Stock Cards. Staff in each facility were reminded on the importants of accountability of Malaria Commodities, quality reporting and Treatment Protocols.

The Project Outboard boat was finally registered with the appropriate authorities. Discussion surrounding the management of the boat will be done with MPHA CEO and PMS an appointment of permanent skipper will done before quarter two. All the necessary items for the boats operation will be bought in POM by fleet team and sent to the Province.

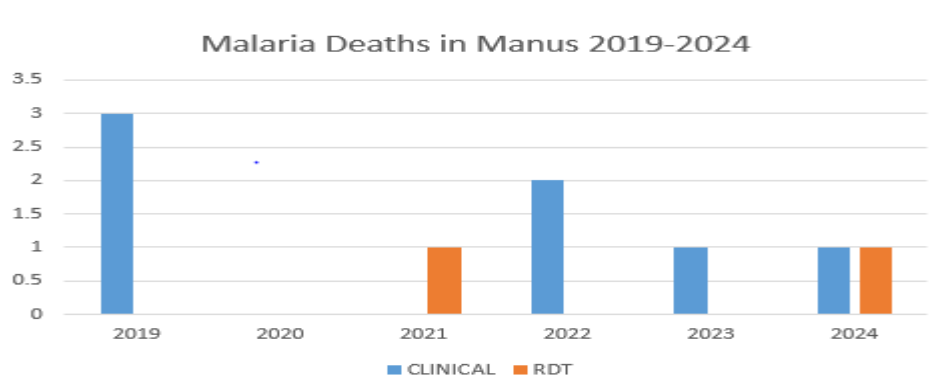
Hospital reporting was again discussed during the quarter one visit has it is an ongoing issue for the team. We have identified that unspecified reporting of malaria cases in AOPD/Other Departments have resulted in high number of Clinical cases in Hospital report. Staff are encouraged to communicate with PMS and Medical records to resolve the issue. Also late reporting by hospital was brought up during the Public Health Review meeting and MPHA Review meeting thus PMS to follow up on this matter.

MALARIA SITUATION IN MANUS PROVINCE



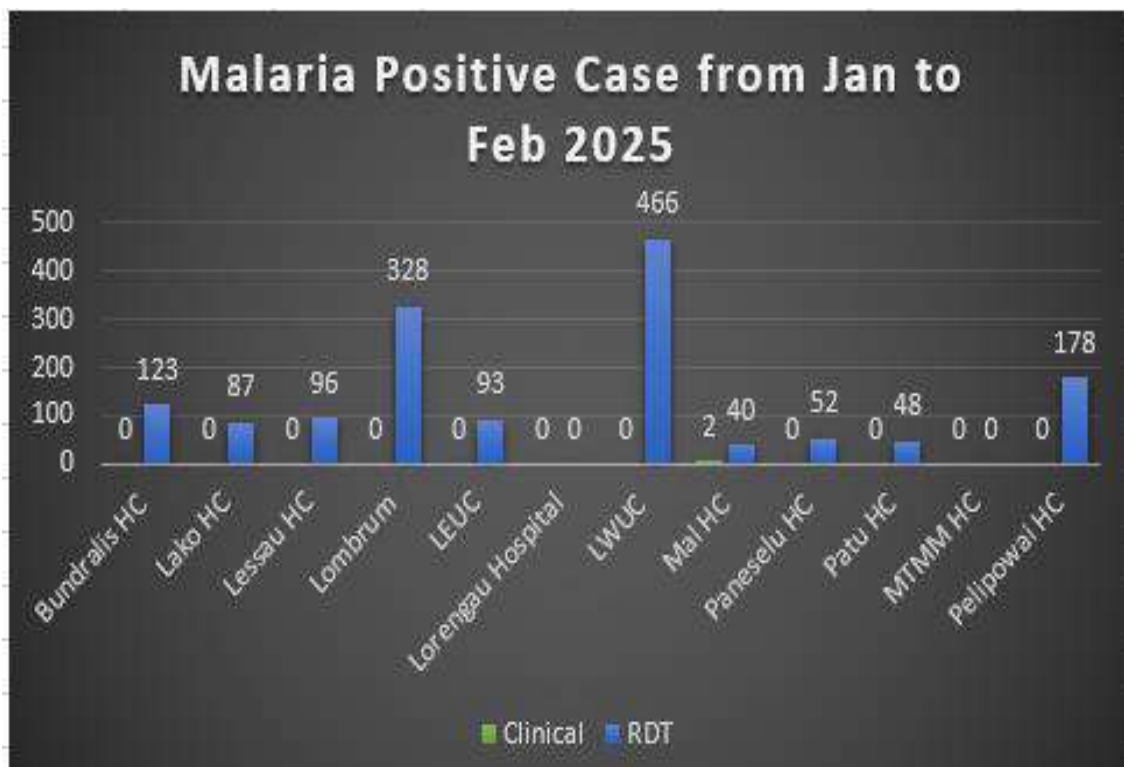
Graph 1. Show the Positive Malaria Case in Manus Province from 2019 to 2024. Taken from eNHIS Database

- Malaria Positive cases is gradually decreasing from 2022 to 2024
- Clinical diagnosis is also subsiding from 2022 to 2024. This is a result of continues visit and training done by team at facility level
- The highest number of Positive Cases were recorded in 2022. This may be a result of more testing done at Health Centre Level and Aid Post Level due to more quality use of diagnostic tool (RDT) and increased supply of diagnostic tool (RDT) by all RAM/NMCP



Graph 2. Show the Malaria Deaths recorded in Manus from 2019 to 2024. Taken from eNHIS Database

- Clinical Deaths is still being recorded from 2022 to 2024
- Only one year (2020) were deaths was not recoded
- From 2019 to 2024, there are more clinical deaths recorded then confirmed deaths. This is concerning as there is enough supplies of diagnostic tool (RDT) in all facilities thus there should not be any clinical deaths recorded. Team will have to prioritise and address this issue



Graph 3. Shows the Malaria Positive Cases between January to February 2025

- Two Facilities (Lombrum and LWUC) have recorded more positive case in January and February as per then data. Both facilities were visited in Q1 visit and confirmation was done with the Facility Register Book. Few reasons were noted for the increase in cases.
 - ✓ Lombrum HC: Currently experiencing wet weather thus may result in the increased case
Movement of contract workers into the area
Non-compliance to Primaquine by Patients
 - ✓ LWUC: The Facilities itself have not seen any increase, however the high numbers are coming from the Aid Posts due to increased supply and other AP now functioning. Wet Weather/Non- Compliance to Primaquine

The team is monitoring the cases from the two facilities if there is need for interventions.

HEALTH FACILITY VISIT UPDATES

There are 13 reporting Health facilities located in Lorengau, the only district in Manus Province. For quarter One (1), we were again able to visit 11 of the 13 facility which are accessible by road and sea. For the 11 facilities visited, 4 of which are accessible by road including Lombrum HC, Lorengau East and West Urban Clinic and Manus Provincial Hospital. Tingou HC which is located in the inlands of Manus was not visited due to bad road condition, however their supplies were picked up at the PHQ. The other 6 facility including, Bundralis HC, Lessau HC, Lako HC, Patu HC and Pelipowai HC are all accessible by sea only.

Table 4. Health Facility visited in Q1 2025 and % of Coverage

MANUS PROVINCE HEALTH FACILITY VISIT SUMMARY 2025							Qtr 1	Qtr 2	Qtr 3	Qtr 4
Total number HFs							13	13	13	13
Total Number Accessible							11			
Total Number Reached							11			
% Coverage (Accessible)							100.0	#DIV/0!	#DIV/0!	#DIV/0!
% Coverage (Total HFs)							84.6	0.0	0.0	0

PROVINCE	DISTRICT	HEALTH CENTRE	VISIT 1	VISIT 2	VISIT 3	VISIT 4	Total HC Visits 2025	Total Expected Visits in 2025	% of HFs visited in 2025	ACCESS
MANUS	LORENGAU	BUNDRALIS HC	24.03.25				0	4	0.0	Boat
MANUS	LORENGAU	LAKO HC	25.03.25				0	4	0.0	Boat
MANUS	LORENGAU	LESSAU HC	24.03.25					4	#VALUE!	Boat
MANUS	LORENGAU	LOMBRUM HC	15.03.25				0	4	0.0	Road
MANUS	LORENGAU	LORENGAU EAST UC	19.3.25				0	4	0.0	Road
MANUS	LORENGAU	LORENGAU HOSPITAL	19.03.25				0	4	0.0	Road
MANUS	LORENGAU	LORENGAU WEST UC	19.03.25				0	4	0.0	Road
MANUS	LORENGAU	MAL HC					0	4	0.0	Boat
MANUS	LORENGAU	PANUSELU HC	26.03.25				0	4	0.0	Boat
MANUS	LORENGAU	PATU HC	21.03.25				0	4	0.0	Boat
MANUS	LORENGAU	TINGOU HC	20.03.25				0	4	0.0	Road
MANUS	LORENGAU	WUVULU HC					0	4	0.0	Boat
MANUS	LORENGAU	PELIPOWAI HC	21.03.25				0	4	0.0	Boat
TOTAL		13	11					52	0.0	

RDTs AND ACT SUPPLIES PROCURED GLOBAL FUND

For Quarter One 2025 (1) RDT and ACT distribution, we distributed both buffer stock that we had plus the new Q1 supplies from RAM logistic team.

Table 2. ACT and RDT supplied by Global Fund



PACKING LIST

DESTINATION:	MANUS PROVINCE	SHIPPER:	AIR NUSGAI CARLO	CONSIGNMENT/WAYBILL NO.	
PACKAGING DATE:	25.01.2025	INVOICE NO.		ACTION OFFICER:	ERRY SAMAL
				DATE:	01.02.2025

CARTON #	NUMBER OF CARTONS	ITEM	QUANTITY PER CARTON	TOTAL QUANTITY	TOTAL IN BASIC UNITS	BATCH #	EXPIRY DATE	WEIGHT PER CARTON (KG)	TOTAL WEIGHT (KG)	VOLUME PER CARTON (m ³)	TOTAL VOLUME (m ³)
1 TO 6	6	RDT	78	468	1,950	75D04245	Mar-26	20	120	0.07	0.42
7	1	ACT 6	18	18	540	0155374	May-27	8	8	1.08	1.08
8 TO 13	6	ACT 12	24	144	720	7258783C	Mar-27	8	48	0.07	0.42
14 TO 15	2	ACT 18	15	30	480	0113294	May-27	5	10	0.07	0.14
16 TO 17	2	ACT 24	40	80	1,200	8AA245478	Jun-28	14	28	0.07	0.14
18	1	RDT	44	44	1,100	75D04245	Mar-26	16	16	0.07	0.07
		ACT 12	6	6	180	7258783C	Mar-27				
		ACT 18	6	6	120	0113294	May-27				
19	1	ACT 6	10	10	300	0155374	May-27	11	11		
		ACT 24	10	10	480	8AA245478	Jun-28				
TOTAL	19								241		2.33

TOTAL SUMMARY		ITEM	PACKETS	INDIVIDUAL UNITS	SOURCE (G/F/PPM)
No. of Cartons	19	RDT	522	2,280	box/40s
Weight (kg)	241	ACT 6	28	840	blister/pkts
Volume (m ³)	2.33	ACT 12	100	4,000	blister/pkts
		ACT 18	36	1,080	blister/pkts
		ACT 24	50	2,000	blister/pkts
		PPM/ACT/ACT	NOT SUPPLIED	tablets	

ANTENATAL LLINS REPORT

During the one (1) visit, No LLINs were distributed. Most facilities still have enough SOH thus they were not supplied. Facilities have improved on ANC stock management and reporting. All visited facilities were encouraged to continue to provide ANC LLINs to first visit pregnant mothers. Since quarter three (3) 2024 we have seen a gradual decline in distributed nets due to less mothers visiting the clinic. This may be indicator of strong Family Planning Program in the Province.

ACCOUNTABILITY OF MALARIA DRUGS SUPPLIES

All malaria RDT and ACTs are kept at Medical store. After quarterly Visits and distribution if Health Facilities run low of supplies they are expected to bring in their reports to PMS, Mr. Julius Binamb quantifies according to their reports and fills the Goods Delivery Note (GDN) of the required get their yellow copy and supplies are to be collected at Medical store upon sight of yellow GDN from the PMS.

HEALTH FACILITY FINDINGS AND OBSERVATION

Table 3. Observation findings from Health Facility Visited

Facility	Stock Card Kept and Maintained	ANC Nets	Physically Visited
Lombrum HC	Yes/Yes	No Nets Distributed	Yes
Lorengau West Urban Clinic	Yes/yes	No Nets Distributed	Yes
Lorengau East Urban Clinic	Yes/Yes	No Nets Distributed	Yes
Lako HC	Yes/Yes	No Nets Distributed	Yes
Paneselu HC	No/No- Misplaced Stock cards-Given new	No Nets Distributed	Yes
Lessau HC	Yes/Yes	No Nets Distributed	Yes
Bundralis HC	Yes/Yes	No Nets Distributed	Yes
Pelipowai HC	Yes/Yes	No Nets Distributed	Yes
Patu HC	Yes/Yes	No Nets Distributed	Yes
Tingou HC	Yes/Yes	No Nets Distributed	Yes
Lorengau Hospital	M-Supply	No Nets Distributed	Yes

LORENGAU HOSPITAL REPORT: DATE OF VISIT- 20/03/25

Lorengau Hospital was visited on the 20th March 2025 All department that stores and uses Malaria commodities. This includes,

- Hospital pharmacy
- Adult Outpatient Department
- Children Outpatient Department
- Medical Ward
- Surgical Ward
- Paediatric ward
- Medical records

Hospital Pharmacy: All malaria commodities are stored well in pharmacy and record kept using M-Supply. Full supply was supplied during Q1 visit. During the visit it was noted most hospital staff are now fully aware of the new treatment protocol and are practicing it. Staff have also improved a lot in terms of quality use of RDT. Clinical case reporting has also subsided however incorrect recording was done in the Malaria register especially in are specificity of RDT Positive result. This was identified and onsite training was done to improve the quality of report. PMS will work very closely with the team at AOPD/COPD and other departments using Malaria Commodities and also the team at Medical records to correct the previous mistake and avoid future issues like this.

Late submission of report is also an ongoing issue for the Hospital and this was discussed with the team at Medical records and PHIO. Hospital have not yet submitted any report since January. The team at medical records who are responsible for collecting and submitting reports to PHIO were advised to do be proactive in terms of collecting and submitting reports.

Microscopy

Apart from Lombrum HC and Lorengau Provincial Hospital, all other health facilities do not have a functional laboratory for doing Malaria Microscopy.

1. Lombrum Health Centre

Have a functional Laboratory room and now is doing Malaria Microscopy. Team met with lab technician and he noted that he is down with consumables and is currently doing Malaria microscopy on need basis. He not taking part in EQA program

2. Lorengau Provincial Hospital

Have a functional Laboratory room and are doing Malaria Microscopy. They have enough stock of lab consumables (malaria reagents, Slides, Dye and etc.) and staffs are taking part in the External Quality Assurance (EQA) program.

All facilities visited during Q1 HC have functioning eNHIS tablet and are correctly using it for reporting. All facilities are aware of the new IPTp protocol (Use of Fansider as Prophylaxis) and are practicing it. Facilities were encouraged to document all three dosages of Fancidar to pregnant mothers.

CHALLENGES AND RECOMMENDATION

CHALLENGES	RECOMNDATIONS
Incorrect recording at Hospital about the positive result of RDT	PMS to regularly work with the team to correct the issue/ Consider another CQI in Q2
Unreached Facilities (Mal and Wuvulu HC	Mal and Wuvulu still remains a major challenge for the team in terms of accessibility. Partner with other partners such as ADI to reach these two facilities
Hire Dingy	Dingy have been registered/discuss the skipper situation and boat trailer with PHA team so Project boat can used in Q2

TRANSPORT USE

- Payment for Hire Vehicle – Tapos Hire Car
- Hired 1 local dinghy to visit 6 accessible health facilities (Bundralis, Patu, Pelipowai, Lessau, Lako and Paneselu Health centres).

ACKNOWLEDGEMENT

1. MANUS PHA administration for the continues support towards the National Malaria program
2. MANUS PHA staff who worked together with RAM team during Q1 2025 visit
3. Provincial Malaria Supervisor Mr. Julius Binamb
4. Rotarians Against Malaria
5. Officers in-charge and their hard working staffs
6. Medical Records, Medical Transit Store & Hospital Information Office
7. Hospital Pharmacy- OIC and the team
8. Provincial Health Information office
9. Tapos Lodge – For the safe and secured Accommodation Provided

PHOTOS



END OF REPORT