



**NATIONAL MALARIA CONTROL PROGRAM
ROTARIANS AGAINST MALARIA QUARTER ONE
FIELD TRIP REPORT CENTRAL PROVINCE March 07th
– March 27th 2024**



QUARTER ONE FIELD TRIP REPORT



Name of Officer : Sylvia Kapin

Destination: Central Province

Date Travelled: 07.03.24 – 27.03.24

Type of documents attached: GDNs

Other RAM Officers :

- Vellgie Ava (RMC Supervisor)
- Salome Yaot (HMMO Central)

Accompanying Officer:

- Mr. Albert Adilla (MLA Kwikila, Rigo)
- Mr. Waffa Miri (CHW – Kupiano)

RAM Driver: Bagu Bagu



Purpose of Travel: [Q1 Health Facility Supervisory Visit, distribution of RDTs/ACTs & ANC LLIN](#)

PEOPLE MET WITH:

Dr. William Lagani _ Director Public Health

Dr. James Amini _ CEO CPHA

Mr. Pana Rim – Provincial Disease Control Officer

Mr. Albert Adila – Kwikila HC, MLA, Rigo District

Mr. Waffa Miri – Kupiano HC, CHW, Abau District

Dr. Kirau – Medical Officer Kupiano, Abau District

Mr. William Vagi – Rural Health Coordinator, Catholic Health

OBJECTIVE

The purpose of this trip is to:

- Ensure availability of RDTs, ACTs, Primaquine, and ANC Nets in Health Facilities and all accounted for.
- Check Health Facility Malaria Registry/Antenatal Net Registers for data analysis
- Integrate Health Facility visit with HMMO field trip
- Follow-up on e-NHIS report at Facility level
- Induction of PMS by RMC Supervisor Vellgie Ava
- Onsite Refresher training for Health Workers
- Ensure proper management of stock by maintaining the usage of stock-cards

1. BACKGROUND INFORMATION OF CENTRAL PROVINCE

Central Province occupies the southern peninsular on the mainland of Papua New Guinea. Covering an area of 29, 998km², the province has narrow access to the northern coastline, but abundant access to the Papuan Gulf. Geographically, Central Province is located to take advantage of PNG's natural resource base, which includes gold and copper mining, oil and gas offshore production, and extensive tropical forest. Central Province is divided into five districts, each of which reflects the diversity of PNG. Rigo and Abau are traditional 'village' societies, which rely on substance agriculture. The Koiari are the traditional landowners of the Sogeri Plateau, just to the north of Port Moresby. During the development of the Nation's capital, this area was significantly affected making many to have moved to find employment in the city. Goilala is the most geographically isolated in the province and is characterized by a unique language and culture, which is still strong today. Kairuku is located in the southern part of Central Province, it is a mixture of coastal areas and inland mountains, a home to diverse communities engaged in agriculture, fishing and small-scale businesses. Kairuku district is known for its lush landscapes and traditional cultures.



Figure 1: Map of Central Province

EXECUTIVE SUMMARY

This is a report of the quarter one Health Facility Visit and Malaria Commodity distribution in the Central Province. The visit commenced on the 07th March day-trip to Hula Health Centre in the Rigo District. The team ended the visit on the 27th March, at Papa and Porebada. The visit also facilitated the introduction of the PMS by RMC Supervisor Vellgie Ava. The Provincial Malaria Supervisor will be based at CPHA, the

position is currently funded by Global Fund through Rotary Against Malaria but will slowly integrate into the CPHA structure, hence CPHA will take ownership as well as the Household Malaria Management Program which is currently under Global Fund.

There are number of facilities where consumption rate is higher than before, hence need an increase in supply on next visit. Central Province is fortunate enough to not experience a major stock-out in Malaria commodities. The facilities have been managing their stocks well, there is also buffer stock enough to maintain supply before next quarter distribution. The team visited almost 90% of all accessible facilities in the Province.

As a way forward, the initiative to create a WhatsApp group for the Malaria Program was done to have an open platform for all officers to share insights, raise issues and open discussion for program sustainability and improvement in the Province.

2. ACHIEVEMENTS

- First quarter Visit and Distribution - 90% Coverage of all Accessible Health Facilities
- The Officers at Kanosia Sub-Health Centre have done very well in maintaining Stock-cards not only for Anti-Malarials but also other commodities.
- Provincial Disease Control Officer Mr. Rim accompanying the team to Bereina Health Centre
- There has been an increase in Malaria cases and the team have responded promptly supplying Akufa with adequate RDTs, ACTs and Primaquine before the Quarter 1 Distribution
- There is an improvement in CMVs bringing in the monthly reports to their respective Health Facilities
- All facilities visited except Veifa'a, Akufa and Yule Island but they have received their supplies. Sr. Celestine from Akufa picked up two bales of ANC Nets from the team after Q1 distribution
- RMC, PMS and HMM Officer integrate Programs
- Bakoiudu HC has 100% of all ACTs accounted for. Table below shows;

Data from Malaria RDT Register			ACTs RDTs Used Over Same Period		% RDT and ACTs Accounted For	
Period	No. of RDT Cassettes Used Since Last Visit	No. of Treatments of ACT Courses Since Last Visit	RDTs	ACTs	% RDTs	% ACTs
14.10.23-12.03.24	262	98	887	98	29.5	100.0

3. SUMMARY OF SUPERVISORY VISIT

The team commenced the Q1 Visit to Hula continued with Hiri-Koiari, followed by Rigo, Abau and concluded at Hiri-Koiari. For Veifa'a and Yule Island the team were unable to physically visit due to the weather.

Table 1 shows the Accessible Facilities the team visited.

Health Facility Visit Summary					
DATE	Health Facility	District	Date	Health Facility	District
07.03.24	Hula HC	Rigo	18.03.24	Boregaina HC	Rigo
08.03.24	Sogeri HC	Hiri-Koiari	19.03.24	KAK HC	Rigo
08.03.24	Laloki HO	Hiri-Koiari	20.03.24	Kwikila HO	Rigo
09.03.24	Kuriva HC	Hiri-Koiari	20.03.24	Upulima SC	Abau
11.03.24	Doa SC	Hiri-Kairuku	21.03.24	Moreguina HC	Abau
12.03.24	Waima SC	Hiri-Kairuku	21.03.24	Bam SC	Abau
12.03.24	Bereina HC	Hiri-Kairuku	22.03.24	Kupiano HC	Abau
12.03.24	Inawaia HC	Hiri-Kairuku	24.03.24	Iruna	Abau
13.03.24	Bakoiudu SC	Hiri-Kairuku	24.03.24	Boru HC	Abau
13.03.24	Kubuna SC	Hiri-Kairuku	26.03.24	Goldie SC	Hiri-Koiari
14.03.24	Agevairu SC	Hiri-Kairuku	26.03.24	PAU	Hiri-Koiari
14.03.24	Kanosia SC	Hiri-Kairuku	26.03.24	Tubusereia	Hiri-Koiari
14.03.24	Brown River AP	Hiri-Koiari	27.03.24	Porebada	Hiri-Koiari
18.03.24	Kokorogolo HC	Rigo	27.03.24	PAPA HSC	Hiri-Koiari

Table 2 shows the coverage rate for both accessible and overall facilities in Central Province

	Quarter 1
Total number HFs	42
Total Number Accessible	29
Total Number Reached	26
% Coverage (Accessible)	89.7
% Coverage (Total HFs)	61.9

4. ANTENATAL LLINS REPORT

As part of the Quarterly visits, ANC LLINS were being distributed to every facility. The opening balance of ANC Nets for Q1 is 1000 nets which is 20 bales. Kwikila received 200 nets before the Q1 visit from buffer stock.

- Initially distributed 1000 ANC LLINS to Health Facilities.
- Added 150 more mosquito nets to replenish our distributing stock,
- Out of the added 150, distributed them.
- Requested for another 300 and added to the current distributing stock on 27th March, 2024. Out of the newly added 300, distributed them.

- Saved 150 Mosquito nets after distribution and usage.
- 100 Nets dropped off for Akufa HC
- A bale remains (50Nets)

There is still issues with nets distributed and not all of them has been accounted for from the last quarter.

The table shows Distribution of ANC LLINS to the following Health Facilities

Facility	No. of Nets	Facility	No. of Nets
Kwikila HC	200	Boregaina	100
Hula HC	50	KAK	50
Sogeri HC	100	BAM Clinic	50
Doa HC	50	Moreguina	100
Bereina HC	100	Kupiano	100
Inawaia	150	Boru	50
Bakoiudu	50	Iruna	50
Yule Is. HC	50	Papa	100
Agevairu	100	PAU	50
		Akufa	100



Figure 3: This bales of LLIN has been in the facility Porebada SHC since last year, the officers onsite are not aware who distributed.

Figure 4.

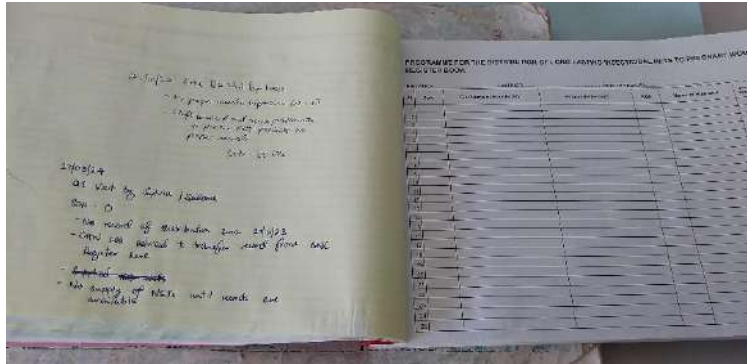


Figure 4: ANC Register at Porebada, LLINs distributed not recorded since last visit by Vellgie as noted. Current visit- CHW Lohia was advised to transfer data from HF ANC Registry to this ANC Register.

5. RDTs AND ACT SUPPLIES PROCURED REPORT

This Quarter the 4-month procured drugs was received on the 25th January, 2024 on schedule before the commencement of quarterly distribution. The additional 1 Month Procured from AMS was packed on the 12.03.24 and consigned on 20.03.24

Figure 4

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 (m³)	TOTAL VOLUME (m³)
1 - 32	32	RDT	40	1280	32,000	101532/536/537	Dec-24		0		0
33	1	ACT 6	48	48	1,440	7254175	Dec-24		0		0
34 - 35	2	ACT 12	48	96	2,880	7254176	Jan-25		0		0
36 - 38	3	ACT 18	24	72	2,160	7254367	Jan-25		0		0
39 - 45	7	ACT 24	24	168	5,040	7254366	Jan-25		0		0
46 (MIX 1)	1	RDT	36	36	900	101532/536/537	Dec-24		0		0
47 (MIX 2)	1	ACT 6	23	23	690	7254175	Dec-24		0		0
		ACT 12	18	18	540	7254176	Jan-25		0		0
48 (MIX 3)	1	ACT 18	7	7	210	7254367	Jan-25				
		ACT 24	16	16	480	7254366	Jan-25				
	48								0		0

TOTAL SUMMARY					
		ITEM	PACKETS	INDIVIDUAL UNITS	SOURCE (GF/GoPNG)
No. of Cartons	48	RDT	1316	32,900 test kits	GF
Weight (Kg)	0	ACT6	71	2,130 blister pkts	GF
Volume (m³)	0	ACT 12	114	3,420 blister pkts	GF
		ACT18	79	2,370 blister pkts	GF
		ACT 24	184	5,520 blister pkts	GF
		PRIMAQUINE		NOT SUPPLIED	

Figure 5: Additional 1 Month Packaging

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	1	ACT 6	20	20	600	3E0247	Dec-25		0		0
2	1	ACT 12	24	24	720	CIAPH001	Jun-26		0		0
3	2	ACT 24	24	48	1,440	CIAPH003	Jun-26		0		0
4	1	ACT 18	23	23	690	BIAPH015	Nov-25		0		0
5	1	PQ	400	400	40,000	JMP-101	Nov-26		0		0
6	1	PQ	197	197	19,700	JMP-101	Nov-26		0		0
TOTAL	7								0		0

TOTAL SUMMARY

		ITEM	PACKETS	INDIVIDUAL UNITS	SOURCE (GF/GoPNG)
No. of Cartons	7	RDT	NOT SUPPLIED	test kits	
Weight (Kg)	0	ACT6	20	600 blister pkts	NDOH
Volume (m ³)	0	ACT 12	24	720 blister pkts	NDOH
		ACT18	48	1,440 blister pkts	NDOH
		ACT 24	23	690 blister pkts	NDOH
		PRIMAQUINE	597	59,700 tablets	NDOH

6. DISTRIBUTION QUANTITY FOR EACH FACILITY

The table displays the quantity of ACTs/RDTs supplied to each facilities and the dates stock supplied on.

DATE	DESCRIPTION	RDT 40kits	ACT 6 30 blisters per box	ACT 12 30bliste rs per box	ACT 18 30blisters per box	ACT 24 30blister s per box	PQ 7.5mg
26/01/24	Akufa HC	60	0	0	0	0	70
26/01/24	Akufa HC	0	3	5	3	8	0
26/01/24	Kuriva HC	0	0	0	8	10	0
19/02/24	Brown River AP	15	0	0	2	2	30
22/02/24	Kuriva HSC	80	8	4	6	12	50
22/02/24	Bereina	80	6	0	8	10	50
27/02/24	Kwikila HC	30	2	2	2	4	40
27/02/24	Boku HC	20	1	1	1	2	20
28/02/24	Kanosia HC	30	2	2	2	4	0
28/02/24	Veifa'a HC	80	4	7	5	11	30
07/03/24	Hula HC	30	1	2	1	3	0
08/03/24	Sogeri HC	40	2	3	2	5	0
08/03/24	Laloki HC	30	2	2	2	4	0
09/03/24	Agevairu HC	80	3	5	4	12	00
11/03/24	Doa HC	40	0	0	0	5	0
12/03/24	Bereina HC	0	0	2	0	6	0

12/03/24	Inawaia	40	3	4	3	6	0
13/03/24	Bakoiudu	20	1	2	2	3	0
13/03/24	Kubuna	20	2	2	2	2	0
14/03/24	Brown River AP	10	0	1	0	3	0
14/03/24	Kuriva	0	0	2	0	6	0
18/03/24	Kokorogolo	10	2	3	2	3	0
18/03/24	Boregaina	20	1	2	1	4	0
19/03/24	KAK	15	1	1	1	2	10
20/03/24	Kwikila	40	0	0	0	0	0
20/03/24	Akufa	0	0	3	4	5	40
21/03/24	Moreguina	50	2	5	0	7	0
20/03/24	Kuriva	0	0	0	0	10	0
21/03/24	Bam	15	1	2	0	2	0
22/03/24	Kupiano	35	2	2	3	4	0
24/03/24	Iruna	55	3	5	3	7	60
26/03/24	Goldie	10	1	2	1	0	0
26/03/24	PAU	30	0	0	0	1	0
26/03/24	Tubusereia	30	1	0	0	1	42
27/03/24	PAPA	5	2	0	0	0	10
27/03/24	Porebada	5	0	0	0	0	15
04/04/24	Tororo	4	0	1	0	1	9
04/04/24	Tapini	6	0	1	1	1	14
04/04/24	Woitape	5	0	1	1	1	14
04/04/24	Yulai	4	0	1	0	1	9
04/04/24	Ononge	4	0	1	0	1	9
04/04/24	Yongai	31	1	1	3	6	21
04/04/24	Kuriva	0	0	0	0	10	0
09/04/24	Dorobisoro	11	1	1	1	2	21

Kuriva has the highest consumption rate of ACTs, they have a lot of CMVs in their catchment as well as Bereina. The facilities assist the CMVs with supplies. Yongai HC has requested for an increase in supply, so RDTs and ACT 24 packed are more than listed *Refer to Distribution list in Annex One (1)*.

OTHER ANTIMALARIALS

There is a stock-out of Fansidar across all Facilities. Officers are well aware of the IPTP when asked about it but are unable to administer due to no stock. There is also a good number of expired RDTs, DuoCotexcin and Quinine still on the shelves. The a/OIC for Papa queried using Artesunate Suppository and Injection simultaneously and was advised to use either one separately as it contains the same dosage.



Figure 8: *Vellgie and Salome removing expired RDTs on the shelves at Inawaia.*



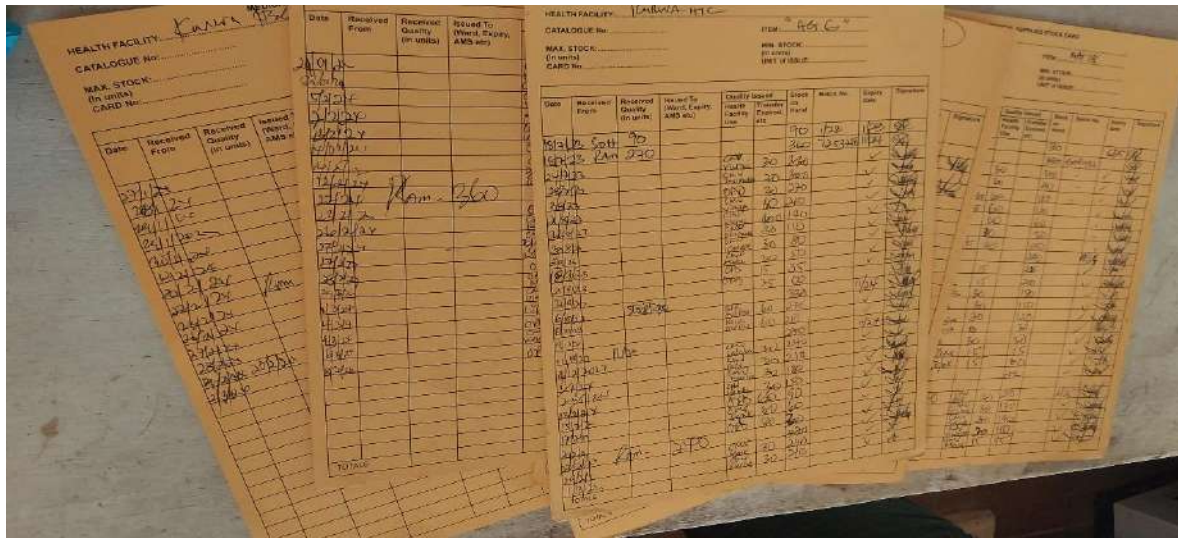
Figure 9: *Expired RDTs and anti-Malarials removed from the shelves to be discarded at Kubuna.*

7. STOCK CARDS REPORT

Out of all the Facilities visited in the Hiri-Kairuku, only one facility has done and maintained stock-cards properly, that is Kanosia Sub-Health Centre.

Stock cards have been introduced to the new officer posted to KAK H/C. Majority of the Facilities visited are yet to maintain stock-cards as expected.

Figure 6: Kanosia Sub-Health Centre has done well in keeping stock-cards updated



8. HOUSEHOLD MALARIA MANAGEMENT PROGRAM UPDATE

Miss Salome Yaot is the current HMM officer in the Province. She integrated follow-up program with the Quarter 1 visit to follow-up on Community Malaria Volunteers (CMV) in Hiri-Koiari. She will be distributing bicycles on her next trip hence the prior visit is ensuring all her active CMVs are able to ride bicycles.

Miss Yaot did not join the team to Rigo, she planned a refresher for the Rigo-Abau CMVs but due to availability of drivers, the training was postponed to first week of April. Kairuku has 60 CMVs trained, 31 are active. Hiri-Koiari 73 trained from which 50 are active. Rigo has 29 trained, 6 are active, this maybe increased after training (05th April, 2024). Abau has 25 trained of which 2 are active, also maybe increased after the refresher dated 08th April, 2024.



Figure 7: HMM Officer visited one of the CMV during our visit to Kuriva HC.

10. Malaria NHIS e-NHIS Reporting

There are few facilities still recording Clinical Diagnosis. All Officers are discouraged to do Clinical Diagnosis as RDTs have been made available in all facilities. Some Facilities are still closed or have closed recently hence no reports have been submitted. Other facilities having problem with workload when compiling monthly reports for instance Sogeri HC, hence emphasis is done on daily entry and delegating of responsibilities to limit workload on the OIC. Below is the Malaria Report for Quarter One, 2024.

Central Province

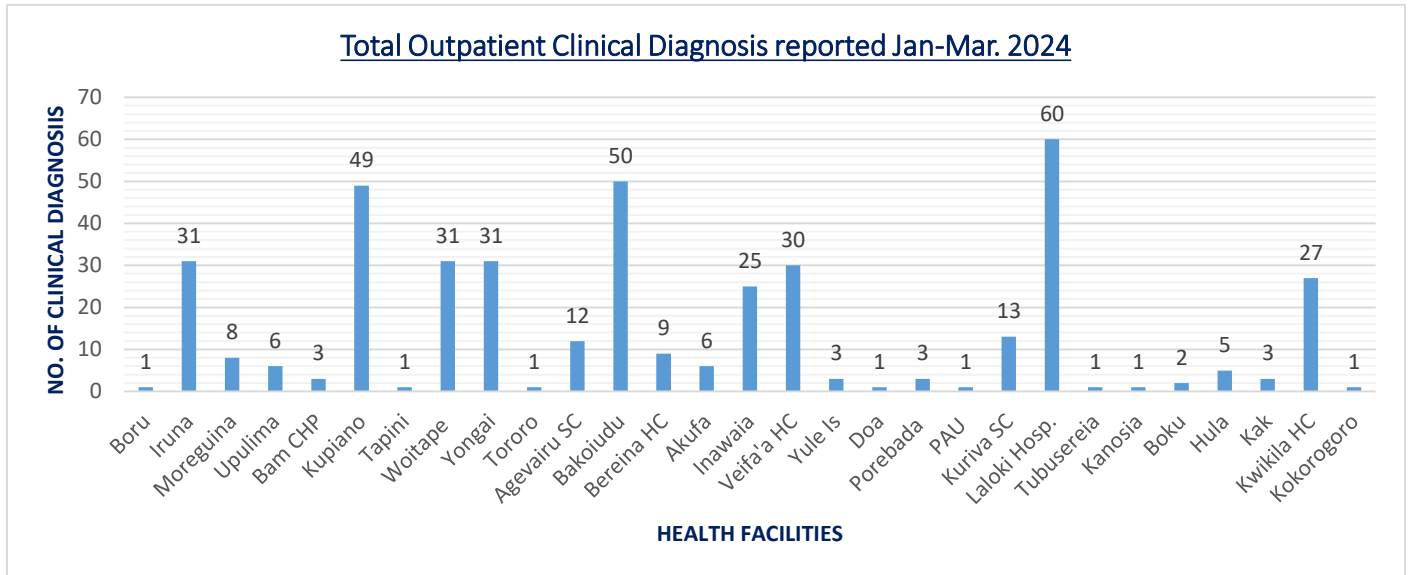
MALARIA REPORT January to March 2024

Date Printed: 15/04/2024 08:19:50

Code	Facility	No of reports	OUTPATIENT		INPATIENT		DEATHS		Slides Examined			RDT Examinations				
			Clinical	RDT	Clinical	RDT	Clinical	RDT	No. Exam	+ve %	+ve % falcip	No. Exam	+ve %	+ve % falcip	Failed	
30101	Boru HC	3	1	7	0	0	0	0	0	0	0	27	25.9	18.5	0	
30102	Irua HC	3	31	140	1	1	0	0	0	0	0	355	43.6	30.5	0	
30103	Kupiano HC	3	49	62	11	18	0	0	0	0	0	180	34.4	27.2	0	
30104	Monegama HC	3	8	427	23	10	0	0	1	100	100	919	44.3	30.4	0	
30105	Upulima SC	3	6	37	0	0	0	0	0	0	0	94	39.4	23.4	0	
30106	Paramana SC	3	0	0	0	0	0	0	0	0	0	0	0	0	0	
30107	Bam CHP	3	3	63	1	0	0	0	0	0	0	169	37.9	33.7	0	
ABAU District			21	98	736	36	29	0	0	1	100	100	1694	41.9	29.8	0
30201	Fane SC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30203	Ononge SC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30204	Tapiri HC	2	1	9	0	0	0	0	0	0	0	37	27.0	21.6	0	
30205	Wotape HC	2	31	46	0	0	0	0	0	0	0	0	0	0	0	
30206	Yongai SC	2	31	203	0	0	0	0	0	0	0	254	79.9	58.3	0	
30207	Yororo SC	1	1	5	0	0	0	0	0	0	0	8	62.5	62.5	0	
GOILALA District			7	64	263	0	0	0	0	0	0	299	72.9	53.8	0	
30301	Agevairu SC	3	12	509	1	1	0	0	1	100	100	850	59.9	36.9	0.2	
30302	Akufa SC	3	6	506	4	2	0	0	1	0	0	821	62.0	53.8	0.1	
30303	Bakokudu SC	3	50	57	1	1	0	0	0	0	0	121	47.1	43.0	0.8	
30304	Beneina HC	3	9	694	2	0	0	0	0	0	0	1343	51.7	37.2	0	
30305	Efogi SC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30306	Goldie SC	3	0	27	0	0	0	0	0	0	0	96	29.2	25.0	0	
30307	Inawia SC	2	25	132	1	0	0	1	2	50.0	50.0	240	55.0	41.3	0	
30308	RMC UC	3	0	0	0	0	0	0	0	0	0	0	0	0	0	
30309	Sogeri SC	1	0	12	0	0	0	0	0	0	0	0	0	0	0	
30310	Vaifa's HC	3	30	388	8	6	0	0	0	0	0	893	43.4	35.9	0	
30311	Waiba SC	2	0	12	0	0	0	0	0	0	0	18	66.7	61.1	0	
30312	Yule Island SC	3	3	54	0	0	0	0	0	0	0	118	45.8	35.6	0	
30313	Ooa SC	3	1	574	2	1	0	0	0	0	0	1507	43.3	30.5	0.3	
30314	Ponebada SC	3	3	2	0	0	0	0	0	0	0	3	100	100	0	
30315	Pau SC	2	1	29	0	0	0	0	1	0	0	105	27.6	17.1	0	
30316	Kuriva SC	3	13	509	0	0	0	0	2	100	100	645	80.0	56.1	0	
30317	Lakoli Hospital	3	60	43	0	0	0	0	1	100	100	71	53.5	52.1	0	
30318	Tubusenia SC	3	1	44	0	0	0	0	0	0	0	250	17.6	6.0	0	
30319	Papa SC	3	0	34	2	1	0	0	0	0	0	152	22.4	19.1	0	
30320	Kubuna SC	3	0	226	0	0	0	0	0	0	0	368	62.0	47.0	0	
30321	Kancasia SC	3	1	342	0	0	0	0	1	0	0	717	47.7	39.3	0.1	
30322	Manari SC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
KAIRUKUHIRI District			55	215	4194	21	12	0	1	9	55.6	55.6	8318	51.3	36.3	0.1
30401	Boku SC	3	2	136	0	0	0	0	0	0	0	224	58.5	44.6	0	
30402	Dorobisoro SC	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30403	Hula SC	3	5	29	0	0	0	0	0	0	0	61	47.5	47.5	0	
30404	Kali SC	2	3	7	0	0	0	0	0	0	0	74	9.5	9.5	0	
30405	Karikila HC	3	27	144	5	1	0	0	2	50.0	50.0	681	21.9	12.2	1.8	
30406	Bonegama SC	3	0	121	2	1	0	0	0	0	0	486	25.1	17.1	0.4	
30407	Kokorogoro SC	3	1	61	0	0	0	0	0	0	0	255	29.8	17.1	0	
REGO District			17	38	498	7	2	0	0	2	50.0	50.0	1731	28.8	19.5	0.8
Central Province			100	415	5691	64	43	0	1	12	58.3	58.3	12042	47.3	34.8	0.2

All Facilities have sent in at least a report for the first quarter except Dorobisoro SC, Manari SC, Efogi SC, Ononge SC and Fane SC no reports. Efogi and Fane is closed. Paramana submitted 3 reports with zero inpatient, outpatient and RDT exam recorded but according to NHIS 4 RDT Exam done, 1-Positive and 3-Negative, which may indicate no patient presenting with any one of the common symptoms of infectious disease (Fever / GBA/ Chills/ Rigors/ Malaise) that would require an RDT.

The graph shows Quarter One NHIS Reporting Status for Central Province. The following facilities have reported clinical diagnosis from the Outpatient.



According to previous reports, there has been quite an improvement on clinical diagnosis numbers. For every quarterly visit, onsite refresher and CQIs the officers will be reminded to not do clinical diagnosis to continue improving.

9. MALARIA PROGRAM VEHICLE

Registration Validity: **19.04.24**

Safety Sticker Validity: **14.04.24**

Duration of Use: **19 Days**

Running Condition: **Satisfactory**

Driver: **Bagu Bagu**



12. FINDINGS AND OBSERVATIONS

- Hula HC has been out of supplies since 22/02/24. There is a laboratory but Malaria Microscopy is not done, only testing for Tuberculosis.
- Waima HC has been closed since November due to theft, villagers are yet to reconcile with Health Facility staff. No stock supplied, there is sufficient stock for the quarter
- Inawaia H/C has been charging Outpatient fees K25
- Brown River Clinic charging K20 outpatient fees and for RDT, including fees for stat doses of ACTs when the clinic was running low on ACT stock. Reason being the officer is not on payroll, has two volunteers and he pays for supplies occasionally
- KAK H/C has a good number of RDTs and ACTs expired
- Paramana Officer has not been available for Q4 last year and Q1 visit this year.
- Bam clinic was last visited by our team in 2022, they received supplies from Moreguina Health Centre
- Porebada Clinic had a 2 ½ bales of Nets, yet to be used. The staff was unable to tell us which team delivered. 50 nets given from Q4 last year was not accounted for in the ANC Register therefore the staff onsite (CHW Lohia) was advised to transfer data from the Health Facility ANC Registry to our ANC Register (A4).
- Dropped off all 7 boxes of Q1 supplies for 'Hard To Reach' Facilities at CPHA, 3 boxes under Catholic Health was refused by their District Health Coordinator-Mr. William Vagi because it is costly for them to distribute
- Fane HC is closed.
- Majority of the Facilities have no or limited stock of Fansidar.

13. RECOMMENDATIONS

- Community Awareness Campaign:** Launch targeted community awareness campaigns to educate people on malaria prevention, symptoms, and the importance of seeking prompt **treatment from local Health Facility.**
- CPHA Partners Meeting: It will be good to have a regular (Monthly) Meetings with other NGOs to share information about current/upcoming programs. This facilitates coordination among partners which will help to prevent duplication of efforts and maximize resource utilization.
- PMS and HMM Officer to integrate activities and involve CPHA on a regular basis

14. ACKNOWLEDGEMENTS

1. Central Provincial Health Authority

2. Rotary Against Malaria

3. National Malaria Control Program

4. Catholic Health Services

Annex (1): Central Q1 2024 Distribution List ACT & RDT - Created for packing on 20.11.2023

ACT, RDT, & PQ QUANTIFICATION UPDATED 21.09.2023 - QUARTER 1 DISTRIBUTION 2024

Created for Packing on 20.11.2023

Four Month Supply - Packets

Three Months' Supply - Packets

Health Facility Code	Health Facility	Health Facility Type	RDTs (25)
30101	Boru	Sc	15
30102	Iruna	Hc	40
30103	Kupiano	Hc	30
30104	Moreguina	Hc	50
30105	Upulima	Sc	12
ABAU	DISTRICT		147
30201	Fane	Sc	4
30203	Ononge	Sc	4
30204	Tapini	Hc	6
30205	Woitape	Hc	5
30206	Yongai	Sc	11
30207	Tororo	Sc	4
30208	Yulai	Sc	4
30106	Paramana	Sc	10
30107	Bam	CHP	10
GOILALA	DISTRICT		58
30301	Agevairu	Sc	65
30302	Akufa	Sc	60
30303	Bakoiudu	Sc	20
30304	Bereina	Hc	80
30305	Efogi	Sc	4
30306	Goldie	Sc	15
30307	Inawaia	Sc	60
30308	Rmc	Uc	6
30309	Sogeri	Sc	40
30310	Veifa'a	Hc	80
30311	Waima	Sc	60
30312	Yule Island	Sc	40
30313	Doa	Sc	100

ACT6 (30)	ACT12 (30)	ACT18 (30)	ACT24 (30)
1	2	1	2
2	3	2	5
2	2	2	4
2	4	3	7
1	1	1	2
8	12	9	20
0	1	0	1
0	1	0	1
0	1	1	1
0	1	1	1
1	1	1	2
0	1	0	1
0	1	0	1
1	1	1	1
1	1	1	1
3	9	5	10
3	5	4	9
3	5	3	8
1	2	2	3
4	7	5	11
0	1	0	1
1	2	1	2
3	5	3	8
0	1	0	1
2	3	2	5
4	7	5	11
3	5	3	8
2	3	2	5
5	8	5	14

Primaquine (100)	Primaquine (1000)
24	2
51	5
42	4
71	7
21	2
209	21
9	1
9	1
14	1
14	1
21	2
9	1
9	1
15	2
15	2
114	11
92	9
81	8
35	3
116	12
9	1
24	2
81	8
9	1
51	5
116	12
81	8
51	5
138	14

30314	Porebada	Sc	15
30315	Pau	Sc	30
30316	Kuriva	Sc	146
30317	Laloki	Hospital	30
30318	Tubuserea	Sc	30
30319	Papa	Sc	30
30320	Kubuna	Sc	35
30321	Kanosia		30
30322	Manari		4
KAIRUKU-HIRI	DISTRICT		980
30401	Boku	Sc	10
30402	Dorobisoro	Sc	11
30403	Hula	Sc	20
30404	Kak	Sc	10
30405	Kwikila	Hc	30
30406	Boregaina	Sc	20
30407	Kokorogoro	Sc	30
RIGO	DISTRICT	0	131
CENTRAL	PROVINCE		1,316

1	2	1	2
2	2	2	4
7	12	8	20
2	2	2	4
2	2	2	4
2	2	2	4
2	3	2	5
2	2	2	4
0	1	0	1
51	82	56	134
1	1	1	2
1	1	1	2
1	2	1	3
1	1	1	2
2	2	2	4
1	2	1	3
2	2	2	4
9	11	9	20
71	114	79	184

24	2
42	4
203	20
42	4
42	4
42	4
51	5
42	4
9	1
1,379	138
21	2
21	2
30	3
21	2
42	4
30	3
42	4
207	21
1,908	191