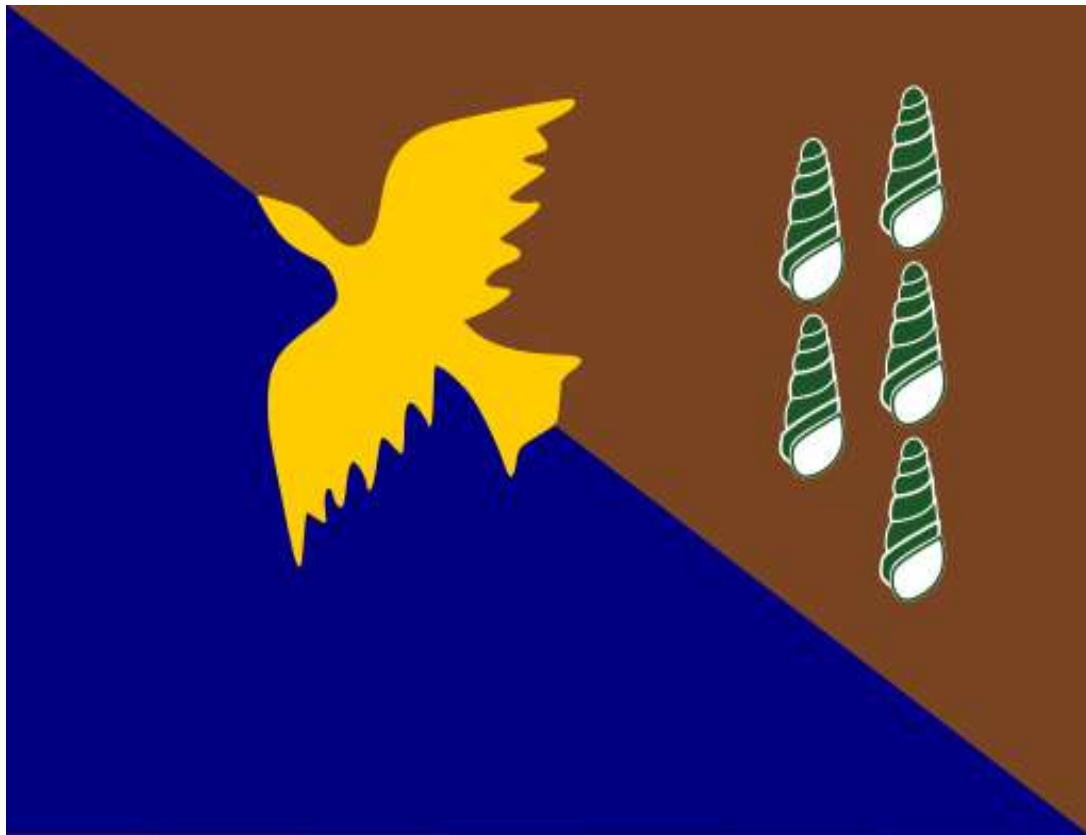




# NATIONAL MALARIA CONTROL PROGRAM ROTARIANS AGAINST MALARIA FIELD TRIP REPORT QUARTER ONE 2024



## MANUS PROVINCE



## **QUARTER ONE (1) FIELD TRIP REPORT**

Name of Officer:	Eustin Torot
Destination:	Manus Province
Date Travelled:	7 <sup>th</sup> of March 2024
Date Returned to Port Moresby:	17 <sup>th</sup> of March 2024
Nights away from the office:	10 Nights
Type of documents attached:	Ticket Bud
PHO Accompanying Officer:	Mr. Julius Binamb
Purpose of Travel:	Quarter One (1) Malaria Supervisory Visit and Drug Distribution

### **PEOPLE MET WITH:**

- Mr. Francis Possy – Chief Executive Officer (CEO)
- Dr. Ahango Amai – Director Public Health
- Ella Micheal – Deputy Director Public Health
- Mr. Songan Pokawin- PHA logistics 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



**EXECUTIVE SUMMARY**

The quarter one (1) Malaria commodity distribution and health facility Supervisory field trip commenced on the 7<sup>th</sup> of March to 17<sup>th</sup> of March 2024. This visit is under the National malaria programme accompanied by the Provincial Malarial Supervisor Mr. Julius Binamb and Supporting staffs from Manus PHA to visit all accessible Health Facilities in Manus Province. A curtesy meeting was held with key partners from Manus PHA including Manus PHA CEO Mr. Francis Possy, Deputy Public Health Director Ms. Ella Michael and Director Public Health Dr Amai. During our discussions, it was made clear that NDOH will now be making 100% procurement of Primaquine. Discussions was held around the new project boat purchased by RAM and its usage. PHA Administration through CEO Mr. Francis Possy have agreed that all the necessary items needed for the boat to be operation will be covered by Manus PHA so as to improve the quality of service to the people.

In this Q1 visit to Manus Province, we were able to cover 11 of the 13 facility that needed Malaria Supervisory and Drug distribution visit. Two Health Facilities (Mal and Wuvulu HC) were not visited as they were Inaccessible. During the visit it was noted that clinical case reporting has improved however some facilities are still reporting clinical case and this was addressed in each facility by the team. Also some Health facility not capturing data from Aid Post due to late submission of repot is also an ongoing addressed by the team during this quarter visit. Overall, all facilities are aware and practicing the New Malaria Treatment protocols.

## HEALTH FACILITY VISIT UPDATES

There are 13 reporting Health facilities located in Lorengau, the only district in Manus Province. In this quarter, we were able to visit 11 of the 13 facility which are accessible by road and sea. The other two health facilities (MAL HC and Wuvulu HC) are inaccessible due to its distance in reference to Lorengau town therefore they were not visited. For the 11 facilities visited, 5 of which are accessible by road including MTMM HC (Tingou HC), Lombrum HC, Lorengau East and West Urban Clinic and Manus Provincial Hospital. The other 6 facility including, Bundralis HC, Lessau HC, Lako HC, Panuseluh HC, Patu HC and Pelipowai HC are all accessible by sea only.

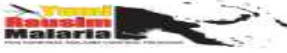

**Table 1.** Health Facility visited in Q1

PROVINCE	DISTRICT	HEALTH CENTRE	VISIT 1
MANUS	LORENGAU	BUNDRALIS HC	14.03.24
MANUS	LORENGAU	LAKO HC	13.03.24
MANUS	LORENGAU	LESSAU HC	14.03.24
MANUS	LORENGAU	LOMBRUM HC	08.03.24
MANUS	LORENGAU	LORENGAU EAST UC	15.03.24
MANUS	LORENGAU	LORENGAU HOSPITAL	15.03.24
MANUS	LORENGAU	LORENGAU WEST UC	08.03.24
MANUS	LORENGAU	MAL HC	
MANUS	LORENGAU	PANUSELU HC	11.03.24
MANUS	LORENGAU	PATU HC	13.03.24
MANUS	LORENGAU	TINGOU HC	09.03.24
MANUS	LORENGAU	WUVULU HC	
MANUS	LORENGAU	PELIPOWAI HC	13.03.24
<b>TOTAL</b>		<b>13</b>	<b>11</b>

	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

## RDTs AND ACT SUPPLIES PROCURED GLOBAL FUND

**Table 2.** ACT and RDT supplied by Global Fund

DESTINATION: MANUS PROVINCE SHIPPER: AIR NIUGINI

PACKAGING DATE: 12/12/2023 INVOICE NO. \_\_\_\_\_

CARTON #	NUMBER OF CARTONS	ITEM	QUANTITY PER CARTON	TOTAL QUANTITY	TOTAL IN BASIC UNITS	BATCH #
1 to 12	12	RDT	40	480	12,000	101523/28/36
13	1	ACT 18	24	24	720	7254176
14 TO 16	3	ACT 24	24	72	2,160	7254367
17	1	ACT 6	24	24	720	7254175
		ACT 24	4	4	120	7254176
18	1	ACT 12	43	43	1,290	
19	1	ACT 18	4	4	120	
		RDT	32	32	800	101523/28/36
<b>19</b>						

TOTAL SUMMARY						
		ITEM	PACKETS	INDIVIDUAL UNITS		
No. of Cartons	19	RDT	512	12,800 test kits		
Weight (Kg)	241	ACT 6	24	720 blister pkts		
Volume (m <sup>3</sup> )	1.23	ACT 12	43	1,290 blister pkts		
		ACT 18	28	840 blister pkts		
		ACT 24	76	2,280 blister pkts		
		PRIMAQUINE		NOT SUPPLIED tablets		

## **ANTENATAL LLINS REPORT**

During the quarter one visit, no ANC LLINs were distributed as all facilities have enough stock on hand. Only two deliveries were done by Malaria supervisor Mr Julius Binamb in February before Q1 visit. During the visit, it was noted that accountability of issued nets is still a problem in all 11 facility visited. Most facility visited are missing the receiving receipt, monthly tally of distributed nets not documented and issued receipt of nets in the ANC LLINs register not filled and documented well. Onsite training was done and those issues were stressed to each facility to improve on. Stock take was done after the visits and a total of 690 LLINs nets remained and stored in the PHA container

ROTARIANS AGAINST MALARIA							
MANUS PROVINCE							
LOCATION OF CONTAINER: PHA YARD							
OFFICER INCHARGE: PMS Mr Julius Binamb							
DATE	DELIVERY TO HEALTH CENTRE	PERSON RECEIVING GOODS	OFFICER SUPPLYING NETS	DOCUMENTATION NO.	STOCK IN	STOCK OUT	BALANCE
01.01.24	Opening Balance				820		820
15.02.24	MANUS PROVINCIAL HOSPITAL	CAROLYN KEN	JULIUS BINAMB	26522		30	790
15.02.24	LORENGAU WEST URBAN CLINIC	CLARE INDING	JULIUS BINAMB	26525		100	690
						130	690

## **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.

## **RDTs AND ACT RECONCILIATION**

Most of the reporting health facilities are reporting very well however they are not capturing the Aid post reports in their reporting. One of the main reason is late submission of report from the aid post. This is a chronic problem and reporting Health Facilities are advice to put systems in place such as creating WhatsApp group (improve communication between Aid post and health Centres) or set a date for Aid Post to submit their reports before receiving their Malaria commodities. Due to Health Facilities not capturing reports from Aid Post, correct amount of malaria commodities is not supplied resulting in commodities shortage and incorrect RDT/ACT accountability from Health Facilities. This was addressed in the Q1 visit and facilities are now required to capture the reports of each aid post that they are supplying malaria commodities.

## HEALTH FACILITY FINDINGS AND OBSERVATION

**Table 3.** Observation findings from Health Facility Visited

<b>Health Facility</b>	<b>RDT/ACT STOCK MANAGEMENT</b>	<b>TREATMENT</b>	<b>ANC LLINs</b>	<b>REPORT FROM Jan-Dec 2023</b>
Lombrum HC 08/03/2024	Malaria commodities stored well in air conditioned room. No stock card used in HF. No expired commodity noted	Attending staff of the Health Facility well are of the new malaria treatment protocol. Refresher onsite training done	Stock on Hand: 97 LLINs nets. Staff alerted that HF has not seen a lot of pregnant mothers since last visit thus high number of nets still available in HF. Distributed receipts from Q3 and Q4 2023 only was found in the ANC net Register	12 report submitted. 3 clinical cases recorded
Lorengau West Urban Clinic 08/03/24	Malaria commodities stored in a small office. No stock cards used for keeping record. All commodities within expiry dates	All staff are aware of the new malaria treatment protocol and are practicing it	No nets issued as the facility had enough stock in hand.	12 report submitted 11 clinical case recorded
Mathew Tuam mundriu Memorial HC (Tingou HC) 09/03/24	Malaria commodities stored in a spacious room. Stock cards not used for record keeping.	Staff are aware of some of the new treatment protocol. Onsite training was done. Staff unsure about the new IPTp treatment protocol. Onsite training done	No nets issued as Health Facility had enough stock on hand.	12 report submitted
Panuselu HC 11/03/24	No stock cards used by HF. Commodities store in the pharmacy. No expiry drug or RDT was noted.	Attending Staff not aware of most of the new malaria treatment protocol. Onsite training was done	Health Facility had enough stock on hand so no nets were issued. ANC register not well kept and updated.	12 report submitted 3 clinical case recorded
Lako HC 11/03/24	Good accountability of all commodities. Stock card used and all commodities are all within the expiry dates.	Staff are aware of the new malaria treatment protocol. Refresher training done	No nets issued.	12 report submitted 16 clinical case recorded
Pelipowai HC 13/03/24	Health Facility is using stock card. Commodities stored well in a spacious room. Good accountability of Malaria Commodities No expiry commodities was removed.	Attending well aware of the new malaria treatment protocol. Onsite refresher of the diagnostic tool (RDT) and treatment protocol was done.	Health facility still had enough stock on hand so no nets was issued.	12 report submitted 32 clinical case recorded

Patu HC 13/03/24	Malaria commodities stored in a small pharmacy. No stock cards used by the HF to maintain records. All commodities are within the expiry dates.	Staff are aware of the new treatment protocol. Onsite refresher training done	ANC register not well kept. Health Facility had enough stock on hand so no nets was issued	12 report submitted 16 clinical case recorded
Lessau HC 14/03/24	All commodities stored in the pharmacy. Stock card available in HF but it is not used.	Staff not aware of most of the new malaria treatment protocol. Onsite training was done	ANC register not well kept. Health Facility had enough stock on hand so no nets was issued	12 reports submitted 163 clinical recorded 1 clinical death
Bundralis HC 14/03/24	All malaria commodities stored in the pharmacy. Stock used for Malaria commodities. No expire drug/RDT was removed.	Attending staff aware of the new malaria treatment protocol. Onsite refresher was done.	No nets were issued. Enough stock on hand	12 reports submitted 2 clinical case recorded
Lorengau East Urban Clinic 15/03/24	All commodities kept in the Pharmacy room. No stock card used for recording. All malaria commodities are within the expiry dates.	Attending staff aware of the new malaria treatment protocol. Onsite refresher was done.	No nets were issued. Enough stock on hand	12 reports submitted 8 clinical case recorded

### **LORENGAU HOSPITAL REPORT: DATE OF VISIT- 15/03/24**

All key partners from Lorengau Hospital were notified, such as the Pharmacy Manager, Director Curative and Departmental Heads before the teams visit to the hospital. Unfortunately, the Director Curative was not able to accompany the team as he was attending the MANUS PHA Review Meeting. All departments using/storing Malaria commodities were visited such as,

- 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. During the visit, no expired ACT/RDT was noted and they still had enough stock from the last supply so no distribution of ACT/RDT was done.

During the visit it was noted most hospital staff are aware of the new treatment protocol and are practicing it. The quality use of diagnostic tool is an issue as staffs are not practicing the correct methods of doing RDT according to instructions from supplied RDT. Onsite training was done to the attending staff. **Clinical reporting has improved, however clinical cases is still recorded and this was conveyed to the attending staff by the team with the onsite training and advice to use the available diagnostic tool like Microscopy and RDT for correct diagnosis and treatment.** Late submission of report is also an ongoing issue for the Hospital and this was discussed with the team at Medical records and PHIO. Attending staff and departmental heads were advised to improve on timely submission of report.

## SUMMARY OF FINDINGS

- ✓ Clinical case reporting has improved however still few cases being recorded
- ✓ Reporting Health Facilities not capturing data from Aid Post due to late submission from Aid post is noted in facilities visited
- ✓ Only three facilities, Lako HC, Pelipowai and Tingou HC are keeping stock cards while the other Health facility needs improvement
- ✓ Accountability of issued and distributed ANC nets is an issue throughout all facility visited

During the Q1 visit, it was noted that most health facilities are aware of the new IPTp (Fancider prophylaxis for pregnant woman) and are practicing it. However, few staff from the visited health facilities were not aware of the new malaria treatment protocol. Onsite refresher training was done for all facilities visited. During the visit, four Health Facilities (Lombrum HC, Lorengau WUC, Pelipowai HC and Lessau HC) were stock out of Fancidar. Health Facilities were advised to manage and request for the drug on time through Medical Transit Store Manus. All Health facilities are doing well in terms of recording IPTp.

## 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, however they are not doing Malaria Microscopy due no stock reagents, slides and microscopy machine specifically for doing malaria diagnosis.

### 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 have functioning ENHIS tablet and are correctly using it for reporting. The ENHIS tablet is usually cared for by the facility OIC or an appointed staff and is responsible for monthly submission of reports. Facilities were advised to do timely reporting and alert the Provincial Health Information Officer (PHIO) if they encounter any issues with the reporting tablet.

**Figure 2:** eNHIS report for MANUS from January to December 2023

Manus Province		MALARIA REPORT January to December 2023										Date Printed: 26/01/2024 10:06:09			
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
160101	Bundralis HC	12	2	418	1	4	0	0	0	0	0	1233	27.6	14.4	0.1
160102	Lako HC	12	16	275	2	0	0	0	0	0	907	25.8	10.5	0.1	
160103	Lessau HC	12	163	602	0	0	1	0	0	0	778	32.3	17.9	0.3	
160104	Lombrum HC	12	3	530	0	0	0	0	2	50.0	50.0	1625	33.0	20.6	0.1
160105	Lorengau East UC	12	8	570	0	0	0	0	0	0	2536	22.3	10.5	0.2	
160106	Lorengau Hospital	6	755	1674	14	1	0	0	23	17.4	8.7	2847	41.5	19.6	1.2
160107	Lorengau West UC	12	11	1017	0	0	0	0	0	0	3698	50.9	28.7	0.1	
160108	Mal HC	11	18	99	0	0	0	0	0	0	337	29.7	22.0	0	
160109	Panuselu HC	12	3	242	2	2	0	0	0	0	844	42.7	18.6	0.1	
160110	Patu HC	12	16	277	4	2	0	0	0	0	858	26.5	14.8	0.3	
160113	Pelipowai HC	12	32	280	0	0	0	0	0	0	1449	37.0	17.9	0.2	
160111	Matthew Tuam Mundru Memorial HC	12	0	179	0	0	0	0	0	0	641	30.7	16.2	0.2	
160112	Wuvulu HC	8	7	4	0	0	0	0	0	0	66	1.5	0	0	
<b>MANUS District</b>		145	1034	6257	23	9	1	0	25	20.0	12.0	17819	36.0	18.8	0.3
<b>Manus Province</b>		145	1034	6257	23	9	1	0	25	20.0	12.0	17819	36.0	18.8	0.3

**Figure 3: eNHIS report for Manus Province for January and February 2024**

Manus Province

MALARIA REPORT February to February 2024

Date Printed: 26/03/2024 07:59:09

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
160101	Bundralis HC	1	1	11	0	0	0	0	0	0	0	76	11.8	3.9	0
160102	Lako HC	1	0	64	0	0	0	0	0	0	0	64	25.0	9.4	0
160103	Lessau HC	1	0	20	0	0	0	0	0	0	0	70	30.0	15.7	0
160104	Lombrum HC	1	1	49	0	0	0	0	0	0	0	179	31.8	26.3	0
160105	Lorengau East UC	1	3	29	0	0	0	0	0	0	0	0	0	0	0
160106	Lorengau Hospital	0	0	0	0	0	0	0	0	0	0	0	0	0	0
160107	Lorengau West UC	1	0	73	0	0	0	0	0	0	0	154	32.5	19.5	0
160108	Mal HC	1	7	18	0	0	0	0	0	0	0	38	47.4	23.7	0
160109	Panuseku HC	1	0	0	0	0	0	0	0	0	0	53	32.1	17.0	1.9
160110	Patu HC	1	0	33	0	0	0	0	1	0	0	98	35.7	23.5	0
160113	Pelipowai HC	1	0	52	0	0	0	0	0	0	0	224	29.5	19.2	0
160111	Matthew Tuam Munchiu Memorial HC	0	0	0	0	0	0	0	0	0	0	0	0	0	0
160112	Wuvulu HC	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MANUS District		10	12	349	0	0	0	0	1	0	0	956	30.2	18.9	0.1
Manus Province		10	12	349	0	0	0	0	1	0	0	956	30.2	18.9	0.1

Manus Province

MALARIA REPORT February to February 2024

Date Printed: 26/03/2024 07:59:09

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
160101	Bundralis HC	1	1	11	0	0	0	0	0	0	0	76	11.8	3.9	0
160102	Lako HC	1	0	64	0	0	0	0	0	0	0	64	25.0	9.4	0
160103	Lessau HC	1	0	20	0	0	0	0	0	0	0	70	30.0	15.7	0
160104	Lombrum HC	1	1	49	0	0	0	0	0	0	0	179	31.8	26.3	0
160105	Lorengau East UC	1	3	29	0	0	0	0	0	0	0	0	0	0	0
160106	Lorengau Hospital	0	0	0	0	0	0	0	0	0	0	0	0	0	0
160107	Lorengau West UC	1	0	73	0	0	0	0	0	0	0	154	32.5	19.5	0
160108	Mal HC	1	7	18	0	0	0	0	0	0	0	38	47.4	23.7	0
160109	Panuseku HC	1	0	0	0	0	0	0	0	0	0	53	32.1	17.0	1.9
160110	Patu HC	1	0	33	0	0	0	0	1	0	0	98	35.7	23.5	0
160113	Pelipowai HC	1	0	52	0	0	0	0	0	0	0	224	29.5	19.2	0
160111	Matthew Tuam Munchiu Memorial HC	0	0	0	0	0	0	0	0	0	0	0	0	0	0
160112	Wuvulu HC	0	0	0	0	0	0	0	0	0	0	0	0	0	0
MANUS District		10	12	349	0	0	0	0	1	0	0	956	30.2	18.9	0.1
Manus Province		10	12	349	0	0	0	0	1	0	0	956	30.2	18.9	0.1

**UPDATE ON NEW BOAT 23 FOOTER AND 60 HP ENGINE**

The 23 footer Boat and engine is currently stored in the Medical transit store log yard. As planned by the RMC in Q4 2023, the boat needs to be registered with the proper authority and a moving trailer, zoom hose and fuel containers is needed for the boat to be operational. This was again discussed with Director Public Health Dr Amai and Manus PHA CEO Mr. Possy and it was agreed upon that Manus PHA Administration would help purchase the items. Mr. Possy advised the team that a request letter be sent to his office with a quotation of the following items to be purchase,

- Boat Moving Trailer
- Boat registration fee
- Containers for fuel
- Fuel hose

**CHALLENGES AND RECOMMENDATION**

CHALLENGES	RECOMNDATIONS
Clinical case reporting and quality use of diagnostic tool (RDT)	More onsite training to be done by PMS to utilize available diagnostic tools. CQI training for Kimbe Hospital and Surrounding health Facilities in Q2 visit
Registration and purchase of moving trailer for the Project boat with other necessities	MANUS PHA Administration to help purchase the items for the project boat
Use of stock cards in Health Facility	Increase number of routine supervisory visit by PMS to Health Facilities not using stock card to help them improve

## **TRANSPORT USE**

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

## **CONCLUSION**

The Q2 supervisory visit to Manus Province commenced on the 7<sup>th</sup> of March and ended on the 17<sup>th</sup> of March. In the Q1 the visit, we were able to visit 11 accessible Health Facilities out of the 13 reporting Health Facilities in Manus Province. Only two Health Facilities, Mal HC and Wuvulu HC were not visited due to their distance in reference to Lorengau town. Issues identified during Q1 visit to Health Facilities such as, Health Facilities not keeping stock card, poor accountability of issued and distributed ANC nets, Clinical case reporting and late submission of reports were addressed and recommendation made to help facilities improve in those areas. Furthermore, discussion was also held with our key partners in MANUS PHA regarding the project boat and its operational status. It was agreed that the boat should be operational to help malaria programs in Manus Province therefor Manus PHA have agreed to purchase the items necessary for the boat to be operational.

Overall, reporting from visited Health Facilities to NHIS is good except for Lorengau Hospital and this was addressed in Q1 visit and the staff at Lorengau Hospital were advised to improve on their timely reporting. The Manus PHA continued their support to the Malaria Program as the visiting team was accompanied by PHA staff during the Q1 supervisory visit. The partnership between MANUS PHA, RAM and the NATIONAL MALARIA CONTROL PROGRAM is vital in the success of Malaria programs in the Province.

## **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 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**



*Onsite Training with Patu HC staff*



*Onsite training done with Pelipowai HC staff*



*During Teams visit to Lorengau Hospital Pharmacy*

**END OF REPORT**