

## **Quarter 1 – Northern Province - Field Trip Report**

**Name of officer:** Aileen Watakapura

**NPHA Officers:** 1. Driver – Mr. Robin Koike,  
2. Malaria Elimination Officer - Mr. Bernard Goviro  
3. Security Officer – Mr. Bonnie Arabata  
4. Gideon Pokowas – HMMO Oro

**Date:** 05<sup>th</sup> of Feb 2024 to 16<sup>th</sup> Feb 2024

### **Summary**

This is a brief summary report for the quarter one field trip conducted in Oro – Northern province from 5<sup>th</sup> to 16<sup>th</sup> Feb 2024. The team that went out comprise of the PHA driver, PHA officer x 1, Security Officer and myself. This visit was purposely for health facility monitoring and data quality checks. The activities conducted during the visit includes drug distribution, ANC net distribution and follow up on facility reports for 2023. There are total of 20 health facilities in the province, however only 17 are functional and 3 are closed. We visited a total of 13 health facilities in the province out of the 17 functioning facilities. Those 4 health facilities not visited are inaccessible facilities, Ioma, Itokama, Sakarina and Emo River.

Prior to conducting the normal health facility monitoring visit, we met with the Public Health Director notifying her of our program activities and advised her office of which officers are to be involved with the RAM activities.

### **Activities conducted during the health facility visit includes;**

- Ensuring correct diagnosis and treatment of malaria cases by health care workers
- Ensuring data quality from the malaria registers and ANC LLIN registers
- Stock count of malaria commodities at the facility and restocking of items
- Ensuring Primaquine stat doses and IPTp is practiced by health care workers
- Ensuring monthly timely reporting via NHIS
- Ensuring HMM program is supported by respective facilities.

### **Key findings**

From the malaria reports from January to December 2023, there were a number of health facilities with pending reports for several months. Those health facilities included; Saiho with 5 reports yet to submit, Sangara with 7 reports yet to submit, Popondetta Hospital with 5 reports yet to submit so I did a courtesy visit to the office of the Provincial health information officer (PHIO), Mr. Bonniepe discussing this matter. He is also aware of this and has been reminding officers responsible several times already concerning this matter. We've also visited those facilities physically and talked with the responsible officers regarding

their pending reports. We leave it to the PHIO to ensure those reports are submitted and must not happen again in 2024. We'll do a follow up again in the next quarter visit.

For the other facilities with 1 or 2 pending reports as indicated per the NHIS report from January to December 2023 have already submitted theirs manually, mostly for November and December reports. The PHIO is now working on entering those reports into the system so it can be cleared. This was confirmed with most of the facilities as they had their copies of those reports at the facility.

Ambasi HC had problem with the reporting tablet when submitting the reports, it uploads to only 80% and stops so this was reported to the PHIO, they still have 3 pending reports for 2023 to be submitted. Currently due to this issue they are now submitting the reports through manually.

Popondetta Hospital is also behind with the reports as they only submitted only 7 reports in 2023. Medical Records OIC was briefed on this matter and said to follow up with the officer responsible for doing the reporting. Also they have only one modem in which the program was installed in and can be assessed only in one desktop to submit reports which is also giving them a program for timely reporting. They needed several desk tops or probably tablets to fast track their work.

Though the hospital laboratory is performing malaria microscopy there are no data being captured in the Malaria Annual report for 2023 and previous years due to them not using the correct reporting forms (NHIS). All this time, they were only using the CPHL quarterly reporting form to submit their reports quarterly. Medical records OIC was brought over to the lab with the correct reporting forms (NHIS) and he did a short training for the lab staffs to fill out the reporting forms correctly and submit monthly to medical records so that malaria microscopy data is captured for the hospital. The lab also reported limited stocks of reagents; stain, methanol, buffer tablet, and also are requesting extra bulb light for their microscopy.

Also from the hospital dispensary, the person responsible for entering all prescription forms for Malaria positive cases into the Malaria registers has been indicating clinical diagnosis in the register when the prescribers are not specifying the results on the prescription forms, therefore they are reporting more clinical cases as well and this was also discussed with them. The hospital really needs a CQI training so such issues can be addressed.

The PHIO has asked me to bring some faulty tablets over to be fixed, however he wasn't present to hand it over to me and I left the province. I have advice the RMC supervisor to follow up with them so we can assist them improve their reporting once their faulty tablets are fixed.

No stock out of AL being reported in this quarter. Almost all the facilities still has some AL supplies on their selves at the time of visit to their facilities.

We still have surplus of RDT cartons in the store room from the Q4 and Q 1 supplies.

Otherwise, there are no major issues were identified during the quarter visit.

### **AL and RDT distribution this quarter**

The below table shows the number of ACTs and RDTs distributed in this quarter from the 2023 Quarter 4 buffer stock and 2024 Quarter 1 supplies for Oro province. Supplies for quarter 1 was received on the 29<sup>th</sup> January 2024 before the RMC visit to the province which was in time. Distribution was commenced on the

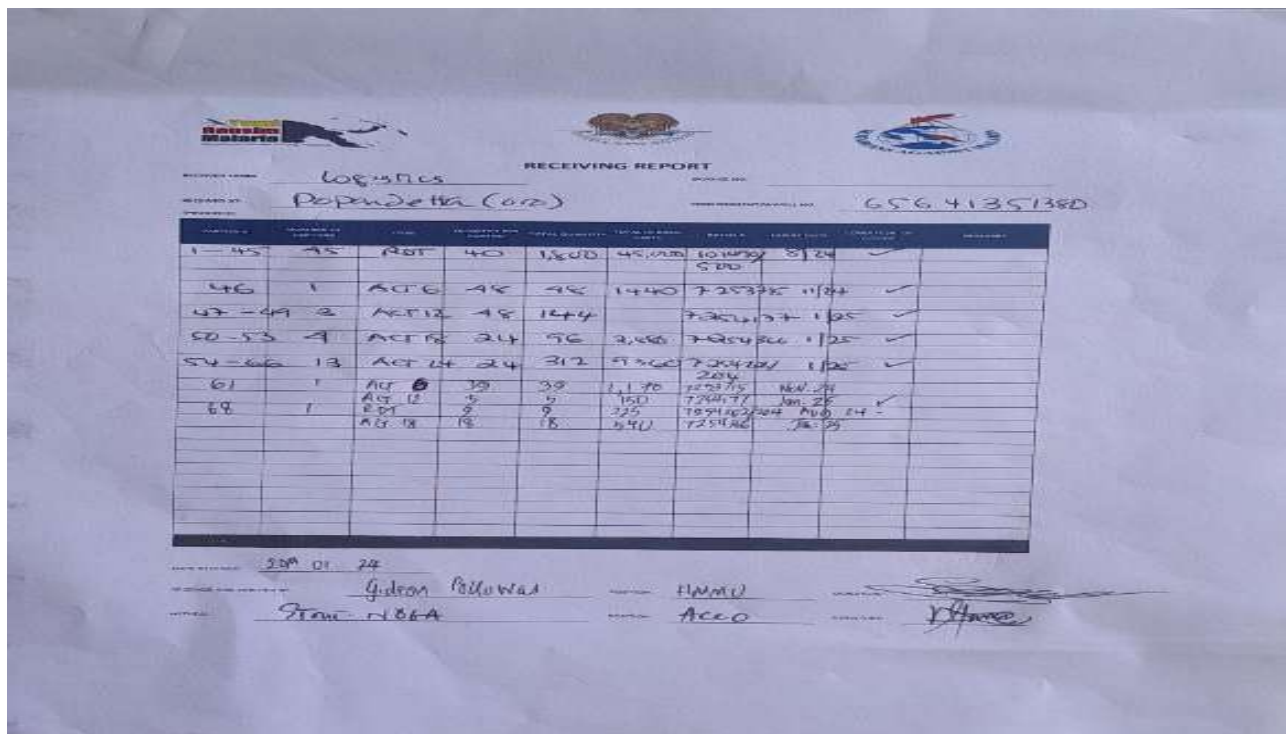
5<sup>th</sup> of February 2024, however prior to that the officers on the ground were using the Q4 buffer stock for distribution to those facilities that were running low stock on AL and RDTs in the month of January. There was no major stock out of ACTs being reported in this quarter. We've also supplied some of the Aid-posts who are reporting very well but due to accessibility and distance couldn't make it to their reporting facility and had come straight to the office. However, we also encourage them to work well with their health centers so they can be supported well.

We still have enough RDT kits (3913) in the province as per the figures below. For the hard to reach facilities, once they come into town they can collect their supplies from the office.

Those figures from the below table are derived from the stock sheet. Refer to the stock sheet for quantities supplied per facility etc.

Items	RDT Boxes of 25	ACT 6 Boxes of 30	ACT 12 Boxes of 30	ACT 18 Boxes of 30	ACT 24 Boxes of 30
<b>Total quantity for distribution</b>	4485	166	292	217	579
<b>Total Actually Distributed</b>	572	149	225	180	376
<b>Remaining Balance</b>	3913	17	67	37	203

Receiving report for the Q1 supplies 2024



**ACT & RDT Reconciliation**

Note: I was not able to collect information for the ACT and RDT reconciliation database since I was not well oriented with the database. However, I just learnt it from a colleague so I will provide information on this starting in the 2<sup>nd</sup> Quarter visit.

### ANC LLIN Net Distribution

We did some ANC net distribution to respective health facilities listed below for this 1<sup>st</sup> quarter. Currently our remaining balance is 1000 nets which is a total of 20 bales left in the storage container.

DATE	DELIVERY HEALTH CENTRE	TO	PERSON RECEIVING GOODS	OFFICER SUPPLYING NETS	DOCUMENTATION NO.	STOCK IN	STOCK OUT	BALANCE
01/01/2024	BROUGHT FORWARD 2023	FROM	Gideon PAPI			1500		1500
16/01/2024	POPONDETTA UC		VICKIE LAKI	GIDEON PAPI	38814		100	1400
25/01/2024	SIROGA HC		CHARLES YUDUP	GIDEON PAPI	38815		100	1300
31/01/2024	GONA SC		MARGERETH ABUSP	GIDEON PAPI	38816		50	1250
06/02/2024	KOKODA HC		MARGERETH ABUSP	AILEEN WATAKAPURA	38817		100	1150
09/02/2024	ORO BAY HC		JENNIFER OGAVE	AILEEN WATAKAPURA	38818		50	1100
12/02/2024	AKO HC		JIM KONEMBO	AILEEN WATAKAPURA	38819		50	1050
13/02/2024	TUFI HC		BORNA. LEKONG J.	AILEEN WATAKAPURA	38820		50	1000
								1000

### IPTp Therapy

Almost all the facilities visited which were providing ANC services are doing IPTp, however for Tufi HC, the nursing staff there was still following the old therapy so we had to write it out for her the new protocol for IPTp – fansidar dosage and time intervals likewise for Gona Health Centre.

No trainings conducted during this quarter visit however we are planning for one in the next quarter for the hospital since this area needs more improvement in terms of their data collection and reporting.

## **Challenges**

Challenges faced during this quarter visit are as follow

1. Delayed reporting for 2023 in some facilities due to OICs being appointed for other PHA roles and no one was stepping in for them to lead at the facility resulting in setback of some activities and especially timely reporting.
2. Lack of supervisory visits from health centres/sub centres to aid posts and CMVs resulting in them coming straight to the Malaria office to collect supplies.
3. CMVs not submitting timely reporting to the reporting facility causing delayed reporting and also discrepancies in the reports for each months
4. Delayed payment to Fuel supplier causing some hick ups with our implementation
5. Faulty boat engine encountered in the middle of the sea causing delay in our return trip from Tufi to the boat stop at Oro bay.
6. RMCs doing admin work again by collecting quotes, liaising with suppliers, etc. which is additional work
7. No Satellite phones for communication in no network areas in case of emergency in high security risk areas
- 8.

## **Recommendations**

- PHA directors to ensure OICs are delegating tasks to other officers on the ground in the event of their absence or when being appointed roles at the PHA level so there is consistency in the smooth running of the facility.
- PMS/HMMO to ensure Health Centres /Sub-Centres are supporting Aid posts and CMVs especially with malaria supplies and are also providing timely reporting to the reporting facilities.
- There should be a first aid kit packed with basic items for the day trips for officers to bring along in case faced with emergency out in the field which can be stored
- Upon weekly updates, admin officer to provide more support in terms of collect quotes and liaising with suppliers rather than letting the RMCs do it.
- Office to purchase satellite phone/first aid kits for RMCs

**Note: I was not able to insert photos since the photo format is not supported however I place the pictures in the photo folder of the public drive.**