

NATIONAL MALARIA CONTROL PROGRAM ROTARIANS AGAINST MALARIA QUARTAR ONE (1) FIELD TRIP REPORT WEST NEW BRITAIN PROVINCE



QUARTER ONE (1) FIELD TRIP REPORT SUMMARY

Name of Officers:	Eustin Torot and Vellgie Ava
Destination:	West New Britain Province
Date Travelled:	1 st February 2024
Date Returned to Port Moresby:	18th February 2024
Nights away from the office:	17 nights
Type of documents attached:	Ticket bud
PHO Accompanying Officer:	Grace Bid (PMS WNB PHA) Apolas Katoa (WNBPHA DRIVER) Wifred Nanghese (WNBPHA MTS OFFICER) Samuel Texie (WNBPHA MTS OFFICER) Anderson Magea (WNBPHA DRIVER)
Purpose of Travel:	Quarter One (1) Malaria Supervisory Visit and Drug Distribution

PEOPLE MET WITH:

- Dr. Joseph Nale _ Director Public Health
- Dr. Tarcisius Uluk _ Acting Director Curative
- Mr. Andrew Kumogene _ Provincial Disease Control Officer (PDCO)
- Mr. Abraham Bunei _ Provincial Pharmacy Inspector
- Ms. Nancy Tanei_ Manager Medical Store WNBPHA
- Ms. Wendy Houinei_ Deputy Director Programs and Standards
- Ms. Grace Bid _Provincial Malaria Supervisor (PMS)

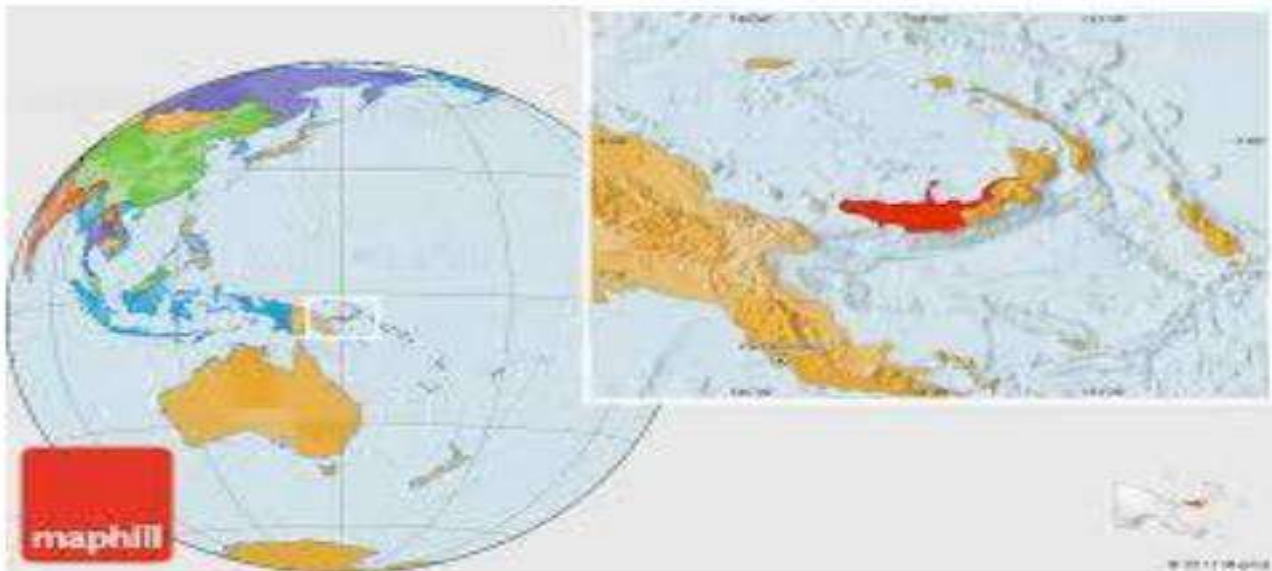
OBJECTIVE

- 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 WEST NEW BRITAIN PROVINCE

West New Britain province is located on the island of New Britain in Papua New Guinea sharing land border with East New Britain province. The capital of West New Britain is Kimbe. The province covers a landmass of 20,387 km² with a population of 264,264 from 2011 census and divided in the past with three districts.; Talasea, Nakanai and Kandrian- Gloucester district.

Figure 1. Map showing location of WEST NEW BRITAIN PROVINCE



EXECUTIVE SUMMARY

The quarter one (1) Malaria commodity distribution and health facility Supervisory field trip commenced on the 1st of February to 18th February 2024. This visit is under the National malaria programme, accompanied by the Provincial Malaria Supervisor Ms. Grace Bid to visit all accessible Health facilities in West New Britain Province. Meetings were also held with Key partners from the WNBPHA including, Director Public Health Dr Nale, Director Curative Dr Uluk and Medical Transit Manager Ms. Nancy Tanei before visiting the Health Facilities. During our discussions, it was made clear that NDOH will be now making 100% procurement of Primaquine and work with WNBPHA to address the current shortage situation in the Province.

There are 38 eNHIS reporting facilities located in the in three District in West New Britain, Nakanai, Talasea and Kandran Gloucester, 27 of which are accessible. In this quarter we were only able to cover 21 of the 27 accessible. During our visits we found that most Aid Post data are not captured in the eNHIS reports. Reporting facilities are now required to work with their Aid Post and capture their data's in their Monthly reporting. Due to bad weather and security reasons, we were not able to visit all accessible facility that are to receive malaria supervisory Visits & Malaria Commodities from West New Britain PHA in partnership with Rotary Against Malaria.

HEALTH FACILITY VISITED

Table 1. Distribution of the Health Facilities in the province and their accessibility

	District	Health Facility	Health Facility Type	Agency	Accessibility	Accessibility Status
1	Nakanai	Buvisi	Health Centre	Government	Accessible	Physically Visited
2	Nakanai	Valoka	Health Centre	Catholic Health	Accessible	Physically Visited
3	Nakanai	Malalia	Health Centre	Government	Accessible	Physically Visited
4	Nakanai	Kapiura	Clinic	Private-NBPOL	Accessible	Physically Visited
5	Nakanai	Silenga	Health Centre	Catholic Health	Accessible	Physically Visited
6	Nakanai	Lalopo	Health Centre	Government	Accessible	Physically Visited
7	Nakanai	Ulamona Sovula Care Centre)	Health Centre	Government	Accessible	Physically Visited
8	Nakanai	Navo	Clinic	Private-MBPOL	Accessible	Physically Visited
9	Nakanai	Bealla	Health Centre	Government	Accessible	Physically Visited
10	Nakanai	Hargy	Clinic	Private-HARGY	Accessible	Physically Visited
11	Nakanai	Mosa	Clinic	Private-MBPOL	Accessible	Physically Visited
12	Nakanai	Baea	CHP	Government	Inaccessible	Collected supply from Medical Transit Store WNBPHA
13	Talasea	Kimbe Urban	Urban Clinic	Government	Accessible	Physically Visited
14	Talasea	Bola	Health Centre	Government	Accessible	Physically Visited
15	Talasea	Bitokara	Health Centre	Catholic Health	Accessible	Physically Visited
16	Talasea	Healla	Clinic	Private-MBPOL	Accessible	Physically Visited
17	Talasea	WNBPHA	Hospital	Government	Accessible	Physically Visited
18	Talasea	Unea	Health Centre	Catholic Health	Inaccessible	Collect supply from Medical Transit Store WNBPHA
19	Talasea	Vitu	Health Centre	Catholic Health	Inaccessible	Yet to collect supply from Medical Transit Store WNBPAH
20	Talasea	Vatukele	CHP	Catholic Health	Inaccessible	Yet to collect supply

21	Kandrian Gloucester	Milimata	Health Centre	Government	Accessible	Physically Visited
22	Kandrian Gloucester	Kaliai	Health Centre	Catholic Health	Accessible	Physically Visited
23	Kandrian Gloucester	Akonga	CHP	Government	Accessible	Physically Visited. NO STAFF AT HF ALL STAFF IN KIMBE TOWN
24	Kandrian Gloucester	Gloucester	Health Centre	Government	Accessible	Physically Visited
25	Kandrian Gloucester	Kilinge	Health Centre	Catholic Health	Accessible	Physically Visited
26	Kandrian Gloucester	Sagsag	Health Centre	Anglican Health	Accessible	Unable to Visit due to bad sea. Left Malaria Commodities with Kilinge for pick up
27	Kandrian Gloucester	Silovuti	CHP	Private-MBPOL	Accessible	Picked up their supply at WNBPHA
28	Kandrian Gloucester	Sasavuru	Health Centre	Catholic Health	Accessible	Picked up their supply at WNBPHA
29	Kandrian Gloucester	Kandrian	Health Centre	Government	Inaccessible	Picked up their supply at WNBPHA
30	Kandrian Gloucester	Aka	Health Centre	Government	Inaccessible	Yet to pick up their supply at WNBPHA
31	Kandrian Gloucester	Turuk	Health Centre	Government	Accessible	Picked up their supply at WNBPHA
32	Kandrian Gloucester	Melenglo	Health Centre	Government	Inaccessible	Yet to collect supply
33	Kandrian Gloucester	Gasmata	Health Centre	Government	Inaccessible	Yet to collect supply
34	Kandrian Gloucester	Amio	Health Centre	Government	Inaccessible	Yet to collect supply
35	Kandrian Gloucester	Sauren	Health Centre	Government	Inaccessible	Yet to collect supply
36	Kandrian Gloucester	Wako	CHP	Government	Inaccessible	Yet to collect supply
37	Kandrian Gloucester	Eseli	Health Centre	Government	Inaccessible	Yet to collect supply
38	Kandrian Gloucester	Pililo	Health Centre	Catholic Health	Inaccessible	Picked up their supply at WNBPHA

Table 2. Percentage of Accessibility

There are 38 reporting facilities located in the three Districts of West New Britain Province. For this quarter in Talasea District, we were able to visit five (5) of the eight (8) facility. Unea HC, Vitu Health Centre and Vatukele HC were inaccessible thus their supplies were picked up at Medical Transit Store WNBPHA by HC Staffs. In Nakanai District, we were able to visit twelve (12) of the thirteen (13) facility with only one Inaccessible Facility (Baea HC) not covered. Baea HC malaria commodities was packed and picked up at the MTS WNBPHA. For Kandrian Gloucester District, we only visited 5 of the 18 facilities. Malaria commodities of the facilities not visited were packed for pick up at WNBPHA Medical Transit Store.

	Qtr 1	Qtr 2	Qtr 3	Qtr 4
Total number HF's	38	38	38	38
Total Number Accessible	27			
Total Number Reached	21			
% Coverage (Accessible)	77.8	#DIV/0!	#DIV/0!	#DIV/0!
% Coverage (Total HF's)	55.3	0.0	0.0	0.0

RDTs AND ACT SUPPLIES PROCURED GLOBAL FUND

Table 3. RDT and ACT supplied by Global Fund.





PACKING LIST

DESTINATION: WEST NEW BRITAIN SHIPPER: AIR NUGINI CONSIGNMENT/WAYBILL NO. 656-41537716

PACKAGING DATE: 24-Jan-24 INVOICE NO. ACTION OFFICER: JESSICA SANA DATE: 24-Jan-24

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 TO 55	55	RDT	40	2200	55,000	101532/30/24	Jan-25	13	715	0.07	3.85	
56 to 58	3	ACT5	48	144	432	7254175	Dec-24	15	45	0.02	0.06	
59 to 63	5	ACT12	48	240	1,200	7254178/6	Feb-25	15	75	0.04	0.2	
64 to 70	7	ACT18	24	168	1,176	7254366	Jan-25	15	105	0.07	0.49	
71 to 95	25	ACT24	24	600	15,000	7254366	Jan-25	15	375	0.07	1.75	
96	1	RDT	18	18	450	101532/30/24	Jan-25	8	8	0.07	0.07	
		ACT5	11	11	330	7254175	Dec-24					
		ACT24	4	4	120	7254366	Jan-25					
97	1	ACT12	38	38	1,140	7254178/6	Feb-25	6	6	0.04	0.04	
98	1	ACT18	20	20	600	7254366	Jan-25	6	6	0.07	0.07	
									98			6.53

TOTAL SUMMARY					
		ITEM	PACKETS	INDIVIDUAL UNITS	SOURCE (GF/GoPNG)
No. of Cartons	98	RDT	2218	55,450 test kits	GF
Weight (Kg)	1335	ACT5	155	4,650 blister pkts	GF
Volume (m³)	6.53	ACT 12	278	8,340 blister pkts	GF
		ACT18	188	5,640 blister pkts	GF
		ACT 24	604	18,120 blister pkts	GF
		PRIMAQUINE	NOT SUPPLIED	tablets	

ANTENATAL LLINS REPORT

In quarter one (1) visit, we distributed a total of 1200 ANC LLINs across the 21 Health Facility visited. Those health facilities that missed out on Q1 distribution were advised to pick them up at Transit Medical Store at WNBPHA. During the Q1 visit, it is observed that most facilities are not keeping proper recording and accountability of distributed nets. Most health facilities visited were out of stock with no proper documentation of distribution. It was also noted that few Health Facilities were supplied during the household nets distribution and were just distributing to pregnant mothers without recording. Onsite training of how to use the ANC LLIN register was done. Importance of keeping proper documentation was stressed and registers was supplied to each facility. Communication was established from each health facility to Provincial Malaria Supervisor and Regional Malaria Coordinator via WhatsApp group where each officer in charge of ANC LLINs distribution can communicate his or her challenges so as to improve quality of documentation and accountability. Stock cards were supplied and officers were advised on the importance of use of stock cards.

ROTARIANS AGAINST MALARIA							
West New Britain PROVINCE							
LOCATION OF CONTAINER: PHA YARD							
OFFICER INCHARGE: Acting PMS Ms Grace Bid							
DATE	DELIVERY TO HEALTH CENTRE	PERSON RECEIVING GOODS	OFFICER SUPPLYING NETS	DOCUMENTATION NO.	STOCK IN	STOCK OUT	BALANCE
16.01.24	HAELLA CLINIC	TERRY SATAO	GRACE BID	32933		50	50
01.02.24	BUVUSSI HC	MARIA TIA	GRACE BID	32935		50	0
05.02.24	Opening Balance				4100		4100
05.02.24	BOLA HC	CYNTIA GODFREE	EUSTIN TOROT	51002		50	4050
05.02.24	BITOKARA HC	SCHOLAR WANGAI	EUSTIN TOROT	51003		50	4000
05.02.24	HAELLA CLINIC	BART KAPAKONI	EUSTIN TOROT	51011		50	3950
06.02.24	KAPIURA CLINIC	AIDA PETER	EUSTIN TOROT	51004		50	3900
06.02.24	SILANGA HC	LIDIA SAMOT	EUSTIN TOROT	51006		50	3850
06.02.24	LALOPO HC	DAMARISH BALO	EUSTIN TOROT	51005		50	3800
07.02.24	NAVO CLINIC	BRENDA YAUGUK	EUSTIN TOROT	51007		50	3750
07.02.24	ULAMONA	HEDWICK KAUMBE	EUSTIN TOROT	51008		50	3700
07.02.24	BIALLA HC	BETSY HANAU	EUSTIN TOROT	51009		100	3600
07.02.24	HARGY CLINIC	KEPOK BEEN	EUSTIN TOROT	51010		50	3550
09.02.24	MOSA CLINIC	REGINA KURI SANAK	EUSTIN TOROT	51012		100	3450
09.02.24	KIMBE UC	ELSIE MIROI	EUSTIN TOROT	51013		100	3350
14.02.24	MILIMATA HC	NORMAH IAVUL	EUSTIN TOROT	51015		50	3300
14.02.24	KALIAI HC	SR MARTHA PUAIC	EUSTIN TOROT	51016		50	3250
15.02.24	GLOUCESTER HC	ALICE SAWGON	EUSTIN TOROT	51017		50	3200
15.02.24	KILENGE HC	BENEDINE NUMURU	EUSTIN TOROT	51018		50	3150
15.02.24	SAGSAG HC	BENEDINE NUMURU	EUSTIN TOROT	51021		50	3100
16.02.24	AKONGA HC	TONY MOLOS	EUSTIN TOROT	51022		50	3050
15.02.24	VALOKA HC	SCHOLLY TUKA	GRACE BID	32934		50	3000
							3000
							3000
							3000
					4100	1200	2900

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, Ms. Grace Bid 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 facility are not capturing the aid post reports in their catchment areas in their reporting. Therefore, correct amount of malaria commodities is not supplied resulting in commodities shortage and incorrect accountability from reporting facility. 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 5. Observation Findings from Health Facility Visited

Health Facility	RDT/ACT STOCK MANAGEMENT	TREATMENT	ANC LLIN	REPORTS FROM OCTOBER TO DECEMBER 2023
BUVUSI HC 03/02/24	Malaria commodities stored in a locked room. Stock cards not used for updates. OIC reported that some malaria drugs were miss managed so planning to store drug in a secure room. Shortage of Stock of malaria drugs was reported on the 11/1123. No expired ACT/RDT was removed	Staff aware of the new Malaria treatment protocol. Onsite refresher training conducted by the team.	Nets were issued 1 day prior to teams visit by PMS. Unable to do physical stock count as officer in charge was un available	3 reports submitted in October 2023 to December 2023. HF still recording Clinical Cases
VALOKA HC 03/02/24	Malaria commodities stored in Pharmacy room. Stock card not used. OIC reported some miss-management of malaria drugs. Plan to store drugs in more secure area. No expired ACT/RDT was removed	Staff aware of the new malaria treatment protocol. Onsite refresher training carried out.	Nil stock. ANC LLINs register not updated well.	Up to date with submitting report. 3 report was submitted in October 2023 to December 2023. HF still recording Clinical Cases
MALALIA HC	Malaria Commodities stored in a small	Staff aware of the new Malaria	Nil stock. ANC LLINs register not	Submitted 3 reports

03/02/24	pharmacy. Reports of miss-management of Malaria commodities. No stock card has been used since the last supervisory visit. No expired ACT/RDT was found	treatment protocol including the usage of prophylaxis in pregnant mothers. Onsite refresher training conducted by the team	updated well	however recorded 50 clinical cases in the report of October to December2023
BOLA HC 05/02/24	Malaria commodities stored in a very small Pharmacy with no proper lighting. Stock cards are not being used to monitor and record malaria commodities. No expired ACT/RDT.	Staff aware of the new malaria treatment protocol. Onsite refresher training carried out by the team	Nil stock of LLINs at the time of the visit. 50 nets (1 bale) was issued. ANC LLINs register updated well	3 reports submitted in October to December 2023. 63 clinical cases recorded.
Bitokara HC 05/02/24	Malaria commodities stored well in spacious Pharmacy. Good accountability of malaria drugs however stock cards were not used. No expired ACT/RDT was noted	Staff had some idea about the new malaria treatment protocol. Onsite Training was done	Nil stock of LLINs at the time of the visit. Recording of distribution was not done on the register book. New register book issued	On time with reporting. Still reporting clinical cases. 3 reports submitted in October to December 2023
HAELLA UC 05/02/23	Malaria commodities stored well in the air-condition pharmacy. Well accounted for. Stock card used for Malaria commodities. However, four carton (4x40) of expired RDT was removed. Clinic had enough Malaria commodities so was not supplied. All other commodities were within the time of expiry dates	Officers well aware of the new malaria treatment protocol. Onsite refresher was done	35 ANC LLINs nets was found at time of the visit. 100 nets (2 Bale) was issued. Register book updated	3 reports submitted during the above time period
KAPIURRA UC 06/02/24	Malaria commodities stored well in a well air-condition room. Stock card used for recording drug distribution. No reports of miss miss-management of Malaria Commodities. No expired ACT/RDT was noted.	Attending officer well aware of the new malaria treatment protocol. Onsite refresher was carried out by the team.	Facility was out of stock of ANC LLINs at the time of the visit. One bale (x50) LLINs was issued to the facility	3 reports submitted during the above time period

SILNGA HC 06/02/24	Stock cards used by facility but needs improvement in timely recording. All malaria commodities stored in a locked room controlled only by SIC. No expired ACT/RDT was noted	Officers present at the time of visit were aware of the new malaria protocol. Onsite refresher was conducted and advised them to continue practicing it. However clinical diagnosis is still an issues. Advise to stop.	Health centre was out of stock at the time of the teams visit. One bale (x50) was issued to the facility. Needs to improve on ANC LLINs register	3 reports sent on October to December 2023. No clinical case recorded
LALOPO HC 6/02/24	Bulk of the Malaria commodities supplied from the last visit still available in the facility. Facility not using stock cards. Malaria commodities stores in the pharmacy. Facility not supplied due to surplus of stock on hand	Staff well aware of the new Malaria treatment protocol and are practicing it. Onsite refresher training was carried out.	Facility stock out since 14/7/23. ANC LLINs register not updated well. One bale (x50) nets was supplied. Advise to improve on record keeping	3 reports sent on October to December 2023. No clinical case recorded
ULAMONA HC 06/02/24	Health Centre was empty due to the Mt Ulamona eruption. Everyone is now resettled at Sovula Care Centre. Malaria Commodities stored in Sovula Primary School Head Master's Office. Small tent was set up at the care centre for treating patients. No stock cards used by staff.	Attending officer not fully aware of the new malaria treatment protocol. Onsite refresher training was conducted	22 nets left over from the relief supply. 50 nets were supplied to the made shift clinic. New register book was given and advice to record accordingly	HF summited 3 reports to eNHIS in October to December 2023. Recorded 14 clinical cases
NAVO CLINIC 07/02/244	Very good stock management from the facility. Drugs kept in a well secure air-condition room. Stock card used.	Staff aware of the new malaria treatment protocol and are practicing it. Refresher training was done by the team	7 ANC LLINs were left at the facility at the time of the visit. Register book updated and is well kept. 50 nets was supplied	Still recording clinical cases despite the availability of RDT. 3 reports submitted to eNHIS
BEALLA HC 07/02/24	Stock cards used by health facility but needs improvement. Malaria	Staff aware of the new malaria treatment protocol	Nil stock of Nets at the time of the visit. 50 nets issued to	Up to date with reporting. One clinical death

	Commodities stored in a spacious pharmacy. No expired ACT/RDT was removed.	and are practicing it. Refresher training was done by the team.	facility	reported. No clinical cases reported in the outpatient
HARGY CLINIC 07/02/24	Malaria commodities stored in a spacious cupboard. Stock cards used for recording.	Staff aware and are practicing the new malaria treatment protocol	50 nets supplied	3 reports submitted. Still reporting clinical cases
MOSA CLINIC 9/02/24	Malaria commodities stored well in an air conditioned room. Stocked card used and well updated. No expired ACT/RDT removed	Staff aware and are practicing the new malaria treatment protocol	50 nets issued to the facility	3 reports submitted in October to December 2023 with no clinical case recorded
KIMBE URBAN CLINIC 9/02/24	Malaria commodities stored in the Pharmacy. Stock card not used.	Staff aware of the new malaria treatment protocols	Staff only issuing nets to Primip Mothers. This was corrected. 50 nets supplied	Submitted 3 reports with 3 clinical cases recorded
MILIMATA HC 14/02/22	Malaria commodities stored in well organised Pharmacy. Stock cards used by the HF	Staff aware of the new treatment protocols	Nil stock at the time of the visit. 50 nets issued to the HC	3 eNHIS reports was submitted. 3 clinical cases was reported
KALIAI HC 14/02/24	Malaria commodities not stored well. Found in three different room. Not good accountability.	Attending officer aware of the new Malaria protocol.	50 nets supplied	3 report submitted. Recorded clinical case
GLOCESTER HC 15/02/24	Malaria commodities stored in an open room. No stock cards used despite being issued from last RMC visit. Staff also charging patient for ACT	Staff aware of the new malaria treatment protocol and are practicing it	36 nets remained at the Facility, However not from ANC LLIN distribution but from household nets distribution from LLINs distribution team. 50 nets supplied	3 report submitted. Recorded clinical case
KILENGE HC 15/02/24	Malaria commodities stored in an open room. No stock cards used despite being issued from last RMC visit. Staff also charging patient for ACT	Staff aware of the new malaria treatment protocol and are practicing it	Nil stock of Nets at the time of the visit. 50 nets issued to facility	Submitted 3 report in October to December. Clinical case recorded

AKONGA HC 16/02/24	All health staff in kimbe town. Unable to do M&E	All health staff in kimbe town. Unable to do M&E	All health staff in kimbe town. Unable to do M&E. 50 nets signed off by community leader for safe keeping until staff returns.	Only 1 report submitted. No clinical case recorded
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KIMBE HOSPITAL REPORT: DATE OF VISIT: 12/02/24-13/02/24

A brief meeting was held with the Director Curative Dr Uluk before the teams visit to the Hospital. Discussion were done around the,

- Malaria Commodities and Quality Usage
- New Malaria Treatment Protocols
- Documentation and M&E
- Primaquine shortage in the Province, and NDoH will now be making 100% of Procurement of Primaquine

After the Meeting, we were accompanied by Dr Uluk to visit all hospital departments using/storing Malaria Commodities including,

- Surgical Ward
- Adult Outpatient Department
- Children Outpatient Department
- Hospital Pharmacy
- Medical Ward
- Paediatric Ward

Hospital Pharmacy- During the time of the visit we found that 29 cartons of RDT supplied to Kimbe Hospital from AMS will expire in July of 2024. It was planned that the Provincial Malaria Supervisor will have to rotate the malaria commodity to other facility to avoid RDT expiring at the Hospital and be of waste. All other malaria commodities are stored well and record kept using M-supply.

During the visit with Dr Uluk to departments in the Hospital, it was noted that most staff are still unaware of the new malaria treatment protocol and most of the staff are using sterile water as buffer to do RDT. Thus it was agreed by Dr Uluk and the team that the staff needs refresher on quality use of malaria diagnostic tool (RDT) and new malaria treatment protocol. It was then planned that a CQI training will be carried out by RAM team in partnership with WNBPHA during Q2 visit.

It was also found that few departments in the hospital using Malaria commodities are recording positive cases only in the malaria register and also recording other treatment apart from antimalarial. Onsite training was done to the attending hospital staff by the team during the visit. The team was unable to meet with WNBPHA PHIO as he was away for studies.

SUMMARY OF FINDINGS

- Clinical case reporting is still an issue that was addressed in the Q1 visit
- Drug storage and accountability is still a challenge that management of each facility to solve with the proposed plan RMC and team
- Use of stock card for keeping record of malaria commodities record is not done by most facilities
- **Staff from few health facilities are charging patient for ACT supply**
- Accountability of ANC LLINs nets is also an issue in all facility.
- Most staff from all facilities are aware of the new Malaria Treatment Protocol however some staff from the Health Centres are not up to date with the new Protocol.
- **Most Hospital staff are using sterile water as buffer for doing RDT**
- Most reporting health facility are not capturing the data of Aid Post in their catchment areas.

CHALLENGES	RECOMANDATION
Trip to Kandrian	Priority in Q2 visit if weather is ok
Clinical case reporting	More onsite training to utilize available diagnostic tools
Communication between Health facilities and Provincial Malaria Supervisor	Malaria WhatsApp group created for all facility to communicate challenges and issues
Hospital and few health facility staff still unsure about the new Malaria Treatment Protocol	CQI training to be carried out in WNBPHA in Q2 visit
Fuel for Distribution of Prepacked commodities and supplementary orders by PMS	WNBPHA to support Malaria Supervisor for routine visits and distribution to each facility
Accountability of Malaria commodities	Health staff are now required to present correctly filled stock cards, Malaria register and LLINs receipt to collect new supply

VEIHCLE USED

KAK 652

- Came out from Ela Motors after service before our Q1 trip.
- In good running condition
- Cracked windscreen need to be replaced. PHA have already purchased windscreen.
- For glue and black rubber to repair windscreen.
- Front shock absorbers
- For new brake pads
- Mileage: 30174km
- Next Scheduled service date: 32000km
- Registration Expiry: 24/10/24
- Safety Sticker Expiry: 13/04/24

CAU 561

The vehicle was brought into service at Ela Motors after Q1 as per directive from RAM management

- Back doors unable to lock
- Difficulty opening Back door from outside
- Front seats are torn
- Back seats torn as well
- Mileage: 290968km
- Registration Expiry: 30/07/24-Safety Sticker Expiry: 13/04/24

ACKNOWLEDGEMENT

1. WNBPHA administration for the continues support towards the National Malaria program
2. WNBPHA staff who worked together with the RAM team during the quarter one visit,
Ms. Grace Bid- Provincial Malaria Supervisor
Mr. Apolos Katoa- WNBPHA Driver
Mr. Wilfred Nanghese- WNBPHA Medical Transit Storeman
Mr. Samuel Texie- WNBPHA Medical Transit Storeman
3. The Global Fund for the continuous funding of Malaria Commodities and funding WNB Q1 Health Facility Malaria Supervisory Visits and malaria commodities distribution

PHOTOS



Team picking up Malaria Commodities from Hoskins Airport



At Busuvsu Health Centre. Onsite training on stock cards



***Team having onsite training with
Kimbe Hospital Team***



Team travelling to Gloucester

END OF REPORT