



NATIONAL MALARIA CONTROL PROGRAM
ROTARIANS AGAINST MALARIA
QUARTER TWO FIELD TRIP REPORT
NEW IRELAND PROVINCE
MAY & JUNE 2024



Report by: Erica Nawara

Malaria Coordinator NIP/ENB

Rotarians Against Malaria

National Malaria Control Program



DATE: 15.05.24-05.06.24

Total Nights in the Field: 21nights

NIPHA Malaria Team:

1. Mr. Thomas Kapu Homebased management of Malaria Coordinator
2. HEO Joyce Johnson- Provincial Malaria Supervisor
3. Mr. Brendan Baltaku- Malaria Admin Officer
4. Ms. Stella Lagar- Malaria Data Entry Clerk
5. Mr. Bethlyn Bekes- Malaria Program Driver
6. Simon Kanguman -Storeman Medical Transit Store

People Met with in the Province:

1. HEO. Maria Sabok -Provincial Disease Control Officer
2. HEO. Betty Tameluk- District Health Manager Kavieng.
3. HEO. Edward Maika- District Health Manager Namatanai District.
4. HEO. Gorethie Kaven- LLG Health Manageress Nimamar LLG
5. HEO. Eunice Johnson- LLG Health Manageress Sentral Niu Ailan LLG
6. Mr. Thomas Kapu Homebased management of Malaria Coordinator
7. HEO. Joyce Johnson- Provincial Malaria Supervisor
8. Mr. Brendan Baltaku- Malaria Admin Officer
9. Miss. Stella Lagar- Malaria Data Entry Clerk
10. Mr. Simon Kanguman -Storeman Medical Transit Store

OBJECTIVE

This was the second trip of 2024, to visit all accessible health centres (HC) in New Ireland Province (NIP), and ensure that healthcare givers in these facilities are correctly diagnosing and treating malaria cases as per National Malaria Treatment Protocol. This trip was also to ensure that there is adequate supply of Malaria Rapid Diagnostic Test (RDT) kits, Artemisinin-based Combination Therapy (ACT)s and other malaria commodities including Antenatal Care (ANC) nets in all health facilities based on consumption rates and as per their monthly Malaria Register reports and National Health Information System (NHIS) reports.

BRIEF BACKGROUND

New Ireland Province is a long thin Island lying between one and five degrees south of the equator in a north westerly direction. It is New Ireland or Niu Ailan in pidgin. A spine of mountains falls straight to the season west but leaves a narrow fertile coastal strip on the east. There is a population of 87,000 most of who live in the south of the Island. New Ireland Province is one of the province located in the New Guinea Islands Region of Papua New Guinea. It is about 9557 square kilometers in size and 1400m above sea level. The province has 2 districts (Kavieng and Namatanai) and 10 LLGs, 4 LLGs (Murat, Lavongai, Kavieng Urban and Tikana) in Kavieng District and 6 LLGs (Tanir, Nimamar, Namatanai, Konovagil,

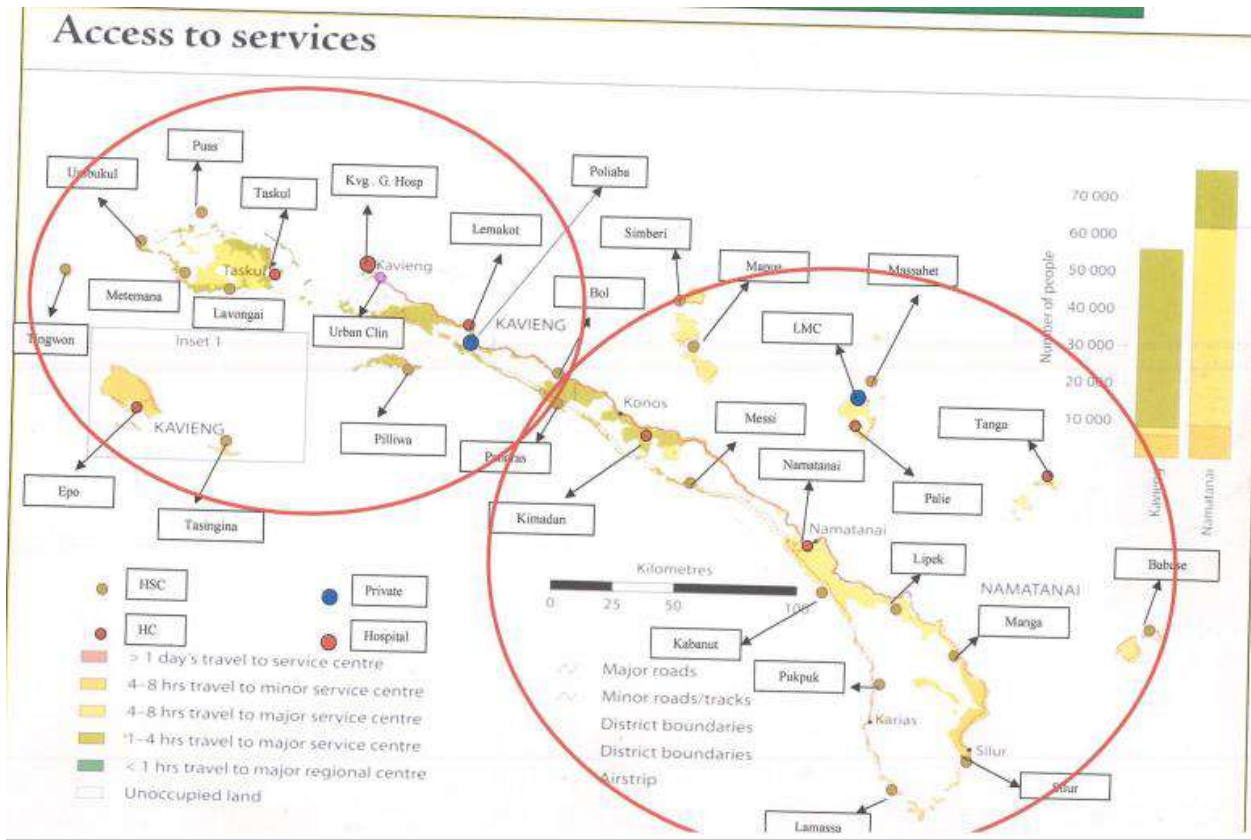


Matalai and Central) in Namatanai District. There are a total of 33 Health facilities in the Province, all 33 HFs are functioning and there are 86 Aid Posts that caters for all the Islands population, 15 of the health facilities are accessible by road and 19 by boat. Total of 11 Health Facilities are Church run, 7 under Catholic Health Services and 4 under United Church Health Services. There are 3 Private Company Clinics and the rest of the 19 Health Facilities are all Government run.

Figure 1.1 This is the map of New Ireland Province.



Fig: 1.2 Below is the picture showing Health facilities in New Ireland Province.



SUMMARY OF QUARTER TWO VISIT

Table 1: Shows the Summary of what has been done in Q2 Malaria Visit in New Ireland Province.

Days	Dates	Activities done
Wednesday	15.05.24	Traveled to Kavieng from POM. Picked up by PDCO at the Airport. Met with Malaria Team. Went to Transit Medical store and confirmed the Malaria Drugs. Visited Kavieng Urban Clinic. Orientation for the new Provincial Malaria Supervisor HEO Joyce Johnson.
Thursday	16.05.24	Traveled to Namatanai with Namatanai District drugs. Dropped off drugs at Namatanai. Visited Namatanai Rural Hospital and Kimadan HC on the way back to Kavieng with the PMS



Friday	17.05.24	Traveled back to Namatanai with the second load of drugs. Arranged Logistics for Tanga and Anir Island Trips. Refill zoom containers at 7:30pm in the night for the trip the next day.
Saturday	18.05.24	Traveled to Tanga Island it's a 4 hours' dingy ride from Namatanai Town. The sea was rough as well as it was raining. We arrived at Tanga Island safely despite the weather, visited Tanga HC however, we couldn't make it to Anir Island on the same day because of continuous rain and rough seas, so we spend a night at Tanga HC. There was also no network coverage on the Island. The Team consist of the PMS, Malaria Admin Officer and myself, our driver and the vehicle were at Namatanai Town waiting for the Team.
Sunday	19.05.24	We traveled to Anir Island with the rain and the rough seas but after 3hours we arrived at Anir safely. We visited Babase HC and again we couldn't make it back to Muliama Boat stop at East Coast Namatanai, mainland because of continuous rain so we spend a night again on Anir Island. There was also no network coverage on Anir Island
Monday	20.05.24	We traveled back to Muliama Boat stop, East Coat Namatanai. The sea was still rough because of strong winds, but we arrived safely after 3 hours despite the bad weather. We then traveled by vehicle to Manga HC freshen up and visited Manga HC. We also visited Lipek HC on our way back to Namatanai Town. We arrived safely in Namatanai Town and we spend a night in Namatanai
Tuesday	21.05.24	We traveled to West Coast Namatanai and visited Kabanut HC. We then visited Bol HSC and Poliamba U/C on our way back to Kavieng town
Wednesday	22.05.24	Visited Panaras HC, Lemakot HC and Lamusmus CHP and did logistics for the Malaria School Survey
Thursday	23.05.24	The team did Malaria School Survey at Lamusmus Elementary School. A total of 152 students were tested and the positive ones were treated
Friday	24.05.24	The team did Malaria School Survey at Ngavalus Elementary School. A total of 147 students were tested. Arranged logistics for New Hanover Island Trip.
Saturday	25.05.24	Traveled to New Hanover Island visited Taskul, Lavongai, Metemana and Umbukul HCs. Spend a night at Umbukul HC.



Sunday	26.05.24	Traveled to Puas visited Puas HC and traveled all the way back to Kavieng Town.
Monday	27.05.24	Visited Kavieng Hospital and arranged logistics for Lihir Island trip. Debrief with District Health Manageress for Kavieng District HEO Betty Tameluk.
Tuesday	28.05.24	Traveled to Namatanai at 5:30am in the morning from Kavieng town, arrived in Namatanai Town and traveled to Lihir Island by Ferry. Couldn't make it to Palie HC because of traffic at the mine site.
Wednesday	29.05.24	Traveled to Palie HC from Londolovit town, visited Palie HC, traveled back to Londolovit town and visited Lihir Medical Centre. Traveled to Masahet Island in the afternoon and visited Masahet HC and traveled back to Londolovit town.
Thursday	30.05.24	Traveled back to Namatanai town. Debrief with District Health Manager for Namatanai District HEO Edward Maika. After debrief the team and traveled to Messi, visited Messi HC. Traveled to Konos and spend a night at Konos for the early morning Trip to Tabar group of Islands.
Friday	31.05.24	Traveled to Tabar Group of Islands and visited Mapua HC, Maragon HC and Simberi Mine Clinic. And traveled back to Konos and traveled all the way back to Kavieng town.
Monday	03.06.24	Traveled to Lamusmus by vehicle and got on the Dingy from Lamusmus to Piliwa HC and back to Lamusmus and all the way back to Kavieng town.
Tuesday	04.06.24	Debrief with Malaria Team (HMMO, PMS, Malaria Admin Officer) and the PDCO. The Team also did stock counts with Mr. Simon at the Transit medical store on all the Malaria buffer stocks as well as the remaining mosquito nets.
Wednesday	05.06.24	Flew back to POM. Arrived in POM, went to RAM office and submitted the Acquittals.

Executive Summary

In Q2 2024 for New Ireland Province, a total of 27 HF were physically visited and were supplied with a full 3-month stock of RDTs and 1-month stock of ACTs. The 6 HFs which were not physically visited also received their Q2 drug supplies through the support from our partners in the province. Those 6 HF which were not visited in this quarter is due to them being inaccessible. There were no major stock outs of RDTs and ACTs at the Health Facility level as well as at the Transit Medical Store in Kavieng. The only



issue now in the province is the stock out of Primaquine in most of the Health Facilities in the Province as well as at Kavieng Medical Transit Store. All HF's were advised during the visit to start placing direct orders to AMS Kokopo for Primaquine supplies. All Health Facilities are following the updated Malaria Treatment protocol. There are 11 HF's in the province who were still reporting CLINICAL MALARIA despite the continuous visits and emphasize. There are 2 Clinical deaths and 1 confirmed deaths reported in this quarter. Malaria Program vehicle (NAE 839) is still in good condition and was used during this quarter visit. The old vehicle (BDS 690) is currently in Ela Motors for service and was not used. Four Malaria School Surveys were done in 2 elementary schools in Kavieng District and 2 in Namatanai District. All 4 school survey results are documented in this Report. HMM Program is still up and running and we are receiving more reports from the CMVs and they were given supplies according to their reports from their reporting HF. A new Provincial Malaria Supervisor was recruited and was fully participated in this visit, which is a great achievement for the Program. I commend my Malaria Team at NIPHA for a successfully visit done in quarter 2 2024 which we have reached 81% Health Facility coverage rate. Malaria is still high in the Province; however, we need effective Team work to reduce Malaria in New Ireland Province.

Kavieng District

For Kavieng District it took 7 days in this quarter to visit all 12 Health Facilities. All HF's in KAVIENG DISTRICT have been supplied with their 2nd quarter supplies of Malaria commodities. 12/15 HF's were physically visited and supplies were delivered at the HF's while 2 HF (Tasingina & Tingwon) their supplies were delivered by the ADI team and only 1HF (Epo/palakau) collected their supplies when in Kavieng for the Immunization Training.

Namatanai District

For Namatanai District it took 12 days in this quarter to visit all 15 Health Facilities. All HF's in NAMATANAI DISTRICT have been supplied with their second quarter supplies of Malaria commodities. 15/18 HF's were physically visited and supplies were delivered at the HF's except for Lihir Medical Centre, Manga HC and Namatanai District Hospital because they have sufficient stock, while 2 HF's (Lamassa HS & Pukpuk HC) their supplies were delivered by the ADI team. Supplies for 1 HF (Silur HC) was left at Transit Medical Store in Kavieng for pickup, SIC was also notified on this arrangement.

COVERAGE RATE

Table 2: Below indicates summary of the visit and mode of distribution used in Q2 2024.

27	HF's which were physically visited and distributed
2	HF's not physically visited but commodities were picked up at PHO by Health Staffs
4	HF's not visited but commodities distributed by Australian Doctors International (ADI)
0	HF's Closed
24	Total Accessible HF's
8	Total Inaccessible HF's



33	Total HFs open
0	Air Drop off HF supplies
112.5%	Coverage Percentage of Accessible HFs Visited
81.8%	Coverage Percentage of Total HFs

HEALTH FACILITY VISITED

Table 3. Distribution of the Health Facilities in the province, their accessibility and the date of visits in quarter 2 2024.

Dis trict	No.	Health Facility	HF Type	Agency	Accessibility	Accessibility Status	DISTANCE FROM PHO (IN HRS)	Date of Visit
Kavieng	1.	Bol	SC	Government	Road	Accessible	1 hour 30 min	21.05.24
	2.	Kavieng	Hosp	Government	Road	Accessible	Base	27.05.24
	3.	Kavieng	UC	Government	Road	Accessible	Base	15.05.24
	4.	Lavongai	HC	Catholic Health	Sea	Accessible	2 hours	25.05.24
	5.	Lemakot	HC	Catholic Health	Road	Accessible	45 min	22.05.24
	6.	Metemana	SC	Government	Sea	Accessible	1 hour	25.05.24
	7.	Epo/Palakau	HC	Government	Sea	Inaccessible	6 hours	Not Visited
	8.	Puas	SC	Catholic Health	Sea	Accessible	4 hours	26.05.24
	9.	Tasingina	SC	Government	Sea	Inaccessible	5hours	Not visited
	10.	Taskul	HC	Government	Sea	Accessible	5 hours	25.05.24
	11.	Lamusmus	CHP	Government	Road	Accessible	1 hour 30 min	22.05.24
	12.	Tingwon	SC	Government	Sea	Inaccessible	5 hours	Not visited



Namatanai	13.	Umbukul	SC	Government	Sea	Accessible	3 hours	25.05.24
	14.	Piliwa	SC	United Church	Sea	Accessible	1 hour 30 min road/ 40 mins by boat	03.06.24
	15.	Poliamba	UC	Company	Road	Accessible	30 min	21.05.24
	16.	Babase	SC	Government	Sea	Inaccessible	4-5 hours	19.05.24
	17.	Kabanut	SC	United Church	Road	Accessible	2hours	21.05.24
	18.	Kimadan	HC	United Church	Road	Accessible	2 hours	16.05.24
	19.	Lamassa	SC	Government	Road	Inaccessible	5-6 hours	Not visited
	20.	Lipek	SC	Government	Road	Accessible	2hours	20.05.25
	21.	Manga	SC	Catholic Health	Road	Inaccessible	6hours	20.05.24
	22.	Mapua	SC	Catholic Health	Sea	Inaccessible	4hours	31.05.24
	23.	Massahet	SC	Government	Sea	Inaccessible	4-5 hours	29.05.24
	24.	Messi	SC	United Church	Road	Accessible	3 hours	30.05.24
	25.	Namatanai	HC	Government	Road	Accessible	4 hours	16.05.24
	26.	Palie	HC	Catholic Health	Sea/Road	Accessible	2-3 hours	29.05.24
	27.	Panaras	SC	Government	Road	Accessible	3 hours	22.05.24
	28.	Pukpuk	SC	Government	Road	Inaccessible	4-5 hours	Not visited
	29.	Silur	SC	Government	Road	Inaccessible	4-5hours	Not visited
	30.	Simberi	SC	Government	Sea	Inaccessible	5 hours	31.05.24
	31.	Tanga		Catholic Health	Sea	Inaccessible	4 hours	18.05.24



32.	Lihir Medical Centre	Clinic	Company	Sea/Air	Inaccessible	4 hours	29.05.24
33.	Simberi Mining Clinic	UC	Company	Sea	Inaccessible	4 hours	31.05.24

PLAN FOR HARD TO REACH HEALTH FACILITIES

Table 4: Shows plan for hard to reach Health Facilities in Q2 2024

No.	Health Facility	How drugs will be distributed	Reasons for not visiting the Health Facility physically
1.	Epo/Palakau	Drugs picked up by the Care taker OIC	Inaccessible Island HF
2.	Tasingina	Drugs delivered by Australian Doctors International (ADI) Team	Inaccessible Island HF
3	Lamassa	Drugs delivered by Australian Doctors International (ADI) Team	Inaccessible/ Bad road Condition
4	Pukpuk	Drugs delivered by Australian Doctors International (ADI) Team	Inaccessible/ Bad road Condition
5	Silur	Drugs collected by SIC	Inaccessible/Bad road condition
6	Tingwon	Drugs delivered by Australian Doctors International (ADI) Team	Inaccessible Island HF

STOCK MANAGEMENT

Overall in the Province there's slow improvement due to continuous Health Facility visit and emphasizes. Stock Cards are kept well and updated for most HFs, only few Health Facilities needs more improvement. Generally, there is **NO STOCK OUTS** of Malaria Commodities especially RDTs and ACTs as for



primaquine it is a big issue now in the Province because most of our HFs are experiencing stock outs. According to the stock out situation on the EHNIS it shows that there are NO STOCK OUTs which is true. **Table 5:** Shows Stock card management and stock out situation for the 18 Health facilities that were physically visited in Q2 2024.

Health Facility	Stock Card Management	Stock Out Situation
Kavieng Hospital	Stock cards are well kept and its always updated.	NO STOCK OUTS , they were found to have few supplies available. All their 2024 Q2 supplies were given during the visit.
Kavieng Urban Clinic	They have stock Cards and it is only updated by the person responsible, but when that person is not available then the stock card is not updated.	NO STOCK OUTS , they were given few stocks from the buffer stock before the actual Q2 distribution. All their Q2 2024 supplies were given during the visit.
Bol HSC	Stock cards are well kept and its always updated.	NO STOCK OUTS , they were given few stocks from the buffer stock before the actual distribution. All their Q2 2024 supplies were given during the visit.
Lemakot HC	Stock cards are well kept and its always updated.	NO STOCK OUTS . All their Q2 2024 supplies were given during the visit.
Taskul HC	They have stock Cards and it is only updated by the person responsible, but when that person is not available then the stock card is not updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit.
Lavongai HC	They have stock Cards and it is only updated by the person responsible, but when that person is not available then the stock card is not updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit.
Metemana HSC	Stock cards are well kept and its always updated.	1 week Stock out of ACTs , All their Q2 2024 supplies were given during the visit
Umbukul HSC	Stock cards are well kept and its always updated.	NO STOCK OUTS , they were given few stocks from the buffer stock before the actual distribution. All their Q2 2024 supplies were given during the visit.



Babase HSC	They have stock cards but it is not updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit
Panaras HC	They have stock Cards and it is only updated by the person responsible, but when that person is not available then the stock card is not updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit
Messi HC	They have stock Cards and it is only updated by the person responsible, but when that person is not available then the stock card is not updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit
Lipek HC	Stock cards are well kept and its always updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit
Manga HC	They have stock Cards and it is only updated by the person responsible, but when that person is not available then the stock card is not updated.	NO STOCK OUTS , they have sufficient ACTs from Q4 2023 distribution as well as they received few stocks from their AMS order. Their Q2 supplies were not given.
Kabanut HC	Stock cards are well kept and its always updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit.
Kimadan HC	Stock cards are well kept and its always updated.	NO STOCK OUTS , they were given few stocks from the buffer stock before the actual distribution. All their Q2 2024 supplies were given during the visit.
Lamusmus CHP	Stock cards are well kept and its always updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit.
Poliamba U/C	Stock cards are well kept and its always updated.	NO STOCK OUTS , they were given few stocks form the buffer stock before the actual distribution. All their Q2 2024 supplies were given during the visit.
Namatanai District Hospital	Stock cards are well kept and its always updated.	NO STOCK OUTS , All their Q2 2024 supplies were given during the visit.



Tanga HC	They have stock cards but is not updated	NO STOCK OUT , They have sufficient stock so their Q2 supplies were not given.
Lihir Medical Centre	Stock cards are well kept and its always updated.	NO STOCK OUTS , They have sufficient stock, so their Q2 supplies were not given.
Palie HC	They have stock cards but it is not updated	NO STOCK OUTS . There was no major stock out. All their Q2 supplies were given.
Masahet HC	Stock cards are well kept and its always updated.	NO STOCK OUTS . There was no major stock out. All their Q2 supplies were given.
Mapua HC	Stock cards are well kept and its always updated.	NO STOCK OUTS . There was no major stock out. All their Q2 supplies were given.
Simberi/ Maragon HC	They have stock Cards and it is only updated by the person responsible, but when that person is not available then the stock card is not updated.	NO STOCK OUTS . There was no major stock out. All their Q2 supplies were given.
Simberi Mine Clinic	Stock cards are well kept and its always updated.	NO STOCK OUTS . There was no major stock out. All their Q2 supplies were given.

Accountability of Malaria Drugs

Accountability of Malaria Drugs is slowly improving in the province because of continues visits. Most HF's are updating their stock cards very well, it's only few HF's who are not doing the right thing. This was emphasized during every quarter visits.



DRUG DISTRIBUTION

Table 6: Shows total number of Malaria Commodities distributed in Q2 2024

Item	Total Distributed in Q2 2024
RDT	2046 boxes of 25 cassettes
ACT 6	23 boxes of 30 blisters
ACT 12	183 boxes of 30 blisters
ACT 18	85 boxes of 30 blisters
ACT 24	261 boxes of 30 blisters
Primaquine 7.5mg	NIL STOCK OF PRIMAQUINE
Primaquine 13.2mg	

For this quarter, 3 months supplies of RDT were distributed to the HFs and only one-month supply of ACTs were distributed, so HFs were also advised to seek assistance at the Transit Medical Store if they are facing stock outs before Q3 distribution starts.

Table 7: Shows the current buffer stock of Malaria Commodities at the Provincial Medical Store after 2024 Q2 Distribution

RDT	ACT 6	ACT 12	ACT 18	ACT 24	Primaquine	Antenatal Nets
3235 boxes of 25 cassettes	0	36 boxes of 30 blisters	0	224 boxes 30 of blisters	0	21 bales (1050 nets)



ANTENATAL MOSQUITO NETS DISTRIBUTION

Table 8: Shows Antenatal Mosquito Net stock sheet for Q1 & Q2 2024

DATE	DELIVERY TO HEALTH CENTRE	PERSON RECEIVING GOODS	OFFICER SUPPLYING NETS	DOCUMENTATION NO.	STOCK IN	STOCK OUT	BALANCE	COMMENTS
10.11.23	ANTENATAL LLINs STOCK BROUGHT FORWARD FROM 2024				3400		3400	
27.02.24	Kavieng Urban Clinic	Collen sege	Thomas Kapu	39820		100	3300	Q1 Distribution
07.02.24	Kavieng Urban Clinic	Collen Zerika	Thomas Kapu	39827		100	3200	Q1 Distribution
07.03.24	KUC	Collen Zerika	Erica Nawara	39825		200	3000	Q1 Distribution
08.03.24	Tinkoris Clinic	Sr Weuta	Erica Nawara	39814		50	2950	Q1 Distribution
09.03.24	Manga HC	Sr Lemvaitas	Erica Nawara	39826		50	2900	Q1 Distribution
11.03.24	Taskul HC	Abel Edwards	Erica Nawara	39829		50	2850	Q1 Distribution
11.03.24	Lavongai HC	Francis Melis	Erica Nawara	39830		50	2800	Q1 Distribution
11.03.24	Melemana HC	Pauline Richard	Erica Nawara	39831		50	2750	Q1 Distribution
11.03.24	Umbukul HC	Batsheba Tindon	Erica Nawara	39832		50	2700	Q1 Distribution
12.03.24	Lamusmus CHP	Sr Maira	Manestella Lagar	45402		100	2600	Q1 Distribution
12.03.24	Bol HC	Sr Clemensia	Manestella Lagar	45405		100	2500	Q1 Distribution
14.03.24	Lemakot HC	James Maxading	Erica Nawara	39833		200	2300	Q1 Distribution
14.03.24	Kimadan HC	Dorothy Pakolai	Erica Nawara	39834		150	2150	Q1 Distribution
15.03.24	Namatana RH	Elsie Tamekare	Erica Nawara	39835		200	1950	Q1 Distribution
21.03.24	Palie HC	Junias Lapan	Erica Nawara	39836		100	1850	Q1 Distribution
18.05.24	Tanga HC	F Fammal	Erica Nawara	39837		50	1800	Q2 Distribution
19.03.24	Babase HSC	Alexander Awing	Erica Nawara	39838		50	1750	Q2 Distribution
20.05.24	Lipek HC	Rachael Wilson	Erica Nawara	39839		50	1700	Q2 Distribution
21.05.24	Namatana RH	Elsie Tamekare	Erica Nawara	39840		50	1650	Q2 Distribution
23.05.24	Pollamba UC	Hellen Manjo	Joyce Johnson	39841		50	1600	Q2 Distribution
25.05.24	Lavongai HC	Mildred talis	Erica Nawara	39842		50	1550	Q2 Distribution
26.05.24	Puas HC	Nrs Georgina	Erica Nawara	39843		50	1500	Q2 Distribution
27.05.24	Kavineg Urban	Christine Lita	Manestella Lagar	39844		100	1400	Q2 Distribution
29.05.24	Palie HC	Amazeah Balane	Erica Nawara	39845		50	1350	Q2 Distribution
29.05.24	Lihir Medical	Anthony, Tandrapa	Erica Nawara	39846		50	1300	Q2 Distribution
29.05.24	Masahet HC	Cecilia Anos	Erica Nawara	39847		50	1250	Q2 Distribution
30.05.24	Messi HC	Roberth Michael	Erica Nawara	39848		50	1200	Q2 Distribution
31.05.24	Maragon HC	Elizabeth Funil	Erica Nawara	39849		50	1150	Q2 Distribution
03.06.24	Piliwa HC	Susan Karake	Erica Nawara	39850		50	1100	Q2 Distribution
05.05.24	Lamassa HSC	Joanna Towo	Brendan Baltaku	45407		50	1050	Q2 Distribution
							1050	Stock left at PHA after Q2 Distribution

In Q2 2024 a total of 800 nets were distributed to the Health Facilities who were doing Antenatal Clinic in the Province.

Accountability of ANC Mosquito Nets

There is slow improvement in the accountability of ANC nets. Most receipts are checked and collected during the visit. So in this quarter all health facilities visited were advised to send in their ANC receipts with their monthly report.



MALARIA REPORT

Table 9: Shows NIP malaria Report January to May 2024 (source ENHIS)

New Ireland Province

MALARIA REPORT January to May 2024

Date Printed: 07/06/2024 12:40:25

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	
170102	Kavieng Hospital	3	0	1390	0	18	0	0	92	4.3	4.3	4151	29.0	22.0	0.2	
170103	Kavieng UC	4	0	2355	0	0	0	0	0	0	0	2520	80.8	60.6	0.1	
170104	Lavongai HC	4	12	1188	0	13	0	0	0	0	0	1799	66.0	54.1	0	
170105	Lemakot HC	4	0	1149	1	4	0	0	109	68.8	39.4	3030	41.7	26.0	0.4	
170106	Melemana SC	4	0	817	0	1	0	0	0	0	0	1754	46.6	42.5	0.2	
170107	Epo / Palakau HC	3	0	76	0	1	0	0	0	0	0	333	24.6	12.0	0	
170108	Puas SC	3	60	670	0	1	0	0	0	0	0	988	78.0	57.4	0	
170109	Tasingina SC	4	19	21	0	1	0	0	0	0	0	88	29.5	23.9	0	
170110	Taskul HC	5	5	1594	0	23	0	0	0	0	0	2500	50.0	46.9	0	
170111	Tingwon SC	4	0	60	0	0	0	0	0	0	0	96	49.0	37.5	0	
170112	Umbukul SC	3	0	283	0	0	0	0	0	0	0	774	37.7	31.1	0.1	
170113	Piliwa SC	4	0	341	0	2	0	0	0	0	0	201	38.8	33.3	0	
170101	Bol SC	3	0	1154	0	0	0	0	0	0	0	1774	52.1	38.3	0.2	
170114	Poliamba UC	5	6	694	0	0	0	0	0	0	0	1575	38.9	28.0	0.3	
170115	Lamusmus CHP	4	0	954	0	1	0	0	0	0	0	1991	62.2	43.5	0	
KAVIENG District			57	102	12746	1	65	0	0	201	39.3	23.4	23574	50.2	38.5	0.1
170201	Babase SC	4	33	415	0	4	0	0	0	0	0	356	74.7	64.6	0	
170202	Kabanut SC	4	0	2620	0	5	0	0	0	0	0	3577	73.2	61.4	0.6	
170203	Kimadan HC	4	0	838	18	10	0	0	11	9.1	9.1	3189	48.1	34.9	0.2	
170204	Lamassa SC	4	20	329	0	4	0	1	0	0	0	874	54.7	48.7	0	
170206	Lipek SC	4	0	853	10	2	0	0	0	0	0	2264	59.8	47.3	0.4	
170207	Manga SC	4	10	889	3	1	0	0	0	0	0	1565	64.9	48.7	0.3	
170208	Mapua SC	4	0	364	2	1	1	0	0	0	0	1414	54.7	40.9	0.1	
170209	Masahet SC	2	0	603	0	0	0	0	0	0	0	847	64.3	48.1	0.1	
170210	Messi SC	4	0	847	4	3	0	0	1	0	0	1618	53.3	38.9	0.1	
170211	Namatanai DH	3	77	2853	18	12	1	0	0	0	0	2374	35.6	27.7	0.1	
170212	Palie HC	4	23	1434	0	18	0	0	0	0	0	2743	55.9	35.7	0.4	
170213	Panaras SC	4	0	183	0	0	0	0	0	0	0	424	43.2	36.1	0	
170214	Pukpuk SC	4	0	903	3	0	0	0	4	0	0	1460	53.5	41.6	0.5	
170216	Silur SC	4	0	542	1	0	0	0	0	0	0	472	71.4	53.8	0	
170217	Simberi SC	4	0	528	0	4	0	0	0	0	0	1010	58.8	40.0	0.3	
170218	Tanga HC	3	0	261	0	8	0	0	0	0	0	474	53.6	46.0	0	
170219	Lihir Medical Centre	4	0	144	0	4	0	0	0	0	0	0	0	0	0	
170220	Simberi UC	3	2	54	0	0	0	0	0	0	0	193	26.9	19.7	0	
NAMATANAI District			67	165	14660	59	76	2	1	16	6.3	6.3	24854	56.4	43.0	0.3
New Ireland Province			124	267	27406	60	141	2	1	217	36.9	22.1	48428	53.4	40.8	0.2

- 2 HFs submitted 5/5 monthly report, 22 HFs submitted 4/5 monthly report and 8 HF submitted 3/5 monthly report and 1 HF submitted 2/5 report.
- 1 confirmed death was reported in February 2024 for Lamassa HSC
- 1 Malaria Clinical Death was reported from Namatanai District Hospital in the month of March 2024
- In Q1 2024 Babase HSC, Namatanai District Hospital and Silur HC are reporting more Malaria Positive cases compared to the total number of RDT tested which is not right. And this was corrected in this quarter visit, hope there will be changes in May report for Babase and Silur.
- Lihir Medical Centre is only reporting Positive cases and not all the RDTs and ACTs. This was emphasized during the visit and they were asked to improve on this.
- Timeliness of monthly report submission is slowly improving
- Out of the 5 Microscopy Facilities in the Province only 3 HFs (Kavieng Hospital, Lemakot HC and Kimadan HC) are reporting Malaria Microscopy.



- **11 Health Facilities out of the 33 Health Facilities in the Province are still reporting Malaria Clinical Cases despite the continuous visits and emphasize.**

Table 10: Table below shows Health Facilities who are using ENHIS and NHIS (Hard Copy) reporting

No.	NHIS (Hard Copy)	ENHIS (Tablet)	Daily Malaria Data Entry
1	Bol HC	Lemakot HC	Yes
2	Taskul HC	Piliwa HC	Yes
3	Lavongai HC	Kabanut HC	Yes
4	Metemana HC	Kimadan HC	Yes
5	Umbukul HC	Lipek HC	Yes
6	Tingwon HC	Manga HC	Yes
7	Epo/Palakau HC	Messi HC	Yes
8	Tasingina HC	Panaras HC	Yes
9	Kavieng Urban Clinic	Pukpuk HC	Yes
10	Silur HC	Kavieng Hospital	No
11	Babase HC	Namatanai DH	Yes. They just started after the Malaria Refresher Training done. February and March data are now entered.
12	Tanga HC	Mapua	Yes
13	Massahet HC	Lihir Medical Centre	No



14	Simberi Mine Clinic
15	Lamassa HC
16	Lamusmus CHP
17.	Poliamba U/C
18.	Palie HC
19	Maragon HSC/ Simberi
20	Puas HSC

Out of the 27 HF that were physically visited only 3 HF (Maragon HSC, Bol HSC and Simberi Mine Clinic) were still using the old outdated NHIS monthly report form whereas all the others are using the new revised form. New updated forms were issued during the visit. The PHIO was also notified after the quarterly visit.

MALARIA TREATMENT PROTOCOL

All health Facility visited are following the Malaria Treatment protocol accordingly. The Information on the new updated Treatment Protocol on the ACT use in First Trimester of Pregnancy was also disseminated to the Health Facility Staffs during this visit.

INTERMITTENT PREVENTATIVE TREATMENT IN PREGNANCY (IpTP)

All health Facilities visited are practicing the Intermittent Preventive Treatment for Pregnant mothers. Fansidar tablets are given according to the treatment protocol. Most HFs in the Province are now keeping a separate record for the 3 doses of fansidar for Pregnant mothers.

MALARIA MICROSCOPY FACILITIES IN THE PROVINCE

Table 11: Shows Malaria Microscopy Facilities in New Ireland Province.

No	HF	Operational Status
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1	Kavieng Hospital	Currently operating with 1 working Microscope. They have reagents available which is provided by the Hospital. They are using the issued Malaria Microscopy register book. They still haven't report well into the ENHIS.
2	Lemakot HC	Currently Operating with also 1 working microscope and they are reporting well into the ENHIS monthly report on timely bases. They operate depending on the Power situation.
3.	Kimadan HC	Currently Operating with also 1 working microscope and they are reporting well into the ENHIS monthly report on timely bases. They operate depending on the Power situation as well.
4.	Namatanai DH	Currently Operating with also 1 working microscope but they are reporting well into the ENHIS monthly report on timely bases. They operate depending on the Power situation.
5.	Lihir Medical Centre	Currently operating with working microscope but they are not using the Malaria Microscopy Register book instead they are using their own register book. And they still have issue with reporting through National Health Information System

HOMEBASED MANAGEMENT OF MALARIA

For this Year HMM Program will concentrate only on the refresher training and supervisory visit for the existing Community Malaria Volunteer (CMV). No new training will be done this year due to limited funds.

All the active CMVs in the Province are reporting well and this has helped most health facilities with their burden of seeing a lot of malaria cases at their outpatients. Most of the CMV reports are captured in the Health Facilities monthly report.

Table 12: Shows CMV status in the Province

Total CMV Trained (2021-2023)	Total Inactive	Total Active
309	69	240



MALARIA SCHOOL SURVEY

Table 13: Shows Results for Malaria School survey done at Lamusmus Elementary School in Kavieng District.

Date: 23.05.24		
Province: New Ireland	School: Lamusmus Elementary School	
District: Kavieng	Type of RDT used: Parascreen	
Total Students Survey	152	
Total Tests done	152	
Total Negatives	139	
Total PF	4	
Total Mix	6	
Total NPF	3	
Total Positives	13	
Treatment	13	ACTs only were given No Primaquine was given because of Nil stock of Primaquine in the Province
Fever in the last 24 hours	4	2 out of the 4 are positives
Own a Net in the Family	93	
Does Not own a Net in the Family	59	
Use a Net the night before	32	Out of 93 students who own nets, only 32 slept under the net the night before
Microscopy	Not done	
Enlarged Spleen	Nil	

Table 14: Shows results for Malaria School Survey done at Ngavalus Elementary School in Kavieng District.

Date: 24.05.24		
Province: New Ireland	School: Ngavalus Elementary School	
District: Kavieng	Type of RDT used: Parascreen	
Total Students Survey	147	
Total Tests done	147	
Total Negatives	117	
Total PF	17	
Total Mix	10	
Total NPF	3	
Total Positives	30	



Treatment	30	ACTs only were given No Primaquine was given because of Nil stock of Primaquine in the Province
Fever in the last 24 hours	21	
Own a Net in the Family	71	
Does Not own a Net in the Family	74	
Use a Net the night before	60	Out of 71 students who own nets, 60 slept under the net the night before
Microscopy	Not done	
Enlarged Spleen	Nil	

Table 15: Shows results for Malaria School Survey done at Kimadan Elementary School in Namatanai District.

Date: 12.06.24		
Province: New Ireland	School: Kimadan Elementary School	
District Namatanai	Type of RDT used: Parascreen	
Total Students Participated	136	
Total RDTs performed	136	
Total Negatives	127	
Total Positives	9	
Total PF	6	
Total NPF	2	
Total Mix	1	
Treatment	9	ACTs only were given. Primaquine was not given due to Nil stock in the province.
Fever in the last 24 hours	8	Out of the 8 students who were febrile in the last 24 hours, 1 was positive with Pf
Owns a Net in the Family	106	
Does not own a net in the Family	30	
Sleeps Under Net	75	Only 75 students amongst the 106 students whose family has a net at home slept under the net the night before.
Microscopy	0	Not done
Enlarged Spleen	4	All grade 1 spleen. 1 was positive



Table 16: Shows results for Malaria School Survey done at Pinikidu Primary School (grades 1&2) in Namatanai District.

Date: 13.06.24		
Province: New Ireland	School: Pinikidu Primary School (grades 1 & 2)	
District Namatanai	Type of RDT used: Parascreen	
Total Students Participated	146	
Total RDTs performed	146	
Total Negatives	122	
Total Positives	24	
Total PF	20	
Total NPF	4	
Total Mix	0	
Treatment	24	ACTs only were given. Primaquine was not given due to Nil stock in the province.
Fever in the last 24 hours	4	Out of the 4 students who were febrile in the last 24 hours, 1 was positive with NPF
Owens a Net in the Family	111	
Does not own a net in the Family	35	
Sleeps Under Net	59	Only 111 students amongst the 59 students whose family has a net at home slept under the net the night before.
Microscopy	0	Not done
Enlarged Spleen	1	All grade 1 spleen. 1 was positive



MALARIA PROGRAM VEHICLE



Vehicle used: RAM Program Vehicle NAE 839

Color: White Type: Land Cruiser 10 Seater

Registration validity: 28.11.24

Safety Sticker validity: 19.10.24

Duration of use: 17days

Driver: Bethlyn.Bekes

Contact: 74318344

Old Vehicle: BDS 690 is still in Ela Motors for Repair and Service.

ACHIEVEMENTS

- Completed NIP Q2 Visit
- Visited a total of 27 Health Facilities with a coverage rate of 81.1%
- New Provincial Malaria has joined the Team.
- All 33 Health Facilities received their Q3 Malaria Drug supplies
- Malaria School Survey
- Great Partnership with Australian Doctors International (ADI)



CHALLENGERS

- Uncooperative Driver
- Lamassa HC, Pukpuk HC and Silur HC were not visited due to bad road condition
- 11 Health Facilities still reporting Clinical Diagnosis despite continuous visits and emphasis. Main challenge is with the manual entry at the PHIO level.

RECOMMENDATIONS

- Malaria CQI Training to be done in Q3&Q4
- Provincial Malaria Supervisor to start quarterly Health Facility Visits and Drug distribution before RMC's arrival in the Province.

ACKNOWLEDGEMENT

1. New Ireland Provincial Health Authority
 - The Chief Executive Officer- Dr. Sternard Hiahsiri
 - A/Director Public Health- HEO. Patterson Marengas
 - Provincial Disease Control Officer- HEO. Maria Sabok
 - Deputy Director Public Health Programs- Mr. Edmond. Polut
 - Partners Coordinator- Mr. Alphonse Wena
 - Provincial Pharmacist- Ms. Monica Wulwarau
 - Provincial Health Information Officer- Ms. Alphonsia Wiringa
 - A/District Health Manager Kavieng District- HEO Betty Tameluk
 - District Health Manager Namatanai District HEO. Edward Maika
 - LLG Health Manageress Nimamar- HEO. Gorethie Kaven
 - LLG Health Manageress Sentral Niu Ailan- HEO. Eunice Johnson
 - Kavieng Transit Medical Store Team
 - All the Health Facilities OICs and Health Staffs who were present during the Q2 visit.
 - HMM Coordinator-Mr. Thomas Kapu
 - Provincial Malaria Supervisor HEO. Joyce Johnson
2. St Barbra Mine Simberi
3. Catholic Health
4. United Church Health
5. RAM
6. Global Fund



PHOTOGRAPHS



Lihir Island Trip visit to the 3 Health Facilities on Lihir Island. Picture 1 is the PMS at Palie HC checking the Malaria Register book, Picture 2 is at Lihir Medical Centre from right Ms. Jeanette N Bokame- Health Service Manager Lihir Medical Centre, Mrs. Gorethie Kaven- LLG Health Manageress Nimamar LLG, Provincial Malaria Supervisor (PMS) HEO. Joyce Johnson, Mr. Anthony Tandrapa- Public Health Coordinator- Lihir Medical Centre and myself HEO Erica Nawara Regional Malaria Coordinator- NIP/ENB RAM/NMCP and Picture 3 is at Masahet HC beach front with all the Health Staff.



Tabar Island Trip. Picture 1 Malaria Admin officer carrying RDT cartons from Mapua HC beach front up to Mapua Health Centre. Picture 2 Nurse Agesta at Mapua HC signing off the GDNs and Picture 3 is at Simberi Mine Clinic, from right is HEO Niandros, myself, Dr. Samo and the PMS.





Tanga and Anir Island Trip. Picture 1 is at Namatanai Boat stop Malaria Admin officer and the Dingy operator assistant loading the dingy for the Trip, Picture 2 is at Tanga HC from right is Sr. Felicity and the PMS, Picture 3 is at Anir Group of Islands Babase HC with Mr. Alex OIC Babase HC and the PMS.



New Hanover Island Trip. Picture 1 is at Taskul HC beach front, going through the checklist with the PMS, Picture 2 is at Lavongai HC, confirming the drugs and the back is the PMS going through the ANC registers with the Nurse who was present during the visit and Picture 3 is at Puas HC beach front unloading the drugs with the Malaria Data Entry Clerk who joined the Team during the visit.





Malaria School Survey for Kavieng District. Picture 1 is at Ngavalus Elementary School, from right is the PMS, Ms. Dolly and Ms. Sarah, 2 Community Malaria Volunteers who assisted the Team with malaria School Survey, Picture 2 is at Ngavalus Elementary School students lining up for the RDT prick and Picture 3 is at Lamusmus Elementary School during the Malaria School Survey.

