

Q2-2024 FIELD TRIP REPORT FOR WHP



RMC (right) presented a new A3 size (revised) ANC Register Book to the OIC of Tipulga CHP in WHP to document IpTp Dosages in this book. OIC-Mr. Isaac Par was happy and satisfied upon receiving this book as he was using a make-shift book as the ANC Register Book for all those years.

VISITING OFFICER: AGATHA GOLA (RMC)

ACCOMPANYING OFFICERS IN THE FIELD: Ms. SALOME MINAR (WH PROVINCIAL MALARIA SUPERVISOR)

DATE OF VISIT: 18th of June, 2024 - 1st of July, 2024.

NIGHTS AWAY FROM THE OFFICE: 5 NIGHTS

TYPE OF DOCUMENTS ATTACHED: PHOTOGRAPHS

PURPOSE OF VISIT: MALARIA M & E VISIT FOR QUARTER 2-2024

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EXECUTIVE SUMMARY

This is the second quarter of 2024 monitoring and evaluation visit for the National Malaria Control Program to Western Highlands Province. The visit was done right after the completion of Jiwaka's second quarter visit. It was a 5-day visit for the Regional Malaria Coordinator due to the Mid-Year Reflection and Learning Meeting in Port Moresby, hence, RMC left the Province to attend the meeting and the Provincial Malaria Supervisor continued with the visits. So, the visit was a total of 2 weeks' period, which started on the 18th of June, 2024 and ended on the 1st of July 2024.

A total of 36 health facilities were physically visited out of the 46 reporting health facilities of Western Highlands Province. This brings the total percentage coverage to 109.1%. Of these 36 facilities visited, none had stock outs of mRDTs, ACTs or Primaquine tablets.

Western Highlands Provincial Health Authority continue to assist the Malaria Program with a vehicle and a driver for the entire visit. The vehicle was used by the PMS for the Health Facility visits.

The main purpose of this visit is to;

- distribute mRDTs, ACTs, Primaquine tablets and Antenatal Long- lasting insecticidal Nets to all reporting health facilities,
- do active stock rotation of antimalarial from one health facility to another, i.e. from low consumption rate to high consumption rate,
- run continuous quality initiative trainings to health facility's OIC and staffs/trainees where needed,
- check on Health Facility Malaria Registers and Antenatal bed net registers & collect,
- stocktake on all malaria commodities at the health centres and replenish where necessary,
- monitor medical supply stock cards for mRDT, ACTs, Primaquine tablets and update,
- check on how well the malaria data is entered into the e-NHIS tablet and whether all sections under malaria is correctly reported,
- malaria data verification and validation through the use of Monthly Malaria Report against the raw data in the reporting tools at the facility,
- coach OICs on how to enter malaria data correctly and completely under malaria sections of the e-NHIS tablet
- make sure e-NHIS monthly reports are sent on time and
- make sure intermittent preventative treatment in pregnancy (Fansidar prophylaxis for antenatal women) is implemented and documented in the ANC Registration book,
- issue new A3 size ANC Register Book to facilities that don't have it and
- liaise with Remote Sensing Team to solve discrepancies found in the e-NHIS tablet with regards to Malaria Program and also the general use and function of the tablet.

BACKGROUND OF WESTERN HIGHLANDS PROVINCE

Western Highlands Province is one of the seven provinces of Highlands Region and is the largest of all. Its capital is Mount Hagen. The total population according to the 2011 National Census was 362 850, which is a densely populated Highland province compared to others. It covers an area of 4299 km².

Much of the land areas in Mul-Baiyer and Dei Districts are plain and the climate is warm.

Economy in the province is mainly generated through subsistence farming and Small-Medium Enterprises. General mindset of the inhabitants is business minded, self-reliant and goal oriented through perseverance.

Infrastructure is improving unlike before, however, some parts of Province still have deteriorating roads and bridges which hindered the health facility visits. Communication through mobile phones in few places in the province is difficult and unreachable due to poor network coverage. Unlike before due to the current political issues and infights in the province which pose a risk or prevent us from reaching the desired destination.

Tribal fights in the Dei district subsided, however, opportunists are still taking advantage of Government and NGOs’ vehicles and car theft is still alarming in this particular District which prevented us from visiting all the health facilities in that district when using Malaria Program Vehicles. It is much safe to visit health facilities with Hire vehicle and local drivers.

Malaria incidence in the province strongly depends on the altitude. Places located in the low altitudes of 900m and below especially in the low plains of parts of Dei district (Ruty Valley & Ruina) and Mul-Baiyer district (Tinsley Valley) have a lot of positive malaria cases registered. These were found to be locally transmitted according to malaria registers as well as discussions made with staffs from the health facilities of these malarial zones. However, due to the climate change as a result of global warming, places situated at higher altitudes are also having malaria infections both locally and imported cases as evident in the Health Facility Malaria Registers.

The province consists of 4 districts namely; Mul-Baiyer, Dei, Mount Hagen and Tambul-Nebilyer District and has a total of 46 coded health facilities which all are accessible by road.

Fig 1. Shows the boundaries of 4 Districts for WH Province

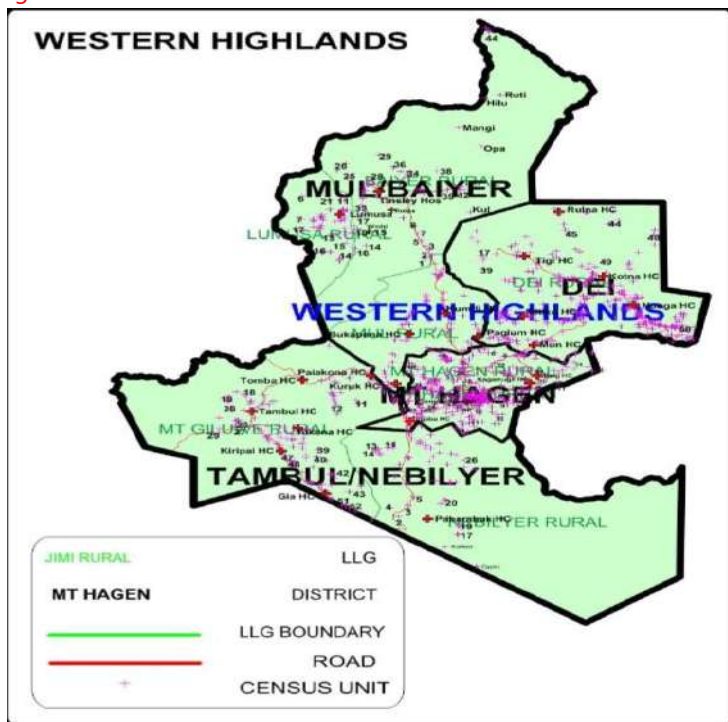
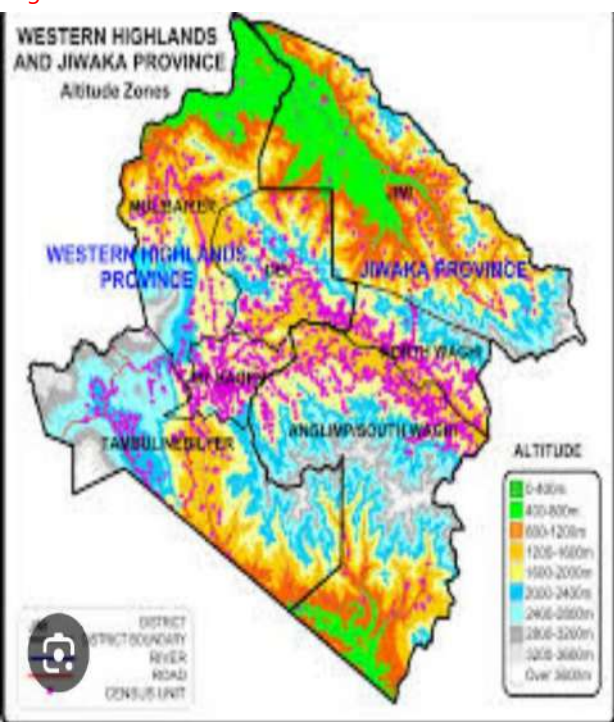


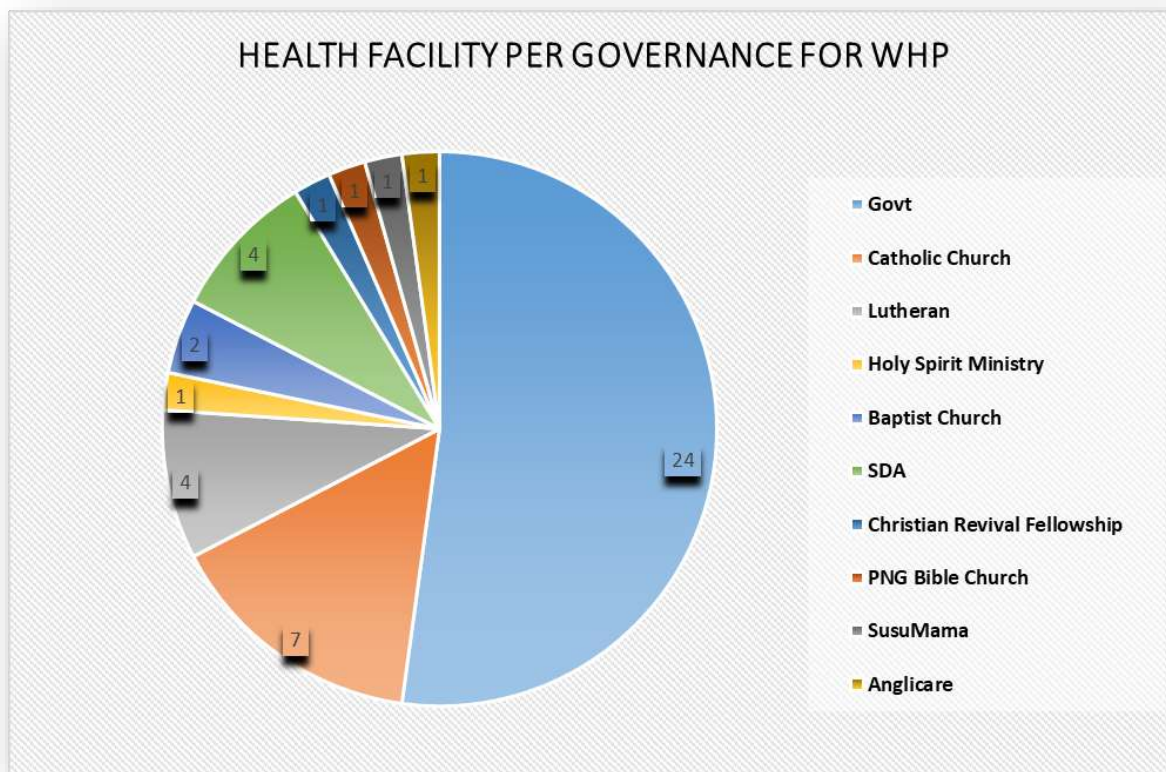
Fig 2. Shows the altitude zone for WHP.



HEALTH SERVICES IN WESTERN HIGHLANDS PROVINCE

Western Highlands Province has a total of 46 reporting health facilities. Of the 46 reporting health facilities and as per the District, Hagen Central has 12 reporting health facilities, Mul Baiyer has 15, Dei has 8 and Tambul Nebilyer has 11. All these 46 health facilities are accessible by road. It is governed by both the Western Highlands Provincial Health Authority(Government) and Church Agencies.

Graph 1. shows the breakup of the 46 reporting health facilities as per the governance.



• **Government/Wester Highlands Provincial Health Authority**

The Government runs 52% (24 hfs) of the total reporting health facilities. These facilities are the Mt. Hagen General Hospital, Hagen Urban Clinic, Bukapena HC, Trolga HSC, Tambul HC, Alkena HSC, Paiakona HSC, Wakanom CHP, Kwinga CHP, Nengil CHP, Poi CHP, Nunga HSC, Pagli CHP, Kagamuga Urban Clinic, Tentenga HC, Baisu UC, Tipulga HSC, Atenga CHP, Tsinjipai CHP, Kombo CHP, Kanimerata CHP, Sanap CHP, Wagbel CHP and Ogelbeng CHP.

• **Catholic Health Services**

It is the second highest organization that runs 15%(7 hfs). The facilities under this are; Kuruk HSC, Kumdi HSC, Keripia HSC, Koibuga HSC, Rulna HSC, Mun HC and Rebiamul Urban Clinic.

• **Lutheran Health Services**

LHS runs 4 health facilities (9%) and they are Gia HSC, Kotna HC, Mukapeng CHP and Tiki HSC.

• **Seventh Day Adventist**

SDA also runs 4(9%) health facility and these are Togoba HC, Paglum HSC, Tomba HSC and Mitiku HSC.

• **Baptist Church**

Baptist Church runs 2(5%) health facility which are Tinsley HC and Laprambo CHP.

• **Holy Spirit Ministry**

This agency runs only 1(2%) health facility which is Bagl HSC.

• **Christian Revival Fellowship**

CRF also runs 1 health facility (2%) which is the Simbimale HSC in Baiyer District.

•PNG Bible Church

This agency also runs only 1(2%) facility which is the Pabarabuk HSC in Nebiliyer District.

•SusuMama Organization

This NGO runs only 1 clinic (2%) and that is SusuMama Urban Clinic in Hagen Town.

•Anglicare

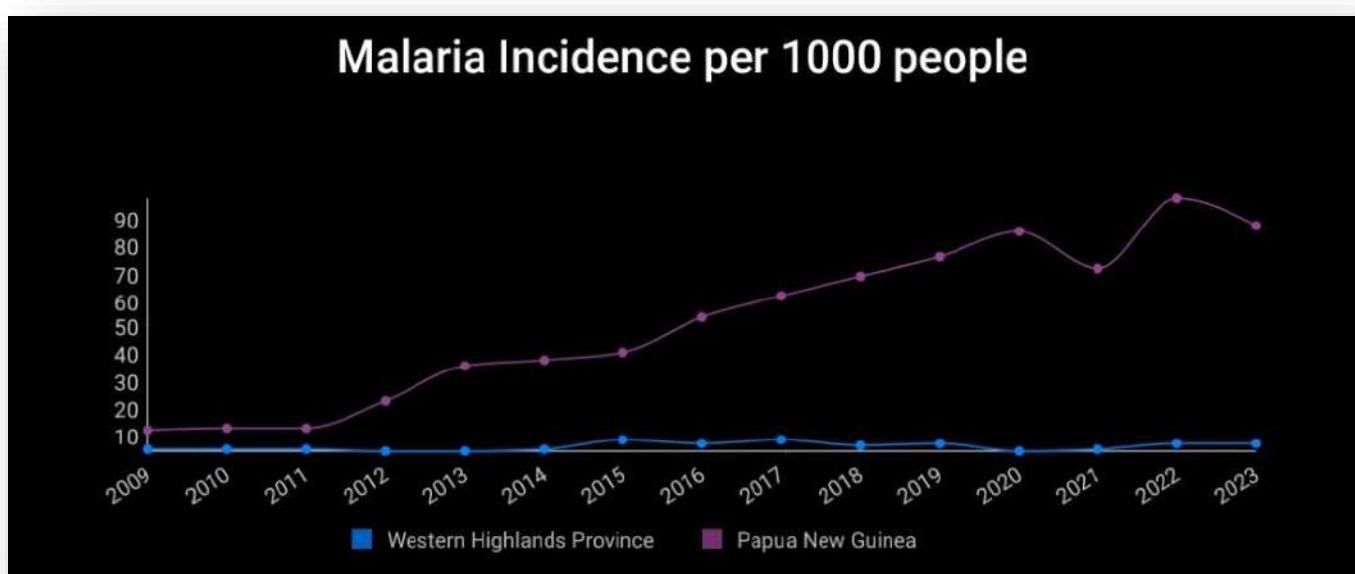
Anglicare also runs only 1 Clinic which is the Newtown Anglicare Urban Clinic.

AID POSTS

Western Highlands Province has 57 Aid Posts of which 7 are inactive while the 50 are active or functioning.

From observations, data analyses and interrogation with the OICs of reporting health facilities, most of the monthly reports from Aid Posts reach them late after submission of reports. One of the way forwards to capture all reports is to further introduce e-NHIS tablet to Community Health Posts and Aid Posts.

Graph 2. Malaria prevalence rate for Western Highlands Province compared to the rest of PNG from 2009-2023.



Source: e-NHIS Western Highlands Province Health Indicators.

PURPOSE OF VISIT

The purpose of this visit is to;

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- run continuous quality initiative trainings to health facility's OIC and staffs/trainees where needed,
- check on Health Facility Malaria Registers and Antenatal bed net registers & collect,
- stocktake on all malaria commodities at the health centres and replenish where necessary,
- monitor medical supply stock cards for mRDT, ACTs, Primaquine tablets and update,
- check on how well the malaria data is entered into the e-NHIS tablet and whether all sections under malaria is correctly reported,
- malaria data verification and validation through the use of Monthly Malaria Report against the raw data in the reporting tools at the facility,
- coach OICs on how to enter malaria data correctly and completely under malaria sections of the e-NHIS tablet

- make sure e-NHIS monthly reports are sent on time and
- make sure intermittent preventative treatment in pregnancy (Fansidar prophylaxis for antenatal women) is implemented and documented in the ANC Registration book,
- issue new A3 size ANC Register Book to facilities that don't have it and
- liaise with Remote Sensing Team to solve discrepancies found in the e-NHIS tablet with regards to Malaria Program and also the general use and function of the tablet.

Table 1. WESTERN HIGHLANDS PHA TEAM MET WITH:

It was a short period visit, therefore, not many PHA officers were met. However, below are the important Officers met and worked with.

NAMES	POSITION	PHONE DIGITS	EMAIL ADDRESS
Salome Minar	Provincial Malaria Supervisor	73849037	Salome.minar@whhs.gov.pg
Sr. Nelly Newman	Provincial Family Health Coordinator	74551951	
Esther Kuya	Environmental Health Officer	71701979	

TYPE OF TRANSPORT USED:

During this second quarter visit, the WH PHA assisted the Malaria Program with a vehicle to be used by the Provincial Malaria Supervisor for her health facility visits while the RMC used the Malaria Program Vehicle LBX 514 for only 6 days. So, there were 2 PHA vehicles used during her visits, 1 in the first week and the other in the 2nd week. Details of vehicles used are outlined below.

Table 2. Shows the vehicles used in the 2nd quarter visit.

Vehicle	Malaria Program Vehicle	WH PHA Vehicle
Vehicle Registration	LBX 514	ZGP 999 & ZGP 622
Color	RAM Color, Blue Yellow	Both white
Type	Toyota Land Cruiser 10 seater	Toyota Land Cruiser (10 seater & 5 Door)
Registration Validity	10.02.2025	
Safety Sticker Validity	31.07.2024	
Duration of use	6 Days	10 Days
Driver	Mr. Dominic Pora	Mr. Robby Puri
Contact	73204135	73772850

HIGHLIGHTS OF Q2- 2024 RMC's VISIT

1. Health Facility Visits Summary for Quarter 2-2024:

Of the 46 reporting health facilities, 36 were physically visited by RMC and PMS, 2 (Kwinga CHP & Mun HSC) were closed due to no staffs and tribal fight respectively, 2 were hard to reach due to deteriorating bridge and road, 7 are situated in Dei District which are accessible but couldn't visit due to car theft and risky for Program Vehicle and Government Vehicles. It's a fighting zone. However, drug supplies for 5 of the 7 health facilities were successfully delivered by the RAM M&E Officer via a Hire Vehicle. The 4 inaccessible facilities will collect their drug supplies from the Public Health Office.

Table 3. shows the summary of the visit.

	Qtr. 1	Qtr. 2
Total number HFs	46	46
Total Number Accessible	33	33
Total Number Reached	38	36
% Coverage (Accessible)	115.2	109.1
% Coverage (Total HFs)	82.6	78.3

2. Stock out of Malaria RDT Kits, ACTs & Primaquine Tablets:

Of the 36 accessible health facilities visited, **none had stock out of mRDTs, ACTs or Primaquine.**

3. Total mRDTs, ACTs & PQ distributed during Q2 visit:

Table 4. Shows the total malaria commodities supplied to Western Highlands' health facilities in this 2nd quarter visit.

Year	Quarter	Malaria RDT Kits	ACTs(blisters)	Primaquine Tablets
2024	2	4725 test kits	1830 blisters	10 000 tablets

4. UPDATE OF ANC LLIN:

There was nil stock of ANC LLIN during the second quarter visit, however, 20 bales (1000 nets) were borrowed from the general bed net stocks at Ramu and taken up to WHP for distribution. All these 1000 nets were distributed to health facilities and there no stock left at the PHO.

Table 5. Shows the ANC LLIN distribution to health facilities in Western Highlands Province.

DATE	DELIVERY TO HEALTH CENTRE	PERSON RECEIVING GOODS	OFFICER SUPPLYING NETS	DOCUMENTATION NO.	STOCK IN	STOCK OUT	BALANCE	COMMENTS
18.06.24	WH PHA MALARIA JPHA STORAGE	AGATHA GOLA-RMC	AGATHA GOLA-RMC	30081	1000		1000	Borrowed nets from the general bed nets.
19.06.24	TINSLEY DISTRICT HOSPITAL	WOKEI S-OIC-MCH	SALOME MINAR-PMS	40070		50	950	Issued by PMS upon HF visit
20.06.24	NENGLI CHP	THERESIA NINDIPA-CHW/OIC	SALOME MINAR-PMS	40071		50	900	Issued by PMS upon HF visit
20.06.24	SANAP CHP	SR. LINA ANGALE-OIC	SALOME MINAR-PMS	40072		50	850	Issued by PMS upon HF visit
20.06.24	OGELBENG CHP	SR. MEROLYN-OIC	AGATHA GOLA-RMC	14525		50	800	Issued by RMC upon HF visit
20.06.24	BUKAPENA HC	PENNY SILYO-CHW	AGATHA GOLA-RMC	14527		50	750	Issued by RMC upon HF visit
21.06.24	HAGEN URBAN CLINIC	NR. CATHY KARA-CHW	AGATHA GOLA-RMC	14531		100	650	Issued by RMC upon HF visit
21.06.24	KAGAMUGA URBAN CLINIC	SR. MARGARETH JONAS-OIC	AGATHA GOLA-RMC	14528		50	600	Issued by RMC upon HF visit
21.06.24	SUSUMAMA TOWN CLINIC	SR. TERESITHA-HFM	AGATHA GOLA-RMC	14529		50	550	Issued by RMC upon HF visit
21.06.24	ANGLICARE NEWTOWN CLINIC	SR. ROSE ABA-OIC	AGATHA GOLA-RMC	14530		50	500	Issued by RMC upon HF visit
24.06.24	WAKNAM CHP	RITA PEPA-CHW	SALOME MINAR-PMS	14532		50	450	Issued by PMS upon HF visit
24.06.24	KURUK HSC	SR. OPUP-OIC	SALOME MINAR-PMS	14535		50	400	Issued by PMS upon HF visit
24.06.24	TOGOBA HC	SASA ISSAC	SALOME MINAR-PMS	14536		50	350	Issued by PMS upon HF visit
24.06.24	REBIAMUL URBAN CLINIC	FRED NAMTANE-CHW/RLA	SALOME MINAR-PMS	14537		50	300	Issued by PMS upon HF visit
25.06.24	WAGBEL CHP	UNITY WIYA-UPSKILLED CHW	SALOME MINAR-PMS	14518		50	250	Issued by PMS upon HF visit
26.06.24	KOIBUGA HSC	MEROLYN MOND-CHW	SALOME MINAR-PMS	14533		50	200	Issued by PMS upon HF visit
26.06.24	PABRABUK HC	REX JACK-OIC	SALOME MINAR-PMS	14534		50	150	Issued by PMS upon HF visit
27.06.24	GIA HC	SIMON KIAP-CHW	SALOME MINAR-PMS	14538		50	100	Issued by PMS upon HF visit
27.06.24	KERIPIA HSC	JACOB-RNO	SALOME MINAR-PMS	14539		50	50	Issued by PMS upon HF visit
28.06.24	TAMBUL HC	JANET TALPA-CHW	SALOME MINAR-PMS	14541		50	0	Issued by PMS upon HF visit
							0	
TOTAL NETS DELIVERED TO HEALTH FACILITIES					1000	1000	0	

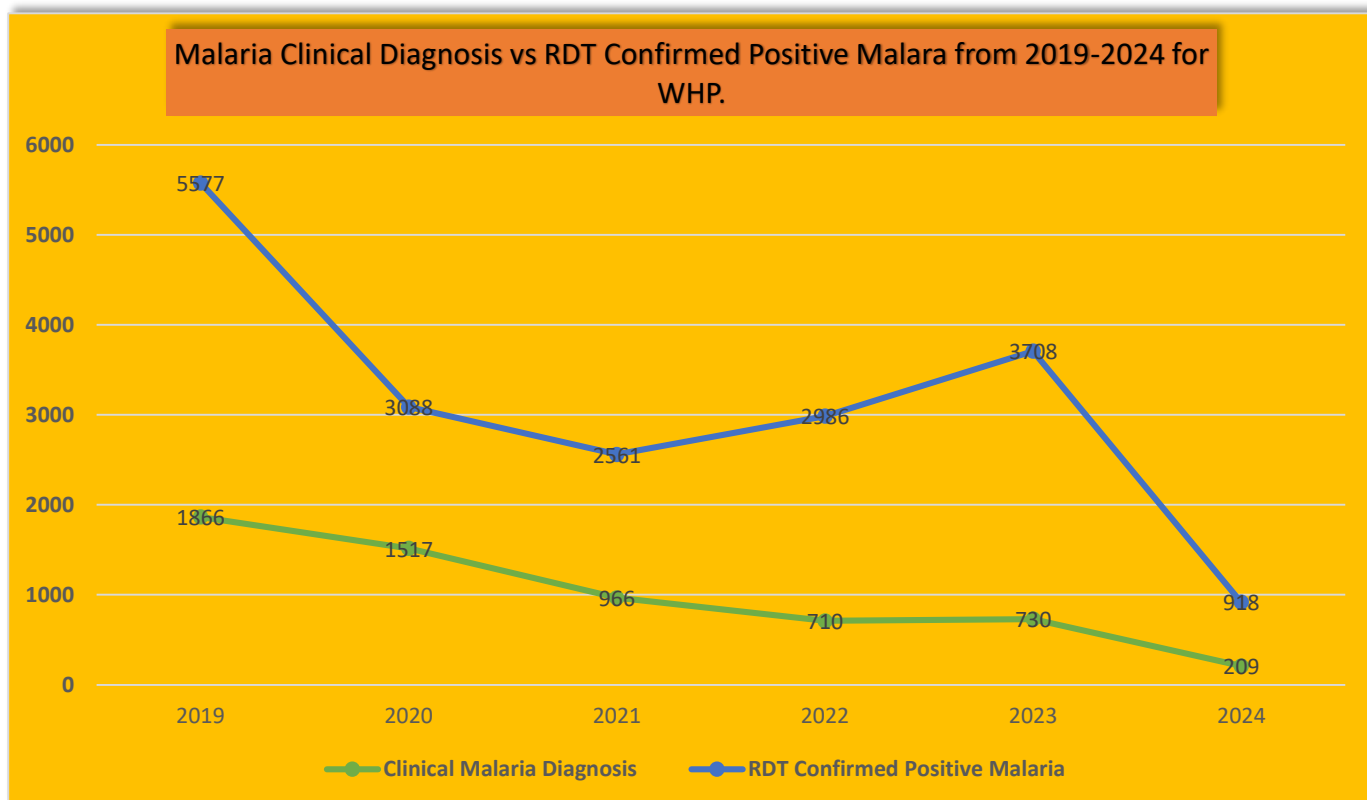
5. Malaria Stock Update

The RDTs, ACTs & Primaquine that were used for the distributions were from the Q1 -2024 buffer stocks. Q2 Drug supplies from AMS-Hagen were received late after the distribution, hence, kept as buffer stocks.

	mRDT kits	ACT 6	ACT 12	ACT 18	ACT 24	PQ
Q1-24 Buffer Stocks	6100 kits	210 blisters	420 blisters	540 blisters	1020 blisters	53 800 tablets
Batch #	H006B0103D	3E01046	A1APH005	B1APH019	A1APH006	22071
Exp Date	Sep-24	Dec-25	Mar-24	May-25	Aug-24	Jun-24
	mRDT kits	ACT 6	ACT 12	ACT 18	ACT 24	PQ
AMS/NDOH Q2-24 Stocks	6250 kits	60 blisters	720 blisters	0	1110 blisters	11000
Batch #	H006CD05D	3E02047	B1APH004		B1APH007	151122
Exp Date	May-25	Dec-25	Oct-25		Oct-25	Oct-25

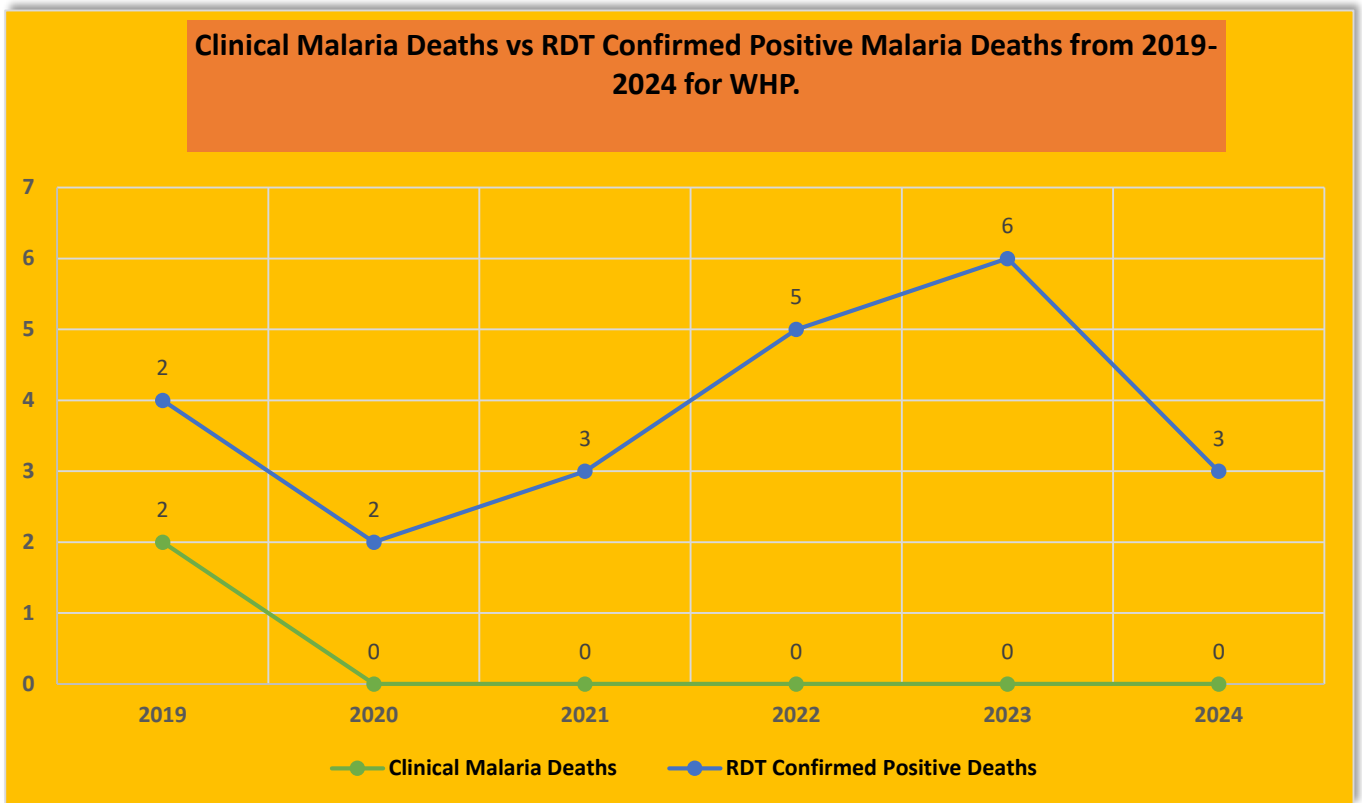
MALARIA DATA UPDATES:

Graph 3. Malaria Clinical Diagnosis vs RDT Confirmed Positive Malaria



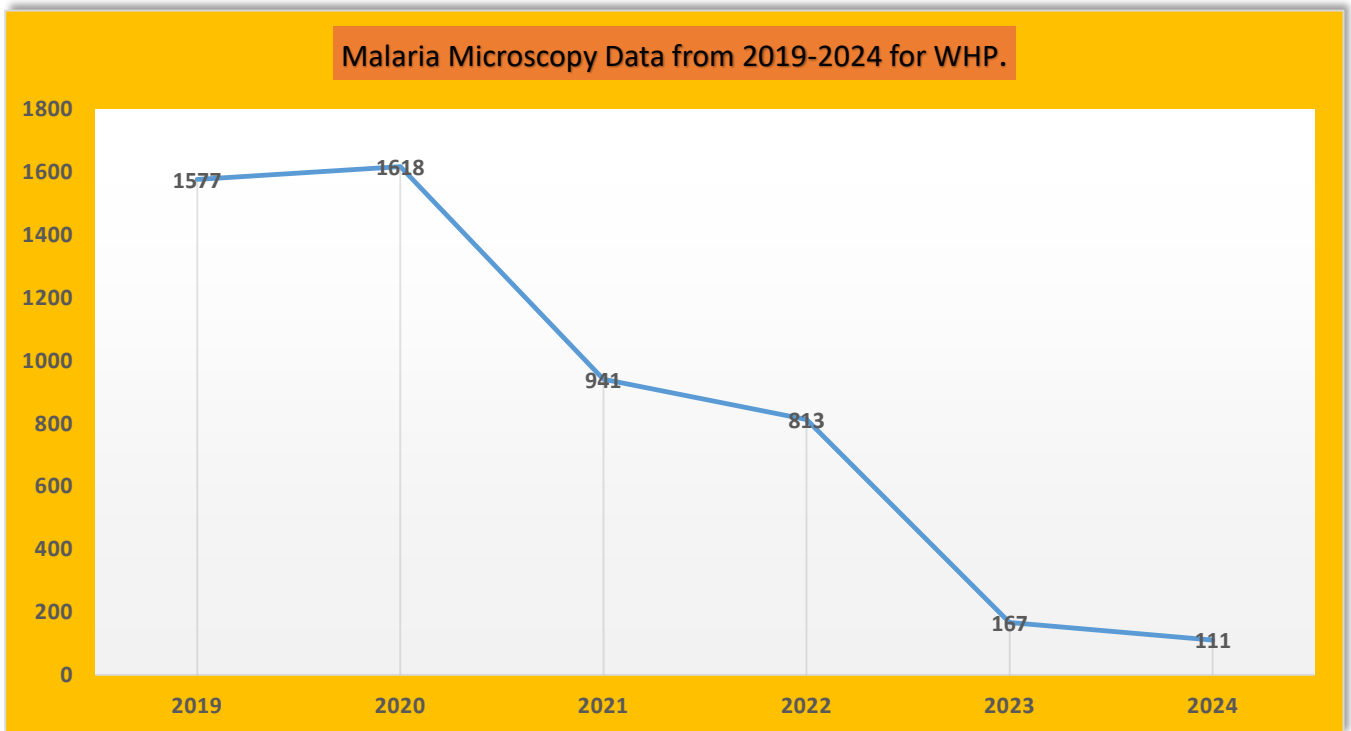
Source: e- NHIS Malaria Report

Graph 4. Clinical Malaria Deaths vs RDT Positive Deaths



Source: e-NHIS Malaria Report

Graph 5. Malaria Microscopy Data for Western Highlands Province.



Source: e-NHIS Malaria Report

Table 6. Health Facilities visited and activities implemented.

District	Health Facility	Date of visit	Activities done
Mul Baiyer	Atenga CHP	19.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Mul Baiyer	Simbimale HSC	19.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Mul Baiyer	Tinsley HC	19.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Mul Baiyer	Trolga CHP	20.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Mul Baiyer	Laprambo CHP	20.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Mul Baiyer	Sanap CHP	20.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Hagen Central	Ogelbeng CHP	20.06.24	Visited by RMC. Stock take on SoH, CQI training done to 2 staffs & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registers.
Hagen Central	Tipulga CHP	20.06.24	Visited by RMC. Stock take on SoH, CQI training done to OIC and his staff, replenished with Malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and issued a new A3 size ANC Register book.
Mul Baiyer	Bukapena HC	20.06.24	Visited by RMC, stock take on SoH, replenished with Malaria commodities.
Mul Baiyer	Nengil CHP	20.06.24	Visited by PMS, stock take on SoH and replenished with Malaria commodities.
Hagen Central	Kagamuga Urban Clinic	21.06.24	Visited by RMC. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Hagen Central	SusuMama Town Clinic	21.06.24	Visited by RMC. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Hagen Central	Hagen Urban Clinic	21.06.24	Visited by RMC. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Mul Baiyer	Paglun HSC	21.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Mul Baiyer	Kumdi HSC	21.06.24	Visited by PMS. Stock take on SoH, Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Mul Baiyer	Poi CHP	21.06.24	Visited by PMS. Stock take on SoH, Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts.
Hagen Central	Anglicare Town Clinic	21.06.24	Visited by RMC. Stock take on SoH, Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration
Mul Baiyer	Kuruk HSC	24.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration
Mul Baiyer	Waknam CHP	24.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Hagen Urban	Rebiamul Urban Clinic	24.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Tambul Nebiliyer	Togoba HC	24.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Hagen Central	Baisu Urban Clinic	25.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities and checked on HFM Registers.

Hagen Central	Bagl HSC	25.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Hagen Central	Wagbel CHP	25.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Pabrabuk HC	26.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Koibuga HSC	26.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Gia HC	27.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Alkena CHP	27.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Keripia HSC	27.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Tsinjipai CHP	27.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Tambul HC	28.06.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Kombo CHP	28.06.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Hagen Central	Tentenga HSC	1.07.24	Visited by PMS. Stock take on SoH, replenished with malaria commodities. Checked on HFMR book/receipts & ANC LLIN receipts
Tambul Nebiliyer	Tomba HSC	1.07.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Tambul Nebiliyer	Paiakona HSC	1.07.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Hagen Central	Mt. Hagen General Hospital	1.07.24	Visited by PMS. Stock take on SoH & Replenished with malaria commodities. Checked on HFMR book/receipts, ANC LLIN receipts and IPTP registration.
Dei District	Nunga HSC	21.06.24	Physically visited by the RAM M&E Supervisor with a hire vehicle. Stock take on SoH and replenished with malaria commodities.
Dei District	Kotna HC	21.06.24	Physically visited by the RAM M&E Supervisor with a hire vehicle. Stock take on SoH and replenished with malaria commodities.
Dei District	Mitiku HSC	21.06.24	Physically visited by the RAM M&E Supervisor with a hire vehicle. Stock take on SoH and replenished with malaria commodities.
Dei District	Mukapeng CHP	21.06.24	Physically visited by the RAM M&E Supervisor with a hire vehicle. Stock take on SoH and replenished with malaria commodities.
Dei District	Tiki HSC	21.06.24	Physically visited by the RAM M&E Supervisor with a hire vehicle. Stock take on SoH and replenished with malaria commodities.
Dei District	Rulna HSC		Road access cut off by massive landslide. Inaccessible health facility. Drug Supplies delivered by WH PHA staffs already.
Dei District	Mun HSC		Facility closed due to tribal fight.
Dei District	Pagli CHP		Not visited due to Fighting zone. Malaria Program Vehicle was used in this visit so it is not allowed to drive in as vehicle theft is high in Dei Drug supplies to be collected by the OIC from the PHO.
Mul Baiyer	Kwinda CHP		Closed due to no staffs.

Mul Baiyer	Kanimerata CHP	Deteriorating road condition, unable to visit. Drug supplies to be collected by the HF OIC from the PHO.
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UPDATE ON MALARIA TREATMENT PROTOCOL FOR PNG

- ✓ Single dose Primaquine for positive Pf cases is implemented.
- ✓ 14-day Primaquine after completion of ACT for Non-Pf & Mixed Infections is implemented.
- ✓ ACT in first trimester is disseminated to OICs and staffs. However, most of them requested for a formal circular from the NMCP-NDOH to confirm and implement.
- ✓ Well versed with the administration of Artemether 40mg & 80mg.
- ✓ Some staffs are now using Artesunate 60mg injection for severe positive malaria cases after several onsite trainings on how to dilute and administer for both intramuscular and intravenous. Trainings will continue for the benefit of all other new staffs and trainees.
- ✓ 3 doses of fansidar for Antenatal women is implemented.
- ✓ Doxycycline prophylaxis for inbound travelers is disseminated. However, as mentioned by staffs, not many people seek for prophylaxis. People just travel and only visit health facilities when they feel ill.
- ✓ Staffs are aware of the 2nd line treatment of Malaria, however, most of them are not using as they don't have case that require 2nd line treatment and
- ✓ the contra-indications of Primaquine is disseminated and staffs are aware of these.

ACHIEVEMENTS

1. Delivered a A3 size ANC LLIN Register Book to Tipulga CHP as the staffs were using a make-shift note book for ANC records all those years.
2. WH PHA again assisted the Malaria Program with a vehicle and a driver to drive the PMS for her Health Facility visits.
3. Constant declining in Malaria Clinical Diagnosis and increase in RDT confirmed cases from 2020 till current.
4. Zero Clinical Malaria Deaths from 2020 till current.
5. Visited >100% accessible health facilities in Q2 visit.
6. Successfully delivered drug supplies to the Fighting Zones in Dei District with the assistance of RAM M&E Supervisor via Hire vehicle.
7. Very good partnership with Western Highlands PHA Team.
8. PMS is able to do her visits alone and do the basic activities. She still needs to learn more on the technical part the Program and other important areas like the Malaria Treatment Protocol.

KEY CHALLENGES

Health Facility Visits

- ✓ Deteriorating road and bridge conditions in Baiyer District prevented visit to Kanimerate CHP.
- ✓ Risky to visit health facilities in Dei District due to tribal fights and car theft.
- ✓ Medical supply stock cards not updated in some facilities.
- ✓ Poor accountability of RDTs, ACTs & Primaquine in some health facilities.
- ✓ Malaria RDT registers not fully entered into the e-NHIS monthly report.
- ✓ Misreporting, that is, report false RDT, ACT & PQ stock out when actual physical stock counts are available.
- ✓ Few health facilities have issues with accountability of Antenatal Long-Lasting Insecticidal Nets.

RECOMMENDATIONS

WH Provincial Health Authority

- ✓ WH PHA to continue provide support in terms of a vehicle and driver during the quarterly visits.

✓ PMS to assist the Medical Records officers in entering Malaria Data because most datas are not completely entered due to workload and shortage of manpower.

✓ Provincial Malaria Supervisor to actively visit each health facility at every opportunity to collect RDT registers & ANC LLIN registers for data verification and reports. Also collect registers from the PHIO's office and sort out for entries.

Regional Malaria Coordinator

✓ Liaise with Geraldine and her Remote Sensing Team for an additional e NHIS tablet for the Public Health Laboratory.

✓ Continue CQI trainings

✓ Will continue to deliver the revised A3 ANC Register books to Alkena CHP and Tsinjipai CHP in Q3 as they're currently using the old pink register book, hence, unable to register the IPTP.

ACKNOWLEDGEMENT

I would like to sincerely thank the following important people, Departmental heads, organization and business sectors for making this trip a success. My word of gratitude to the;

1. Nation Department of Health – National Malaria Control Program.
2. Rotary Against Malaria – Regional Malaria Coordinator Program.
3. Western Highlands Provincial Health Authority Team.
4. The RAM M&E Supervisor (Miss Lucy Temon) for assisting in delivering the Q2 Drug Supplies to 5 Health Facilities in Dei District.
6. All the staffs of the 36 reporting Health Facilities of WHP
7. The drivers, Mr. Dominic Pora & Mr. Robby Puri for safe driving.

Cheers to everyone in the Fight Against Malaria!

Field Trip Report compiled by;

Ms. AGATHA GOLLA – Regional Malaria Coordinator for Western Highlands Province.

FEW PHOTOGRAPHS OF QUARTER 2 VISIT:



RMC issued new A3 size ANC Register Book to the OIC of Tipulga CHP for IPTP recording as they were using a make-shift note book all those years.



RMC running CQI training to the OIC and a staff at Tipulga CHP in WHP.



Malaria Program Vehicle Driver Mr. Dominic Pora loading ANC LLIN bales from Kurumul Jiwaka office to be transported to WHP for Q2 distribution.



RMCs (Agatha Gola & Nellie Jerry) & the RAM LLIN Tea Team conveying with the Program Vehicles from Hagen to Simbu, then to Goroka to board flights back to POM office.