

MILNE BAY PROVINCE

QUARTER 4 REPORT



GROUP DISCUSSION: MILNE BAY TEAM AND PSM @ LAMANA HOTEL-NOV 2024

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TITLE: REGINAL MALARIA COORDINATOR

MILNE BAY PROVINCE QUARTER FOUR (4) FIELD TRIP REPORT-2024

'Every mosquito bite avoided brings us closer to a malaria –free world''

Background of Milne Bay Province.

Milne Bay Province is located on the eastern part of Papua New Guinea. The Province is said to be a maritime province however there are people who are living on the ragged mountain range of the Owen Stanley range.

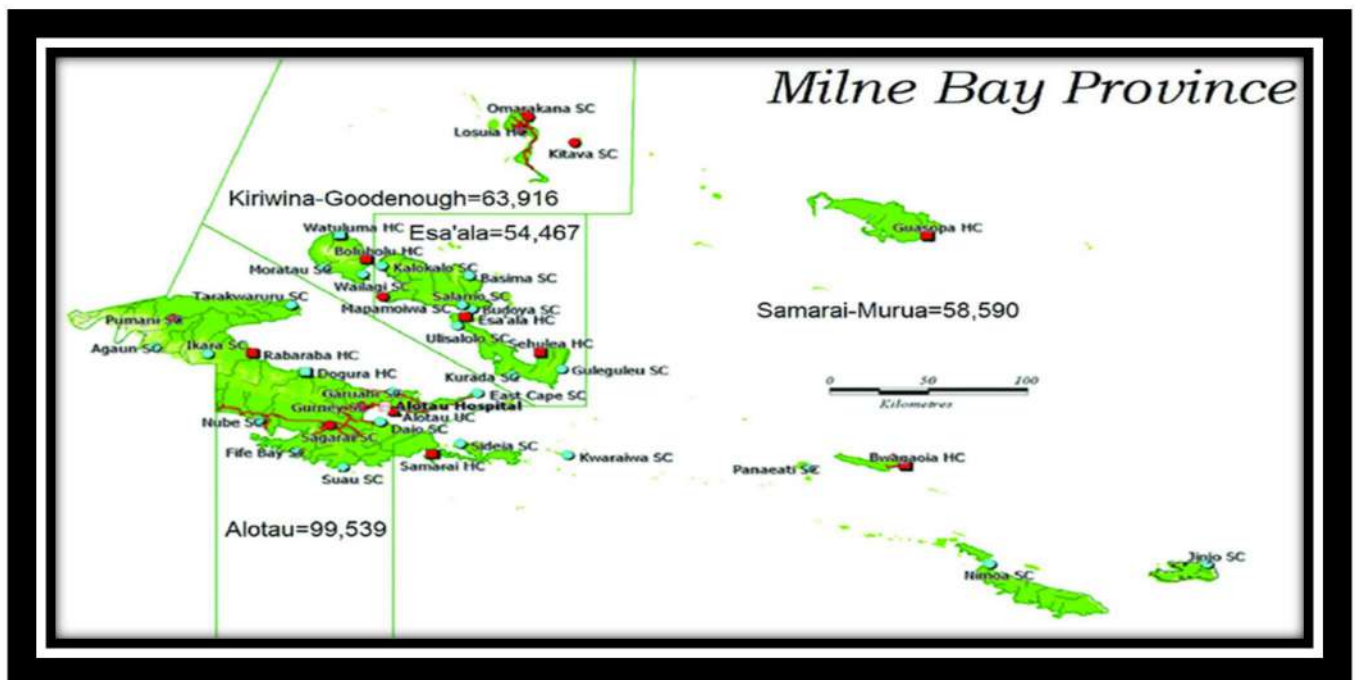
The province is accessible by sea where the province shares international borders with Australia and Solomon Islands. The southern part of the province shares provincial borders with Central Province and the Northern border is with Oro province.

Malaria still remains the high in daily outpatient cases and a high morbidity case in most health centers in the low lands of PNG where Milne is no exception. In Milne Bay Malaria still remains the top five leading cause of disease burden. Malaria control activities in MBP are the Malaria Commodity Supplies to health center levels (clinical interventions) and Vector Control Activities are the distribution of Long Lasting Insecticidal Mosquito Nets to Antenatal mothers and Household Distribution.

These interventions are delivered to 42 operating health centers and their catchment population with the partnership from MBPHA and other district and local level stakeholders.

The HMM programme was introduced in the province during 2019, where community malaria volunteers are trained at community level to Test, Treat and Tack simple malaria.

Map of Milne Bay Province with its Health Centre



Quarterly Health center supervisory visits

To do a quarterly supervisory visit to all accessible Health Centres it will require a total of 28 days to cover the province as a whole.

While on field trips the main purpose of the field trips is to carry the following routine activities.

- Ensure and restock all Health center with the first line Anti-Malarial Treatment. Atermisinin-based combine therapy (ACTs), Primaquine malaria diagnostic tests(RDTs),
- Supply Antenatal bed nets to pregnant mothers at health facility levels
- Ensure that all health centers are testing and treating Malaria with the correct treatment protocols by doing refresher training with health center staff.
- Collect and ensure that malaria registers are correctly entered in the eNHIS and monthly health center reports are submitted timely
- Support and Strengthen HMM programme where Community Malaria Volunteers are trained at the community level to test and treat Malaria under the guidance of the supervising health centre as well as the Aid post.

During the quarterly visits, unpredictable weather remained a major challenge in delivering services to the outer most Islands of Milne Bay.

Small sea crafts travel weekly to outer islands like the Trobrian islands. This quarter we successfully visited four health centres on Kiriwina where PMS visited by dinghy.

In Samarai/Murua district due to the remoteness of these islands, Misima, Woodlark(Guasopa), Rossel(Jinjo), Sudest(Nimboa), where not physically visited however malaria supplies were freighted with mosquito nets.

Esa'ala, Alotau and Kiriwina Goodenough Districts had a 100 percent supervisory rate for this quarter for all accessible Health centres



RDT test done @ Mapamoiwa HC



Stock count @ Kwaraiwa HC

Table showing Q4 Health Centre Visits

District	Accessible HC	HC Visited Q4	% coverage
Alotau	14/17	14/14	100
Esa'ala	10/10	10/10	100
Samarai-Murua	8/8	3/8	38
Kiriwina- Goodenough	9/9	9/9	100

Summary of health Centre Visits quarter four.

MILNE BAY PROVINCE HEALTH FACILITY VISIT SUMMARY 2024						
PROVINCE	DISTRICT	HEALTH CENTRE	VISIT 4	Total Exp	% of HFs v Accessibility	VISIT 4
MILNE BAY	ALOTAU	Agaun HC	not visited	4	0 Inaccessible	inaccessible
MILNE BAY	ALOTAU	ALOTAU HOSPITAL	08.11.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	ALOTAU UC (Goilana)	07.12.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	BUBULETA CHP	06.11.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	DAIO H/C	05.11.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	DOGURA HC	05.12.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	EAST CAPE SC	06.11.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	FIFE BAY SC	12.11.24	4	25 Accessible	physically visited
MILNE BAY	ALOTAU	GARUAHI SC	09.12.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	GURNEY SC	31.10.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	IKARA SC	not visited	0	0 Inaccessible	inaccessible
MILNE BAY	ALOTAU	NUBE SC	13.11.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	PUMANI SC	not visited	0	0 Inaccessible	inaccessible
MILNE BAY	ALOTAU	RABARABA HC	06.12.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	SAGARAI SC (Ho'olai)	13.11.24	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	SUAU SC (Iloilo AP)	not visited	4	75 Accessible	physically visited
MILNE BAY	ALOTAU	TARAKWARURU SC	06.12.24	4	75 Accessible	physically visited
PROVINCE	DISTRICT	HEALTH CENTRE	VISIT 4	Total Exp	% of HFs v Accessibility	VISIT 4
MILNE BAY	ESA'ALA	BASIMA SC	09.12.24	4	75 Accessible	physically visited
MILNE BAY	ESA'ALA	BUDOYA SC	08.12.24	4	75 Accessible	physically visited
MILNE BAY	ESA'ALA	ESA'ALA HC	12.12.24	4	75 Accessible	physically visited
MILNE BAY	ESA'ALA	GULEGULEU SC	07.12.24	4	50 Accessible	not Visited
MILNE BAY	ESA'ALA	KALOKALO SC	07.12.24	4	75 Accessible	physically visited
MILNE BAY	ESA'ALA	KURADA SC	06.12.24	4	75 Accessible	physically visited
MILNE BAY	ESA'ALA	MAPAMOIWA SC	09.12.24	4	75 Accessible	physically visited
MILNE BAY	ESA'ALA	SALAMO SC	08.12.24	4	75 Accessible	physically visited
MILNE BAY	ESA'ALA	SEHULEA	07.12.24	4	75 Accessible	physically visited
MILNE BAY	ESA'ALA	ULISALOLO SC	13.12.24	4	75 Accessible	physically visited

PROVINCE	DISTRICT	HEALTH CENTRE	VISIT 4	Total Exp	% of HF's v Accessibility	VISIT 4
MILNE BAY	SAMARAI MURUA	BWAGAOIA HC	not visited	0	25 Accessible	not Visited
MILNE BAY	SAMARAI MURUA	GUASOPA HC	not visited	0	0 Inaccessible	not Visited
MILNE BAY	SAMARAI MURUA	JINJO SC	not visited	0	0 Accessible	not Visited
MILNE BAY	SAMARAI MURUA	KWARAIWA SC	13.11.24	4	75 Accessible	not Visited
MILNE BAY	SAMARAI MURUA	NIMOA SC	not visited	0	0 Accessible	not Visited
MILNE BAY	SAMARAI MURUA	PANAEATI SC	not visited	0	0 Accessible	not Visited
MILNE BAY	SAMARAI MURUA	SAMARAI HC	12.11.24	4	75 Accessible	physically visited
MILNE BAY	SAMARAI MURUA	SIDEIA SC	12.12.24	4	75 Accessible	physically visited

PROVINCE+H4& DISTRICT	HEALTH CENTRE	VISIT 4	Total Exp	% of HF's v Accessibility	VISIT 4
MILNE BAY	KIRIWINA GOODENOUGH BOLUBOLU HC	09.12.24	4	75 Accessible	physically visited
MILNE BAY	KIRIWINA GOODENOUGH KADUWAGA CHP	10.12.24	4	50 Accessible	physically visited
MILNE BAY	KIRIWINA GOODENOUGH KITAVA SC	11.12.24	4	50 Inaccessible	physically visited
MILNE BAY	KIRIWINA GOODENOUGH LOSUIA HC	11.12.24	4	50 Inaccessible	physically visited
MILNE BAY	KIRIWINA GOODENOUGH MORATAU SC	06.12.24	4	75 Accessible	physically visited
MILNE BAY	KIRIWINA GOODENOUGH OMARAKANA SC	not visited	0	0 Closed	not Visited
MILNE BAY	KIRIWINA GOODENOUGH SINAKETA CHP	10.12.24	4	50 Accessible	physically visited
MILNE BAY	KIRIWINA GOODENOUGH WAILAGI SC	09.12.24	4	75 Accessible	physically visited
MILNE BAY	KIRIWINA GOODENOUGH WATULUMA HC	07.12.24	4	75 Accessible	physically visited

Q4 MALARIA SUPPLIES

The health Centre supervisory visits would not eventuate without the Malaria commodities that we received from RAM logistics team.

Summary Report Q4 Drugs 2024			
PACKING LIST RAM			
No of cartoons	Items	PACKETS	SOURCE
54	RDTs	2701	NDOH
	ACT 6	143	NDOH
	ACT 12	392	NDOH
	ACT 18	183	NDOH
	ACT 24	500	NDOH
	PRIMAQUINE 100	4962	NDOH

Routine drug distribution has been done upon health center visits and from Area transit at Alotau. Drugs are supplied as per HC stock on hand. The Province had sufficient RDT supplies from two buffer which was distributed in quarter three (3) and quarter four (4). Quarter four (4) supply of RDT will continue in Q1 of 2025



There is a need to increase HC stock requirements as per the consumption rate of health centres.

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free world”

Malaria supplies @ Bolubolu wharf

ANC NET DISTRIBUTION

As part of the fight against Malaria RAM distribute LLIN nets to pregnant mothers to reduce malaria in pregnancy cases. This is done at health Centre levels when a mothers comes to the HC she is issued with

A total of 20 bales were distributed throughout quarter four distribution

ASSETS

The province has two RAM vehicle which is a new white land cruiser (FAD 737) and the old vehicle that is BDW 155. The two vehicles are in running condition.

The vehicles are currently controlled by the MBPHA- public health authority where RAM officers access transport through filling out transport request forms for the transport use on daily bases.

There is a programme 24-foot dinghy and a 60HP engine. With the assistance of public health division RMC have used the engine on field trips.

HMM moto bike will be transferred to Oro province.



HMM moto bike



BDW 155

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FAD 737



60 hp engine used by RMC on field trip



24-foot dinghy(new)

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Partnership

Rotarians Against Malaria always work together with all provincial health offices. In quarter four of 2024 there were a lot of integration and partnership with the two organizations to delivery health services to the people of Milne Bay. Quarter four activities highlighted

- ✓ Fuel supplied by PHA for field trips
- ✓ Rations and fuel given by public health (disease control) to assist with HMM community refresher training and supervision
- ✓ RAM team(HMMO) being a part of the Village Health Assistant(VHA) Training and implementation with MBPHA
- ✓ RAM supplied incentives to Village Health Assistant(VHA) Training at two training catchment (Gogosiba and Sehulea)
- ✓ PHA drivers assisting with logistics



HMMO speaking at the TOT training of Village Health Assistant-Alotau

Challenges

With the routine activities that are carried out each quarter where there is regular supply of RDTs, Atermisinin Combine Therapy(ACT) drugs and Primaquine and LLIN net distributions for combat Malaria there are some programmatic constrains that we encounter

- ❖ ANC net accountability where the net receipts delay to reach Provincial Malaria Supervisor on time.
- ❖ The accountability of positive vas ACT treatment on the eNHIS not consistent where ACT are over reported at health center level. This is require quality checks be done by PHIO before submission.
- ❖ Late monthly reports from Health centres is still a concern.
- ❖ Transport delay due to weather.

Recommendations

To improve service delivery and accountability of commodities being issued by RAM, we suggest the following recommendations to be done

- Conduct continuous quality Malaria refresher training at all health levels, Health Centre, District and provincial.
- Regular communication with health Centre staff on update of Malaria stock at HC and timely reporting.
- Regular Visits with PHIO to correct NHIS Malaria data

Acknowledgments

We would like to thank the following individuals and partners in this year's fight against malaria.

1. RAM partners Team
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6. United Church, Catholic Church and Anglican Health Services directives
7. Health Facility Staff at all district level
8. The CMVs for volunteering

Photos



Malaria school Survey @ Maiwara PS



Moto Bike training @DBTI Nov 2024