

Inter Aide Child Health Program

January - June 2014

Program Update

Achievements

The first 6 months of the program at Katchale Health Centre have been very successful. Each stakeholder has made progress with their commitments in the MoU (see the attached list of commitments for details):

- **Inter Aide** has provided a motorcycle for Katchale Health Centre staff to use, and has rented two HSA houses for Village Clinics. An extra nurse house has been rented and fitted with a solar electricity system. Inter Aide facilitators have worked with the HSAs to conduct a monitoring survey in the catchment, and are now assisting the HSAs to run community activities. Inter Aide supervisors are working closely with the Health Centre supervisors.
- **Lilongwe District Health Office** has sent a new nurse for Katchale Health Centre, which has significantly improved maternity services there. The IMCI coordinator has conducted supervision to improve the operation of the Village Clinics. This included helping the HSAs at Katchale to improve their use of c-stock for drug reports. The maintenance department has prepared plans for the first HSA house at Khuzi, and DHO has continued to supply fuel for the Health Centre motorbike.
- **Mitundu Health Area** has assisted the staff at Katchale to identify a new Health Centre Management Committee and to improve their reporting process for drugs. They have also provided emergency assistance for drug stock outs.
- **Katchale Health Centre** has selected a new Health Centre Management Committee. The HSAs have worked with Inter Aide facilitators to do a monitoring survey in their catchment areas. Using the results of the survey they have developed an action plan for improving the health of their catchments. The supervisors have improved their planning and supervision of HSA activities, and the Village Clinic providers have started using c-stock for drug management. The HSAs have also identified and trained Village Health Committees for each GVH.
- **Chadza and Kalumbu Traditional Authorities** have passed by-laws requiring all households in their areas to take action on latrines, hand washing, bed nets, health seeking, family planning and safe delivery. They have met with their GVHs to urge them to take action. Community members in Khuzi have mobilized to provide bricks, sand, stones, and labour for the construction of an HSA house with attached clinic room at Khuzi.

Challenges

A few challenges have been encountered during the implementation of activities:

- **Supervision schedules for DHO and Health Area:** Inter Aide is ready to provide transport assistance for staff at DHO and Mitundu Health Area to regularly supervise Katchale Health Centre in order to improve services there. However, Inter Aide is still waiting to receive a supervision schedule so that the vehicle can be booked for this.

- **HSA house in Namikango:** Two HSAs running Village Clinics at Khuzi and Chipwhanya have moved into the houses provided by Inter Aide. The third HSA in Namikango has not moved into his catchment area. Results from the first monitoring survey suggest that most children under 5 in Namikango are going to the Health Centre for treatment, as Namikango station is very close to Katchale. By comparison, there is a very big need for a Village Clinic in Nyamazani, but the HSA for that catchment is not trained.
- **Village Clinic training for senior HSA:** The senior HSA needs to be trained on Village Clinics so he can supervise them regularly. He is currently not trained, and so no-one is conducting monthly supervision of the clinics. The IMCI coordinator has put him on the list of people to be included in the next training session, but the training session has been delayed.
- **Fuel for the Health Centre motorbike:** According to the MoU, Lilongwe DHO agreed to provide fuel each month for the motorbike that Inter Aide has loaned to the Health Centre. However, the Health Centre report that sometimes they wait up to two months to receive fuel, and as a result it is difficult for them to supervise activities.

Monitoring & Evaluation

A baseline survey was conducted in January 2014 (see the attached report). The results confirmed many of the problems identified during stakeholder discussions.

In addition to the baseline survey, the HSAs and Inter Aide facilitators also conducted a house-by-house census of the entire Katchale Health Centre catchment area. This has confirmed the exact population of the catchment, and allowed us to create a set of indicators that will be regularly measured to show improvements in the catchment area.

Katchale Health Centre Demographics

# TA	3	# GVH	22	# VILLAGES	168
# HOUSEHOLDS	4,362	POPULATION	18,763	# UNDER 5s	3,328

Katchale Health Centre Indicators

TOPIC	INDICATOR	BASELINE
Latrines	% of households with their own latrine (not shared)	39%
Hand washing	% of households with a hand washing facility	6%
Bed nets	% of households with at least one hanging bed net	60%
Health seeking	% of sick U5 taken to a health facility within 1 day	44%
Family planning	% of women* using a long term method of family planning	24%
Safe delivery	% of women who delivered at a Health Facility**	71%
Village clinics	% of sick under 5 children taken for treatment at a village clinic ***	30%

* Excluding women who are pregnant, want another child now or are beyond child bearing age

** Out of all women who delivered in the last 6 months

*** Out of all under 5 children who were sick in the last 2 weeks, only in catchment areas with a Village Clinic.

Budget

Inter Aide has spent total of **675,877 MKW** on direct support to Katchale Health Centre in the period up to May 2014. See the attached ledger for details of the items purchased.

ANNEX: PROGRESS ON MOU COMMITMENTS

Commitment	Progress
Inter Aide	
Place one Inter Aide Facilitator in each HSA catchment area	Complete
Provide stakeholders with transport, food, refreshments and stationary where necessary for support meetings and training sessions	Complete
Provide transport for supervision visits by the DHO and Health Area supervisors, where necessary.	Delayed – waiting to receive supervision schedule from DHO and Health Area
Maintain the motorbike owned by Katchale Health Centre or provide an alternative motorbike.	Complete
Provide transport to assist with the delivery of supplies from DHO or Mitundu Health Area to the Health Centre, where necessary and possible, given logistical constraints.	Complete
Purchase high priority equipment items for the maternity and delivery rooms at Katchale Health Centre, including examination bed, beds, bulbs, bedsheets, blankets, mattresses, solar battery, newborn weighing scale, and vaccine cooler boxes.	In progress
Purchase emergency back-up supplies of contraceptives and Village Clinic drugs if necessary, and purchase basic equipment for Village Clinics.	Not started
Purchase bicycles for a maximum of 8 HSAs.	Complete
Rent houses in the catchment area for up to four HSAs running Village Clinics, one relief nurse, and one relief medical assistant if necessary.	Complete
Provide cement, iron sheets and skilled labour to construct one HSA house in the catchment area for an HSA running a Village Clinic.	In progress
Conduct regular monitoring. The results of monitoring will be shared regularly with all stakeholders.	In progress
Adapt the program as necessary based on changing needs and feedback / input from other parties during the stakeholder meetings	In progress
Lilongwe District Health Office	
Send relief nurses to Katchale Health Centre while identifying a permanent second nurse before the end of 2014.	Complete
Pay the salaries and any additional allowances for relief nurses and the permanent second nurse when found.	Complete
Train a new Health Centre Management Committee for Katchale Health Centre, including paying all relevant allowances.	Not started
Train additional HSAs at Katchale Health Centre on how to run Village Clinics, including paying all relevant allowances, when the regular training sessions are running (if possible).	Delayed – due to delayed training sessions
Assist Katchale Health Centre to open a fourth Village Clinic in a hard-to-reach area, if possible.	Delayed – due to delayed training sessions
Develop a supervision checklist and schedule and conduct regularly supervision at Katchale Health Centre based on the schedule, including paying all relevant allowances.	Delayed
As part of the supervision visits, assist Katchale Health Centre to improve their stock control (including consumption reports) and staff scheduling.	In progress
Enforce the policy that HSAs running Village Clinics must live in their catchment area, and ensure they are staying in the houses rented / built by Inter Aide and the community.	In progress
Provide fuel for the Katchale Health Centre motorbike every month.	Challenges – fuel not provided every month

Commitment	Progress
Provide feedback and input into the program at regular stakeholder meetings	In progress
Mitundu Health Area	
Develop a supervision checklist and schedule and conduct regularly supervision at Katchale Health Centre based on the schedule.	Delayed
As part of the supervision visits, assist Katchale Health Centre to improve their stock control (including consumption reports) and staff scheduling.	In progress
Enforce the policy that HSAs running Village Clinics must live in their catchment area, and ensure they are staying in the houses rented / built by Inter Aide and the community.	In progress
Provide feedback and input into the program at regular stakeholder meetings.	In progress
Katchale Health Centre	
Organize for the selection of a new Health Centre Management Committee for Katchale Health Centre.	Complete
Ensure that the HSAs work closely with the Inter Aide facilitators in the catchment area villages. This includes attending monthly planning meetings with Inter Aide, and assisting with the implementation of the community level activities.	Complete
Train Village Health Committees identified by each GVH, without requiring additional allowances.	Complete
Develop a supervision checklist and schedule and conduct regularly supervision of HSAs in the field.	In progress
Review and improve the stock management and control system at the Health Centre, including making sure that all consumption reports are completed accurately and on-time.	In progress
Review and improve the staff schedule at the Health Centre to improve efficiency.	In progress
Open a fourth Village Clinic in a hard-to-reach area, if possible.	Not started
Enforce the policy that HSAs running Village Clinics must live in their catchment area, and ensure they are staying in the houses rented / built by Inter Aide.	In progress
Ensure that all equipment and supplies purchased or maintained by Inter Aide are stored securely, and used only for the intended purpose.	In progress
Complete a log book for the Health Centre motorbike, recording all trips, mileage and fuel.	Complete
Allow Inter Aide to conduct monthly audits of equipment and supplies purchased by Inter Aide, including the motorbike log book.	In progress
Provide feedback and input into the program at regular stakeholder meetings	In progress
Traditional Authorities	
Develop, implement and enforce public health by-laws	Complete
Implement penalties for GVHs who do not implement the by-laws in their villages, and allow GVHs and chiefs to implement penalties for households who do not implement the by-laws.	In progress
Support the Inter Aide facilitators and HSAs when they are implementing the community level activities to promote implementation of the by-laws. This includes requesting GVHs to identify volunteers to form a Village Health Committee that will work with the Inter Aide facilitator and HSA.	Complete
Mobilize the community to mold bricks, collect sand, and provide land and unskilled labour for HSA and nurse houses. Monitor the presence of HSAs in the houses to ensure they are staying there.	In progress
Provide feedback and input into the program at regular stakeholder meetings	In progress