



E&F Management Consult/IHVN ACTION Plus Up Project (AIDS Relief Interventions with System Enhancements - ARISE)

Monthly Report: December 30th -January 30th 2013 (Q2M1)

1.0 Executive Summary

The ARISE/ACTION PLUS UP went full throttle this month, with employment of additional staff especially field workers. A number of stakeholders meetings including EFMC partners' forum for both comprehensive and PHCs, the ARISE team was also in attendance at the IHVN partners' forum.

The PMTCT team activated a PMTCT site at Jikwoyi Medical Center. This is a step necessitated by the handover of the comprehensive site in the axis to CCCRN which caused absence of a referral central in the axis. A pre-activation assessment was made and plans made for an orientation for the facility staff on the implementation of PMTCT services. A total of 29 healthcare workers were put through the provision of PMTCT services to positive pregnant women. The facility is set to begin implementation of PMTCT services.

Sixteen (16) ARISE facilities were supported this month while a total of Twenty-nine visits were paid to feeder sites and potential feeder sites. The team has worked to engage the staff of these facilities to get them to participate more in the provision of services.

The community HTC outreach team was present at Jikwoyi Medical Center from Monday 21st to 25th January at the Mother and Child health week to carry out PITC to 394 (M-99, F- 291) clients who visited the clinic to access other services at the program. All reactive clients 14(M-2, F-12) were referred to Sisters of Nativity (SON).



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The HTC lead gave a health talk at the Word of Faith Group of Schools to educate students in the junior class on “Responsible Parenthood, Sexual Behaviours and the Spread and Consequences of HIV/AIDS, 87 children (M-39, F-48) benefitted from this service.

The clinical care unit engaged in the follow up of the PMVs that were activated in December, 2012 to provide testing to the populace. Other facilities (PMVs) were supplied with testing commodities to commence testing. The positive clients from the PMVs were enrolled into EFMCC. In addition, the team provided technical assistance to Abaji General Hospital and EFMCC.

2.0 JANUARY Facts Sheet

<p>Clinical Care</p>	<ul style="list-style-type: none"> • 142 were newly enrolled and 70 commenced on ART; 74-started on CTX; 142 Screened for TB. • The Laboratory unit carried out 163- CD4 assays; 162- ALT/Haematology;- 162 Chemistry. • Capacity of lab staff at AGH built on reagent logistics and machine maintenance. • CD4 machines at AGH and GGH site serviced.
<p>Community Services</p>	<ul style="list-style-type: none"> • 26 community outreach activities were carried out within Dutse, Nyanya and Kubwa. • A total of 5,731(M-3,321 F-



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2,400) individuals were counselled, tested and received their results

- 138 individuals (M-35, F-103) were reactive, 29(M-9, F-20) 40 (M-14, F-26) enrolled at EFMCC, 28 already on care, 16 still at the denial stage, others referred to other facilities.
- Participated in a meeting at IHVN. The highlight was the introduction to C&S services, the necessary forms, tools and items to work with were shown to everyone present.
- Orientation for 36 Interns was held and all participants knew their latest HIV status as they were tested for HIV.
- 141 (M-37, F-104) clients were followed up through phones calls and 7 home visits were made.
- 2 EFMCC facility staff were trained on the use of Care and Support tools.
- Conducted academic and monitoring visits to 8 schools; LEA Byazhin, LEA Kubwa 2, LEA Izhyapi, LEA Mabushi, JSS Kubwa 2, JSS Byazhin, Model Secondary School Kubwa, and Kubwa.
- Following the 18th of January 2013 meeting at IHVN 205 copies of 21 different C&S



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	<p>tools (registers and forms) were delivered by IHVN at the EFMC project on 30th of January.</p>
<p>Commodity, Procurement and Medical Logistics</p>	<ul style="list-style-type: none"> • Request was forwarded to NASCP and discussions initiated with CIHP and other IP towards leveraging RTKs. • Six months commodities and Lab. Reagents forecast based on ARISE target was concluded and forwarded to IHVN. • Commodities were acquired from GHIL-L warehouse include ARV for three EFMC supported comprehensive sites.
<p>Prevention of Mother to Child Transmission</p>	<ul style="list-style-type: none"> • Activated Jikwoyi medical Centre as PMTCT site. • Continued support visits to EFMC supported facilities. • 1927 pregnant women with known HIV status (including number of women tested, counselled and received their test results) with 56 reactive. • 3 eligible HIV-positive pregnant women were placed on treatment. • 5 HIV positive pregnant women were placed on Prophylactic regimens using a combination of 3 ARVs, excluding SD-NVP. • 3 women placed on



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	<p>prophylactic regimen using a combination of 2 ARVs.</p> <ul style="list-style-type: none"> • 17 placed on Maternal AZT (WHO Option –AZT from 14 weeks + SD-NVP at labour)and • 35 infants placed on Nevirapine.
<p>Human Resources</p>	<ul style="list-style-type: none"> • Recruitment exercise for new staff. • Prepared and sent out employment letters for new staff. • Organised orientation exercise. • Organised partner’s forum • Procured office stationery and other consumables.

3.0 Next Steps

- Follow up on items needed for BP checks, malaria and glucose testing at outreach activities
- Closer monitoring and guidance of staff newly activated PMTCT sites to ensure smooth commodities logistics. Make available the ADR form at the facilities and provide orientation on how to fill it when there is need.
- Supportive visits to Jikwoyi Medical Centre.
- Orientation training for the activated PMVs.
- Hands on training at Jikwoyi Medical Centre on DBS and CD4 sample collection.

4.0 Conclusion