

# QUARTER FOUR HEALTH INFORMATION SYSTEM BULLETIN 2016/2017.



Volume, 1 Issue 2

20th July 2017

Every day in Africa a gazelle wakes up. It knows it must run faster than the fastest lion or it will be killed. Every morning a lion wakes up. It knows that it must outrun the slowest gazelle or it will starve to death. It doesn't matter whether you are a lion or a gazelle. When the sun comes up, you better be running."

~ Abe Gubegna.

## Dear Readers,

Hi all, much appreciation for your contributions following the release of the last Quarter (Jan-March 2017) bulletin. Am humbled to introduce to you this Quarter (Apr-June 2017) bulletin. As you are aware, this is the last quarter of 2016/2017 financial year. This bulletin shade light on performance across all the quarters of financial year 2016/2017. It also captures some few activities that took place in April to June 2017 in the County.

2016/2017 financial year has been affected by frequent strikes thus affecting different indicators across the health sector. In this bulletin, you will realize that some indicators have increased in the same quarter (Q1, Q2, Q3) contrary to what was presented in the previous bulletin. This follows data entry after I have extracted the data. DHIS 2 have been on and off thus late release of this bulletin.

Mother child health have been greatly affected with 4ANC visits dropping from 39.6% to 24.5% in Q2 and Q4 respectively. Fully immunized children coverage dropped from 75.4% in Q1 to 46.1% in Q4. Skilled delivery dropped from 44% in Q3 to 30.4% in Q4. Family planning from 59.9% to 32%. However, due to November 2016 and May 2017 malezi bora activities, deworming and Vitamin A supplementation increased in Q2 and Q4. Some of the APRP 2016/17 targeted indicators performance include FIC- 60%, skilled delivery - 74%, FP new cases- 96% and 4ANC visits- 65%. Stay blessed.

G. Mukuria

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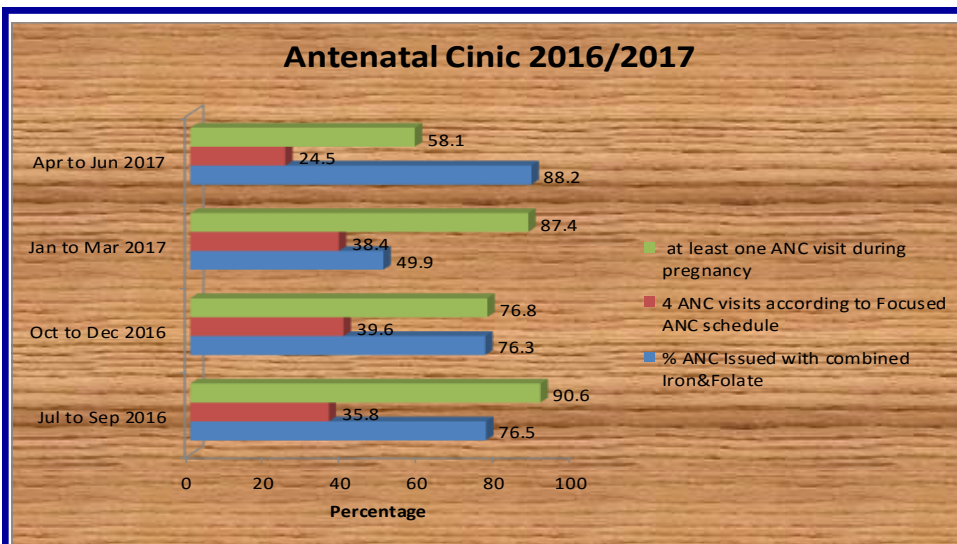
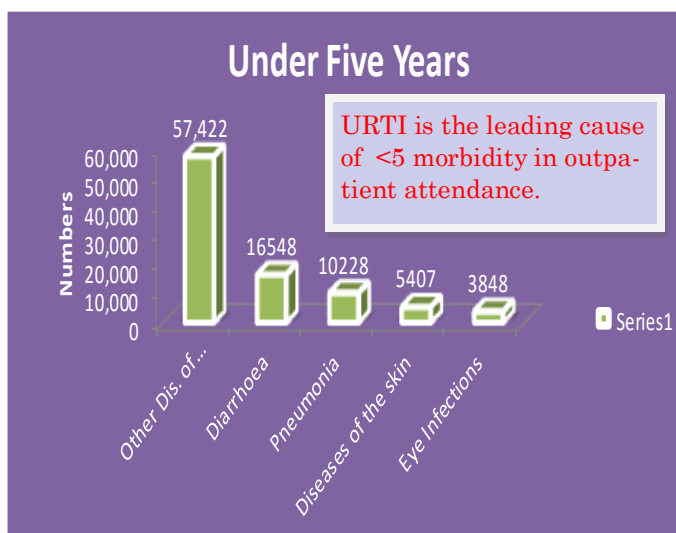
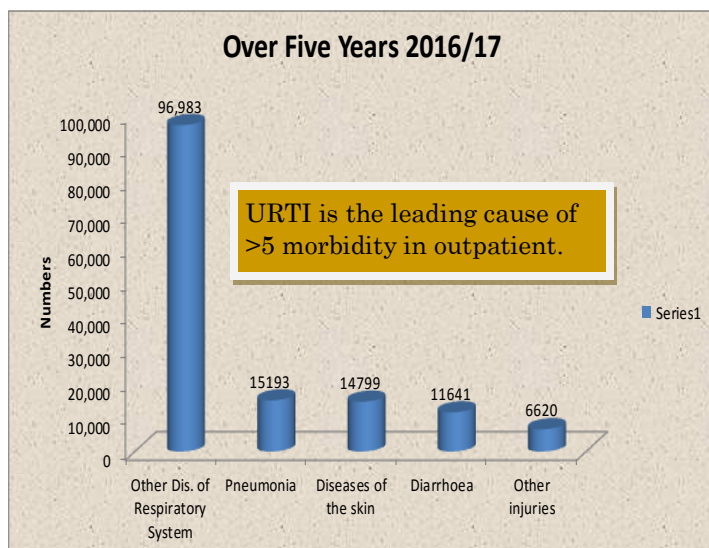
## Activities completed last Quarter (April - June 2017)

- \* Malezi Bora May 2017
- \* APRP 2017/2018 Development.
- \* Organization Capacity Assessment samburu County.
- \* RMNCAH formative Research Samburu County
- \* M&E plan development.
- \* NASCOP M&E tools training

## Challenges Experienced this Quarter

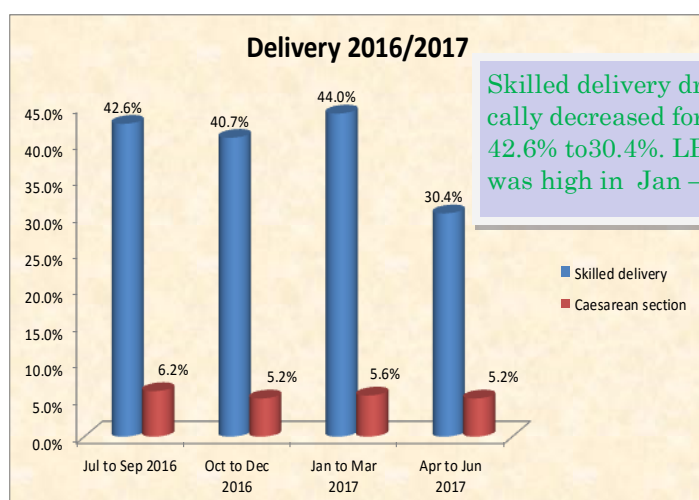
- ◆ Nurses strike which affected health services in the County.
- ◆ Late reporting from health facilities.
- ◆ Lack of articles from different program areas.
- ◆ Inadequate funding to carry out data quality reviews and supervision.
- ◆ Technical hitches in DHIS 2.

## Outpatient Morbidity (5 Leading cases)

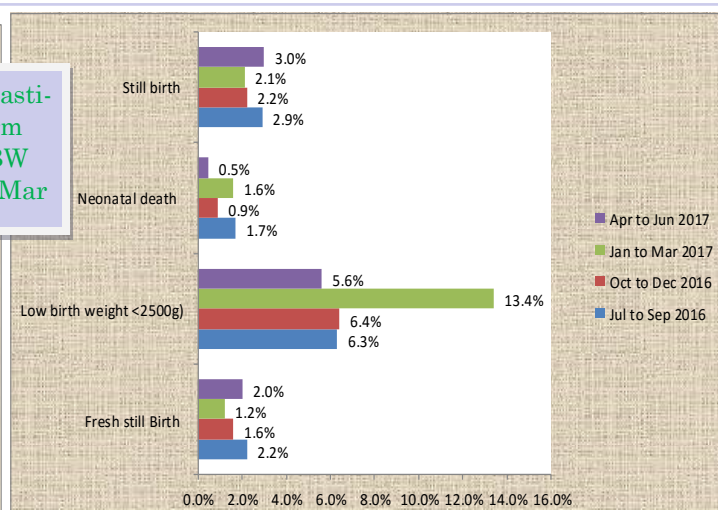


The gap between 1st ANC visit and 4 ANC drastically increased across all the quarters. This is an indication that most mothers are still not completing their ANC visits as scheduled. However October to December had the highest 4 ANC visits completion at (39.6%).

IFAS is essential for pregnant mother but it is evident that we are below target (90%) on issuing combined iron and folate. Despite the effect of strike, April to June had the majority of pregnant women issued with IFAS (88.2%)



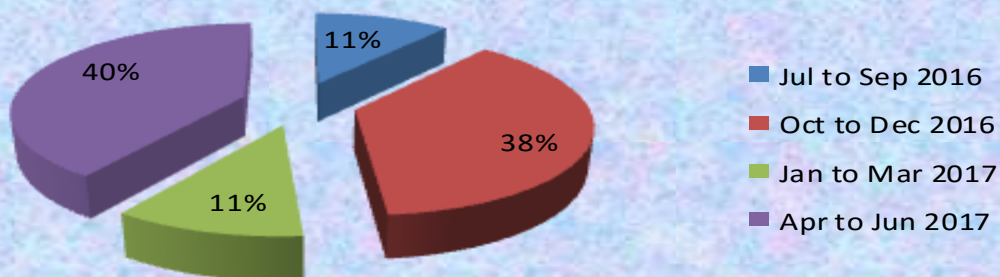
Skilled delivery drastically decreased from 42.6% to 30.4%. LBW was high in Jan-Mar



## County Report Completeness Index.

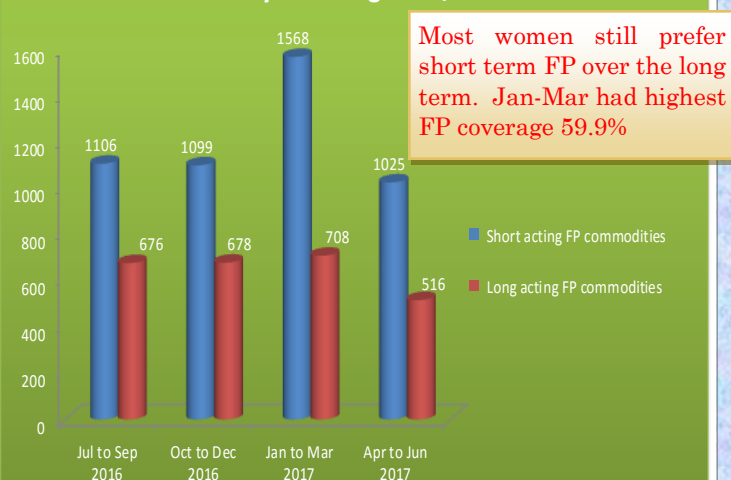
Name	Percent Reported	Percent On Time
MOH 705 B Outpatient summary > 5 years	85	59.6
MOH 705 A Outpatient summary < 5 years	84.7	62.5
MOH 711 Integrated Summary Report	84.5	61.7
MOH 731-1 HIV Counseling And Testing	82.4	60.1
MOH 717 Service Workload	82.1	60.2
MOH 731-2 PMTCT	80.2	58.1
MOH 731-3 Care and Treatment	80	57.2
MOH 731-5 Post-Exposure Prophylaxis	78.5	57.8
MOH 710 Vaccines and Immunization	78.1	56.9
MOH 706 Laboratory Summary Report	68.8	51.2
MOH 731-4 Voluntary Male Circumcision	63.7	44.6
MOH 713 Nutrition Monthly Reporting	62.8	46.6
MOH 708 Environmental Health Services Revised	59.1	31.5
MOH 515 Community Health Extension Worker Summary Revised	57.3	36.5

### children aged 12-59 months dewormed

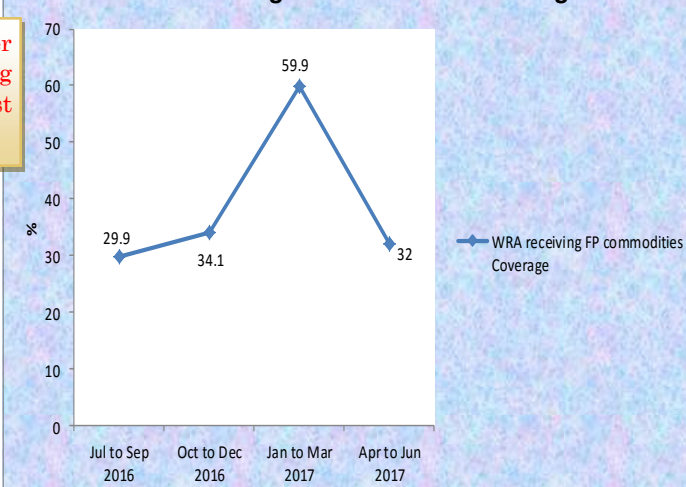


Deworming is only up scaled during malezi bora Months. School deworming is also not reported.

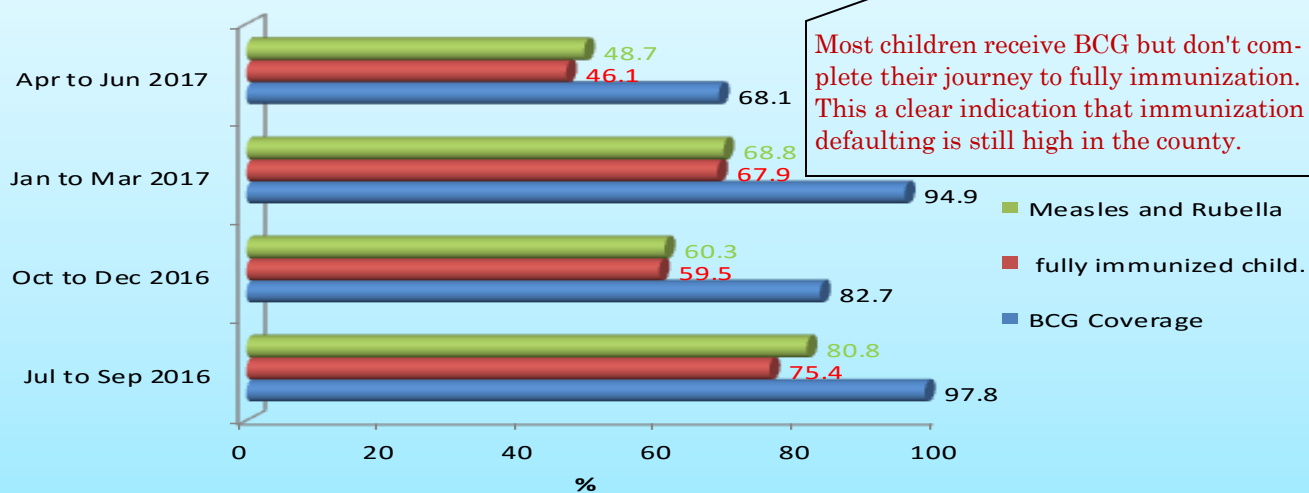
### Family Planning 2016/2017



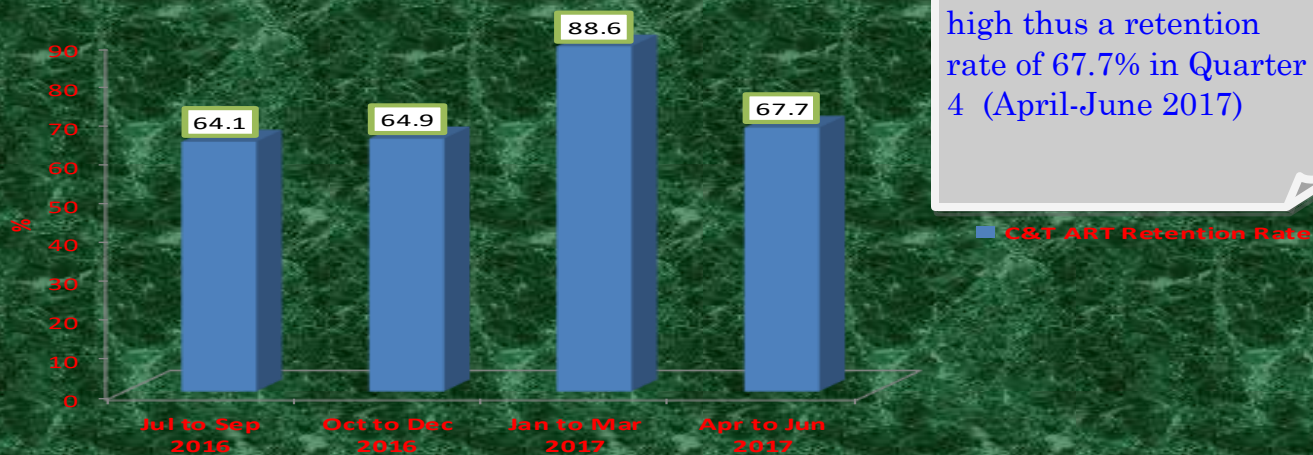
### WRA receiving FP commodities Coverage



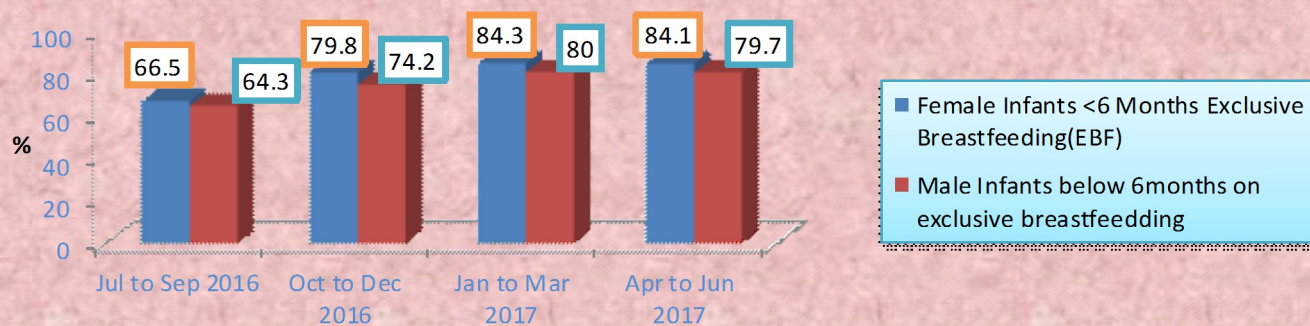
## Immunization 2016/2017



## C&T ART Retention Rate

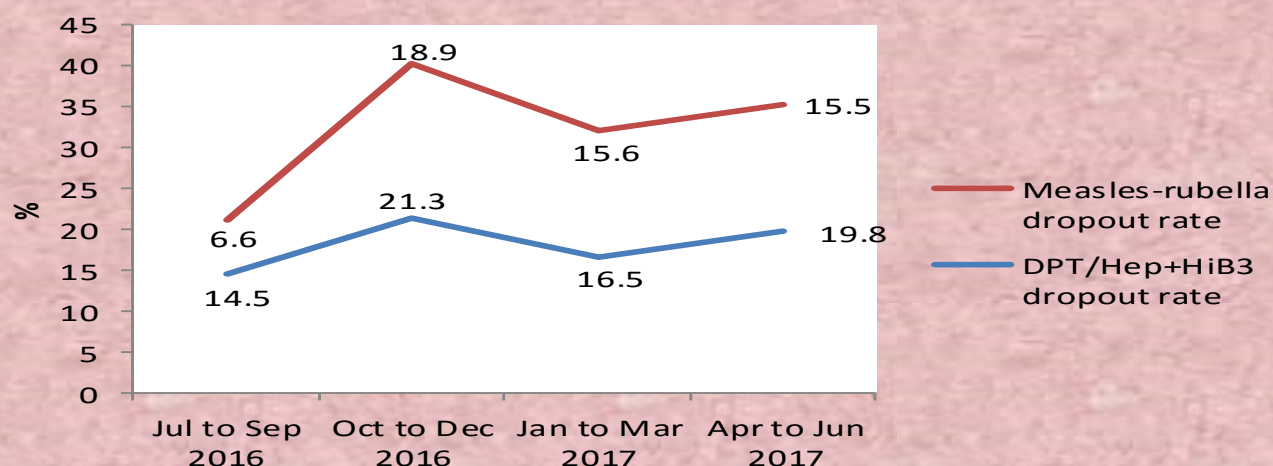


## Exclusive Breastfeeding.





## Drop out rates (Immunization)

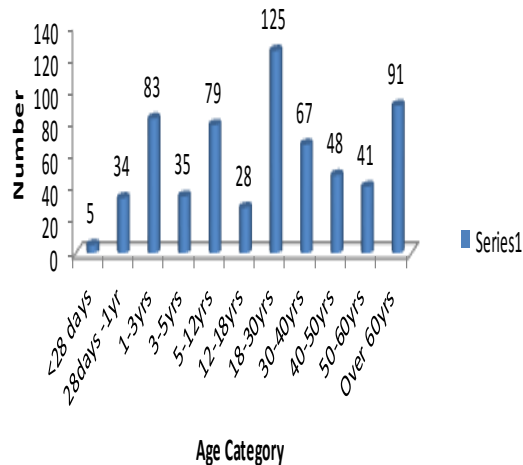


## EX ASKARI SERPENT 17 MEDICAL CAMPS—AFTER ACTION REVIEW

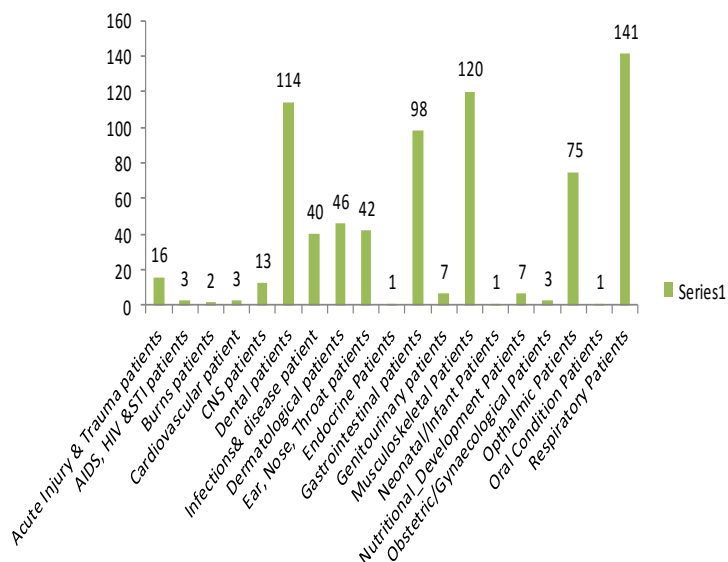
Three medical regiment visited Samburu County to provide Health Outreach Clinics( Medical camps) from 22nd Apr 2017 – 09 May 2017. Eighteen (18) days clinics were established in Ngutuk, Lengusaka, Lerata and Laresoro. The team comprised Regiment's Doctors, Medical Technicians, Nurses and Dentists., as well as clinicians and interpreters from the Kenya Defense Force and Kenya Red Cross. Patient category 18-30 years were the most seen with URTI taking the lead in all the condition type.

EX-ASKARI SERPENT 17- EPIDEMIOLOGICAL DATA

### Patient Numbers by Age Category



### Condition Type

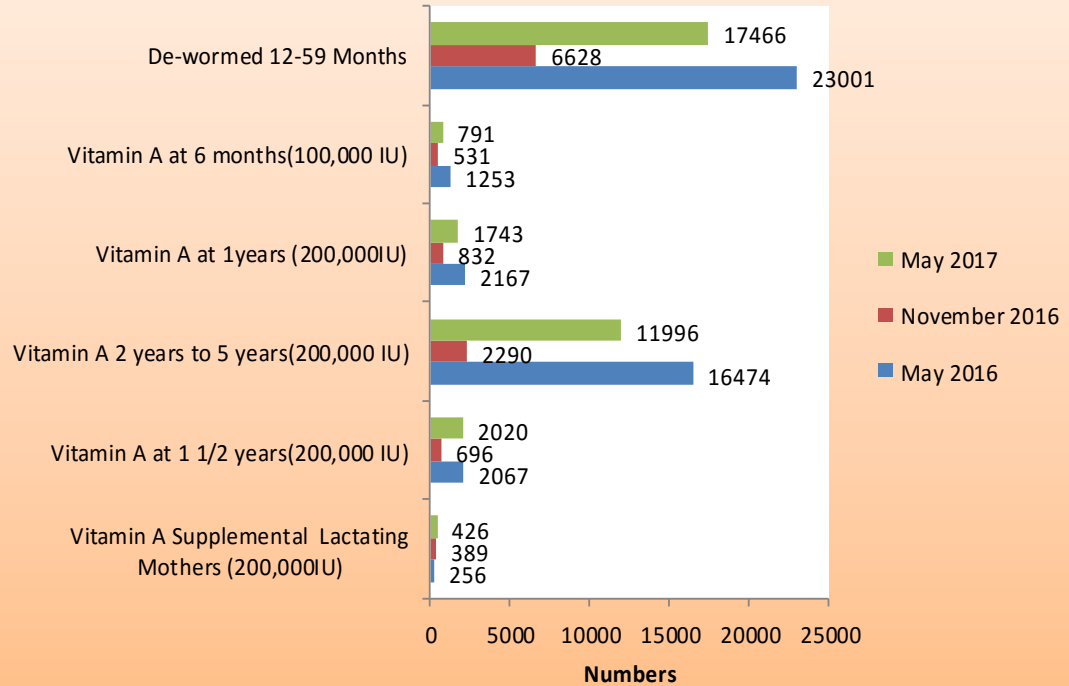


# Malezi Bora Activities.

Afya Leo ni Uzima Kesho



Malezi Bora May 2017 was made successful by good coordination between the MOH and Partners across the County.



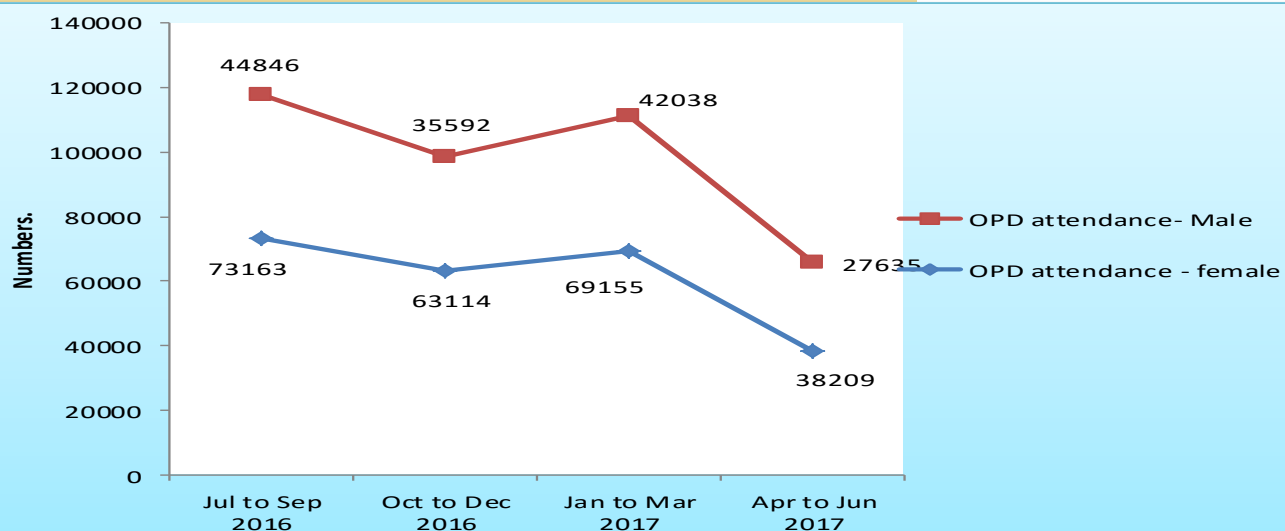
## Malezi Bora Launch at Maralal Maria Mfariji Children Home



Cap- IEC Material.



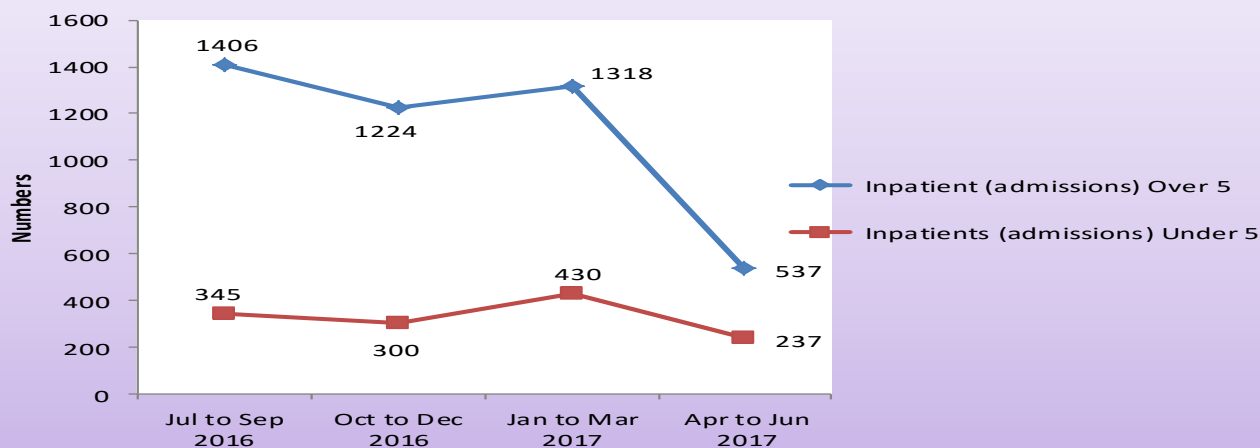
## Outpatient Utilization 2016/2017



## PNEUMONIA, BLOOD PRESSURE, MENTAL HEALTH AND DIARRHEA TREND

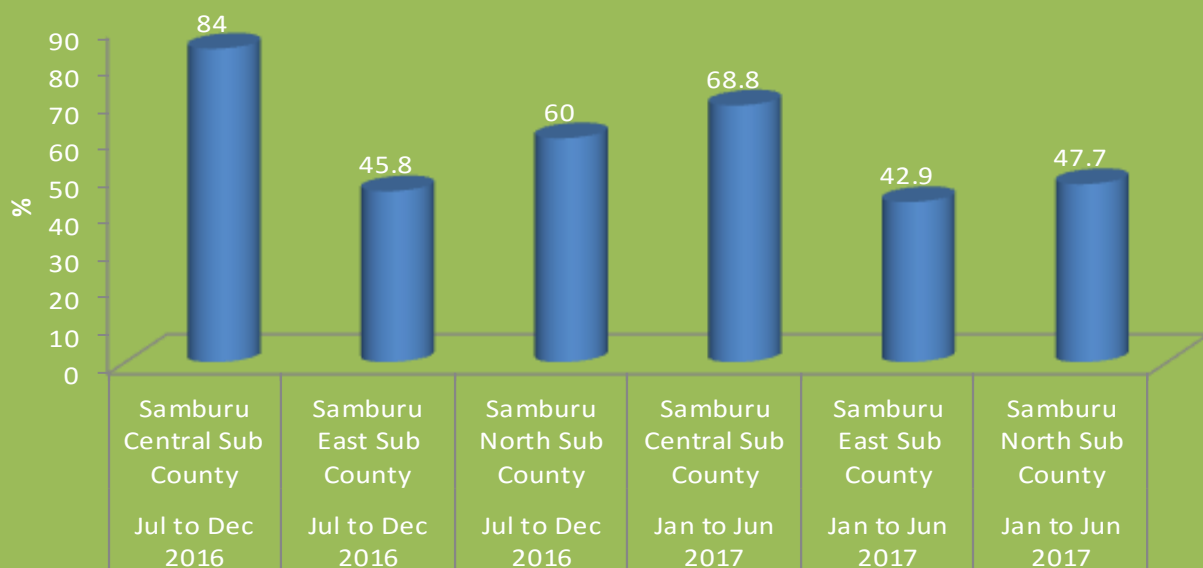
Quarters	Pneumo- nia inci- dence rate under 5 years (%)	new outpa- tients cases with high blood pres- sure (%)	new outpatients with mental health conditions (%)	under 5's treated for diarrhea (%)
Jul to Sep 2016	32.8	0.14	0.02	8.9
Oct to Dec 2016	24	0.13	0.03	8.8
Jan to Mar 2017	21.9	0.13	0.03	10.3
Apr to Jun 2017	12.1	0.08	0.04	8.2
<b>Total</b>	<b>22.7</b>	<b>0.12</b>	<b>0.03</b>	<b>9.05</b>

## Inpatient 2016/2017

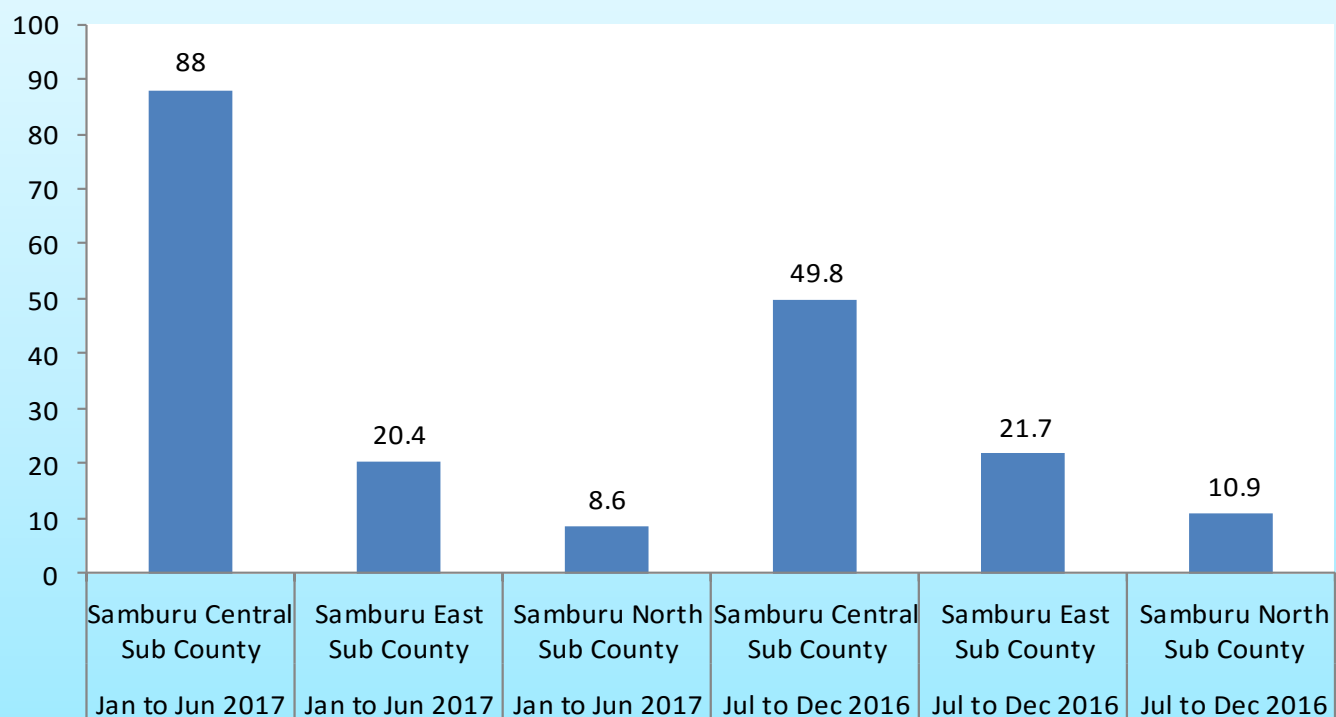


## Comparison by Sub-County.

### Proportion of children under one year who are fully immunized



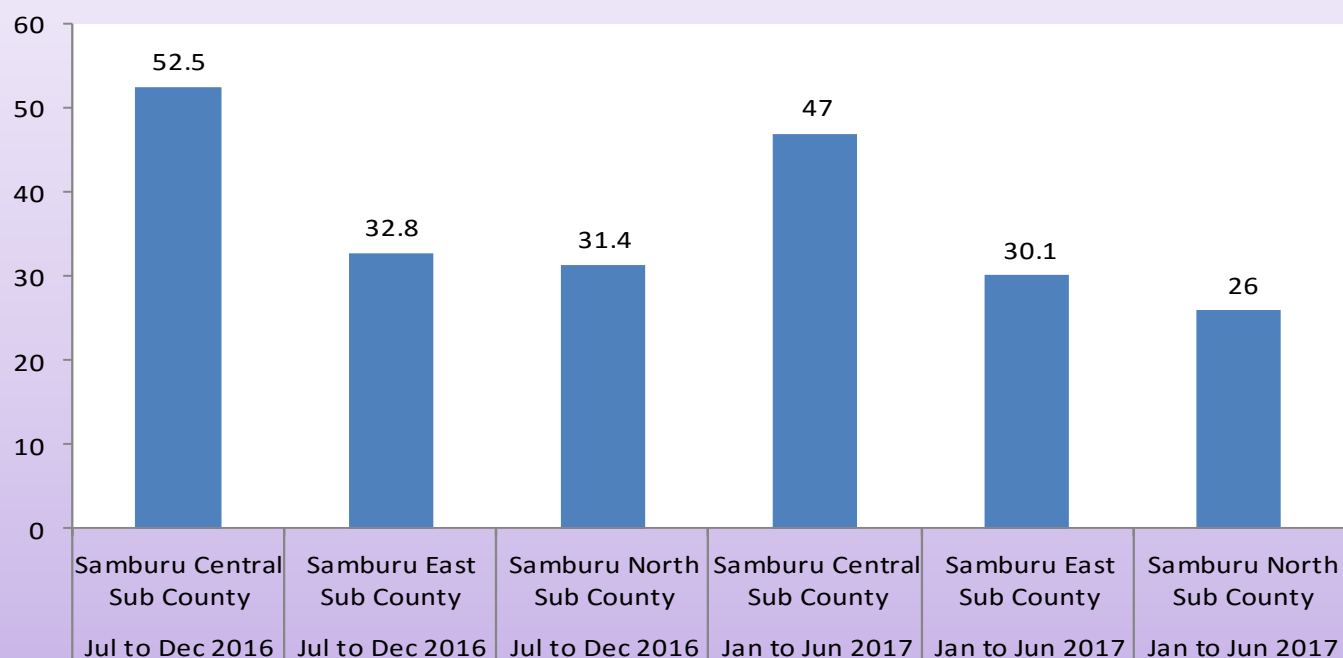
### WRA receiving FP commodities Coverage



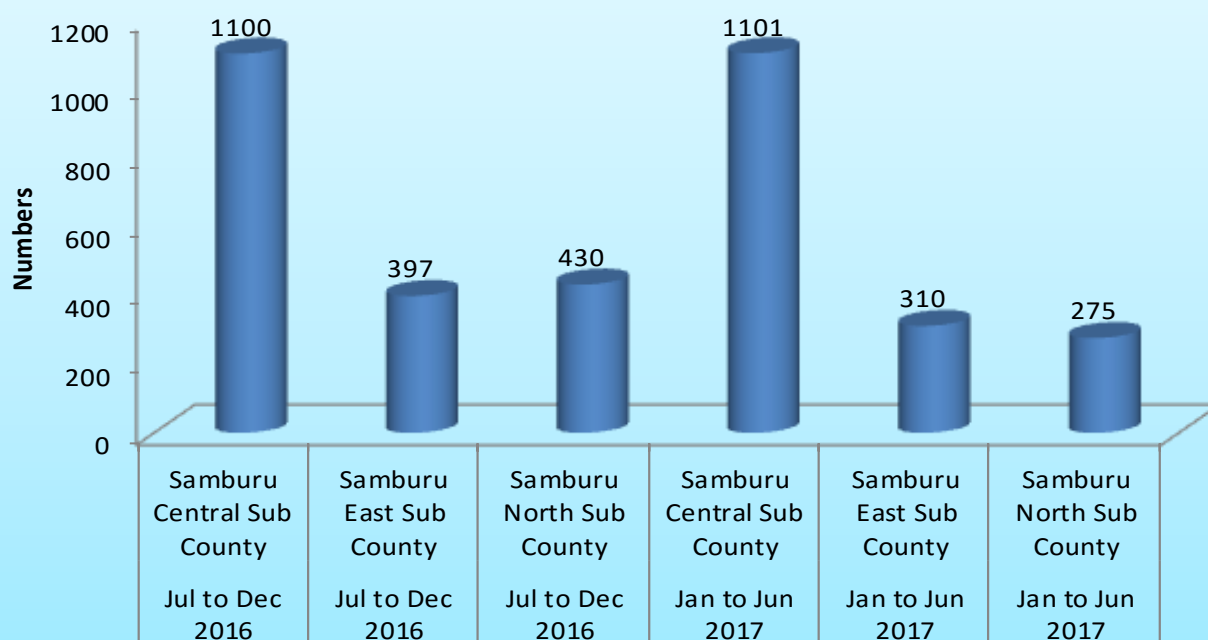


# Skilled Delivery

## Delivery by Skilled attendant Coverage



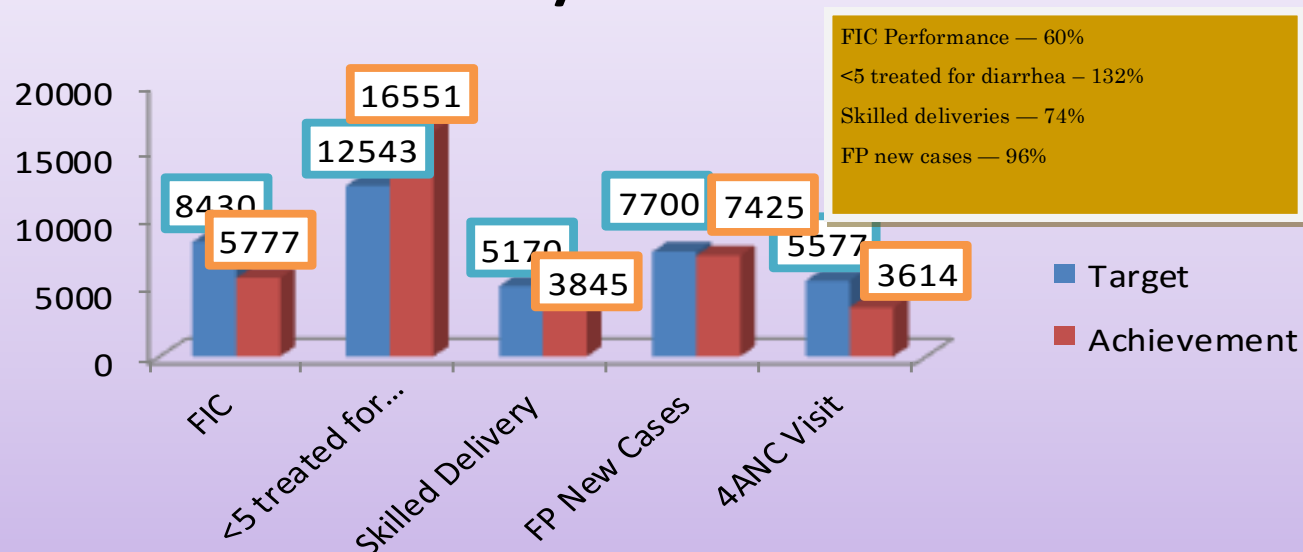
## Pregnant women completing 4 ANC visits



## FINANCIAL YEAR 2016 /2017 AT A GLANCE

Indicator	Quarter 1: Jul—Sept	Quarter 2: Oct– Dec	Quarter 3: Jan-March	Quarter 4: Apr-June	Total— 2016/2017
% Fully Immunized Children	75	59	67	46	61.8
% HIV+ pg women receiving ARVs	100	100	107	100	101.8
% Under five treated for diarrhea	8.9	8.8	10.3	8.2	9.1
% New outpatient with High blood pressure	0.14	0.13	0.13	0.08	0.1
% New out-patients with mental health conditions	0.02	0.3	0.03	0.04	0.1
# New outpatient with diabetes	16	10	3	0	7.3
# of RTA Injuries	15	12	24	9	15.0
# of Other injuries	307	269	231	193	250.0
% Skilled deliveries	42.6	40.7	44.0	30.4	39.4
%WRA receiving Family planning	29.9	34.1	59.9	32	39.0
% Low birth Weight	6.3	6.4	13.4	5.6	7.9
% Fresh still births	2.2	1.6	1.2	2.0	1.8
% clients completing 4 ANC	35.8	39.6	38.4	24.5	34.6
% < 6 MONTHS EBF	Male: 64.3 Female: 66.5	Male: 74.2 Female: 79.8	Male: 80 Female: 84.34	Male: 79.7 Female: 84.1	Male: 74.6 Female: 78.7

### Selected 2016/17 APRP Indicators



Designer

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IN DATA WE TRUST  
In God we trust. All others must bring  
data.

Send Articles to:  
jeffmk90@gmail.com for  
inclusion.



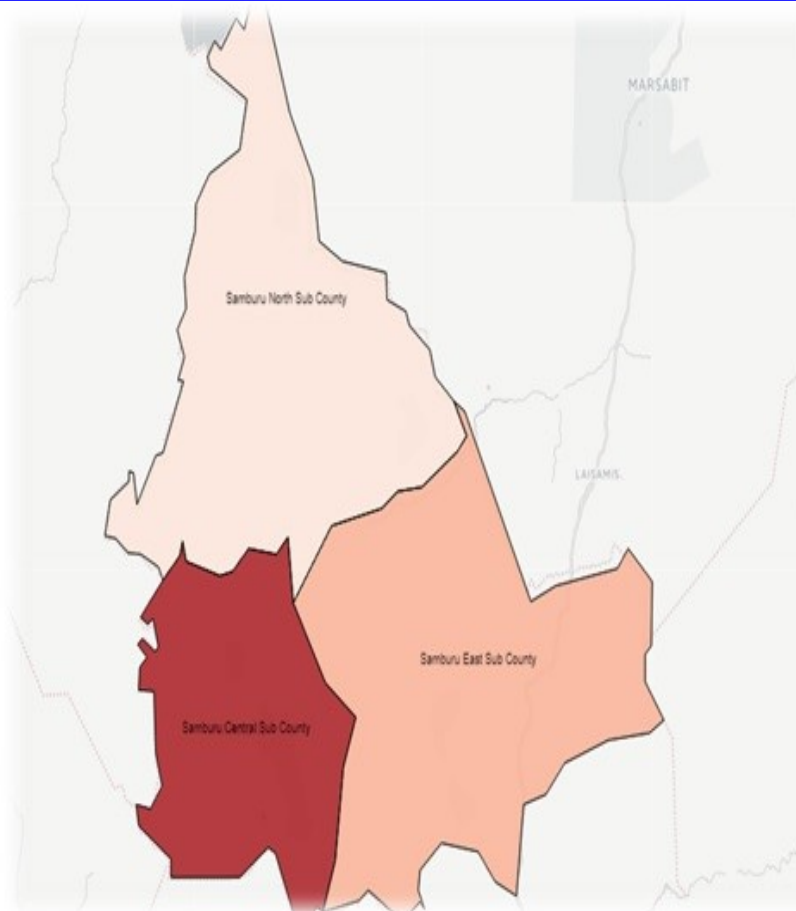
### FROM THE AUTHOR:

Evidence based decision making is enhanced by sound demand for health information.

Health data and information lack value unless they are used to inform decisions.

Quality data is fundamental for increased demand and use.

M&E system depends on capacity and performance of people implementing it at different level.



WRA receiving FP  
commodities Coverage  
2016

10.0 - 18.4 (1)
18.4 - 26.1 (1)
26.1 - 33.7 (0)
33.7 - 41.4 (0)
41.4 - 49.0 (1)