QUARTERLY HEALTH INFORMATION BULLETIN.

Volume 1, Issue 1 : Q3 2016/2017

20th Apr 2017

SAMBURU COUNTY HEALTH SERVICES DEPARTMENT.

"Enthusiasm is the yeast that makes your hopes shine to the stars. Enthusiasm is the sparkle in your eyes, the swing in your gait. The grip of your hand, the irresistible surge of will and energy to execute your ideas."

Henry Ford.

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FROM THE AUTHOR

Dear Readers,

In this issue, analyzed data reported over the past quarter (Jan-Mar 2017) indicates improvements were realized compared with the previous quarter (Oct-Dec 2016). This includes indicators such safe deliveries at 39.6% (from 36.1%), FIC (up at 56.1% from 47.3%) . However, in other indicators, the performance was unfavourable such as babies born with low birth weight (<2500g) which went up to 13.6% from 6.4% in the previous quarter. This document comprises a comprehensive report of health indicators across health service delivery in the County. The

G. Mukuria

source of data is DHIS2 where data was extracted on 18th to 19th April 2017. To realize continual improvement in presentation and use of health information, to monitor performance as well as in evidence based decision making, it is vital for stakeholders (readers, researchers, users, data providers & managers, etc.) to provide input. The compilation of this first edition of the HIS Quarterly Bulletin will enable to share information far and widely in the County.

This Bulletin highlights the progress made in selected indicators in Samburu County.

Finally, I want to point out that there is no such thing as perfect data but the indicators presented in this newsletter signal to us that certain services require further audit, analysis and examination in order to identify if a problem exists. However any feedback will be highly appreciated as it will help improve future HIS bulletin.

Regards

Activities completed last Quarter (Jan-Mar 2017)

* Revival of Monitoring and Evaluation Technical working group
* Training on Community Health Information System.
* Commenced County M&E Plan development.

Vision, Mission and Core Value.

Vision

A County Free From Communicable Condition.

Mission

To provide effective leadership and participate in the provision of quality health care services that are equitable, responsive, accessible, and accountable in Samburu County.

Core Value

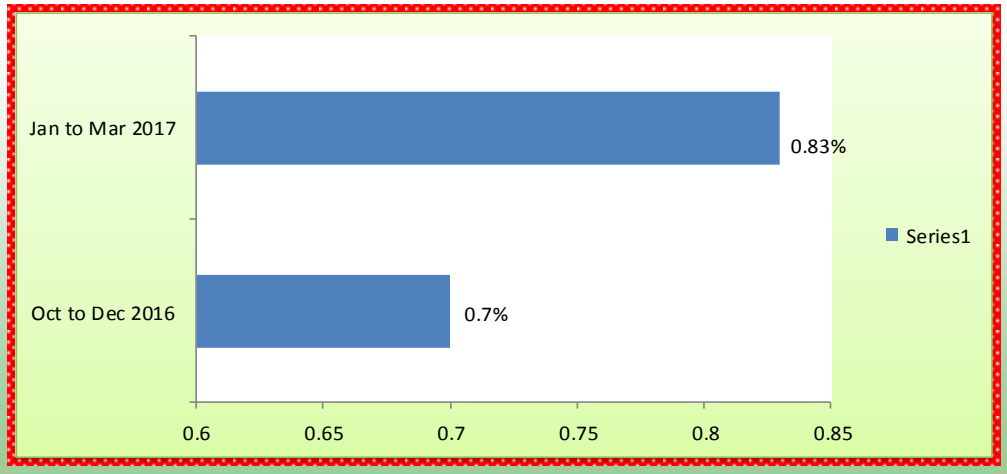
Integrity, Accountability and transparency, Team Spirit, Equity and Fairness, Professionalism, Innovativeness and People-centered.

Outpatient Morbidity (10 Leading cases) Jan—Mar 2017

Diseases (New cases only)->5yrs	Number of cases
Other Dis. of Respiratory System	27840
Pneumonia	4346
Diseases of the skin	4129
Diarrhoea	3582
Other injuries	2075
Anthritis, Joint pains etc.	1715
Urinary Tract Infection	1443
Eye Infections	1271
Confirmed Malaria (only Positive	949
Sexually Transmitted Infections	832

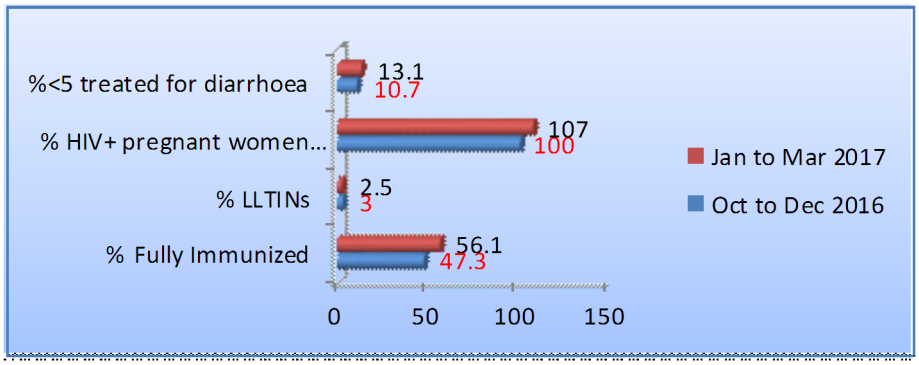
Diseases (New cases only) <5	Number of cases
Other Dis. of Respiratory System	16,230
Diarrhoea	4885
Pneumonia	2570
Diseases of the skin	1427
Ear Infections/Conditions	1200
Eye Infections	845
Tonsolitis	484
Confirmed Malaria(only Positive cases)	459
Asthma	284
Burns	281

PMTCT .% ANC Clients tested for HIV+



A total of 1986 pregnant mothers were tested at ANC out of which 14 received positive result in Oct-Dec 2016. In the following quarter (Jan- March 2017), a total of 2300 pregnant mothers were tested for HIV at ANC, 19 of which received positive result.

Objective 1:- Eliminate Communicable Conditions



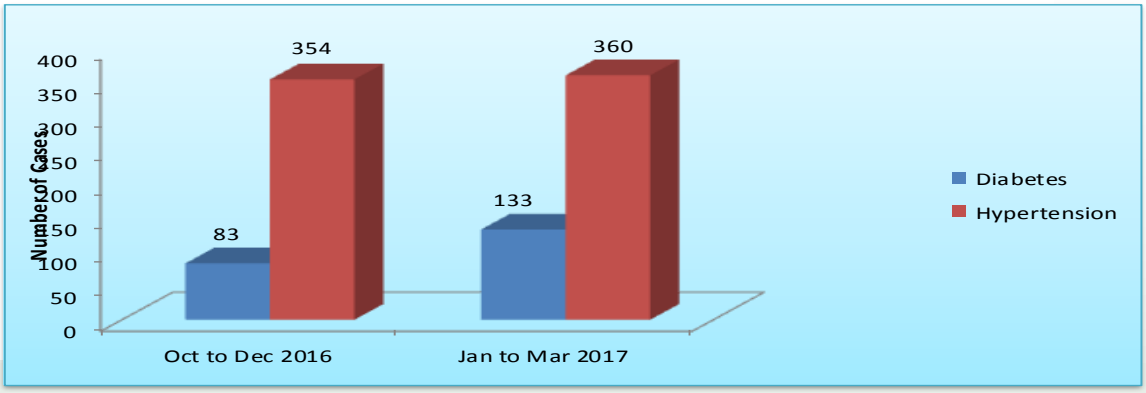
There was a slight improvement in January to March 2017, However there was data on LLTINs . Out of 14 HIV+ mothers at ANC, 15 received preventive ARVs thus 107%.

The number of <5 treated for diarrhea increased from 10.7% in Oct-Dec 2016 to 13.1% in Jan- Mar 2017.

County Report Completeness Index.

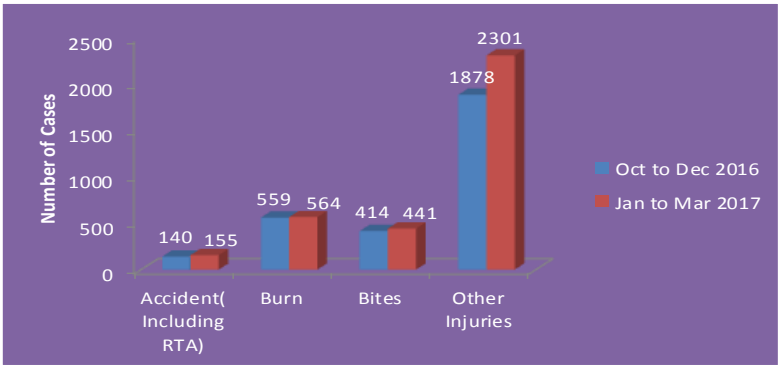
Data Set	% Completeness	% Timeliness
MOH 705 A Outpatient summary < 5 years	89.3	74.3
MOH 705 B Outpatient summary > 5 years	88.9	73.2
MOH 711 Integrated Summary Report	88.2	74.5
MOH 710 Vaccines and Immunisation	88.2	75.5
MOH 717 Service Workload	86.6	72
MOH 731-1 HIV Counselling And Testing	86.6	74.5
MOH 706 Laboratory Summary Report	84.2	80.7
MOH 731-5 Post-Exposure Prophylaxis	83.3	70.6
MOH 731-3 Care and Treatment	83.3	72.7
MOH 731-2 PMTCT	83.3	72.6
MOH 731-4 Voluntary Male Circumcision	76.9	66.7
MOH 515 Community Health Extension Worker Summary Revised	76	65.6
Facility Contraceptives Consumption Report and Request Form	74.5	42.2
MOH 708 Environmental Health Services Revised	65.9	32.6
MOH 734 F-CDRR for Nutrition Commodities	63.6	51.5
MOH 713 Nutrition Monthly Reporting	63.2	55.2
Malaria Commodities Form	63	55.1

Objective 2:- Halt, and reverse the rising burden of non-communicable conditions



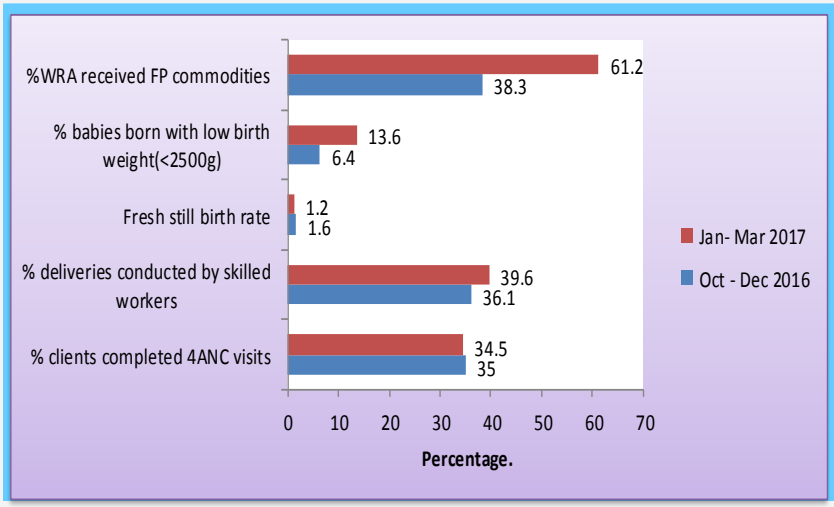
Health education on Lifestyle diseases should be done to reduce the number of patients getting diseases like diabetes and hypertension.

Objective 3:- Reduce the burden of violence and injuries



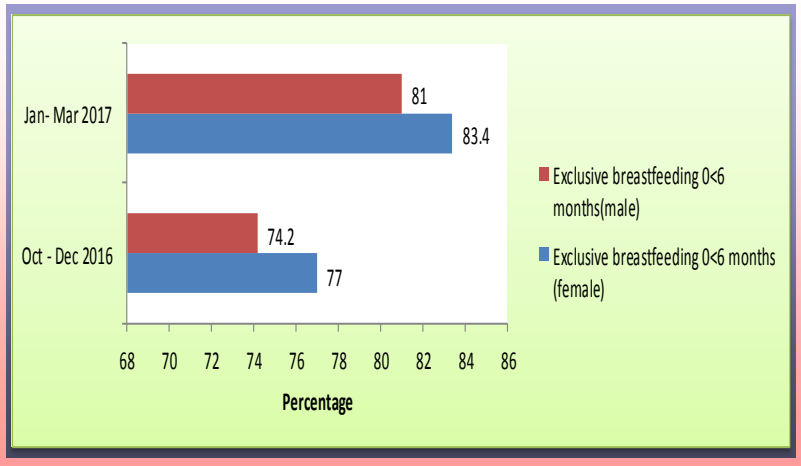
Over the past period, the number of cases reported due to accidents (which include road traffic accidents) increased from 140 cases in Oct—Dec 2016 to 155 cases in Jan-Mar 2017. Burns reportedly increased by 5 cases. However cased of bites by animals, snakes, insects, etc. increased by 27 cases.

Objective 4:- Provide essential health services



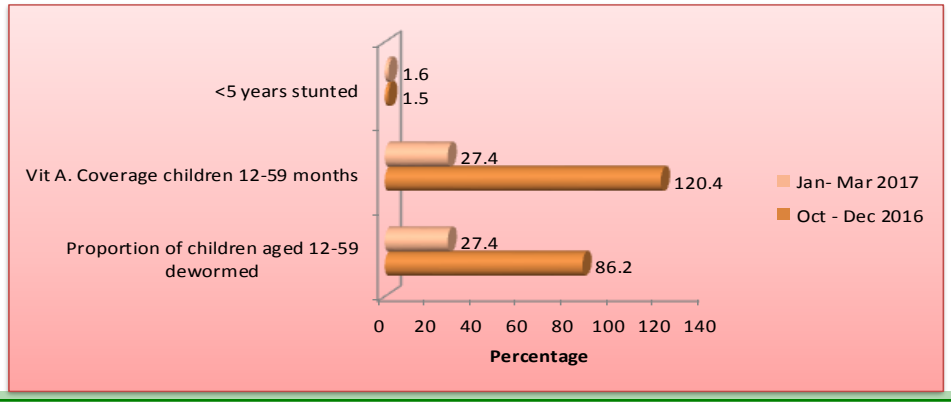
Deliveries conducted by skilled attendants increased from 36.1% previous quarter to 39.6% last quarter. Pregnant women completing 4 ANC visits marginally decreased from 35% to 34.5% over the same period. Newborns with low birth weight has also greatly increased to 13.6% from 6.4% previously. However performance increased notably over the same period for Fresh Still birth rates (a decreasing indicator) which decreased from 1.6% in the previous quarter to over 1.2 % in the last quarter.

Objective 5:- Minimize exposure to health risk factors



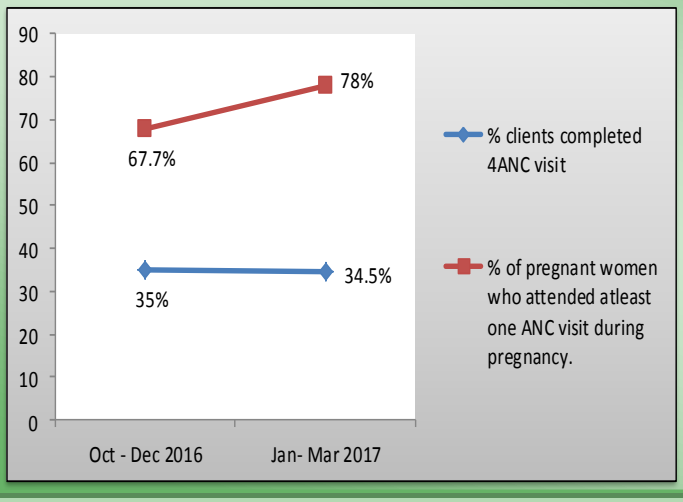
Over the two past quarters reviewed, analysis was done to establish whether there was any difference along gender lines. The analysis shows that while the proportion of girls who were breastfed exclusively for 6 months increased marginally by 6.4% from 77% to 83.4%, the same was the case for the male-child as it increased by 7.2% between the previous and most recent quarters.

Objective 6:- Strengthen collaboration with health related sectors



As illustrated in the chart alongside, there was a great margin where all indicators significantly dropped by three quarter . This could be attributed to Malezi bora Month (November 2016).

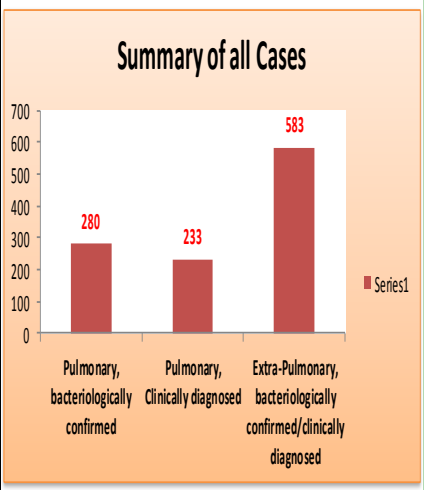
Drop out between 1st ANC Visit and Four ANC Visit (Jan-Mar, 2017)

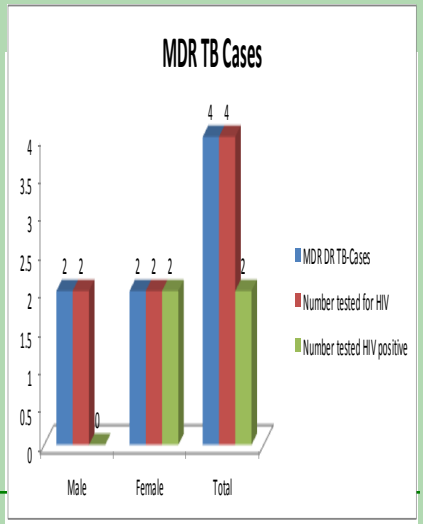


The alongside graph show drop out rate between the number of pregnant women who attended the 1st ANC visit compared with the number who attended the 4th ANC visit at the health facility. This indicator measures how many of these clients who make the 1st visit for ANC services, continue and attend up to 4 visits as required, thereby increasing the likelihood of attending a safe delivery in the health facility. In Oct—Dec 2016, 32.7% of pregnant women attended just one ANC visit and did not complete the four ANC visits scheduled over the course of their pregnancy. This is a significant contributor of low coverage of safe deliveries across Samburu County.

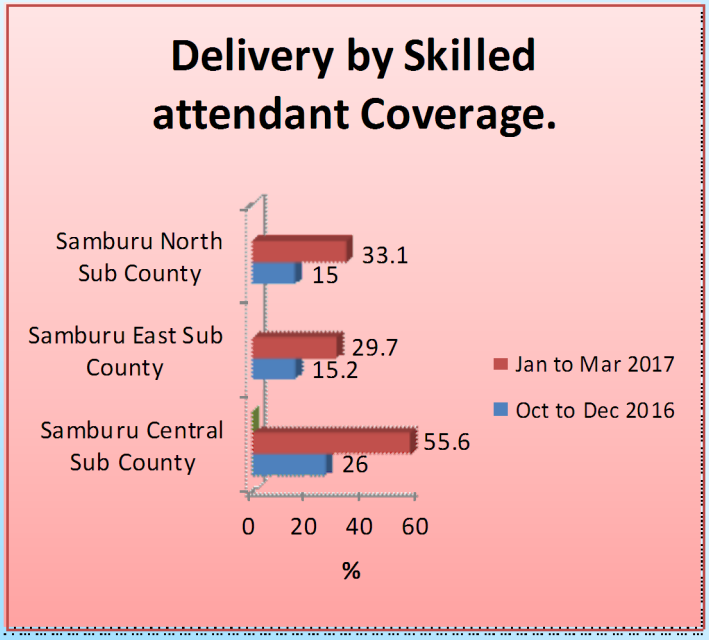
SAMBURU COUNTY QUARTER 1,2,3,4 TB CASE FINDING 2016.

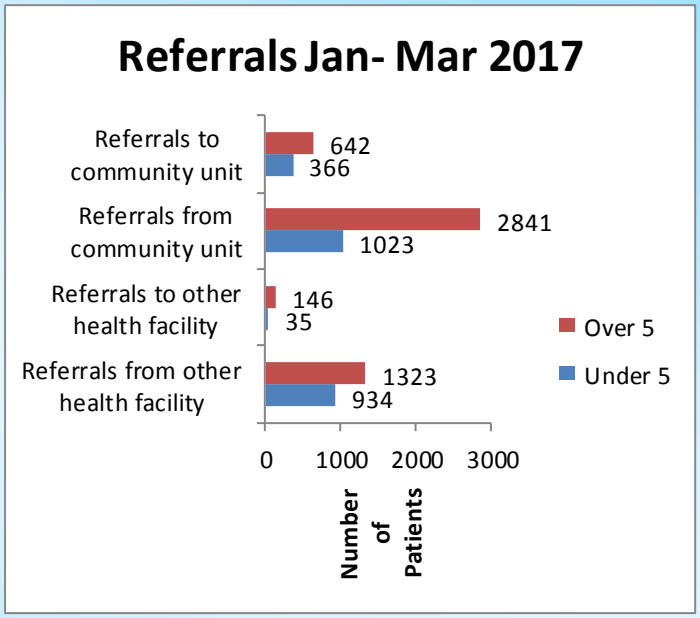
Summary of all Cases	Total		
Pulmonary, bacteriologically confirmed	280		
Pulmonary, Clinically diagnosed	233		
Extra-Pulmonary, bacteriologically confirmed/clinically diagnosed	583		
Age and sex Distribution(Bacteriologically Confirmed)			
	Male	Female	Total
New Bacteriological Confirmed	153	119	272
Number tested for HIV	148	117	265
Number HIV Positive	23	33	56
Age and Sex Distribution (Clinically Diagnosed)			
	Male	Female	Total
New Clinically Confirmed	115	106	221
Number tested for HIV	107	98	205
Number HIV Positive	23	27	50
Age and Sex Distribution(Previously Treated)			
	Male	Female	Total
Previously Treated Bacteriologically	15	5	20
Number tested for HIV	15	5	20
Number HIV Positive	5	1	6
Age and Sex Distribution(Extra- Pulmonary)			
	Male	Female	Total
Extra- Pulmonary	40	30	70
Number tested for HIV.	39	29	68
Number of HIV Positive	6	4	10
Age and Sex Distribution all MDR TB Cases			
	Male	Female	Total
MDR DR TB-Cases	2	2	4
Number tested for HIV	2	2	4
Number tested HIV positive	0	2	2
Age and Sex Distribution Mono- Resistance patterns			
	Male	Female	Total
Mono resistance Cases	1	1	2
Numbers tested for HIV	1	1	2
Numbers tested HIV Pos.	0	1	2





Delivery by Skilled Health Staff per Sub-County & Referral Services





National RBF supervision Feedback

National RBF team visited Lodung'okwe, Ngutuk Elmuget, Wamba health centre, Loosuk and Lesidai on 31st Jan 2017 to 3rd Feb 2017. Some of the feedback included:

i) Most Facilities had complied with fund policy.
ii) Clear minutes were missing on how RBF funds were allocated.
iii) There were no quarterly micro plans highlighting how fund will be used.
iv) There were issues of reporting– Under-reporting
v) There was need to Health Insurance Subsidy for the poor awareness.
vi) Procurement procedures were not strictly followed.
vii) Ensure safeguard of placenta pit, Latrine pits, Sharps etc.
viii) HFMC terms should be revisited.

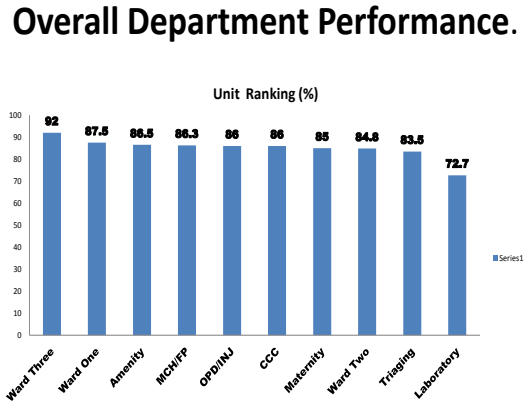
National team giving feedback to COH and JVT at COH's office

Best Department Rewarded at County Referral Hospital.

The hospital offers 24 hours out-patient services, Revenue dept, Health Records and Information dept, MCH and FP, Nutrition dept, TB and CCC, Laboratory services, Radiology, Physiotherapy/ Occupation Therapy, Plaster/ORTH, Medical Engineering/Maintenance, Pharmacy, Stores Supplies, Medical Clinics, Operative services and Referrals. The hospital also offers Maternity, inpatient services, and Mortuary Services.

92%- Ward Three

Dr. Nato Rewarding the best department



Up scaling Family Planning Services

Mariestopes Kenya is an Organization that provide family planning services to clients in every part of the country free of charge. They normally come to Samburu County referral hospital twice a year to provide free family planning services to the clients.

This year they visited County referral Hospital on 23rd to 25th February 2017 and were able to give the following family planning methods to our clients.

BTL	5
Vasectomy	0
Implanon Classic	40
Jadelle	76
IUCD	26

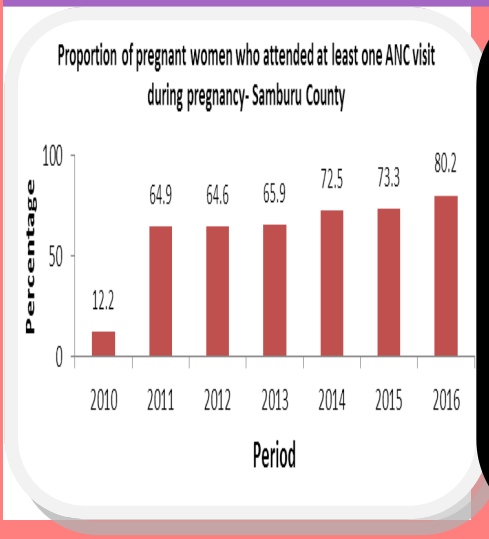
Total Client seen were 147. They will again visit our facility for the same services o 24th-26th May 2017.

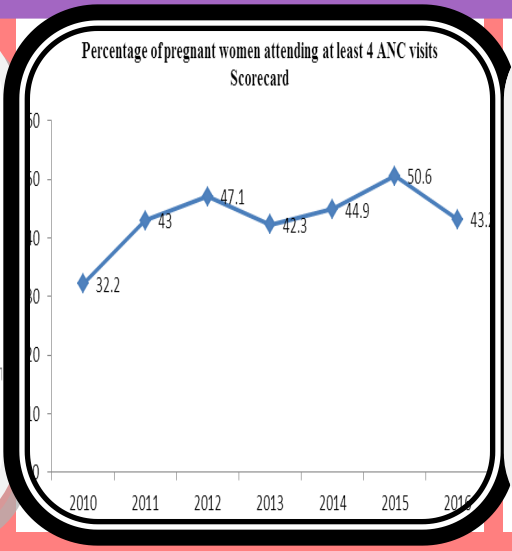
Evalyne - I/C MCH

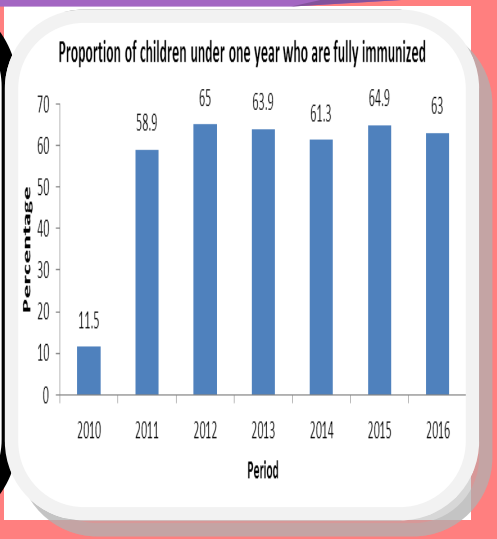
Community Unit Referrals Jan-Mar 2017

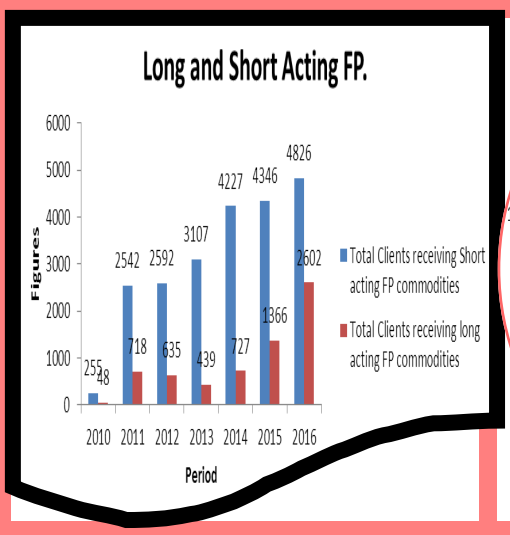
Data element	Value
Reffered for ANC	915
Referred for Skilled Delivery	420
New-borns with danger signs referred	136
Children of 0-11 months referred for immunization	733
Children 6-59 months referred for Vitamin A supplementation	884
Referred with Severe malnutrition	111
Referred with Moderate Malnutrition	358
Referred with cough for 2 or more weeks	222
Referred for HIV Counselling and testing (HCT)	684
Referred for Routine checkups for the elderly (60+)	286
TB Contacts Traced And Referred	92

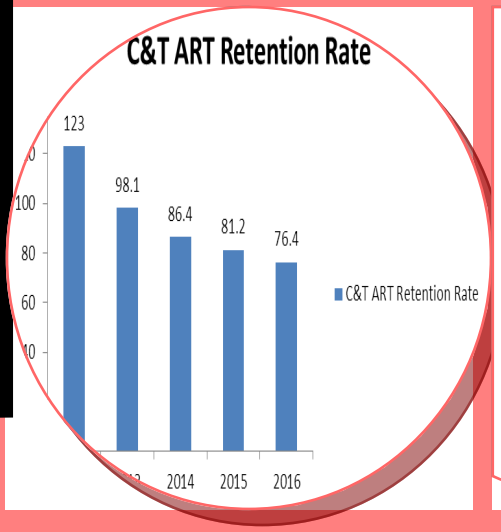
7 Years Trend

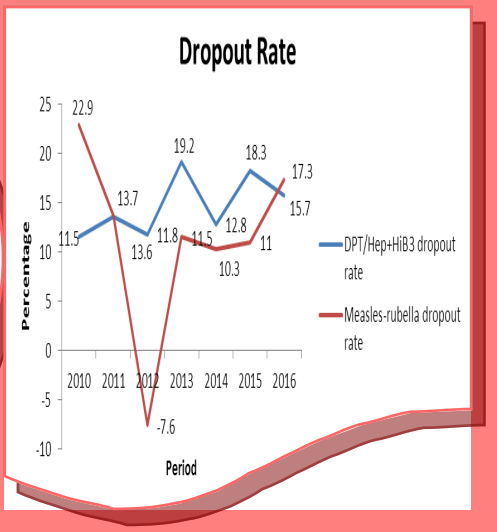












Period	Number of Children under 5 years attending Child Welfare Clinics for growth monitoring (new cases)	Proportion of Children under five attending CWC who under weight	Proportion of Under 5yrs attending CWC who are stunted
2011	27751	22.9	1.7
2012	81889	5.1	5.9
2013	85058	0.2	3.9
2014	77908	3.8	2.2
2015	75589	6.1	1.6
2016	12847	0.51	1.5

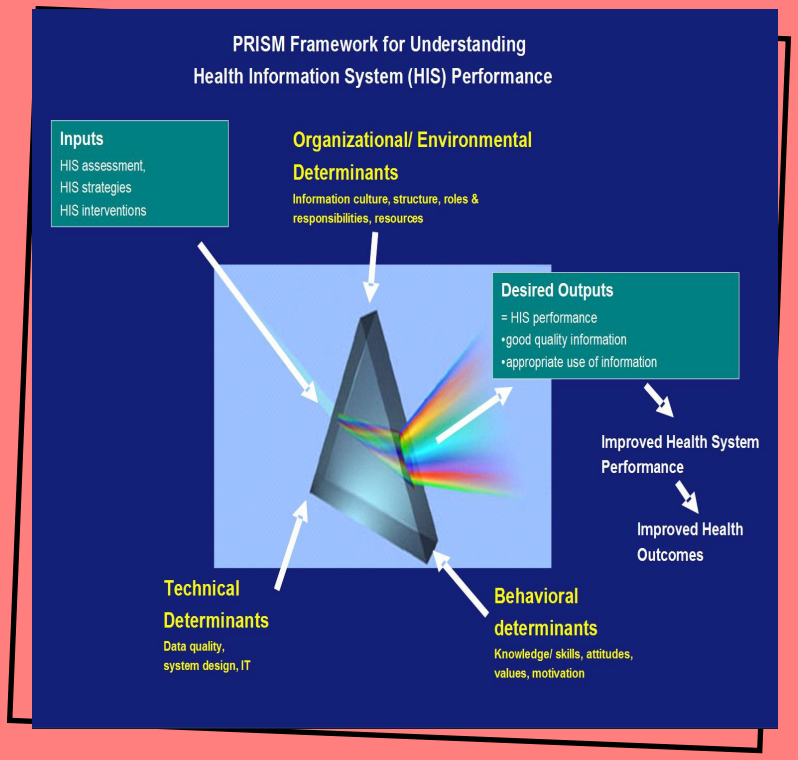
Design and Layout

GEOFFREY MUKURIA
COUNTY REFERRAL HOSPITAL
COUNTY M&E COORDINATOR
SAMBURU

Data is power, Information is Liberating

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

M&E Department



Pictorial—Polio Campaign R2 April 1-5.

	Sub County	Pop <5 2014 as per Microplan Kindly update the Population target as per microplan in Households Sheet 1	Total Vaccinated in the HOUSEHOLDS (Received before)0-59	Total Vaccinated OUTSIDE HOUSEHOLDS (Received before)0-59	Never received before (Zero dose)0-59	% Zero Dose	*Total Number vaccinated	*SNIDs Coverage %
NANDI	Mosop	28,172	21609	6864	2	0.01	28,475	101.1
	Nandi South	34,970	30913	6314	1	0.00	37,228	106.5
	Tinderet	15,846	12082	4102	3	0.02	16,187	102.2
	County Total	162,261	134,037	37054	21	0.01	171,112	105.5
SAMBURU	Samburu Central	27,054	24008	4918	151	0.52	29,077	107.5
	Samburu East	14,993	13348	3120	369	2.19	16,837	112.3
	Samburu North	13,111	12240	2108	170	1.17	14,518	110.7
	County Total	55,158	49,596	10146	690	1.14	60,432	109.6