

Zamfara Group Work

Baseline Dissemination workshop

2/June/2009

Participants

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| Issue | Interventions | Action Points | |
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| | | GOVT | PRRINN-MNCH |
| Lack of SBAs | Determine shortage of SBAs | Conduct MSP | Provide TA to support the process |
| | Leverage on the midwives service scheme | meet up with the FMOH/NPHCDA conditions | |
| | Recruit Additional SBAs | Calculate shortage based on estimates from the MSP | |
| | Formation of a HR forum to address issues of unskilled staff/unemployed CHEWs | SMOH to facilitate the formation of the forum | provide TA for the process |
| | | Task shifting as aprt of TOR for the forum | |
| | Training of CHEWS on MLSS | MOH to identify female CHEWS to be trained | Provide technical and logistic support |
| | Incentives for rural posting/ explore incentives for females staff | MOH to take this forward | |
| | Improve the standard of health training institutions | Upgrade the infrastructure / improve the management | Suport the process to strenghten the management/ minot infrastructural support |

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| Access to quality MNCH services (High number of non functional HFs) | Renovate and equip HFs to meet the agreed MSP standard | HC MOH, MFLG and MBEP to follow up with HE to discourage building of more Hfs and should concentrate on renovation | Advocacy |
| | | Phased renovation /equipping of HFs (one per ward) | Support competency based training and renovation of Hfs of 3 CEOCS and 12 BEOCS |
| | | MOH to engage with MDGs to concentrate on renovation/equipping of HFs | |
| | | MOH to write letters to Min of water resources | |
| | Training of Staff | Training of HF staff in the targetted Hfs i.e. the one HF ward policy | LSS training for SBAs Competency based skill training (facility based) |
| | | Organize training on different aspects of MNCH components | |
| | Supervision | MOH and MFLG to Strengthen ongoing supportive supervision at both the State and Lga levels | Provide TA to support the process |
| | | Establish a quarterly review/feedback meetings on progress of activities (ISS, plan etc) - include community | Provide TA to support the process |
| | | Provide regular funds for the process | |

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| Low knowledge and utilization of MNCH services | Create awareness using religious and traditional leaders | Work with MFLG, MORA and MOI to create awareness | Support the process |
| | Resuscitate VDCs/WDCS | MOH and MFLG to facilitate the process | Facilitate the process |
| Barrier to utilization of services | Alleviate cost of services | Promote free MNCH policy | TA to cost and support the process |
| | Explore establishment of community saving/financing or other schemes | Work with PRRINN-MNCH to pilot the process | Provide TA to explore the process |
| | Explore establishment of community based MNCH services | Work with PRRINN-MNCH to pilot the process | Provide TA to explore the process |
| | Explore the possibility of rewarding TBAs to refer pregnant women to HFs | | Provide TA to explore the process |
| | Engage with wife of HE to promote MNCH activities | MOH and MOWA to facilitate the process | Catalyse the process |
| | build trust of the client | | |

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| Weak HMIS system | Production of tools | MFLG to reproduce forms | |
| | | MOH and MFLG to ensure that provisions are made in the 2010 budget for production of tools | |
| | Training of HF on HMIS | | Support the training of HWs |
| | Srenghthen the reporting system | provision of regular funds to support the process | |
| SDSS | Review the reports of the SDSS reports/ follow up action | Determine the ED list and the quantity required + cost | TA to quantfy, cost and support the process |
| | | Set up FM system | |
| | | Set recording system | |
| | | Adress the issue of storage and distribution | |
| | | MOH to engage with MBEP and MFLG on the funding of the process | |