GF/NACA/ATM/RSSH/C19RM PROJECT

STATE: NASARAWA

LGA: KOKONA

WARD: GARAKU

PREPARED

BY

FIRST STEP ACTION FOR CHILDREN INITIATIVE

SUBMITTED TO:

NETWORK OF PEOPLE LIVING WITH HIV/AIDS IN NIGERIA (NEPWHAN)

REPORTING PERIOD:

JULY, 2024

INDICATOR	TARGET	MONTHLY ACHIEVEMENTS	QUARTERLY CUMMULATIVE ACHIEVEMENTS
Number of Client Exit Interviews Carried Out at GF Supported Facilities (Cumulative Quarterly Target)	24	8	8
Number of Focused Group Discussions Carried Out by CSOs to Elicit Information on Beneficiary Satisfaction (Cumulative Quarterly Target)	2	1	1
Minimum Number of Identified Issues During Client Exit Interviews and FGDs	5	7	7
Minimum Number of Identified Issues Resolved	3	0	0

Summary of Activities Conducted Within the Month (*This includes FGDs, CEI, Remedial Actions taken, Advocacy and advocacy Follow-Up Visits*)

Client Exit Intervie ws (CEI) **Number of CEI Conducted: 8**

Respondent Sex: Male/Female M4 F4

Respondent Type: Adult 6 Children 2

Availability of ATM & C19 Health products (The facility does not provide COVID-19 and TB services but only HIV and Malaria. All Positive HIV clients are referred to General Hospital Garaku for treatment.

Number of Respondents who received ATM&C19 Services: 6. (Malaria 6, other non ATM & COVID services 2).

Number of Respondents Charged for ATM&C19 Health products: 6

Number of Respondents with ATM & C19 service satisfaction: 6

Focused Group Discussio ns (FGD)

EENTRY FGD SESSION (FRIDAY, 19th JULY, 2024)

CLMT were welcomed to the meeting by the Angwan Loko Community Leader, Mr. Yakubu Sama. The leader prayed for a fruitful deliberations as he encouraged all participants to feel free to express themselves while the meeting last. He therefore granted approval for the entry FGD meeting to commence. The PO, Mr. Augustine Ayuba on his part thanked the community leader for the warmth reception accorded to all participants.

OBJECTIVE OF ENTRY FGD SESSION:

The PO say that the objectives of the FGD session was to generate adequate and accurate information from participants on challenges affecting access to ATM and COVID-19 service uptake at PHC2, Angwan Loko Garaku. He said the exercise was in two phases (Entry and Exit), he said this meeting was ENTRY FGD session and there shall be the EXIT FGD session in September, 2024. He concluded that participants are free to respond to all questions asked and all responses shall be kept privately.

Key Deliberations on Resilient and Sustainable System for Health (RSSH)

- 1. COVID-19 (CORONAVIRUS)
- 2. Prevention
- 3. Treatment and
- 4.Gender and Human rights

ISSUES IDENTIFIED DURING ENTRY FGD

- 1 Poor facility infrastructure (nearly collapse facility toilet, leaky roof/decayed ceiling at medical record unit, decayed mattresses/no bed-sheet.
- 2. Poor facility staff attitude to work/low patronage (staff resume between 8-9am and close between 2-3pm daily).
- 3. Poor facility infrastructure (nearly collapse facility toilet, leaky roof/decayed ceiling at medical record unit, decayed mattresses/no bed-sheet.
- 4. Inadequate chairs and tables (facility need 6 chairs, (3 benches and 3 plastic chairs and 3 office tables).
- 5. Lack of light (facility power source (PHC) has been disconnected due to their inability to pay accumulated bills.
- 6. Lack of water source (they buy water or fetch it by themselves)
- 7. No security guard (night watchman man).



Remedial Actions Taken PO facilitating entry FGD session at Angwan Loko on 19th July, 2024 at Community Leader's Compound, Garaku Based on the issues identified in the month of July 2024, a follow-up to stakeholders revealed that they have taken actions to resolve five out of the seven (7) identified issues as follows:

- 1. Poor infrastructure (nearly collapse toilet building, leaky roof/decayed ceiling at Medical Record Unit. During entry FGD session, two participants were assigned to conduct an assessment of the issues and report to community leader. During follow-up, the community leader of Angwan Loko, Mr. Sama Yakubu revealed that the assessment has been done and work will start by August, 2024.
- 2. Facility has inadequate tables and chairs: NURTW chairman who made commitment to donate 3 benches during FGD entry session have already engaged a carpenter. The construction shall be done by August, 2024.
- 3, Lack of security personnel (Night guard man): A follow-up to stakeholder (community leader) revealed that they have started the process of engaging a security personnel and shall be completed by August, 2024.
- 4, Lack of light: A follow-up also revealed that the stakeholders have agreed to reconnect the disconnected source of power at PHC 2, Angwan Loko, Garaku. They have already procured cables to that effect.
- 5. Poor staff attitude to work and poor client patronage to PHC 2, Angwan Loko, Garaku. A new timetable reflecting the new resolutions on staff resumption time and closing (8am-6pm) as against the former (9:am-2:pm) have been drawn. A follow-up revealed that it shall take effect from August 2024 as against our earlier resolution during meeting to start by Monday July, 22nd, 2024.

Advocacy and Advocacy Follow-up Visits.

In the month of July 2024, the following activities were conducted

- 1. Entry Community Advocacy Visit
- 2. Entry Facility advocacy visit
- 3. Key informant interview with OIC PHC 2, Angwan Loko, Garaku

1. REPORT OF COMMUNITY ENTRY ADVOCACY VISIT TO MR. SAMA YAKUBU, ANGWAN LOKO COMMUNITY LEADER ON 18TH JULY, 2024 AT HIS RESIDENCE, ANGWAN LOKO, GARAKU

The CLMT conducted an entry advocacy visit to the community leader of Angwan Loko, Garaku Mr. Sama Yakubu. During the entry advocacy, the CLMT introduced the organization and its objectives and equally introduced NEPWHAN and its activities as well as the RSSH C-19 project, its objectives and goals.

RSSH/C-19RM OBJECTIVES

- 1. **RSSH:** The PO, Mr. Augustine Ayuba explained that the objective is to contribute to making foundational changes to strengthen the health system in Nigeria through targeted interventions that support the federal government to set policies, strategies, and standards hence the presence of the CLMT in Angwan Loko community to implement the objective in the community and PHC 2, Angwan Loko community.
- 2. **C-19RM:** The PO explained that the objective of the COVID-19RM is to support the strengthening of Nigeria's system for effective response to COVID-19 pandemic and other public health emergencies. **Welcome Remark:** In his response, the community leader welcomed the team to the community and granted permission for the project to be implemented in the community. The WDC and Community Reprehensive both appreciated the community leader and added that the project would be implemented in the community for a period of three (3) months (July-September, 2024).

In addition, they explained that the project is a community driven project therefore the CLMT would be facilitating the process of identifying and advocating issues to stakeholders who would be responsible for mobilizing resources to address facility issues. PO also added that all structural gaps at the facility would be addressed by the community stakeholders and not the CBO/CLMT or NEPWHAN.

PO explained to the stakeholders that activities to be conducted include facility entry advocacy and follows-up, Key Informant Interview (KII) at the facility and entry and exit FGD all within the quarter.



Youth leader contributing during the meeting at the community leaders residence on 18th July, 2024

1. REPORT OF FACILITY ENTRY ADVOCACY TO OIC PHC 2, ANGWAN LOKO, ON 20TH JULY, 2024 AT PHC 2 GARAKU

The facility entry advocacy commenced after an opening prayer followed by self-introduction and presentation of the aims and objectives of the advocacy visit by the Program Officer of First Step Action, Mr. Augustine Ayuba.

Objectives of the advocacy visit

The PO stated that the aims and objectives of the advocacy visit was to introduce Resilience and Sustainable System for Health (RSSH COVID-19RM) to the facility. The PO further explained that the aim of the project was to address gaps in systems and structures that affects smooth access to AIDS, TB, Malaria and COVID-19 services across health facilities hence, the selection of PHC2 Angwan Loko Garaku as a beneficiary.

The PO explained that the project will last for three (3) months (July-September, 2024). He however added that there would be continuous follow-ups on unresolved issues even as the implementation moves to another ward/facility. The PO added that the implementation approach is community driven hence the involvement of two stakeholders from Garaku Community (WDC and Community Rep).

The PO also explained that the CBO/CLMT has no financial provision to address any facility issues

that would be identified during the meeting however, they would advocate for such issues to the stakeholders to address them.

Welcome Remark:

The OIC of PHC 2 Angwan Loko Garaku, Mrs Victoria Damisa welcomed the team to the facility and appreciated the CBO/CLMT and NEPWHAN as well as Global Fund for funding the project. She then granted access to the CLMT to implement the project in the facility.

Identified facility issues

The WDC who facilitated this session, guided the staff of PHC2 Angwan Loko who identified there issues to include:

- 1. Facility operating in a rented apartment
- 2. Poor facility staff attitude to work/ Low patronage of clients to PHC 2 A/Loko (staff resume between 8-9am and close between 2-3pm daily).
- 3. Poor facility infrastructure (nearly collapse facility toilet, leaky roof/decayed ceiling at medical record unit, decayed mattresses and no bed-sheet.
- 4. Inadequate chairs and tables (facility need 6 chairs, (3 benches and 3 plastic chairs and 3 office tables).
- 5. Lack of light (facility power source (PHC) has been disconnected due to their inability to pay accumulated bills.
- 6. 10. Lack of water source (they buy water or fetch it by themselves)
- 7. No security guard (night watchman man).
- 1. Facility operating in a rented building: The staff explained that they have a permanent with blocks being molded expecting the start of the building by end of 2024. The community are therefore hesitant to invest their money in the current rented building. However, CLMT engaged them on the need to attend to some of the key issues identified.
- **2. Poor facility staff attitude to work/low client patronage to the facility:** When CLMT probe to know why the community doesn't patronage the facility. It was revealed that long time staff late works resumption (9:am) and early closure (2:pm) in the past resulted to poor clients patronage.
- CLMT guided PHC 2 Angwan loko Garaku staff who resolved that from Monday 22nd July, 2024, a new working time-table be drawn to cover working hours between 8:am and 6pm tentatively. It was agreed that one CHEW would come in the morning and close by 12:pm then the next CHEW takes over the facility between 12:PM to 6pm. They would be assisted with other staff.
- 3. Poor facility infrastructure (nearly collapsed facility toilet building, leaky roof/decayed ceiling, at Medical record unit and Decayed Mattresses: One part of the facility toilet has fallen off exposing

the toilet to the outside. The toilet is no more in use for now until it is fixed.

- 4. **Inadequate tables and chairs (need 6 (chairs 3, benches 3):** The facility staff reported that they need additional tables and chairs to address the inadequate chairs and tables especially on immunization days or any special health wealth.
- **5. Lack of light:** It was reported that Power Holding Company of Nigeria (PHCN) disconnected their light over accumulated light bills. They therefore requested light source be replaced with either rechargeable lantern or solar system.
- 6. **No water source:** The facility has no borehole nor a well,. They reported to buy water from vendors or fetch it themselves.

At the end of the advocacy visit, the PO explained that all they have listed would be advocated to the stakeholders so they can address them. The OIC appreciated the CLMT and made commitment to keep to the new working hour timetable.

7. **Night Watchman:** It was reported that the facility has no security guard hence the staff are skeptical about their safety in the night hence the need to stopped night duty.



PHC 2 Staff contributing during facility entry advocacy on 20th July, 2024 at PHC 2, Angwan Loko, Garaku

(2) REPORT OF FACILITY KEY INFORMANT INTERVIEW CONDUCTED WITH MRS VICTORIA DAMISA (OIC PHC2 GARAKU) ON 24TH JULY, 2024 AT PHC 2, ANGWAN LOKO, GARAKU

The following were the questions asked by CLMT and responses received during the (KII)

Q1. When asked to please tell the team about the COVID-19, HIV/AIDS, TB and Malaria services they offer in the health facility.

RESPONSE: In her response, the OIC said the facility test for Malaria and gives drugs to positive clients but refer for COVID-19, HIV and TB to General Hospital, Garaku.

Q2. We asked her to list the resources that are required to provide COVID-19, HIV/AIDS, TB and Malaria services effectively?

RESPONSE: She responded that the facility needs human resources, trainings, consumables and non-consumables.

Q3a.CLMT also requested to know the resources available (quantity) to ensure, COVID-19, HIV/AIDS, TB and Malaria service delivery are effectively carried out in the facility.

RESPONSE: She responded that they have 3 trained staff to handle HIV/AIDS testing only but refer positive cases to GH, Garaku. she added that they also have 3 trained staff to provide malaria services.

Q3b. The team requested to know the level of knowledge available (quality) to ensure HIV/AIDS, TB and Malaria service delivery?

RESPONSE: She responded that they have MLT 1, CHEW 2.

Q3c. Please confirm the availability and sufficiency of these resources.

	Available	Sufficient
	(Yes/No)	(Yes/No)
Consumables	Yes	No
Non-consumables	Yes	No

Q3d. When asked to list those responsible for providing these resources?

RESPONSE: She responded that is state government through Nasarawa State Drug Supply Management Agency (NDSMA).

Q3e. On level of security availability in the facility?

RESPONSE: The OIC responded that the facility has no perimeter fencing, no door burglary proof and no light, no night watchman.

Q4. What is the current monthly inflow of patients seeking COVID-19, HIV/AIDS, TB and Malaria services at the facility?

RESPONSE: 86 (ATM service is only for malaria which is 16). The remaining data (70) is for other health issues.

- Q5. What is the monthly patients-service provider ratio? (The number of patients to the number of health care provider)? **RESPONSE:** 86/4 = 1:21
- Q6. Can you tell us about the challenges currently faced in delivering COVID-19, HIV/AIDS, TB and Malaria services?

RESPONSE: The OIC reported inadequate personnel and inadequate infrastructure; She added that people prefer to patronize local health practitioners such as Patent Medicine

Dealers (Chemist).

Q7. When asked to explain the level of community structure involvement in COVID-19, HIV/AIDS, TB and Malaria service delivery?

RESPONSE: She reported that the level is non active even though at some points, the community stakeholders render support to the facility but the support is inadequate hence non-active.

Q8. The team asked to know if the Personal Protective Equipment (PPE) in the facility are sufficient?

RESPONSE: The OIC responded that they have but are not sufficient.

9. Are the community members using PPE correctly and at all times?

RESPONSE: There are no PPE equipment at the community level.



CLMT Conducting KII with Mrs. Victoria Damisa OIC PHC 2 Garaku) on 24th July, 2024 at PHC 2 A/Loko, Garaku

Outreach Activities on IPV, GBV and Human Rights

The organization shall conduct her GBV outreach activities in the month of September, 2024.

DAILY RESULTS TRACKER

Date	Activity Conducted	Name of Facility/Community	Specific Issue Identified from CEIs and FGD	Name & Designation of Stakeholder visited for advocacy related issues	Advocacy issue to be resolved	Current Status (Resolved or Pending)	Follow-up Action Required
17/07/24	CLMT Weekly Review Meeting	First Step Office	No issue identify	Patience Ene Ogbiloja (ED)	No advocacy issue to be resolved	No issue to be resolved	No follow action required
17/07/24	2 CEI conducted	PHC 2 Angwan Loko, Garaku	No issue identify	Victoria Damisa (OIC)	No issue to be resolve	No pending issue	No follow up action required
18/07/24	2 CEI conducted	PHC 2 Angwan Loko Garaku	No issue identify	Victoria Damisa (OIC)	No issue to be resolve	No pending issue	No follow up action required
19/07/24	2 CEI conducted	PHC 2 Angwan Loko Garaku	No issue identify	Victoria Damisa (OIC)	No issue to be resolve	No pending issue	No follow up action required
19/07/24	Entry FGD session	PHC 2 Angwan Loko Garaku	1. Poor facility infrastructure (leaky roof, nearly collapse facility toilet, decayed ceiling, damaged mattresses 2. Facility operating in a rented building 3. Lack of water source 4. lack of light source 5. No security guard man 6. Inadequate tables & Chairs 7. Poor staff attitude to work/low client patronage	Victoria Damisa (OIC)	1. Stakeholders made commitment to resolve nearly collapse toilet building, leaky roof/decayed ceiling at Medical Record Unit. 2. stakeholders to resolve issue of tables/chairs 3, Stakeholders to resolve issue lack of security personnel 4, Stakeholders to resolve issue of lack of light 5. Stakeholders to address issue of poor client patronage/ poor staff attitude to work.	Issue pending	Follow – up action required and CLMT are following up with stakeholders to redeemed their commitments

20//07/24	Conducted Facility Entry Advocacy	PHC 2 Angwan Loko, Garaku	No issue identify	Victoria Damisa	No issue to be resolved	No pending issue	No follow up action required
22/07/24	1 CEI Conducted	PHC 2 Angwan Loko Garaku	No issue identify	Victoria Damisa	No issue to be resolved	No Pending issue	No follow up action required
23/07/24	1 CEI Conducted	PHC 2 Angwan Loko, Garaku	No issue identify	Victoria Damisa	No issue to be resolved	No pending issue	No follow-up action required
24/07/24	Conducted facility Key Informant Interview (KII)	PHC 2 Angwan Loko Garaku	No issue identify	Victoria Damisa	Lack of security personnel at PHC 2 Garaku	Pending	Follow-up action is required and CLMT has engaged stakeholders who made commitment to enage a night watchman
25/07/24	1 CEI conducted	PHC2 Angwan Loko Garaku	No issue identified	Victoria Damisa	No issue to be resolved	No pending issues	No follow-up action required

CLMT MEMBERS

1. Name of PO: AUGUSTINE AYUBA Signature:

2. Name of WDC:LIVINUS OWA Signature:

3. Name of COM. REP: AGATHA J. ANTHONY Signature:

4. Name of ED: PATIENCE ENE OGBILOJA Signature:

	Issues Requiring SPOs Attention
1 No issu	ue require SPOs attention in the month under review
	Implementation Outcomes
Challenges	No challenge recorded in the month under review
Recommen dations (What can be done to improve on the identified Challenges)	No recommendation
Success Stories (Summary of key successes recorded for the month if any)	In the month of July, 2024, a follow-up to Q2 community revealed that stakeholders have made another donation of a table to PHC 1, Garaku. The Office table was donated with support from Religious Leader, NURTW, Youth, and Market Women respectively. The table was handed over to the OIC PHC 1 Garaku Mrs. Pauline John by the CLMT in July 2024 at PHC 1, Garaku. The OIC expressed appreciation to the CBO and NEPWHAN for facilitating the process and made commitment to make maximum use of it.

PICTURES



munity Rep Conducting CEI at PHC 2, Angwan Loko, Garaku on 17/07/2024



WDC Conducting CEI at PHC 2, Garaku on 15th July, 2024

	Name of CBO: FIRST STEP	Name of FFP/	Designation	Facility/community	Telephone of	Signatur e of	Date of activity
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DATABAS COFFACILITIES/COMMUNITY FOCAL PERSONS

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		ART focal person				ART focal person			
MARY	BAHAGO ROSEMARY	Lab focal person	07031102303	DAR		Lab focal person			
		Referral focal person				Referral focal person			
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NEPWHAN/GF/NTBLCP/NACA/RSSH/C19RM GRANTS DATE 18/07/2024 ATTENDANCE SHEET DAY Activity: COMMUNITY ENTRY ADVOCACY Program Area: HEDGIH Level of Activity: ONGOING Type of Funding CHORM Venue of Activity COMMUNITY LEADER'S COMPOUND, ANGWAN LOKO, GARAKY SURNAME FIRST NAME DESIGNATION SEX PHONE No ORGANIZATION E-MAIL SIGNATURE (in capital) (in capital) (M/F) COMMUNITY LEADTER CA LOKU, CTARRIKH CommuniT-1 M YAKUBU SAMA /AKUBU 08036069592 LEAUTER 2 M TOUTH MEMBER derplantherman.com DEWNIS BARTH AlLoh AARLON M OUTH LEADER TEACHER Albern F PARON MARY Goverko women ANITHONY COM REP AGATHA JIMMA F 08162870877 FIRST STEP agatha oga Il agmail com Agl. Owalivinus242@gmarcon 6 DWA LIVINUS 08035047019 FIRET STEP WDC

Name: AUGUSTINE AUGINSTINE Date: 18,7724

Kindly note that signing this attendance sheet implies that you have given NEPWHAN the consent to use action pictures taken during this activity for reporting.

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Venu	e of Activity PHe	2, ANGWAR	Lo	KO GAR	AKU			
s/N	SURNAME (in capital)	FIRST NAME (in capital)	SEX (M/F)	PHONE No	ORGANIZATION	DESIGNATION	E-MAIL	S
DA	DWA	LIVINUS	m	D8035047019	FIRST STEP	MDC	ONALWING242EGMENTE	m
2	ANTHONY	AGATHA JIMMA	F	08162870877	FIRST SHP	COM REP	agatha ogall@gnalce frstpproferent Egmel com)#1 ^{<}
3	ATUBA	AUGUSTINE	M	08036348824	FIRST 574	Po	Egnel com	
4	Damisa y.	Victoria	+	07068252183	PHCZ Garaky	Olc		F
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Venue	SURNAME (in capital)	FIRST NAME (in capital)	SEX	PHONE No	ORGANIZATION	DESIGNATION	E-MAIL	SIGNAT
1	James 1.		F	07068252183	PHCZ Gark	010		their
2	AMTHONY	AGATHA JIMMA	f	08162870877	FIRST STEP	COM REP	agathaoga II agmail. com	1 Ac
3	DIMA	LIVINUS	m	08035047619	FIRST STEP	PO	owalismuszazagmun hostephasavana ognat.com	A A
4	ATURA	Aller Tente	M	0803634882	STEP	70	agnation.	10
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	FIRST STEP ACTION											
	NEPWHAN/GF/NTBLCP/NACA/RSSH/C19RM GRANTS ATTENDANCE SHEET DATE 25 67 2024											
	Activity: ON DUCTED CE Program Area: HEALTH Level of Activity: ONGOIN G Type of Funding											
	Venue of Activity PHC 2, AN GWAN LOKO, GARAGU											
	S/N	SURNAME (in capital)	FIRST NAME (in capital)	SEX (M/F)	PHONE No	ORGANIZATION	DESIGNATION	E-MAIL	SIGN			
	1	OWA	LIJINUS	M	0823047019	FIRST SPEP	MAC	ONG WINUS242 Egymande				
	2	ANTHONY	AGATHA JIMMA	f	08162870877	FIRST STEP	COM REP	agatha oga Il agmail Cor	nA-			
	3	Damisa y.	Victoria	F	07068252183	PHC2 Garale	4 010	histepnesarews@	#			
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Compiled By: Reviewed & Approved by:

Augustine Ayuba Patience Ene Ogbiloja

Designation: Program Officer Designation: ED

Signature:

Date: 26nd June, 2024 Date: 26nd June, 2024

Signature: