

Quarterly Monitoring Visit report

Background information

Project name:	Kogi NTDs Control Programme
Project number:	44007
Partner:	Kogi State Ministry of Health
District / province:	
Report author(s):	Amanyi Juliana
Date of report:	10 th June 2016

Visit details

Date of visit:	30 th May - 9 th of June 2016
Names and positions of Sightsavers staff present:	<ul style="list-style-type: none"> • Amanyi Juliana – Programme Officer
Names and positions of partner staff present:	<ul style="list-style-type: none"> • Director, Public Health • State NTDs Coordinator • State NTD team members • 6 Local Government Area (LGA) NTD Coordinators and Assistant Coordinators
Did visit include a field trip? <i>(delete as applicable)</i>	YES
If YES, please give field location(s) visited:	Kogi, Okehi, Adavi and Ijumu LGAs

Visit objectives

(NB: please insert any specific additional objectives as necessary)

- Conduct mop-up training for Kogi, Okehi, Adavi and Ijumu LGAs.
- To monitor treatment in LGAs where treatment is still ongoing.
- To commence collection of treatment reports.
- To verify compliance on use of drug inventory for drug accountability (allocation and return of balances).

SECTION 1: Progress against actions from last monitoring visit:

Action(s) from last meeting <i>(insert extra lines if necessary)</i>	Completed? (Y/N)	Comments
1. Train 1,500 school teachers	Y	1,511 teachers were trained. This is because more than two teachers were trained in some schools based on the school enrolment.
2. Train 150 health supervisors	Y	150 health supervisors were trained to supervise the treatment of school aged children to protect them from Schisto and STH
3. Commence treatment for school aged children	Y	MAM for school aged children commenced across 15 targeted LGAs.

SECTION 2: Progress against planned activities

2.1. According to your detailed review of the **project workplan**, is progress against planned activities Green, Amber or Red, according to the definitions below? (tick one)

GREEN <i>(Progress is where it should be, and we have completed all the activities scheduled to date)</i>	AMBER <i>(We have had some challenges but activities scheduled to date are at least 75-80% complete)</i>	RED <i>(We have had major obstacles. Many of the scheduled activities are less than 75% complete.)</i>
✓		

2.2. What are the main points of interest? If/where progress on activities is behind schedule, what are the reasons behind it and what mitigating actions will you take?

The training of teachers for school based treatment commenced in Kogi State on the 16th of May, 2016. While the training was completed in some LGAs, the turn out in four LGAs (Kogi, Okehi, Adavi and Ijumu) was poor due to the ongoing civil servants' screening exercise in the state. Thus, it became necessary to conduct a mop up training in these LGAs, monitor ongoing treatment and commence collection of treatment reports.

The mop up training for Kogi LGA took place in two centres on the 31st of May 2016 while that of Adavi, Okehi and Ijumu was conducted on the 1st and 2nd of June 2016. High turnout was recorded for the mop up training in each of the three LGAs this is due to improved awareness in these LGAs.

SECTION 3: Progress against planned outputs

3.1. According to your detailed review of project **output statistics**, is progress against planned outputs Green, Amber or Red, according to the definitions below? (tick one)

GREEN <i>(Project outputs are on track and by the end of the year should be on or above the targets set.)</i>	AMBER <i>(Project outputs are slightly off track but by the end of the year will be at least 75-80% of target)</i>	RED <i>(Project outputs are significantly off track, and may be seriously off target by the end of the year.)</i>
✓		

3.2. What are the main points of interest? If/where progress on outputs is behind schedule, what are the reasons behind it and what mitigating actions will you take?

- Achieving the training target – The project targeted to train 1,500 teachers. Tentatively, 1,511 teachers have been trained. This number will likely increase when the mop up trainings in 4 LGAs are completed.
- Uptake of medicines and compliance to treatment – In previous years, the rate of refusal was high due to low awareness and fear of adverse effects of medicines. Consequently, sensitization was improved using different means (Printing and distributing IEC, radio jingles, print media and announcements in places of worship).

This increased awareness and greatly reduced refusal in the ongoing treatment.

SECTION 4: Progress against planned expenditure

4.1. According to your detailed review of the **project budget**, is expenditure Green, Amber or Red, according to the definitions below? (tick one)

GREEN <i>(Expenditure is on track and within +/- 10% of planned levels for this point at the year.)</i>	AMBER <i>(Expenditure is slightly off track but by the end of the year will be within +/- 10% of planned levels)</i>	RED <i>(Expenditure is significantly off track, and by the end of the year will be over +/- 10% of plan.)</i>
✓		

4.2. What are the main points of interest? If/where overspend or underspend has occurred, what are the reasons behind it and what mitigating actions will you take?

Expenditure is going according to plan and a new project accountant has been posted to the project. This accountant will require training. Plans are in place to invite him to NCO for training.

SECTION 5: Field trip details

At least one monitoring visit per year should include a trip into the field. If this particular visit included such a trip, please give details of any key observations or findings below:

Monitoring was done in Ajaokuta and Adavi LGAs where treatment is still ongoing. So far, there is no report of any adverse effects of medicines and this is due to improved awareness on eating before taking the medicines.

Tentatively, a total number of 1,511 teachers were trained across 15 LGAs with either one or two representatives from each school depending on the school enrolment. The trained teachers are expected to do stepdown training for other teachers that will participate in treating the pupils.

Some schools have completed treatments and submission of reports have commenced.

SECTION 6: Other notes

Include details of any else of importance that was discussed. This might include progress against outcomes (if observable), details of any qualitative discussions, a review of audit action points or progress on activities related to partner capacity building.

Action points

- Collection of treatment report from LGAs Education Desk Officers.
- Data entry and mop up treatment (if need be).

SECTION 7: Agreed actions

List any actions agreed at the visit, together with details of who is responsible for delivering it and the timeframe for completion (insert extra lines if necessary).

Issue identified	Proposed action	Who responsible	Deadline
Proper drug inventory	Teachers, LGA coordinators and Health Supervisors to account properly for medicines supplied to them for treatment	State Pharmacist, LGA Coordinators, Teachers and Health Supervisors	4 th week of June
Proper completion of school/community summary form	Health workers to support teachers in proper completion of school/community summary form	Frontline health workers	4 th week of June

SECTION 8: Key attachments

Please attach and file the following documents with this report:

Document	Attached? (tick once complete)
Output statistics / monitoring framework	
Training report	✓
Work plan review	
Budget review	
Case study (optional - but please attach if you have one)	

Signed and agreed by:
Juliana Amanyi

Signed and agreed by:
State NTD Coordinator

(Sightsavers)

(Partner)

Date: 10th June 2016

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