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The Ministry of Medical Services

ORAL REHYDRATION THERAPY CORNER OPERATIONAL GUIDELINES

Orientation Package for Health Workers

January 2013





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Foreword

Diarrhoeal disease is among the second commonest cause of mortality in children under five years, with a prevalence of 16.6% (KDHS, ICF Macro 2008-2009). The stagnation of its prevalence over the last few years and the decline in the functionality of oral rehydration therapy corners, has led to many children missing out on quality life saving oral rehydration therapy. The declining quality management of children with diarrhoea is demonstrated from the recent health service provision assessment (IMCI HFS, 2010), which showed that only 36% of sick children consulting health care providers are assessed for 3 main symptoms of fever, diarrhoea and cough or difficulty in breathing and that only 14% are assessed for all general danger signs, yet diarrhoea, fever and cough and /or difficulty in breathing form the main reasons for sick child consults.

The observed gaps include inadequate knowledge and quality management of diarrhoeal disease, re allocation of the ORT Corner space, and declining focus on delivery of diarrhoea preventive and treatment interventions through functional ORT Corner. The ORT Corner Operational Guidelines and Health Workers Orientation Package aims at improving the quality of diarrhoea in Kenya.

The expected outputs of this guideline will be reduced mortality from severe dehydration caused by diarrhoea in children, which will contribute to the country achieving the target of Millennium Development Goal (MDG) 4, as an outcome. Secondly, it is also envisioned that implementation of these operational guidelines will result in the scale up of sustainable and functional ORT Corners, in each and every facility, at all levels of health care.



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The overall goal is to contribute towards “reducing the health inequalities and reversing the downward trends in health related outcome and impact indicators”, as per the National Health Sector strategic Plan (NHSSPII-2005-2010). The guiding principle in the operational guideline is the use of the WHO adapted IMCI protocols (WHO, 1997) in the management of the sick child with diarrhoea, and the integration of the key child health services during the consult at the service delivery point. Strengthening all components of a functional ORT Corner are critical to reduction of child morbidity and mortality. The Ministry of Public Health and Sanitation is committed to the challenge of reducing mortalities due to diarrhoeal disease.

I therefore call upon all development partners and stakeholders in child survival programmes to allocate resources for scale up of functional ORT Corners in all health facilities (100% coverage), as per the guidelines, and also invest in the qualitative aspects of monitoring and evaluation (M&E) of the management of the sick child with diarrhoea.

I believe that these guidelines will go a long way to serve all children irrespective of the health care level, and therefore ensure that all children under five years live to their full development.

A handwritten signature in black ink, appearing to read 'Annah Wamae', with a long horizontal line extending to the right.

Dr Annah Wamae, OGW

Head, Department of Family Health
Ministry of Public Health & Sanitation



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Acknowledgements

The Oral rehydration therapy (ORT) corner operational guidelines are a product of efforts from several partners and stakeholders. The Ministry of Public Health and Sanitation (MOPHS) through the Division of Child and Adolescent Health (DCAH) wishes to appreciate the support from all those who participated in its development. This orientation package brings out the key highlights of the guidelines, for ease of understanding by the healthcare worker.

The contribution of the following organizations and institutions is highly appreciated:

Child Health ICC members.

Department of Family Health- Division of Child and Adolescent Health, Department of Health Promotion, Division of Nutrition and Division of Vaccines & Immunization.

Department of Environmental Health

USAID

MCHIP

PATH

PSI

CHAI Kenya.

Micronutrient Initiative.

WHO-KCO.

UNICEF-KCO

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Abbreviations

ACRONYM	Full Name/Meaning
AOP	Annual Operational Plan
CSD	Child Survival & Development
CMEs	Continuing Medical Education
DCAH	Division of Child and Adolescent Health
DD	Diarrhoeal disease
HSSF	Health Sector Services Fund
IEC	Information, Education & Communication
MUAC	Mid Upper arm circumference
M&E	Monitoring and Evaluation
Min.	Minimum
OJT	On Job Training
ORS	Oral Rehydration Solution
QIP	Quarterly Implementation Plan
Qty	Quantity
Zn	Zinc Tablets



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Outline / Layout

- Overview of the Guideline: Goal, Objectives, Link between Child Survival Strategy, Diarrhoea Policy Guidelines & ORT Corner Operational Guidelines
- Definition, Components & Functions of an ORT Corner
- Diarrhoea Management in the Sick Child
- Roles of the Healthcare worker
- Checklists – Equipment, Supplies, Commodities and IEC Materials
- Human Resource for ORT Corner
- Monitoring & Evaluation highlights



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Goal of the ORT Corner operational Guidelines

Goal:

To enhance child survival and development of children aged less than five years through prevention and control of diarrhoeal disease.



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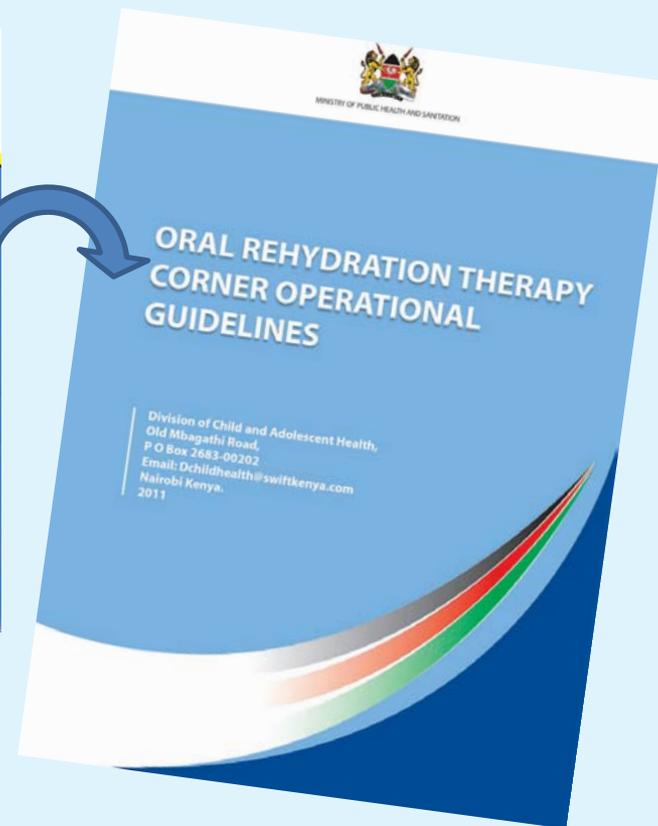
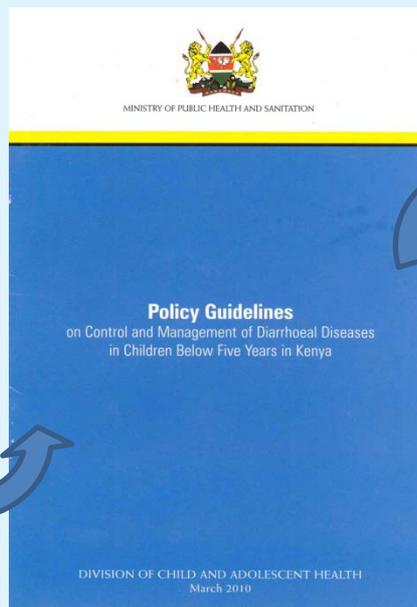
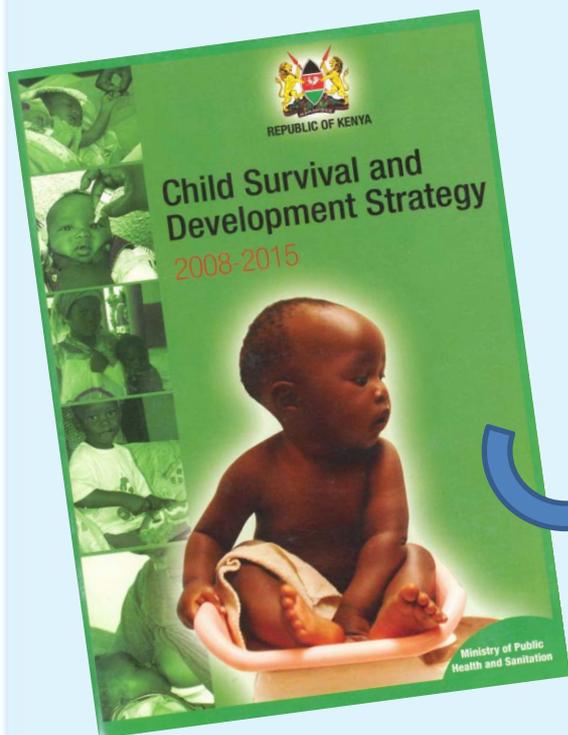
Objectives of the ORT Guidelines

1. To reduce the morbidity and mortality in children aged <5 years due to diarrhoea disease as per the diarrhoea policy guideline recommendations (DCAH, 2010).
2. To scale up evidence based quality & standard operating practices for diarrhoea disease management, alongside other IMCI illnesses at ORT Corners.
3. To define the minimum package of equipment, commodity and supplies for a functional ORT Corner.
4. To strengthen and institutionalize Monitoring & Evaluation of diarrhoeal disease activities in Health Facilities in Kenya.



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Link Between Child Survival & Development Strategy, Diarrhoea Policy Guidelines & ORT Corner Operational Guidelines





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What is an ORT corner

This is a designated area or space within a health facility where children with diarrhoea disease are assessed, classified, treated and counseled.

Location: Within main entry points for children in a health facility -MCH, OPD & the Ward.



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Components of an ORT Corner

- Space-Location
- Equipment, Commodities & Supplies
- Communication/messaging,
- IEC Materials- Algorithms, BCC Materials
- Human resource
- Monitoring & Evaluation- Tools/Registers.
- The Client & Care giver



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Functions of the ORT corner -Treatment

1. Assessment & classification of children with diarrhoea .
2. Oral rehydration therapy with Low osmolar ORS
3. Administration of first dose of Zinc tablets (20mg or 10mg)
4. Administration of Vitamin A (200,000/100,000IU)
5. Counseling on continued diarrhoea treatment of the child at home



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Functions of the ORT corner-Prevention

- ❑ Counseling on Hygiene & Sanitation measures - Hand Washing at 4 critical times:-
 1. After using the toilet
 2. Before preparing food for the baby
 3. Before feeding the baby
 4. After changing the baby and properly disposing off its feaces
- ❑ Counseling on Safe Water for disease prevention:
 1. Safe Water treatment (e.g. Boiling) & Storage)
 2. Personal & Environmental hygiene



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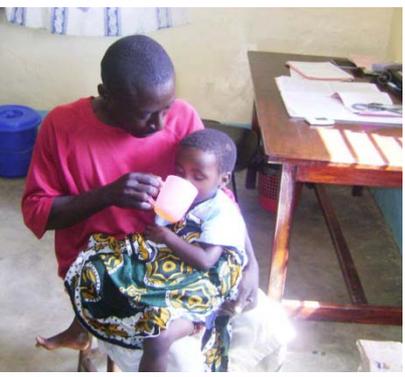


Functions of the ORT corner– Other functions

1. Demonstrations of:
 - Hand Washing
 - Low Osmolar ORS mixing and giving,
 - Correct amount and dosage schedule of Zinc.
2. Provision of other services: Immunization, HIV counseling and testing, Infant and young child nutrition, Growth monitoring & Disease surveillance.
3. Documentation of activities using the ORT monitoring tools.
4. Strengthening facility and community linkages through CHEWs and CHWs.



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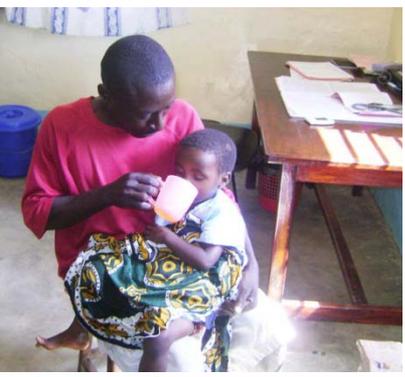


Roles of the Health care giver (1)

1. Ensuring availability of ORT Corner commodities, supplies and data tools; e.g. use the AOPs, HSSF & QIP to budget for these.
2. Collection, analysis and timely submission of diarrhoea disease data & facility reports.
3. Promotion of disease surveillance
4. Maintenance of the ORT corner equipment's.
5. Ensure correct sick child management
6. Counsel mother on when to return (Danger signs)



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Roles of the Health care giver (2)

7. Correct sick child management (Assess, Classify & Treat).
8. Counsel on the Four (4) rules of Home treatment:
 - Give extra fluids-ORS & recommended home fluids.
 - Give extra feeds during & after diarrhoea, and extra exclusive breast feeding if age<6months.
 - Give Zinc tablets as per the HCWs instructions
 - When to return if no improvement (Danger Signs)



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Roles of the Health care giver (3)

9. To explain the following danger signs to return Child immediately:

- lethargic
- develops a convulsion
- becomes unconscious
- drinking poorly
- vomits everything & not able to feed
- Blood in stool



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Standard ORT Corner Equipment

Item	Item
Buckets for storing cups and spoons	Infection prevention buckets with lids (No.3-disinfecting, 1 st rinse, final rinse)
At least 2 clear plastic jugs-Calibrated	At least 6 Cups, 50ml-100ml, 100-200ml-Calibrated
Comfortable chairs/bench/seats for clients	Hand washing facility with tap
At least spoons- teaspoons and stirring spoons	Safe water source & storage containers (at least 40 litres-2No. 20 litre Jerricans)
Sufurias (14 inch) with lid	Table for mixing ORS
Timing device or wall clock	Wash Basin
Waste bucket	Water heating equipment
Locally available demonstrative measuring materials- e.g. local measuring tins	Weighing Scale



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Standard ORT Corner Commodities & Supplies

Item	Item
Chlorine for disinfection	Soap for hand washing
Low Osmolarity ORS Sachets	Safe, clean water
Zinc Tablets, 20mg	Thermometers
Vitamin A (200,000; 100,000IU caps)	Diarrhoea wall charts
Ciprofloxacin, Metronidazole, Erythromycin and Chloramphenicol for Dysentery, Amoeba and Cholera	Mother Child Health booklets
IMCI chart booklet	Assessment forms and ORT Registers
MUAC Tapes	IEC posters for diarrhea disease



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Standard ORT Corner Commodities & Supplies

#	Item/Equipment checklist.	Min. Qty
1.	Tea spoons	12
2.	Table spoons	12
3.	Stirring spoon	1
4.	Plastic buckets (with lids for infection prevention)	3
5.	Buckets – for storing cups, spoons,	2
6.	Small plastic cups (50-100ml & 100-200ml)	12
7.	1 litre Calibrated measuring jars	2
8.	Table Trays	2
9.	Wash Basins	2
10.	Water heating equipment,(e.g..hot plate/Meko)	1



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Standard ORT Corner Commodities & Supplies

#	Item/Equipment checklist.	Min. Qty
11.	Sufurias with a Lid (14 inch),	1
12.	Waste Basket	1
13.	Wall Clock	1
14.	Table- for mixing ORS	1
15.	Benches/chair(s),	6
16.	Water Storage Container (at least 40lts)- With Tap	1
17.	Locally available measuring containers – e.g. cooking fat Tins.	2
18.	Weighing scale	1
19.	Hand Washing Facility/Point e.g. tippy taps and new technologies.	1
20.	Safe water source	1



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IEC Materials

For the Care giver

IEC Materials on:

1. Diarrhoeal disease treatment
 - ORT (ORS and other fluids) and Zinc.
 - Vitamin A.
 - Nutrition/Feeding recommendations
2. Key preventive messages on:
 - Vaccination (Rotavirus and measles)
 - Hand washing with soap
 - Personal hygiene and Sanitation
 - Use of Safe water at Home
 - Extra Feeding (Exclusive Breastfeeding for age < 6 months) & age > 6 months.

For Health Worker

1. Diarrhoea management Job Aid for:-
 - Assessment
 - Classification
 - Treatment
 - Counseling
2. ORT Corner operational guidelines.
3. IMCI Chart Booklet.



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Signs, Classification & Treatment of Diarrhoea

SIGNS OF DIARRHOEA	CLASSIFICATION	TREATMENT PLAN
<p>Two or more of the following Signs:</p> <ul style="list-style-type: none"><input type="checkbox"/> Lethargic or unconscious<input type="checkbox"/> Sunken eyes<input type="checkbox"/> Not able to drink; or drinking poorly<input type="checkbox"/> Skin pinch goes back very slowly	SEVERE DEHYDRATION	PLAN C
<p>Two or more of the following Signs:</p> <ul style="list-style-type: none"><input type="checkbox"/> Restlessness, irritable<input type="checkbox"/> Sunken eyes<input type="checkbox"/> Drinks eagerly, thirsty<input type="checkbox"/> Skin pinch goes back very slowly	SOME DEHYDRATION	PLAN B
<ul style="list-style-type: none"><input type="checkbox"/> No signs to classify as some or severe dehydration	NO DEHYDRATION	PLAN A



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Human Resource Capacity for ORT Corners

Health care workers who have appropriate knowledge and skills for effective sick child case management, including: on assessment, classification, treatment, referral, service linkages and counseling.



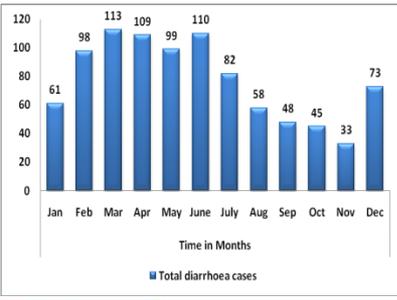
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ORT Corner M&E tools Checklist at facility

1. The ORT Register
2. ORT data summary sheet
3. Supervision checklist
4. Graphical display of monthly cases of diarrhoea and classifications
5. ORT Corner guidelines & M&E document
6. Sick Child recording forms
7. MOH CHW referral & counter referral forms



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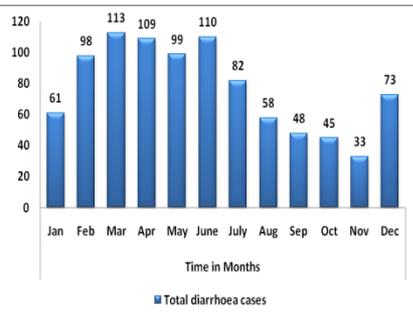


ORT Corner M&E – Key Highlights (1)

1. Perform monthly reviews of diarrhoea disease data.
2. Display diarrhoea cases, classifications & treatment plans on charts/graphs (e.g. on simple manila paper).
3. Fill the ORT Register completely & correctly.
4. Use IMCI guidelines to assess, classify and treat sick children with diarrhoea disease and other illnesses.



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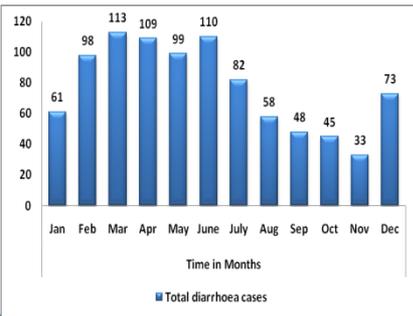
ORT Corner M&E – Key Highlights (2)

5. Identify facility challenges/gaps and document solutions in implementable action plans.
6. Supervision using a checklist is done at acceptable intervals and results used to effect change.
5. HMTs & DHMTs to use OJT, CMEs and mentorship to learn about diarrhoea disease & its management.

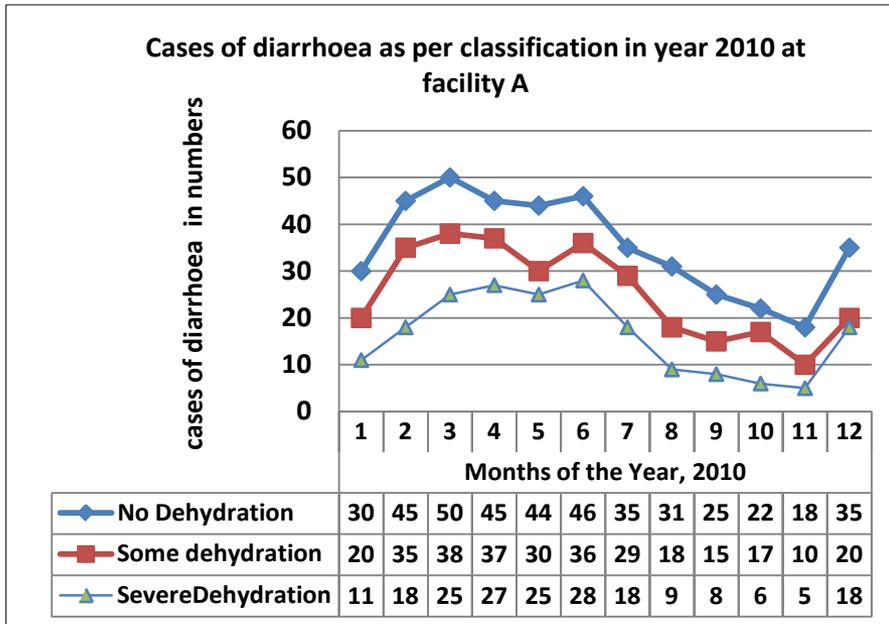


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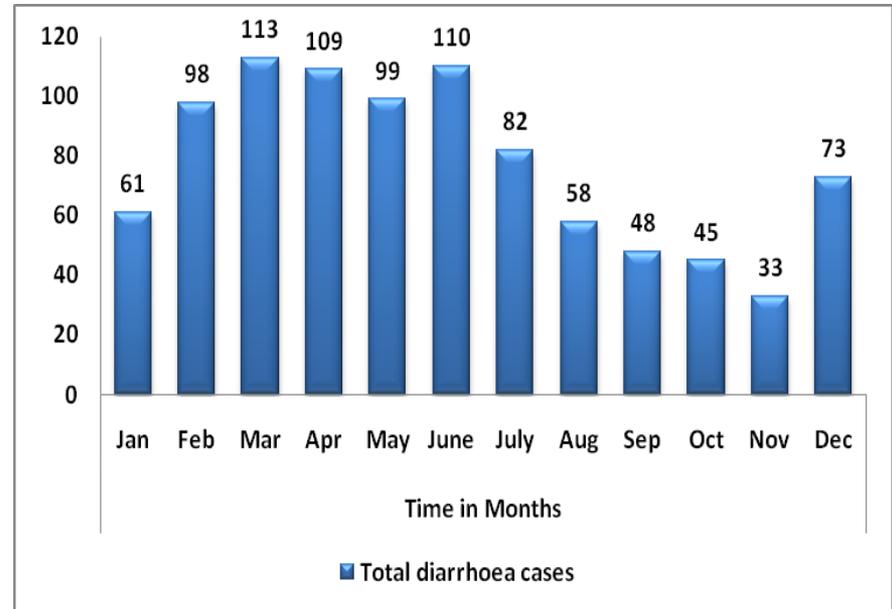
ORT Corner M&E – Key Highlights (3)



Line Graph representation of the ORT Data

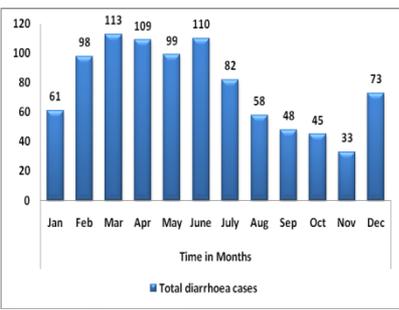


Bar graph representation of ORT data





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