



USAID/Food By Prescription



Update

Oct-Dec., 2013

Annual Meeting Highlights Completing Institutionalization & Transfer of NACS to Government

Annual Planning and Performance Review meeting emphasized year five's USAID/Food by Prescription main task as completing institutionalization and transfer of oversight for Nutritional Assessment, Counseling and Support (NACS) of HIV care and support services to the government of Ethiopia.

The project goal of the final year would be to strengthen national capacity to plan and manage integration of NACS in HIV services, said Abdulaziz Ali (Dr.) Chief of Party of USAID/ FBP during the meeting. The transition readiness assessments started in year 4 would be used by the government and USAID/FBP to address gaps identified and any program bottlenecks that would significantly hamper transition.



USAID/FBP staff during the Annual Planning & Review Meeting

He said staff need to increase their commitment to meet the year five project objectives of continued provision of technical assistance for 500 health facilities to maintain quality of NACS service, national ownership of NACS implementation, documentation of best practice and identification of future technical assistance needs.

Each regional team discussed in detail on the plan for year 5 in accordance with the overall objectives of the project and the context of the respective regions. Annual Planning and Performance Review meeting held in Hawassa between 21 and 24 October 2013 reviewed the performance of year 4 and the progress made to achieve the project objectives. It was also a platform for regions to share their best practices in the project implementation.

Second Phase Readiness Assessment of Facilities Conducted in all Regions

The second phase of readiness assessment of facilities was conducted in all seven USAID/FBP's operational regions at the end of the first quarter, 2013.

Transitioning of mature health facilities to the government is one of the most important deliverables of USAID/FBP in year five. It is imperative to closely follow the progress that has been made so far in improving performance and achieving set objectives of the project.

Earlier, pre-readiness assessment were conducted to identify the existing gaps of health facilities providing NACS. It also helped to take action to fill gaps accordingly and make health facilities ready for the final readiness assessment. Thorough discussion was held by the team before setting out for assessment to have the same understanding on each indicator. The assessment was conducted in 159 facilities through the tool developed for same purpose. After finalizing assessment of each facility, feedback session was held in each assessed facility on the results of the assessment with the head of the facility and NACS focal person.

Exemplary Quality Improvement in Debremarkos Health Center

Continuous Quality Improvement (CQI) principle implemented in Dermarkos Health Center has improved the outcome of Nutritional Assessment, Counseling and Support (NACS) for people admitted for treatment of severe and moderate malnutrition. Following provision of relevant training on NACS, a team charged with initiating and directing the principle were drawn from Multi Disciplinary Team (MDT) and staff working in the ART unit. Problems impeding the overall performance of NACS were identified using the data available. The main problems outlined included:



From left: Mulugojam Sheshu ART nurse, Simachew Aemiro NACS focal person, Mastewal Muluneh and Birehane Admasu Case Managers

- Minimal number of severely and moderately malnourished PLHIV having followed the plumpy'nut/plumpy sup treatment and brought about desired weight gain
- Increased number of PLHIV on plumpy'nut/plumpy sup treatment failed to follow up this treatment.
- Incomplete registration of beneficiaries admitted for treatment

The team then devised a viable strategy to address the problems identified, according to Simachew Aemero ,NACS focal person of the facility. These were:

- Strong counseling on plumpy'nut /plumpy sup and components of nutrients and how it help to recover malnourishment
- Recounting plumpy'nut /plumpy sup sachets consumed as evidence of consumption by patients when they come for follow up visit
- Different color card attached to the patient history card with unique NACS number for beneficiaries enrolled for malnourishment treatment
- Brining the issues of NACS in the regular MDT meeting

After six months, significant changes were observed enabling the facility to double the graduation rate and reduce non respondent and lost to follow up rate.

Indicator	Status Before QI (Jan-March 2013)	Result after QI April-Sept 2013
Graduation Rate	42%	87.2%
Non Respondent	14.5%	4%
Lost to Follow up	34%	0
Data Record Quality	Less than 65 complete	100% complete

Simachew said “As QI has been bearing fruit in bringing impact on the adult ART unit of NACS, we are in the process of implementing in the pediatric unit. The management of the facility is also envisaging to further scale it up to improve its overall services”.

Facility Transition in Addis Ababa

After readiness assessments and supervisory visits by USAID/FBP staff with involvement of relevant government health office representatives, a transition workshop was organized for mature facility in Addis Ababa Region to give emphasis to the government's ownership of NACS implementation.

Thirteen facilities were found to be mature from 21 facilities assessed in Addis Ababa region during the first quarter and USAID/FBP formally transferred the technical support it has been providing on Dec.13,2013.



USAID/FBP has been building institutional capacity at different levels of the health care delivery system to integrate NACS into the RHB/ sub city and woreda office and health facility level annual work plan. It has been implementing supportive supervision strategy as well as strengthening commodities and logistics management at the regional and facility level. It has been supporting the effort underway to maintaining commodity abuse surveillance and instituting the linkage between facility and community for required support of beneficiaries not to relapse to malnutrition.

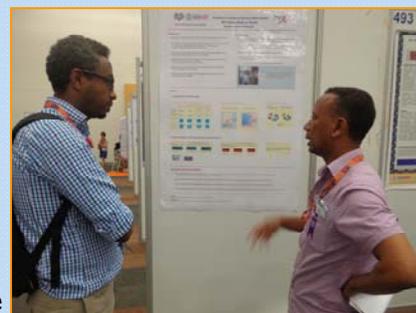
Representative of the health bureau reiterated at the occasion that NACS would be handled fully by the government to strengthening its integration into health facilities HIV/AIDS care and support program. The transition workshop were attended by representatives of regional health bureau and health offices of sub cities and woredas as well as heads and NACS focal persons of all the 21 assessed facilities .

Study on Outcome of Nutritional Progress of Malnourished PLHIV at the 17th ICASA

USAID/Food by Prescription presented findings on Nutritional Progress of Severely Malnourished HIV Positive Adults on Clinical Nutrition Care In Ethiopia at the 17th ICASA 2013, held in Cape Town 7-11 December 2013.

The presentation which was summarized in poster format for the international event dwelt on how adult PLHIVs with severe malnutrition respond to different nutrition supports.

Dr Yared Abebe Senior Nutrition Advisor for USAID/FBP, highlighted the outcome of treatment with RUTF for severely malnourished adults, showing that there has been improvement of nutritional status as evidenced by change in average weight and Body Mass Index as well as change in nutritional status among others.



“Clients enrolled with *higher* BMI tend to have higher BMI on subsequent visits- hence, early diagnosis and management of malnutrition will make the care more effective”, according to the study. Positive feedback was collected from spectators in hundreds and further explanations were given on the results of study during the exhibition.

Save the Children staff attending ICASA conference from Africa Region also convened a Pre- ICASA meeting. The meeting was aimed at developing a regional learning agenda around HIV prevention and treatment among children, adolescents and young people by identifying areas of priority. It also reviewed novel and evidence based approaches to HIV prevention, care and treatment.

Few Questions to Molla Belay

USAID/Food by Prescription has been providing technical support with the objective of integrating Nutritional Assessment and Counseling Support (NACS) into government's HIV/AIDS prevention and care system. Amhara region is one of the six regions where the program is implementing this support in 125 health facilities. USAID/FBP facilitated training as well as training of trainers to meet the objective of delivering and maintaining quality of NACS in sustainable manner. Molla Belay, Human Resource for Health Management Officer with Health Bureau of Amhara Regional State answered a few questions related to training.

When did you take Training of Trainers (TOT) in NACS ?

It was in October 2012 when I was working as manager in Debre Tabor Hospital.

How many times have you provided training ?

I have rendered NACS and QI training five times organized in Bahirdar and Gonder.

How do you position the effort of USAID/FBP in building capacity of health professionals in providing NACS ?

NACS has been internalized by staff in units of the health facilities where NACS is provided. The training in Quality Improvement (QI) has also brought significant change becoming a model for other health service deliveries. For instance, we shared the excellences of QI to Addis Ababa region.

What should be the way forward ?

It is not feasible to conduct training often times and thus onsite training is ideal as there is experiences of higher turnover and transfer of the already trained staff. QI need to be also upheld and lead by top management of the facility not only for NACS but also for disease prevention and improve quality of overall services of health facilities. The region need to also continually monitor capacity of staff. It is paramount importance to evaluate and recognize best performers to increase commitment.



Corporate Social Responsibility in Helping Tackle Economic Problem of PLHIV

Private/public partnership workshop was held in Addis Ababa to encourage private organizations so that they will engage in helping create different economic strengthening opportunities for recovering malnourished adults and People Living with HIV. The USAID/Food By Prescription Program is involving Implementing Partners (IPs), in this case, Hiwot Integrated Development Association (HIDA), a local NGO, to identify enthusiastic private sector partners and facilitate the process of getting people Back to Work in Addis Ababa.

HIDA, convened various private sector representatives from a range of different areas in an attempt to work in collaboration and to see beneficiaries, people living with HIV/AIDS (PLHIV), being provided with realistic employment opportunities. The workshop, the major aim of which is to introduce the concept of Back to Work initiative and getting pledges from the private sector representatives to work in collaboration and help USAID/FBP beneficiaries receive support in the form of direct employment and other support.

The issue of corporate social responsibility in helping tackle the economic problem of disadvantaged groups like PLHIV, OVC and People with TB that are being supported by USAID/FBP was discussed at length. It was noted during the discussion that materializing corporate social responsibilities goes beyond compliance and engages in actions that appear to further some social good, beyond the interests of the firm and that which may even not be required by law. Participants from numerous private sector organizations have afterwards pledged their allegiance and appreciated the initiative.

In similar development, implementing partners linked about 234 PLHIV who underwent nutritional treatment and recovered from malnutrition to job opportunities created by private and public enterprises during the ended quarter. Some 90 beneficiaries also secured scholarship for skill training and to attend formal education.

The contents of this "Update" is the responsibility of FBP and do not necessarily reflect the views of USAID or the United States Government.