

Quality Community Home Care: Empowering Communities through Essential Supplies

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Presentation Outline

Background

Problem statement

Methodology

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What surprised us?

Way forward



Namibian Context

In Namibia, home-based care (HBC) is an integral part of community-based health care (CBHC) with the following objectives:

- To empower communities to increase awareness and knowledge and improve attitudes and practices related to the prevention, treatment, care (including both curative and palliative) and rehabilitation of most common diseases
- To set standards for CBHC to ensure the effective implementation of quality programs

Guiding documents:

- CBHC Policy 2008
- CBHC Standards 2009



Problem Statement

The Namibia Ministry of Health and Social Services (MOHSS) was concerned that Community Home Based Care (CHBC) kits were not:

- Reaching families and community health care providers to provide health education, counseling, and quality care at home
- Providing the chronically ill and people with HIV/AIDS:

- Basic nursing care
- Personal hygiene
- Wound care
- Micronutrients
- Pain relief



CHBC kits are a critical component of a comprehensive care and treatment program

Namibia's Ministry of Health and Social Services (MoHSS), with technical and financial support from Supply Chain Management System (SCMS), conducted a situational analysis of the logistics management system for CHBC kit supply



Methodology

- Conducted April-May 2008, included 116 respondents and all 13 regions of Namibia
- Respondents selected through a combination of targeted, purposive and systematic sampling including:
 - Non-governmental organizations (NGOs)
 - Community-based organizations (CBOs)
 - Faith-based organizations (FBOs)
 - Community health care providers
 - Doctors and clinic nurses
 - Pharmacy and stores personnel



The assessment revealed a largely unplanned system

- ❑ Storage and inventory control procedures
 - 87% of respondents reported random receipt and distribution
 - Stockouts were frequent and imbalances irregularly monitored
 - Storage areas insufficient
 - Written guidelines lacking for storage
 - One in three respondents encountered expired products in kits
- ❑ Monitoring and supervision
 - Imbalances irregularly monitored
 - Storage areas insufficient
 - Written guidelines lacking for supervision



The assessment revealed a largely unplanned system, cont.

- ❑ Transportation and distribution
 - Most respondents did not have documented distribution schedules or means of transport to convey kits to service delivery points
 - Two in three recipients received kits without packing lists
 - Namibia's large size and low population density are a challenge
- ❑ Information systems
 - No standardized reporting system
 - No use of data for decision-making



What surprised us?

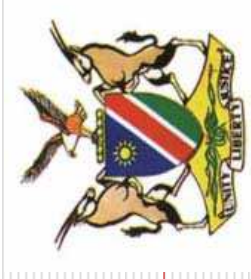
Non-logistics issues needed to be taken into account:

- ❑ Some community structures not functional
- ❑ Inadequate integrated support supervision
- ❑ Weak referral system
- ❑ Sustainability of health care providers
- ❑ Strong demand for incentives for CBHC providers



Conclusion

Based on these results, the MoHSS endorsed a logistics system redesign to ensure kits are continuously available for CHBC providers and integrated into the overall pharmaceutical and logistics supply system



Recommendations

To ensure reliable supply of health care products, programs **must incorporate a strong logistics system** that:

- Makes sure to take into account non-logistics issues, particularly integrated supportive supervision at all levels
- Formalizes a method for refilling supplies from health-care and other facilities that provide services



Thank you!

Questions?

