Output 2

- Health systems strengthened in Nyanza Province to support delivery of Kenya Essential Package for Health (KEPH), especially the maternal and neonatal health component.
Referral System Strengthened in Target Districts

• Where facility-based birth is low, a referral system is essential, including:
  – Referral from Health Center to Hospital
  – Referral from Community to Health Center or Hospital

• EHS interventions included:
  – Mobile phones for EHS supported health facilities
  – Purchase of motor ambulances to be placed at hospitals STILL NEED
  – Purchase of 1 boat (to access island communities)
  – Purchase of 5 motorcycle ambulances to be placed at Health Centers

• Target: 10 Community-based Emergency Referral systems functioning by 2011
Referral strengthened

- Mobile phones to 23 of 25 EHS supported facilities
  - Only one not functional at Endline
- Motor ambulances
- 1 Boat (for island communities)
- 5 Motorcycle ambulances
  - Required training of 2 local riders (often casual employees at Health Center)
  - Training of mechanic
  - Logistically complicated intervention
  - Disproportionate focus on motorcycles in this evaluation
### Emergency cases referred to the referral hospital during the past year (January – December 2010)

<table>
<thead>
<tr>
<th>Health facilities: Magunga, Ndiru, Pala HC</th>
<th>Obstetric cases</th>
<th>Other cases</th>
<th>By MCA</th>
<th>Total</th>
<th>By MCA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total:</td>
<td>34</td>
<td>9</td>
<td>No data</td>
<td>19</td>
<td></td>
</tr>
</tbody>
</table>

### Recorded patients transported by motorcycle ambulance (MCA) from the community during the past year (January – December 2010)

<table>
<thead>
<tr>
<th>Health facilities: Magunga, Ndiru, Pala HC</th>
<th>Obstetric cases</th>
<th>Other cases</th>
<th>Not specified</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total:</td>
<td>9</td>
<td>6</td>
<td>0</td>
<td>15</td>
</tr>
</tbody>
</table>

How to judge? 
And had they not been transported?
Lessons Learnt regarding use of motorcycle ambulances

- Need for clarity about the envisaged role of the ambulances
  - For transport patients between facilities or from the community to a facility
  - Whether the motorcycles are for emergencies only, or a general source of transportation to the facility for delivery

- Need to ensure that the vehicles are robust/functional

- Need to explore alternative means of transport (taxis etc) and costs before introducing motorcycles and fixing a cost for their use

- Need for comprehensive and consistent community mobilisation
Lessons Learnt regarding use of motorcycle ambulances

- The need for agreed operating procedures including:
  - Responsibility for routine maintenance
  - Responsibility for ensuring availability of fuel
  - Responsibility for documentation of use, expenses and income
  - Responsibility and systems for obtaining cost sharing contributions

- Need for handover of the above responsibilities as staff move/ change

- Consideration whether there should be a common reward package for drivers (payment/ lunch allowance/ protective clothing etc)
Recommendation re: Motorcycle Ambulances

• Before committing to further roll out:
  – undertake brief comparative study of sites in Kenya where they are being used “successfully”
  – determine if the definition of success is appropriate across different settings
Output 2: Indicator #4

Reproductive Health Data Management

• Recognized in EHS as essential for planning at multiple levels

• No specific indicators articulated at the programme inception

• Weakness of data hinders routine monitoring (and this evaluation)
  – Other than coverage (skilled attendance and antenatal care), few usable data on actual use of health services
  – Example: Unmet need for Emergency Obstetric Care
  – Even fewer on health outcomes other than maternal death
    • Severe morbidity
    • Perinatal outcomes
When equipping health facilities, thought must be also be given to record-keeping and HMIS needs.
Recommendation: Reproductive Health Data Management

- Further strengthening is necessary for the investment in planning processes to be fully realised.

- Efforts at strengthening HMIS should focus on specific tasks, with articulated goals and timelines and be monitored over time.

- Focus on the quality, breadth and use of data collected at health facilities also merits increased attention during national, provincial and district planning.
• Inventory training delivered and materials supplied
• Intervention not in AOP and ? ownership by District and Province?
Recommendations

- System strengthening will require local ownership and prioritisation and longer term support and supervision to be sustainable