

O2 HEALTH
ACTIVITIES

O3 WASH
ACTIVITIES
Health Facilities
& Quarantine

04 ISSUES
CHALLENGES
MITIGATION
Plans

COVID-19

JUNE 2020

COVID-19 Response update

Volume: 5

Nutrition Activities











Activities	Nawalparasi East	Nawalparasi West
# of Outpatient Therapeutic Care Centres (OTCC) providing services	16	14
# of under 5 children screened in CBIMNCI	982	924
# of under 5 children screened in EPI Clinic	512	898
# of SAM children under treatment	16	28
# of SAM children followed up via phone	17	37
# of FM stations broadcasting IMAM related messages	2 (8 spots/ day)	2 (6 spots/ day)
# of FM stations broadcasting National Vit- A & Albendazole distribution jingle (1 week)	2 (8 spots/ day)	2 (6 spots/ day)



Separate facebook pages has been created for awareness raising messages related to COVID-19 for both Nawalparasi East and West.

Weekly COVID-19 related multimedia contests are held via the same page.



Health Activities

NAWALPARASI EAST

- All 3 categories of PPE items classified by MoHP were provided to all Health Facilities and Health Offices of Nawalparasi East and West based on the need assessment.
- Health workers were also oriented on IPC measures and proper use of PPF.
- Triage system at Health Facilities were installed for continuation of effective services ensuring the safety of all.
- Take away IEC materials were provided and flex were installed at Health Facilities and other strategic locations.

Local Level (Health facilities)	Items	Surgical Mask	Examination gloves	Utility gloves	Liquid hand- washing soap	Soap dispenser	Alcohol based hand rub (0.5ltr)	IR thermometer	KN95 Respirators
	Unit	(pcs)	(pcs)	(pcs)	(Itr)	(pcs)	(pcs)	(pcs)	(pcs)
Gaidakot Municipality		1,500	1,200	10	6	17	12	0	15
Devchuli Municipality		1,500	1,200	10	6	17	12	2	15
Madhyabindu Municipality		2,000	1,600	14	8	23	16	7	15
Kawasoti Municipality		1,750	1,400	12	7	20	14	6	15
Hupsekot Rural Municipality		1,000	800	6	4	11	8	3	10
Binayi Tribeni Rural Municipa	lity	1,250	1,000	8	5	14	10	4	10
Baudikali Rural Municipality		1,500	1,200	10	6	17	12	0	10
Bulingtar Rural Municipality		1,750	1,400	12	7	20	14	0	10
Health Office		250	400	2	1	3	2	2	200
Total		12,500	10,200	84	50	142	100	24	300



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Need Identification

- Need Assessment of health facilities was done.
- Preparation of required list of PPE and WASH items for health facilities was done.

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Purchase & approval

- The PPE items planned from the field were procured and purchased from Kathmandu office.
- The approval for the distribution of PPE items were taken from local and district level to avoid duplication.

NAWALPARASI WEST

Local Level (Health facilities)	Surgical Mask	Examination gloves	Utility gloves	Liquid hand- washing soap	Soap dispenser	Alcohol based hand rub (0.51tr)	IR thermometer	KN95 Respirators
Unit	(pcs)	(pcs)	(pcs)	(ltr)	(pcs)	(pcs)	(pcs)	(pcs)
Bardaghat Municipality	1,500	1,200	10	6	16	12	0	15
Pratappur Rural Municipality	2,000	1,600	14	8	22	16	4	15
Sunwal Municipality	1,000	800	6	4	10	8	3	15
Ramgram Municipality	2,500	2,000	18	10	28	20	0	15
Susta Rural Municipality	1,250	1,000	8	5	13	10	4	10
Palhinandan Rural Municipality	1,750	1,400	12	7	19	14	2	15
Sarawal Rural Municipality	2,000	1,600	14	8	22	16	5	15
Health Office	250	400	2	2	3	3	2	200
Total	12,250	10,000	84	50	133	99	20	300

 $^{^{}st}$ 12 Pieces of Washable Jumpsuits, Face Shields and Foot cover (Category I PPE-MoHP) were provided to both Health Offices in Nawalparasi East and West.



WASH Activities

WASH Items distributed at Quarantine sites	Nawalparasi East	Nawalparasi West	
Hygiene Kit	348	300	
Buckets - 20 litres	300	254	
Mug - 1 litre	300	294	
Toilet Brush	19	6	
Water purification tablet - 3.5 mg	2350	2350	
Water purification tablet - 67 mg	1175	1175	
Chlorine Solution (Piyush)	295	300	
Water Bottle - 1 ltr	400	150	

A total of 442 people in Nawalparasi East and 444 people in Nawalparasi West benefitted from WASH activities in quarantine sites. The materials were distributed at quarantine sites of Kawasoti Municipality, Madhyabindu Municipality and Baudikali Rural municipality of Nawalparasi East and Susta Rural Municipality, Sarawal Municipality, Palhinandan Rural Municipality, Pratappur Rural Municipality and Ramgram Municipality of Nawalparasi West.





Delivery from Kathmandu to **Nawalparasi**

The items were delivered from Kathmandu in two trucks supported by World Food Programme (WFP). Total est. Cargo handled: 8.5 MT Total est. volume of cargo: 42 M³ Total items types: 39

Capacity building

- A training package was delivered to partners HICODEF in Nawalparasi East and MADE Nepal in the west and cascaded down to health workers at health facilities.
- IPC measures, Triage system installation, Proper use of PPE, WASH related activities, Preparation of chlorine water.



Local Level (Health facilities)	Bleaching powder (25kgs)	Bucket with tap	Colour coded closed dustbins
Unit	sack	pcs	pcs
Gaidakot Municipality	5	15	30
Devchuli Municipality	5	15	30
Madhyabindu Municipality	7	21	42
Kawasoti Municipality	6	18	36
Hupsekot Rural Municipality	3	9	18
Binayi Tribeni Rural Municipality	4	12	24
Baudikali Rural Municipality	5	15	30
Bulingtar Rural Municipality	6	18	36
Health Office	1	3	6
Total	42	126	252



NAWALPARASI WEST

Local Level (Health facilities)	Bleaching powder (25kgs)	Bucket with tap	Colour coded closed dustbins
Unit	sack	pcs	pcs
Bardaghat Municipality	5	15	30
Pratappur Rural Municipality	7	21	42
Sunuwal Municipality	3	9	18
Ramgram Municipality	9	27	54
Susta Rural Municipality	4	12	24
Palhinandan Rural Municipality	6	18	36
Sarawal Rural Municipality	7	21	42
Health Office	1	3	6
Total	42	126	252

- Corresponding to the triage system, strategic locations were identified at each health facility for the placement of handwashing stations and dustbins.
- •Health workers were oriented and demonstrated on preparation of chlorine water of different concentration from bleaching powder.
- •The uses and benefits of chlorine water was taught and discussed.

Issues & Challenges

- Continued restriction in movement and unavailability of public vehicles for more than three months has resulted in difficulties for mothers/caretakers of Severely Acutely Malnourished (SAM) children to go to health facilities (HFs) or Outpatient Therapeutic Care Centres (OTCCs) for treatment and follow up.
- No nutrition assessment of children under 5 years, pregnant and lactating women in quarantine areas.
- Limited basic PPE to conduct screening via different existing platforms like CBIMNCI and EPI clinics.
- Limited triage at health facilities resulting in health workers being reluctant to provide services requiring clinical assessment.
- Limited screening of children under 5 years for malnutrition at health facilities (HFs) and community level.
- Child could suffer from Moderate Acute Malnutrition (MAM) or MAM cases could develop into SAM.
- Increased Global Acute Malnutrition (GAM) and household food insecurity in the context of protracted lockdown and lean season.
- Increased number of relapse SAM children identified during assessment.
- WASH facilities in guarantine areas and HF's do not meet minimum WHO standards.

Mitigation

- Limit the number of visits, i.e. to once per month for enrolled children in IMAM programme and follow up SAM children via phone
- Make provision of transporting RUTF to the nearest point of contact in hard-to-reach areas for enrolled SAM children
- Explore opportunities for nutrition assessment in quarantine areas
- Distribute basic PPE to health facilities for continuation of health service delivery.
- Disseminate and advocate following guidance from the government to continue service available information up to local level.
- Advocacy with local authorities (DAO, Palikas, HO etc.) should be continued for access of beneficiaries to health facilities / OTCCs
- Blanket supplementary feeding should be prioritized to address acute malnutrition.
- Coordinate with Federal Government. PLMS. Health Offices. Local Levels and between districts for timely supply (if available).





Repackaging

- The items were repackaged into smaller individual pack for Health facilities with proper visibility.
- Staffs from partners supported in repackaging and Action Against Hunger did the monitoring.

Distribution

- Movement plan was prepared and vehicles hired.
- The distribution at all 83 health facilities in all 15 local levels were completed in 8 days i.e. 18-26 June 2020.



Mitigation contd.

- Additional strategies for screening of children for acute malnutrition should be explored beside EPI clinics, family / mother MUAC e.g. combining with MCH follow up, targeted mobile services from partners mobilizing FCHVs and HWs etc.
- · Continue and increase coverage of targeted screening for acute malnutrition in different strategic locations.
- Establish/strengthen proper triage system in health facilities for providing health services
- Provision of emergency cash transfers using existing delivery systems for social safety nets while respecting social / physical distancing
- · Distribute personal hygiene kits and





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