



Jigawa is situated in the north-western part of the country with a population of 5,590,272 (Male: 51% Female 49%). 86% of the state's wards boast of functional primary healthcare facilities. Infant mortality stands at 83 per 1000 live births; unmet need for family planning is 98.7% and the use of contraceptives stands at 1.3% (MICS, 2016).

Key achievements

- The programme procured mobile phones, installed the software and trained State Quality of Care (QoC) Focal Persons on CommCare and conducted monthly mentoring and supervision to all the 27 LGAs in the state.
- To avoid duplication of efforts in the state MNCH2 initiated a joint activity with ECP-PERL and the Jigawa State House of Assembly Committee on Health to sustain the State Lead Accountability Mechanism's advocacy efforts and other oversight functions at health facilities.
- The report of data quality assurance shows an increase in data tool availability due to the MNCH2 efforts in printing and distribution of Health management information system (HMIS) tools.

Lessons

- Making Traditional Leaders custodians of Emergency Transport vehicles (Haihuwa Lafiya) has led to increased proper utilization and management of the vehicles.
- Integration of community structures by the programme in the state has increased knowledge management as well as provided a good opportunity for synergy among volunteers and service providers.
- The use of mobile technology with CommCare software has led to rapid improvements in QoC data reporting, collation and analysis.

Transition and Sustainability

- The State Ministry of Health (SMOH) has taken over Quality of Care and Integrated Supportive Supervision through Saving One Million Lives funding with these activities already captured in the State Annual Operational Plan.
- Medecins Sans Frontieres has reached an agreement with the SMOH to train Midwife Mentors. These trained Mentors will cascade training to other midwives in the state.

Priorities for the next month

- Support the Medical Records Teams in FMC Birnin-Kudu and Rasheed Shekoni Specialist Hospital to improve on the use of the Health Management Information System (HMIS) tools and reporting.
- Mentor newly-established Village Health Committees in 5 LGAs - Hadejia, Gumel, Dutse, Ringim and Birnin-Kudu).
- Strengthen linkages and collaboration with the Saving One Million Lives Programme and community structures to sustain MNCH initiatives at the community level.

“Patient information in our facility is now digitalised, including laboratory investigation results and it's very easy to track clients in ante-natal care, family planning and immunisation. This innovation is a colossal development and my staff are working efficiently and delivering services effectively. The reporting rate has improved from around 65% to about 90% in the LGA, and these could easily be tracked and used for decision-making to improve the quality of care in all supported facilities.”

- Saidu Yusuf
Head of M&E Department
Dutse LGA PHC Department



A trained M&E Officer conducting Data Quality Assessment (DQA) in Kadira PHC, Guri LGA

births assisted by skilled personnel
151,773

pregnant women making at least 4 ANC visits
459,670

newborns and mothers who received care within 24 hours of delivery by a skilled health care provider
37,768

children fully immunised against vaccine-preventable diseases.
581,184

additional women using modern Family Planning methods
89,107