



Kano is located in north-western Nigeria. With an estimated population of 13.4 million, it is the most populous of Nigeria's 36 states. The child mortality rate is 103/1000 live births (MICS 2016/17), with less than 50% of children under 5 fully vaccinated and 20% availability of child health cards (MICS 2017).

## Transition and Sustainability

### Key achievements

- Development of a dashboard for monitoring Free Maternal, Newborn and Child Health (FMNCH) drugs through MNCH2 support to ensure regular supply and distribution thereby strengthening already existing accountability system.
- Capacity building for 13 LGA officers from quality of care teams from three (3) LGAs including (Bebeji, Nassarawa and Gabasawa) on local capacity improvement, methodology and technique for routine monthly monitoring of quality of care
- New Community Score Card (CSC) checklist was developed by MNCH2 to reduce errors in reporting clients satisfaction for quality care services across all the Primary Health Centres (PHCs) in the state

### Lessons

- Routine feedback from community structures such as Safe Space Initiative (SSI) volunteers on community satisfaction of health care services provision led to a review and adoption of a revised community scorecard checklists for improved data reporting at the community.
- Data mop-up greatly improved data reporting at the facility level especially from private health facilities in the state, where for example, it led to an increase in reported number of deliveries by Skilled Birth Attendants (SBA's) and other outcome indicators

- The state has budgeted N8.2million for the procurement and distribution of family planning commodities across all the healthcare facilities in the state through the Saving One Million Lives (SOML) basket fund.
- Funding for the quantification of free MNCH drugs has been sustained by the state government. Activities for the month under review was fully financed by the state government through the State Ministry of Health (SMoH)
- The state approved the procurement of 5,000 bales of Long lasting insecticides treated nets (LLINs) worth N252Million to promote prevention of malaria in pregnancy
- The state has expanded the conduct of stock availability for Free MNCH medicines from 264 MNCH2 supported health facilities to 320 health facilities.



*We need to identify operational challenges through periodic monitoring and evaluation of the objectives of contributory health care scheme. This will go along way in guiding the state government to develop effective and sustainable policies “*

- The Executive Secretary State  
Contributory Health Care Management Agency  
Dr Halima Mijinyawa

### Priorities for next month

- Supervise the conduct of MNCH week implementation across all the 44 LGAs
- Support the SMoH to analyse data collected on free MCH drugs availability assessment
- Make input into the contributory health care scheme Monitoring and Evaluation (M&E) plan during the forthcoming stakeholders validation meeting
- Work closely with SMoH and relevant agencies to facilitate smooth transition of data collection for community level interventions after MNCH2 program close out.



MNCH2 Local technical assistant during data mop-up at Bamaiyi Clinic Gama community Nassarawa LGA



births assisted by skilled personnel

**450,533**



pregnant women making at least 4 ANC visits



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

**325,901**



children fully immunised against vaccine-preventable diseases.

**1,672,745**



additional women using modern Family Planning methods

**630,387**