



Healthy Communities

Response to Omi Consultants' Project Evaluation: December 2022

24 February 2023

Introduction

KTF commissioned an external evaluation to examine the impact and effectiveness of the Healthy Communities project in improving access to quality health care and improving the capacity of both the health care system and health workers through training and professional development. The review was conducted through extensive consultations with communities in which project activities took place, KTF-employed CHWs, KTF staff members, and partners such as the Northern Provincial Health Authority (NPHA). Interviews took place in October with the report finalised in December. Additional analysis was conducted on a range of data provided by KTF. This response outlines KTF's planned strategies to address recommendations made in the evaluation to improve upon important aspects of the program design and implementation.

Recommendations and KTF actions

OC: Continue to strengthen and work with what is working well:

- **Plan to support the NPHA to promote and advocate for more support of future funding opportunities. Actively address and promote Healthy Communities' interventions and advocate for support from other partners and the government.**
- **Conduct regular, quarterly update meetings with NPHA, District Advisors and the community representatives to maintain a healthy working relationship. It is important to organise more "Training of Trainers" (ToT) at the district level if the project wants to see a wider impact on skills and capacity at the community level.**

KTF plans to meet with NPHA in March and will set up a calendar of regular quarterly meetings. We will continue regular engagement with both government and NGO partners, such as KI, to continue discussion on project activities and to minimise duplication. We will also continue to advocate for the NPHA to take more CHWs on payroll. Additionally, we will increase focus on improving the capacity of local officers. This includes KTF's plans underway to engage National Department of Health (NDOH) to train Oro based staff to then act as trainers for their catchment.

OC: Improve areas facing challenges:

- **Respective project activities need to develop contingency plans with partners to mitigate emergencies such as typhoid and COVID-19 to ensure planned programming such as immunisation patrols are able to continue.**
- **Instruct all CHWs to conduct regular patrols to provide healthcare to people with disabilities that may not be able to access the health facility.**
- **CHWs to conduct community awareness to promote weekly family planning clinics to ensure community members understand these services are available.**
- **Prior to a closure of Healthy Communities project activities, it would be imperative to develop a safe contingency plan and strengthen the current activities. An appointment of an accompaniment coordinator position with NPHA would be beneficial.**
- **More technical support is required to improve the monitoring and reporting capacity for Healthy Communities and partners to support advocacy in the future using reports and data collected.**
- **An effective database must be implemented to ensure that data from the partners and from KTF are collated and analysed to provide guidance for programming.**
- **Encourage cross-learning for the partners and programs by sharing learning across different project sites and stakeholders with NPHA and the respective districts, Sohe and Ijivitari.**

KTF recognises the importance of continuing to have regular communications with communities and partners to identify emergencies that may impact project activities to provide adequate and timely response. In our March monitoring visits, we will address points 2 and 3 to ensure the community is aware of all services offered, including family planning, and that health care is inclusive and all members of the community are able to access services.

We have no current plans to cease project activities and we will ensure there is an appropriate level of sustainability before the project ends. KTF will recommend to the NPHA that their staff are adequately involved at the end point of project activities and will endeavour to ensure this is the case.

KTF is currently working on improving M&E systems to maintain a database which will enable better sharing of information with NPHA. Further training with CHWs will be conducted on tablet use to ensure they can use it effectively as a resource and for M&E purposes. Data will be better collated and analysed to improve programming and share learning and promote greater understanding of health in the communities with the NPHA, particularly to improve long-term sustainability.

OC: Training & Capacity Building:

- **Prepare and enhance the sustainability of the interventions by assessing the current implementing partners particularly the NPHA, CHWs, and VHVs to improve their management skills.**
- **Develop a change management plan and support the local communities with mentoring and coaching on how to seek other support and funds apart from KTF.**

KTF agrees that ensuring healthy workers are able to self-manage their aid posts and health facilities is imperative. We will undertake further training with our health workers to upskill on providing high quality health care and management of the aid posts regarding procurement and maintaining adequate stock supplies. We are currently supporting the NPHA with improving their procurement systems via the NDOH.

KTF will work with community leaders to assist them in seeking support for other funding opportunities. We also recognise the potential for greater encouragement of community members to contribute funds or in-kind to the operations of the health posts.

OC: System Strengthening and Scale up:

- **Strongly consider scaling up the services to the most remote communities where the government faces challenges working in.**
- **It is strongly recommended that the project be extended to ensure the system strengthening and provincial or national scale up is achieved and to ensure there is strong partnership with PHAs and its stakeholders. Another 3-4 years extension on the activities affected would be ideal to ensure it is strengthened for long-term sustainability.**
- **KTF's monitoring and evaluation team should provide close oversight, supervision and mentoring in the field activities to assist programs' to monitor and implement the use of MEL tools to capture data as well as impact and lessons learned. There seems to be silos in reporting and reports and databases need to be shared with NPHA and the districts of other local partners for planning and support.**
- **Strengthen and support current cadre of VHV and VBA programs to disseminate health promotional interventions. Increase support with finances and logistics to carry out outreach programs which have proven effective.**

KTF has always endeavoured to go where there is the most need, and has regularly worked in rural and remote areas in which government services are challenged. We will liaise with NPHA to determine where the government needs additional support and identify locations in which the NPHA struggles to operate and where villages are in need of health services.

We also agree that the project needs to continue for at least another 3-4 years to achieve greater sustainability and we have no immediate plans to cease Healthy Communities operations. We are looking to hand over as much as possible to the government, particularly

CHW salaries for which discussions are already underway. The project will not end until KTF has ensured high quality health services will continue and will use the recommendations provided in this report to seek further ANCP funding.

KTF recognises that Village Health Volunteer (VHVs) and Village Birth Attendants (VBAs) provide vital support and services for communities and KTF is currently exploring opportunities with other partners to provide capacity building for VHVs and VBAs. Logistical support for their patrols will continue.

OC: Advocacy and Promotions:

- **Advocate and promote access to NPHA supported services. It seems that increases in the use of services is from trainings or from the community awareness that attracts patients to seek support from CHWs. Support needs to be given to those established and locally based organisations, CHWs, VHVs and their respective aid posts to take responsibilities to provide services when KTF closes.**
- **Higher level interventions and systems strengthening, or advocacy needs to be done by KTF management with partners/stakeholders to strengthen the partnership to sustain some of the interventions.**

KTF will encourage and support the NPHA to maintain a high standard of services and promote the usage and access to these services to increase the number of community members accessing health services regularly. KTF will continue to support partners, stakeholders and the NPHA to continue health interventions and strengthen partnerships to build sustainability and promote inclusion.