

REIMAGINING HEALTH SERVICE DELIVERY



IMPACT REPORT 2020-2021

A Documentation of Achievements of The Fayemi
Administration in the Health Sector





HIS EXCELLENCY
DR. JOHN KAYODE FAYEMI, CON
GOVERNOR OF EKITI STATE, NIGERIA



HIS EXCELLENCY
OTUNBA BISI EGBEYEMI
DEPUTY GOVERNOR OF EKITI STATE, NIGERIA



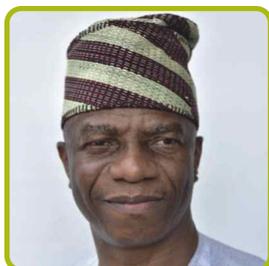
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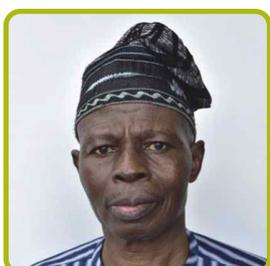
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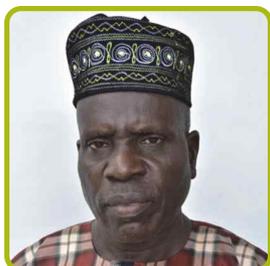


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ACRONYMS

ABUAD	Afe Babalola University Ado-Ekiti
ANC	Antenatal Care
CBCPC	Community Based Child Protection Committee
CPs	Community Pharmacies
CSOs	Civil Society Organisations
CBOs	Community Based Organisations
CQI	Continuous Quality Improvement
DMA	Drug Management Agency
EMR	Electronic Medical Record
EOC	Emergency Operations Centre
FGM	Female Genital Mutilation
GBV	Gender-based Violence
HCH&HS	Honourable Commissioner for Health and Human Services
HFs	Health Facilities
HIV	Human Immunodeficiency Virus
HMB	Hospitals Management Board
HMIS	Health Management Information Systems
ISS	Integrated Supportive Supervision
ITN	Insecticide Treated Nets
LGA	Local Government Area
LIOs	LGA Immunization Officers
LLINs	Long-Lasting Insecticidal Nets
M&E	Monitoring & Evaluation
MCH	Maternal & Child Health
MDAs	Ministries, Agencies and Departments

ACRONYMS

MNCHW	Maternal, Neonatal, Child Health Week
MOHs	Medical Officers of Health
MoUs	Memorandum of Understanding
NACA	National Agency for the Control of AIDS
NDHS	National Demographic Health Survey
NFELTP	Nigeria Field Epidemiology and Laboratory Training Program
NYSC	National Youth Service Corps
PHC	Primary Health Care
PHEOC	Public Health Emergency Operations Centre
PMTCT	Prevention of mother to child transmission
PMU	Program Management Unit
PPMVs	Patent and Proprietary Medicine Vendors
RDTs	Rapid Diagnostic Tests
RNA	Ribonucleic Acid
SMOH	State Ministry of Health
SOML PforR	Saving One Million Lives Program for Results
SPHCDA	State Primary Health Care Development Agency
TCG	Technical Consultative Group
ToRs	Terms of Reference
TOT	Training of Trainers
UHC	Universal Health Coverage
UNICEF	United Nations Childrens Fund
USAID	United States Agency for International Development
VAAP	Violence Against Persons (Prohibition)
WHO	World Health Organisation



FOREWORD

When I received the call from His Excellency, Dr John Kayode Fayemi to join his cabinet as the Commissioner for Health and Human Services in Ekiti State, I considered it a privilege to serve. Having worked in various positions, focusing on health systems reform and health financing at the national level here in Nigeria and in the United Kingdom, I considered the opportunity a chance to bring this know-how home to serve my people in Ekiti State.

The past one year has been a very busy one, not without challenges, but yet immensely fulfilling as we have laid the ground work to deliver measurable impact for the people of Ekiti State in the near future. We have achieved remarkable feats in the delivery and optimisation of PHC services. The State Government, in line with the national policy, has established Primary Health Care (PHC) facilities in all the 177 Wards in the State and each of these facilities is equipped with a solar refrigerator to ensure that vaccines are accurately stored. Over 120 PHCs in the State are beneficiaries of the Basic Health Care Provision Fund, which will ensure that vulnerable populations such as pregnant women and children have access to an essential package of health services free of charge. The State Health Insurance Scheme has also provided free healthcare services to thousands of pregnant women and under five children in the past one year.

We have commenced the refurbishment of our secondary care facilities and we are investing in our people, processes and tools to enable the sector respond to 21st century challenges.

We have invested in health security through various projects one of which is the building of our molecular laboratory that deploys advanced technology to enable quick and accurate diagnosis and analysis of samples. We have expanded our COVID-19 sample collection centres from 16 to 145 across all LGAs which has made COVID testing very accessible to all persons in the State. We have decentralised our Emergency Operations Centre (EOC) functions to all 16 Local Governments, further strengthening our early warning systems and surveillance.

For these initiatives to thrive, we put in place performance management initiatives that have improved programme management and cohesion among the various players in the States health sector.

To guarantee that our efforts are sustained beyond the life of our administration, the relevant laws and policies that will create an enabling environment for a resilient and sustainable sectoral progress is ongoing. Some of these include the; Drug management agency law, quality accreditation and standards law, policy on quality of care and the mental health law.

This report details our journey of impact in the past one year and I invite you to explore it and learn about our commitment towards achieving Universal Health Coverage for Ekiti Kete. As I always say; the journey to achieving our goals requires a thousand steps but like Johnnie Walker said, we must keep walking in the right direction.

Dr Oyebanji Filani

Honourable Commissioner For Health And
Human Services, Ekiti State, Nigeria



EXECUTIVE SUMMARY

In September 2020, a health sector stakeholders summit was convened to understand the degree of health challenges affecting the State and to co-create solutions to improve the quality of service delivery and strengthen the resilience of the States health system. During this summit, it was sensually noted that despite appreciable health-seeking behaviour and good coverage rates, health outcomes in the State were sub-par compared to regional peers; suggesting a quality-of-service delivery gap. To sustainably close these gaps in service delivery and create an enabling environment for all health sector reforms to thrive, the State has developed a good number of laws and policies which will strengthen, support and catalyse improved outcomes at all levels of healthcare.

The COVID-19 outbreak was a clear call for the State to re-strategize and invest in health security in order to sustainably respond to, and build back from future outbreaks. Within the period under review, the State was able to mobilise resources to the tune of 1 billion naira for COVID-19 response and to strengthen overall health security in the State. These resources enabled the establishment of a molecular laboratory, a public health laboratory, the decentralisation of COVID-19 EOCs to all LGAs in the State and the expansion of testing centres from 16 to 145. In order for these inputs to yield the best results, performance management initiatives were introduced to improve coordination, facilitate knowledge sharing and quick decision making. Routine review meetings both at LGA and State levels provided an avenue to critically analyse data and identify specific areas of concern in order align policy decisions and activities to targets and set objectives.

Recognising the States ambitious plans to become a regional hub for quality health services, it was critical to ensure that public health facilities were equipped with the tools to deliver cadre-appropriate services and ensure continuous quality improvement. A source, distribute, incentivise and train approach was deployed to ensure adequate and equitable availability of human resources across all levels of health care. Infrastructural inputs were also made to ensure that equipment needed to provide quality services were available.

In the past year, intensive effort has been made to mobilise a good number of new partners to support the states goals. This has yielded appreciable results as the State is at varying stages of engagement with the Tekano Group, Clinton Health Access Initiative, USAID, Management Sciences for Health, Global Fund/NACA, the Massachusetts Institute of Technology and others. With a good number of achievements in the bag and many more to come, we anticipate 2022 with the hope of doing and being more for the benefit of the Ekiti people.



Impact Tracker



Giant Strides in Health Security

17



Emergency Operations Centres (EOCs) established across the State (1 per LGA)

145

COVID-19 sample collection sites across all LGAs.

37,000 plus

COVID-19 tests conducted and counting.

582

Persons trained and mobilized to deploy COVID-19 vaccination.

238,097 plus

- persons vaccinated
- Lowest vaccination wastage rate in the country. 0% compared with national rate of 6.5%



Pushing Towards Universal Health Coverage

₦63mn

Disbursed to 122 PHCs under the Basic Health Care Provision Fund (BHCPF)

3,150

Persons benefiting from the State Health Insurance Scheme



Infrastructural Developments

₦4bn

- Renovating 12 General Hospitals and 36 Primary Healthcare Centres (PHCs)
- Building a molecular laboratory and
- A public health laboratory

189

Solar Direct Drive refrigerators distributed to all primary healthcare centres in the State.

₦400mn

Worth of medical equipment distributed across 48 primary healthcare centres

2022 Outlook

Partnerships for State Health Goals

Programming

Inputs to Service Delivery

Performance Management

Health Security

Laws & Policies

Strategic Vision for The Health Sector

Redefining Healthcare Impact report 20/21



Impact Tracker



Optimising Service Delivery

₦311mn

Worth of investment in the deployment of Health Management Information Systems (HMIS) and Electronic Medical Record (EMR) services in 4 pilot secondary health facilities.

520

Primary Health Care workers trained to improve service delivery

4 General Hospitals

To benefit from an incentivized Doctor rotation programme that will ensure increased utilization of health services and continuous availability of high-level skilled personnel.



Partnerships to Achieve State Goals

\$100k

Worth of technical assistance for executive course on health financing for health sector stakeholders

99%

Of Corp members retained under the National Youth Service Corp (NYSC) medical doctors fellowship.

20

Doctors recruited in the past one year to support quality service delivery in primary and secondary healthcare facilities.

₦100mn

Worth of technical assistance from the Global Fund/NACA partnership.

2022 Outlook

Partnerships for State Health Goals

Programming

Inputs to Service Delivery

Performance Management

Health Security

Laws & Policies

Strategic Vision for The Health Sector

Redefining Healthcare Impact report 20/21



The Strategic Vision for the Health Sector

In September 2020, at the instance of the Honourable Commissioner for Health and Human Services, a retreat of stakeholders in the health sector, was held to:



Understand and agree on current challenges affecting the efficient provision of health service delivery



Co-create solutions aimed at improving the quality-of-service delivery across all levels of care, whilst strengthening resilience of the health system



Map out as well as prioritize interventions for immediate and long-term implementations

At the retreat, participants noted that despite a high health seeking behaviour and good coverage rates, health outcomes were suboptimal compared to regional peers. An indication of the sub-par quality of care delivered in health facilities in the State.

To address this challenge, we developed a set of three core strategic priorities and a number of cross cutting enablers;

1. A reimagined health service delivery model: that ensures universal, integrated and equitable access to affordable and quality services, and effective referral linkages to secondary and tertiary facilities.
2. Strengthened health security: that reinvigorates essential public health functions for preventive and promotive health, and timely and resilient epidemic/pandemic preparedness and response.
3. Improved governance, performance management and financing: which ensures good governance of the States health system by strengthening institutions to establish efficient and sustainable financing for financial protection as well as accountability systems to measure results, performance and outcome.

To achieve the above, we recognised the need for regulatory and enabling frameworks such as laws and policies, the need to strengthen capacity, the importance of aggressively focusing on data for decision making and the necessity of providing resources while exploring opportunities for partnerships all of which will be explored in the following chapters.



The HCH & HS at The Budget Defence, Ekiti State House of Assembly



Break Out Session, Health Stakeholders Summit



His Excellency The Governor of Ekiti State Dr Kayode Fayemi at the Health Stakeholders Retreat



Honourable Commissioner for Budget and Economic Planning Mr Femi Ajayi presenting a certificate to a participant at the stakeholders meeting



A Facilitator at the Stakeholders Retreat



The Honourable Commissioner for Health pays a preliminary visit to the management of the Ekiti State University Teaching Hospital (EKSUTH)



Health Stakeholders Retreat

Laws and Policies for an Enabling Environment

In the last one year we have worked to create an enabling environment in which the States health reform efforts can thrive and be sustainable. Laws and policies have been formulated to strengthen, support and catalyse health service delivery and outcomes at different stages of development. These laws and policies include:



Laws

1.

Ekiti State Drugs and Health Commodities Management Agency (DMA)

2.

Ekiti State Standards, Monitoring And Accreditation Systems For Quality of Care

3.

Mental Health Service Law



Policies

1.

Clinical Governance and Quality of Care

2.

State Cancer Control Policy

3.

Annual Operational Plan



DMA Bill Drafting Committee Meeting with the HCH & HS



Presentation of the draft DMA Bill to the Honourable Commissioner for Health by the Bill drafting committee.



Presentation of Draft DMA Bill to HC



World Mental Health Day



Quality Accreditation and Standards Law

Background

Ekiti State's health regulatory structure is diffused, with the department of hospital services and training at the State Ministry of Health, playing a loosely defined role of overseeing private sector service delivery providers, the department of nursing services coordinates the activities of nurses in the State through verification of licences, the State Primary Health Care Development Agency inspecting primary care facilities, while the general hospitals are overseen by the Hospitals Management Board.

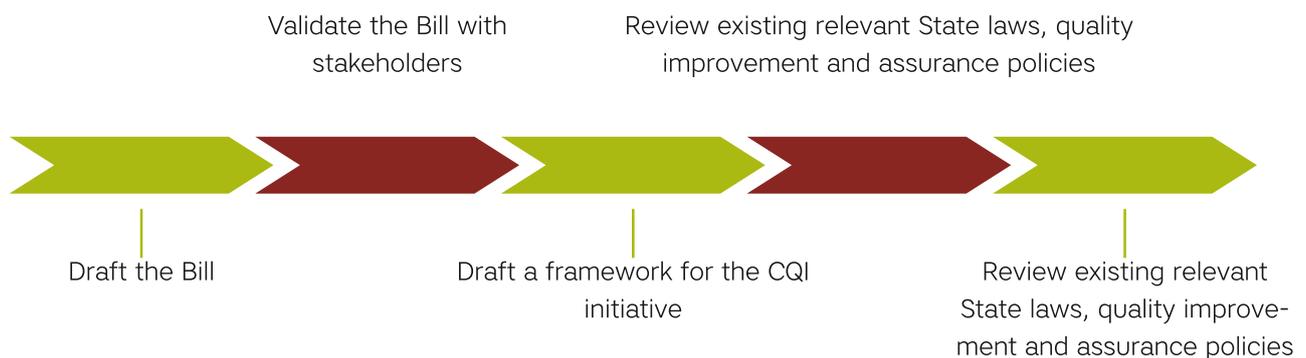
Despite what appears to be enforcement mandates within some of these departments and agencies, there is a lack of clarity on the existing standards in place. Across majority of regulatory agencies, support is required to enhance their ability to prohibit the unauthorized provision of drugs or practice of medicine. At a minimum, this is necessary to protect patients across the State from receiving treatment from quack practitioners. Quackery is rampant across Ekiti particularly in the private sector arena and there is a sense that avoidable deaths and sentinel events can easily go undetected, and therefore are not analysed or learned from, in a system that relies on patient complaint to identify defects.

To address this, the State is putting in place the enabling law to enforce standards and adequate monitoring. The law provides a basis for the effective implementation of regulatory requirements that ensure the public is protected from fake, non-credentialed, or minimally certified health providers and from healthcare facilities that do not adhere to the minimal essential standards of care.



Key Activities

A committee was set-up to co-design and implement an aligned model for the State led Regulatory Unit. This committee worked with stakeholders to:



Training for Corp Members under the Continuous Quality Improvement initiative



HCH Visit to NYSC Camp

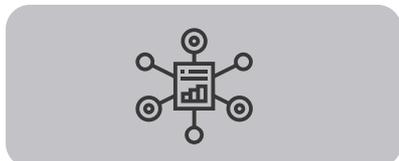


Dr Uzoamaka Onyeama counselling a patient





Key Outputs



Establishment of a framework and standards to regulate health services and facilities in the State.



Define and update roles and responsibilities of multiple regulatory agencies and areas of alignment.



Update the existing database that captures information on all public and private health service providers in the state to enable regulation and assessment of service spectrum.

Policy on Quality of Care and Continuous Quality Improvement (CQI) Initiative

Background

Building on the standards and accreditation law, the ministry is developing a policy document that will set out a clear path to achieving our aim of improving patient safety, clinical outcomes, and client satisfaction.

The policy document when finalised, will highlight areas of major improvements in health system performance that can be achieved primarily through new approaches to leadership, organization and care using better deployment of existing resources. It will also be the underpinning for the continuous quality of care initiative (CQI).

This CQI initiative will drive Ekiti States quality improvement agenda, outline clear state CQI goals, ensure coordination, enforcement and use of evidence-based approaches to continuously improve quality of care in public and private facilities in the State.

As earlier mentioned, a multistakeholder committee, comprising professionals across the sector have been tasked with the mandate to complete get the process and interventions fully functional by the end of the year 2021.



Mapping of Private Health Facilities in Ekiti State. Source: Ekiti State Ministry of Health and Human Services



Mapping of Private Laboratories in Ekiti State. Source: Ekiti State Ministry of Health and Human Services





Key Activities

1. Capacity Building for:
 - i Quality Improvement Assessment data collectors.
 - ii Data collection and geolocation enumerators.
 - iii 520 PHC facility staff.
2. Creation of the NYSC medical fellowship in which Corper Doctors are deployed to PHCs in the 3 pilot LGAs (Ikole, Ikere and Oye), to serve as drivers of change especially for quality data collation and reporting in priority areas such as MNCH, Malaria treatment, antenatal care and delivery among others.
3. Surveys and geolocation capturing for:
 - i Quality Improvement Assessment Survey (Pilot and Baseline study)
 - ii Care site enumeration



Key Inputs

Convergence of a high-level stakeholder gathering which led to the conceptualisation of the accreditation initiative and the inauguration of the working committee.

Development of the proposed framework.

Geo-mapping of care provision sites; CPs, PPMVs, Laboratories



Drug Management Agency (DMA) Law

Background

Drugs and medical supplies are key elements of a functioning health system. Ensuring facilities have essential drugs and supplies at the right time and that patients can access affordable products when needed is pivotal to delivering Universal Health Coverage (UHC). The quality, safety, efficacy and equitable accessibility of drugs and health commodities is hinged on strong regulatory systems, quality manufacturing and efficient supply chains.

The Act provides the legal basis to establish the Ekiti State Drugs and Health Commodities Management Agency. It provides foundation on which the State will manufacture, procure, distribute, sell and manage drugs and medical commodities in the State.



The DMA Bill has been passed into law by the State House of Assembly and assented to by the Governor of Ekiti State, Dr John Kayode Fayemi.



Increased leverage to engage big pharmaceuticals on contract and clearly defined extended credit.

Excellent supply chain system in the State leading to zero stock-out.

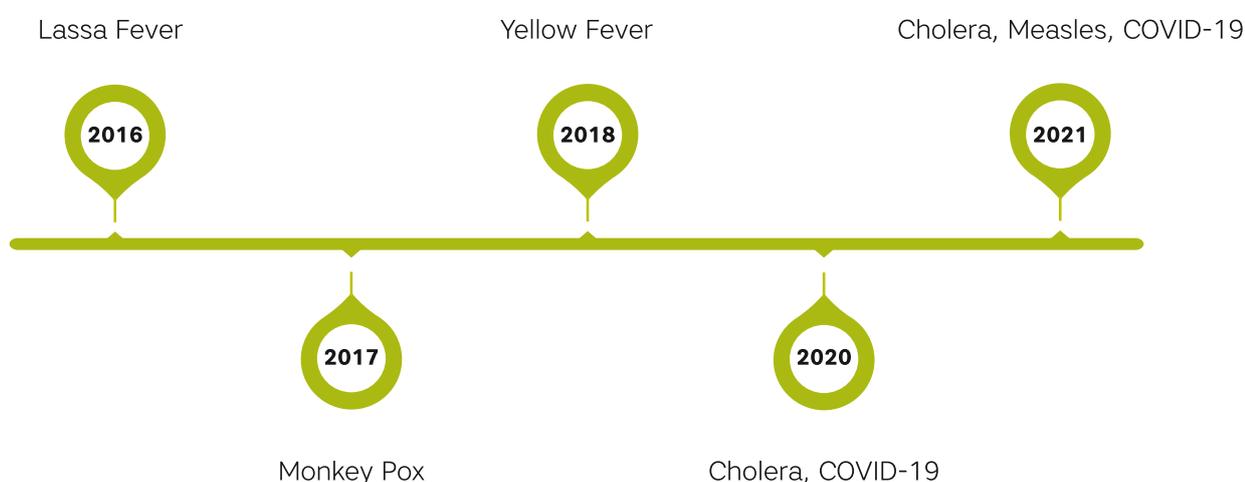
Continuous availability of high-quality drugs and price stability.



Enhancing State Health Security

Background

The Ebola outbreak in 2014 highlighted the Health Security challenges in Nigeria and across West Africa. In the past decade, Nigeria has experienced at least two disease outbreaks every year. Ekiti State, has recorded six outbreaks in the past six years which are: the Lassa fever outbreak (2016), monkey pox outbreak (2017), yellow fever outbreak (2018), cholera outbreak (2020,2021), measles outbreak (2021) and more recently, the COVID-19 pandemic (2020, 2021).



Timeline of disease outbreaks since 2016. Source: Ekiti State Ministry of Health and Human Services

This is a clear indication that the State has to be actively prepared to contain, mitigate and manage the impact of inevitable public health events such as disease outbreaks.

Prior to 2020, public health response in the State was short of a proper structure and coordination of functions. There was fragmentation among surveillance and response teams at the LGA and State levels which resulted in mis-alignment of roles and functions. With the advent of the COVID-19 pandemic, there was need to build and strengthen essential public health facilities and functions, that will not only respond to the pandemic, but position the State for timely and resilient outbreak preparedness and response.



Irepodun/Ifelodun LGA EOC Team



HCH & HS with Professor Funmi Olopade in front of the State Molecular Laboratory



The Senior Special Assistant to the Governor on Public Health, Dr. Jimlas Ogunsakin leading COVID Risk Communication Activities with Risk Communications Team



Key Inputs and Achievements

1. The State has built a team led by the State Epidemiologist who has a degree in field epidemiology from the Nigeria Field Epidemiology and Laboratory Training Program (NFELTP).
2. Clear lines of engagement and protocols have been established at LGA and State levels to strengthen surveillance, response, data collection and reporting.
3. A Public Health Emergency Operations Centre (PHEOC) has been established to coordinate and lead outbreak response and preparedness in the State.
4. As at July 2021, Ekiti was the **only State in the country that had decentralised COVID-19 Emergency Operations Centres (EOCs)** by establishing them in all 16 LGAs in the State. This has facilitated problem solving, quick decision making and better coordination of functions at the LGA level.
5. As at July 2021, Ekiti was the **only State in the Southwest to incorporate a vaccination pillar into the COVID-19 Emergency Operations Centre (EOC)**. This has improved the States ability to easily detect and solve problems relating to vaccine acceptance, storage, distribution and risk communications.
6. COVID-19 sample collection sites have been **expanded from 16 centres to 145 centres across all LGAs**, thus improving case detection by making COVID-19 testing very accessible to all persons in the State.
7. There has been massive scale-up of COVID-19 testing using RDTs. This has **reduced the duration** to make a diagnosis from over **48 hours to 15mins**. So far, 23,159 tests have been conducted using RDTs with 4,391 of those tests conducted in August 2021. All RDT positive cases undergo RNA testing at the State molecular laboratory.
8. To ensure case detection even outside public facilities, private medical facilities have been trained by the State and provided with RDT kits for COVID-19 testing.
9. **Domiciliary care has been deployed for clinically stable COVID-19 patients.** This method of care is not only cost-effective, but has shown to facilitate healing as patients are able to receive care in environments, they are familiar with and from their loved ones. As at September 11th, 760 persons had been managed under domiciliary care with no fatalities recorded.
10. Weekly emergency operations centre meetings and **daily technical working group meetings (during vaccination cycles)** have facilitated early detection and resolution of bottlenecks, timely decision making and improved capacity of staff to query and utilise data to inform planning and decision making. This has resulted in Ekiti State being the best performer in vaccine deployment in Nigeria, evidenced by commendations from the Federal Government.





EKSG receives COVID 19 Vaccines



COVID 19 Vaccines received from NPHCDA



The HCH & HS examining the COVID Vaccine Samples



Her Excellency Erelu Bisi Fayemi receiving her COVID vaccine



His Excellency Dr John Kayode Fayemi receiving his COVID vaccine



His Excellency Dr John Kayode Fayemi with his vaccination card



Symbolic Vaccination of a Traditional Ruler During COVID Vaccine Flag-off



HCH & HS and PS at the technical working group meeting



Group Photo of Emergency Operations Centre Pillar Leads



The State Immunisation Officer, Mrs Ajimati, The Governors SSA on Public Health, Dr Ogunsakin _ The State HMIS Officer Mrs Ojo



Moba LGA EOC Team



Molecular Laboratory

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Sensitisation on COVID-19 at Okeosun Ward, Ikere LGA



Clients getting registered for COVID-19 vaccination



Woman getting vaccinated at Afao, Ikere LGA



Ward vaccination focal person reminding a client to come for the second dose of the COVID-19 vaccine



The Permanent Secretary EKSMOH; Mr Jide Akinleye mni leading stakeholder engagement on Cholera response at Moba LGA



The Permanent Secretary EKSMOH; Mr Jide Akinleye mni and the State Risk Communications Team at the cholera response stakeholder engagement in Moba LGA-1



Engendering Accountability Through Performance Management Initiatives

Background

Limited intra-sectoral coordination, subtle interdepartmental rivalries, siloed working with limited use of data for decision making, impacted the State health sectors ability to effectively respond to the challenges of service delivery. This fragmented system could largely be attributed to inadequate organisational leadership.

Improving coordination and increasing collaboration within the health sector is key to bridging gaps in service delivery, knowledge sharing and decision making. By implementing a performance management system that focuses aggressively on data management, reporting, reviews and use; the health sector has been able to zero in on specific areas of concern by aligning policy decisions, actions and activities to targets and set objectives.



Key Activities

1. Daily TWG meetings during vaccination campaigns to quickly detect and resolve bottlenecks relating to vaccine acceptance, storage, distribution, risk communications and others.
2. **Bi-weekly meetings between the HCH & HS, PS and Directors in the SMOH.** This leadership meeting serves as an avenue to facilitate decision making, resolve problems, and ensure alignment of activities and set targets.
3. **Score card reviews of health facility data** on priority areas such as malaria care, antenatal services, facility birth, essential supplies, childhood pneumonia etc. to provide insight on facility level progress or bottle necks.
4. Weekly departmental meetings to address emerging issues and assess outcomes of proffered solutions.
5. **Quarterly intra-sectoral meetings chaired by the HCH&HS.** This meeting involves major health sector parastatals and organisations in the State and facilitates cohesion, accountability and knowledge sharing among these parastatals.



Key Outputs

1. Increased opportunities for feedback and clarification of functions which have facilitated harmony, increased transparency and trust within the sector.
2. Improved programme management.
3. **More approvals secured this year** by the State Ministry of Health from His Excellency the Governor of Ekiti State, than in the past 3 years.



Bi-Weekly Directors Meeting with HCH & HS



State Immunisation Officer, Mrs Ajimati making a presentation at the intra-sectoral meeting



Secretariat of the Directors Bi-Weekly Meeting L-R Segun Adebayo (Under Secretary EKSMOH) Anthony Ayeni (PA to the HCH & HS) Zikar Elendu (SA to the HCH & HS)



Quarterly Intra-sectoral Meeting



Mrs Sola Igotun, Director Admin and Supplies EKSMOH making a presentation during the Directors interface with the HCH & HS



HCH & HS Reviewing Service Delivery Data



Quarterly Intra-sectoral Meeting



Bi-Weekly Directors Meeting with HCH & HS



COVID Technical Working Group Meeting

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Strengthening Inputs to Service Delivery

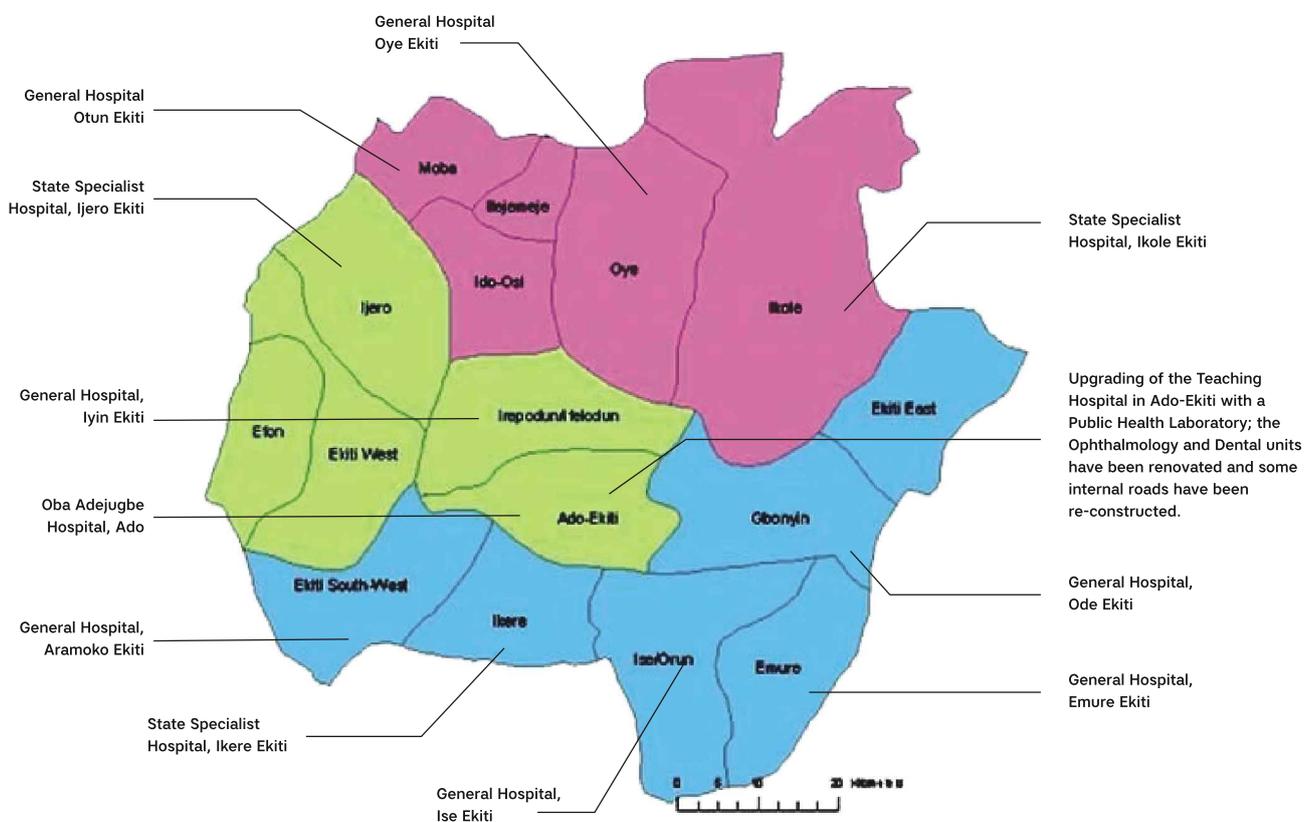
Background

Most facilities in the State had structural and operational challenges which contributed to the low level equilibrium in the quality of service delivery and health outcomes. In these facilities, infrastructure and relevant utilities were either damaged or non-existent, most lacked basic medical equipment, availability and distribution of human resources was a challenge especially in facilities located in rural and hard to reach areas, culminating in poor quality of service delivery. Recognising the States ambitious plans to become a frontier health system, it became critical to ensure equitable distribution of human resource and the availability of needed tools and infrastructure to facilitate the delivery of quality health services.



Key Inputs

Extensive renovation in twelve (12) General Hospitals in the State. These infrastructural developments include:



2. **Renovation of 46 PHC** facilities across LGAs to improve the quality of services delivered.
3. **One hundred and eighty (189) Solar Direct Drive refrigerators** distributed to all Primary Health Care facilities to facilitate proper vaccines storage and distribution.
4. Distribution of **modern equipment** such as delivery beds, weighing scales, thermometers, sphygmomanometers etc. for **48 Primary Health Care** centres in the State, to ensure facilities deliver adequate care.
5. Partnership with Helium Health and Sterling Bank to digitise health services through the deployment of **Health Management Information Systems (HMIS) and Electronic Medical Record (EMR) services in 4 pilot secondary health facilities.** This will enable the State collect, collate and synthesize health records electronically and in real time thereby improving transparency and accountability.
6. Despite constrained fiscal space, more than **20 doctors have been recruited** in the last 1 year to support quality service delivery in primary and secondary health care facilities.
7. A National Youth Service Corp (NYSC) medical fellowship has been established, in which Corper Doctors are actively encouraged to work in rural settings within State. So far, **99% of Corper Doctors** posted to the State since the beginning of the fellowship have been **retained.**
8. Redistribution of nurses and midwives within senatorial zones to ensure more equitable access to skilled health care services especially during child birth.
9. **Training of 520** primary health care workers, with more to be trained before the end of 2021.
10. An **incentivised Doctor rotation programme** has been designed and is currently undergoing implementation planning. This programme when deployed will ensure increased utilisation of health services and continuous availability of high-level skilled personnel in General Hospitals in the State.



Distribution of New Laptops to Staff of the Ekiti State Ministry of Health to Facilitate Performance



Signing of the Tripartite MOU Between Ekiti State Government, Helium Health and Sterling Bank



Receipt of over 80 million naira worth of medical equipment from Management Sciences for Health



Renovated Childrens Ward at SSH Ikole



PHC Staff Training



The PS, EKSMOH giving a speech at the flag-off of the PHC Staff Training



Newly built Oxygen Plant at EKSUTH



Installed Solar Panel at SSH Ikole



Participants at the PHC Staff Training



Flag-off for the Distribution of Solar Direct Drive Refrigerators to 189 Primary Health Care Facilities



Renovated Laundry at SSH Ikole



Renovated Female Ward, SSH Ikole

Programming

Malaria Program



Key Activities

1. Work plan and budget development meeting for the malaria World Bank supported Malaria Impact Project.
2. Commemoration of World Malaria Day, 2021 in partnership with SOML, WHO and ABUAD.
 - Distribution of 250 Long Lasting Insecticidal Nets to pregnant women.
 - Behaviour change communication activities.
 - Two-day LLIN distribution campaigns across 15 LGAs following the commemoration.
3. Monthly technical meetings of the State and LGA program officers.
4. Routine monitoring and supportive supervision in partnership with SOML.
5. Inauguration of state steering committee for the Malaria Impact Programme.

Saving One Million Lives Programme for Results (SOML PforR)



Supportive Supervision to primary healthcare facilities in the State



Funding of PHC renovation and provision of commodities



Refurbishment of State cold chain store



SOML Team During Supportive Supervision to Primary Health Facilities



SOML Team During Supportive Supervision to Primary Health Facilities



Stakeholders Forum on Female Genital Mutilation



Strengthening Action Against Gender-Based Violence



Key Activities



Capacity Buildings

of health workers on FGM, Sexual and Reproductive Health, Gender Based Violence



Programme Implementation

1. Mobilization of trained health workers to provide prevention and response services to at-risk women/girls and FGM survivors
2. Advocacy dialogue and consensus building with religious leaders to seek for their support to delink FGM from religious requirements.
3. **Establishment of a toll-free line** report cases of FGM and other forms of GBV.
4. **Routine counselling of survivors** who suffer from dyspareunia due to FGM complications.



Monitoring/Evaluation

1. To accelerate the abandonment of FGM- monitoring visit was carried out to trained health workers in Ado, Ikere, Ikole, Ekiti South West, Ekiti West and Ido Osi local government area of Ekiti State. 2020.
2. Quarterly FGM monitoring and supervision- May- June 2021.
3. Quarterly review meeting with OICs trained in 6 LGAs- June 2021



Stakeholders Forum on Female Genital Mutilation



Stakeholders Forum on Female Genital Mutilation



Medical Assistance Initiative by Her Excellency Erelu Bisi Fayemi





Commemoration of World Malaria Day



Medical Assistance Initiative by Her Excellency Erelu Bisi Fayemi



Medical Assistance Initiative by Her Excellency Erelu Bisi Fayemi



Commemoration of World Malaria Day



Commemoration of World Malaria Day



Commemoration of World Malaria Day



Malaria Programme Manager, Mrs Bankole at the SOML Workplan Development Meeting



Her Excellency, Erelu Bisi Fayemi, HCH & HS at the GBV Elders Forum in Ikoile LGA



Her Excellency, Erelu Bisi Fayemi, HCH & HS at the GBV Elders Forum in Ikoile LGA



The Permanent Secretary, Hospital Management Board, Dr. Afolabi Williams delivering a keynote speech during the Medical Assistance Initiative Programme



Galvanizing Partnerships to Achieve State Health Goals

With higher coverage rates compared to peers, partners had often de-prioritised support for Ekiti State, culminating in limited technical and financial support for the State.

In the last one year, despite the odds, the sector has mobilised a good number of new partners to support the states goals, an indicator of confidence in the work being done and achievements so far. Within the period under review, the following partners have supported the State in varying capacities:



1. Tekano Group;

Organised an **executive course valued at 100,000 USD** for health sector leaders on health financing. This training built the capacity of the State health insurance team to deliver an explicit package of services (under the scheme) to over 2,000 under 5 children and over 1,000 pregnant women in the past one year.



2. USAID;

Recognising our commitment to end drug stock outs in the State and provide a sustainable system for the procurement, storage and distribution of drug and medical commodities, USAID has committed to an agreement in principle to **provide the State with technical assistance and capacity building** on drug supply chain management.



3. Management Sciences for Health;

Donated **medical equipment worth four hundred million naira (₦400,000,000)** for use in Primary Health Care centres. This donation has helped plugged some gaps in service delivery and improved utilisation across beneficiary primary health centres in the State.



3. Global Fund/NACA;

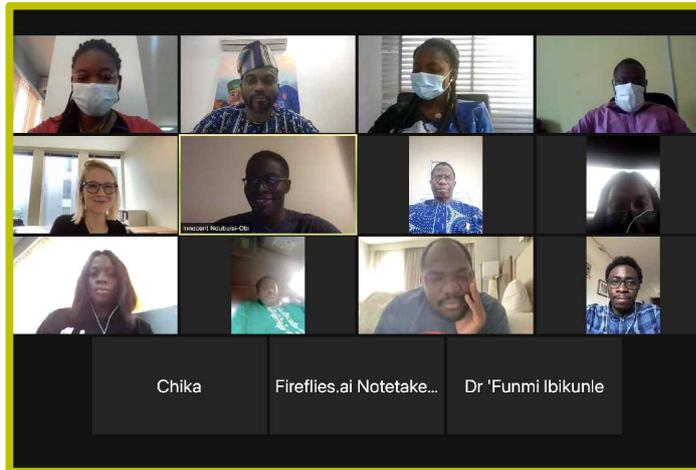
Is supporting the State with funds and **technical support worth up to a hundred million naira (₦100,000,000)** for health system strengthening through performance management.



5. Massachusetts Institute of Technology;

Will provide **technical assistance through the Governance Innovation Lifecycle Challenge** to improve health care service delivery in the State.





Partnership Meeting between the EKSMOH, Gatefield, CcHub and Massachussets Institute of Technology



Signing of partnership between EKSMOH and Management Sciences for Health



Signing of the tripartite MOU between EKSG, Sterling Bank and Helium Health

2022 Outlook

Having laid a solid foundation for impact in the past one year, we look forward to harvesting positive outcomes from most of the work that have been done so far. In 2022, we plan to focus aggressively on performance management, optimising primary healthcare to bring us closer to our goal of achieving UHC and further strengthening the States health security through emergency preparedness and response.

With the level of work done on improving service availability and readiness, in 2022, the State will focus on purchasing an explicit and guaranteed set of services for the population under its Health Insurance program. We also aim to strengthen the capacity of the State DMA to enable it engage local pharmaceutical manufacturers, to supply quality healthcare commodities at greatly reduced prices, thus making the DMA the most competitive business unit for quality medicines supply in the State.

We will continue the operationalisation of the state quality of health policies and regulatory laws, with the aim of achieving adherence to standards in at least 50% of service providers in the State. The State Ministry of Health and Human Services will also look to maintain an updated database of all health facilities and service delivery points in the State.

Finally, in 2022, the sector will leverage existing partnerships and create new ones to further push the States healthcare goals. Beyond delivering the service charter of zero preventable facility deaths, we look forward to Ekiti State becoming a regional hub for healthcare excellence.



A Documentation of Achievements of The
Fayemi Administration in the Health Sector
2020-2021

