

<b>Project Number and Title:</b>	PROJECT START	AMOUNT	RECIPIENT			
MPTF 62- Title: Improving maternal and	DATE <sup>1</sup> : 1 <sup>st</sup> October	ALLOCATED by MPTF:	ORGANIZATION			
newborn health through the delivery of a	2016	USD 1,499,979.5	United Nations			
standard package of maternal newborn	Total duration (in	(please indicate different	Population Fund			
interventions in the remotely-located Todee and	months): 9 months	tranches if applicable)	(UNFPA)			
Careysburg Districts of Montserrado County	inonvisor y monus	\$	(61(171)			
Project ID:			2. United Nations			
0000000 (Gateway ID)			Children's Fund			
Project Focal Point:	EXTENSION DATE:	FINANCIAL	(UNICEF)			
Dr. Remi Sogunro, UNFPA Representative		COMMITMENTS	3. World Health			
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Dr. Alex Ntale Gasasira, WHO Representative						
Cell: +231 775 281 157 Email:			n and the angles of			
gasasiraa@who.int			IMPLEMENTING			
Suleiman Braimoh, Ph.D. UNICEF Liberia			PARTNER(S): Ministry of			
Representative Cell: +231 0770267100 Email:			Health (MoH), R.L., Liberia			
sbraimoh@unicef.org			Prevention of Maternal Mortality			
	DD O IE CEED END		(MoH), Montserrado County			
Strategic Objective (STEPP)	PROJECTED END	EXPENDITURES	Health Team			
SO3 - Description: Ensure Essential Services	DATE:	as of 31st March 2017				
Recovery Strategic Objectives	30 <sup>th</sup> June 2017	<u>UNFPA Expenditure</u>				
RSO# - Description:		<u>US\$ 13,943.55</u>				
<b>Mission Critical Action</b>		WHO Expenditure:				
MCA6 – Description: Access to basic		<u>\$51,428.01</u>				
services						
T 4.	Sub-National Coverage	Areas:				
Location:		or districts: Careysburg and To	odee districts, Montserrado			
Country or Regional Liberia:	County	.,	,			
	•					
Report Submitted by:	Report Cleared by:					
o Name: Dr. Philderald Pratt	Name: (Head of Agency) Dr. Remi Sogunro, UNFPA Representative					
o Title: Assistant UNFPA Representative	o Date of Submission: March 31st, 2017					
O Date of Submission: March 31st, 2017	o Participating Organization (Lead): United Nations Population Fund (UNFPA)					
o Participating Organization (Lead): United	o Email address: sogunro@unfpa.org					
Nations Population Fund (UNFPA)  • Email address:pratt@unfpa.org						
o Email address:pratt@unfpa.org	1					

<sup>&</sup>lt;sup>1</sup> The date project funds were first transferred.



OUTPUT INDICATORS					
Indicator	Geographic Area	Projected Target (as per results matrix)	Quantitative results for the reporting period (Jan- Mar, 2017)	Cumulative results since Project commencem ent (quantitative )	Delivery Rate (cumulative % of projected total) as of date
Description of the qu	iantifiable indicat	or as set out in	the approved pro	oject proposal	
Output 1: Access to and utilization of EmONC services, routine RMNCAH and referral services for women and girls 15-49 years of age is increased.					
Proportion of safe health facility deliveries	-Koon Town Clinic	80% (313)	42	42	13.4%
	-Nyeahn Health Center	70% (357)	26	26	7.3%
	-Bensonville Hospital	100% (1451)	72	72	4.9%
Proportion of women attending ANC 4 visits	Koon Town Clinic	80% (313)	53	53	16.9%
	Nyeahn Health Center	70% (357)	75	75	21%



**Year: 2017** 

		i ear:	2017		
	Bensonville Hospital	100% (1451)	166	166	11.4%
Proportion of obstetric complications	-Koon Town Clinic	80% (78)	8	8	10%
managed at EmONC	-Nyeahn Health Center	70% (89)	4	4	4%
	-Bensonville Hospital	100% (362)	22	22	6%
Output 2: Maternal reporting, death review			and Response are f	functional as evic	denced by timely
Proportion of maternal death audits/reviews	-Koon Town Clinic,	60%	0	0	0%
carried out routinely by targeted health	-Nyeahn Health Center	60%	0	0	0%
facilities	-Bensonville Hospital	60%	0	0	0%
Proportion of neonatal death audits/reviews	Koon Town Health Clinic,	60%	0	0	0%
carried out routinely by	Nyeahn Health	60%	0	0	0%
targeted health facilities	Bensonville Hospital	60%	0	0	0%
Output 3: Health facilities implement Infection Prevention and Control (IPC) in line with national protocols and SOPs					
Number of targeted health facilities with functional MNDSR	-Koon Town Health Clinic, -Nyeahn Health	3	3	3	100%
committees					



-Bensonville Hospital Number of health -Koon Town facilities with Health Clinic, complete IPC SOPs and utilizing them Nyeahn Health 3 0 0 0% Bensonville Hospital Output 4: Improved public health and environmental sanitation through expanded access to safe drinking water, basic sanitation, solid waste management services and hygiene education. Number (3) of Koon Town health facilities Health Clinic with WASH facilities meeting -Nyeahn Health 0 3 national standard Center 0 -Bensonville Hospital Koon Town Number of health Health Clinic facilities with 3 Nyeahn Health 0 WASH operation 0% 0 and maintenance Bensonville Hospital (O&M) structures Output 5: Community based maternal and newborn health care interventions are implemented through strong community engagement that supports timely identification, reporting and referral of maternal newborn complications at community level Number of facilities Koon Town 3 whose CHDCs held Health Clinic, 3 each at least three Nyeahn Health 100% 3 Bensonville meetings within the last quarter Hospital Proportion of Koon Town Health Clinic communities with 100% 0 0% Community Health 0 Development



Committee (CHDC) participating in maternal death reporting and response activities	Nyeahn Health Center Bensonville Hospital				
Proportion of maternal and newborn referrals conducted by community health workers	-Koon Town Health Clinic, Nyeahn Health Bensonville Hospital	30% 30% 25%	13 7 16	13 7 16	
1. Number of active CHVs/TTMs providing home based maternal and newborn services	-Koon Town Health Clinic	72	0	0	0%
	-Nyeahn Health Center	88	0	0	0%
	-Bensonville Hospital	27	0	0	
2. Number of FP clients that receive FP	-Koon Town Health Clinic	25%	0	0	0%
commodities through community based distributors	-Nyeahn Health Center	25%	0	0	0%
	-Bensonville Hospital	25%	0	0	0%



### PROGRAMME REPORT FORMAT

#### **EXECUTIVE SUMMARY**

Liberia MPTF partners represented by UNFPA, WHO and UNICEF have continued to contribute to restoration and strengthening of high quality, rights-based health services in Liberia, as well as increase demand, access to and utilization of maternal and newborn health care services in line with the National Health policy. Towards this end, the partnership has received funding aimed at improving maternal and newborn health through the delivery of the standard package of maternal and newborn health interventions in the remotely-located Todee and Careysburg Districts of Montserrado County.

Supportive joint field assessments and supervision have yielded the availability of baseline data for implementation of the project.

At the level of the communities, CHDCs has been activated since the Ebola virus disease outbreak and requires support to strengthen the MNDSR committees at all of the project sites. Others include a gradual achievement of targets in the areas of safe facility-based deliveries, number of pregnant women attending ANC visits, proportion of obstetric complications managed at facilities, referrals of maternal and newborn cases by community health volunteers and the number of clients accessing FP commodities at facility levels.



#### **Narrative**

Joint assessments between the UN Agencies (WHO, UNICEF & UNFPA) and the Montserrado County Health Team were conducted last quarter to update the data and provide the needed to establish the baselines for the project, identify gaps and inform the community of their role and responsibilities for the project implementation.

In collaboration with the Montserrado County Health Team, the project engaged the communities earmarked on the re-activation of CHDCs in all catchment communities of the three project facilities. This led to these committees commencing regular monthly meetings to include the discussion on maternal death reporting and response activities in a bid to strengthen the Maternal Neonatal Death Surveillance Response (MNDSR) at the community-level.

Detailed assessment of health facilities and staff was done to determine their level of preparedness for provision of EmONC services, identify gaps for attention and strategize plans for implementation. A detailed technical assessment of WASH facilities was also conducted and completed during the quarter under review. Plans for implementation of WASH activities as identified in assessment are underway.

Relative to proportion of safe health facilities' deliveries, Koon Town Clinic recorded a total of 42 deliveries (13.4%) against 313 deliveries representing 80% as targeted deliveries. Nyeahn Health Center reported 26 (7.3%) of 357 (70%) deliveries at the end of the reporting period while the only hospital, Bensonville, reported 72 (4.9%) of 1,451 (100%) deliveries. Of these number of deliveries, there were successful managements of complications at each of the facilities. Koon Town had 8 complications, Nyeahn 4 and Bensonville Hospital 22 representing 10%, 4% and 6% respectively.

Reports from the project facilities show some gradual increment in the number of women attending ANC visits against a set target; Koon Town Clinic reported 16.9%, Nyeahn Health Center reported 21% while 11.4% is attributed to the Bensonville Hospital.

Constraints: This project had a very slow start due to delays in the receipt of funds by various partners' agencies, and as such a no cost extension has been requested.