

Improving malaria case management in Kenya

The MalariaCare partnership is a five-year effort led by PATH and funded by the US Agency for International Development (USAID) under the President’s Malaria Initiative (PMI). The partnership works in PMI focus countries and other countries in Africa and the Mekong Region to scale up high-quality diagnosis and treatment services for malaria and other life-threatening illnesses.

MalariaCare works closely with the Kenya Ministry of Health’s National Malaria Control Program (NMCP) to help local government health authorities build malaria case management quality assurance (QA) systems across more than 800 health facilities in Western Kenya. These QA systems include training and onsite supervision to help health providers correctly diagnose all suspected malaria cases before treatment is provided and to ensure that appropriate treatment is given to each patient—whether they have malaria or another disease. County and sub-county level clinical and laboratory health receive technical training aimed at building a team of local supervisors who will, in turn, supervise and mentor facility clinical and laboratory health providers.

MalariaCare is working in eight high-burden counties in Western Kenya: Migori, Homa Bay, Kisumu, Siaya, Vihiga, Kakamega, Busia, and Bungoma.

Context for MalariaCare in Kenya

Roughly 70 percent of Kenya’s population is at risk for malaria. The majority of those at highest risk (17 million people) live in areas of epidemic and seasonal malaria transmission. An additional 12 million people live in malaria-endemic areas.

To achieve the government goal of 100 percent appropriate management of suspected malaria cases by



2018, the Kenyan NMCP has started implementing: (1) a dual strategy using rapid diagnostic tests (RDTs) at lower level facilities and laboratory-based microscopy at higher level health facilities; and (2) universal, appropriate treatment based on the result of the diagnostic test. MalariaCare is supporting this goal by working closely with the NMCP to implement a system of high-quality assured malaria case management—including training, on-site supervision, and mentoring (known as “outreach training and support supervision [OTSS]”), electronic data collection, and follow-up evaluation and implementation of lessons learned. The system involves continuous problem solving and program enhancement, with the end goal of a fully operational, test-based approach to triage and treatment of febrile patients.

PRESIDENT’S MALARIA INITIATIVE



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Objectives

MalariaCare's activities in Kenya aim to achieve the following objectives:

- Improved accuracy of diagnostic testing for malaria to greater than 90 percent.
- Increased percentage of patients suspected to have malaria or febrile illnesses who receive a diagnostic test for malaria.
- Increased percentage of patients who receive appropriate treatment for malaria or other febrile illnesses to 100 percent—consistent with the result of the diagnostic test.
- Strengthened laboratory systems at the country level for detecting malaria and other infectious diseases.

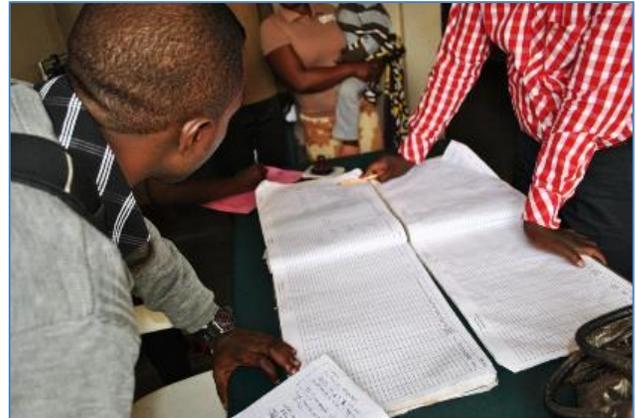
Key activities

Building diagnostic capacity. To improve QA of malaria and other febrile illness diagnostic services, MalariaCare is building capacity at the county, sub-county, and health facility level. Representatives from county Malaria Reference Labs participate in advanced malaria microscopy diagnostic training, while health providers from lower level health facilities receive training on basic diagnostics and RDTs.

Improving malaria treatment. To further strengthen clinical practice, the project is also working with health management teams to train clinical providers in enhanced clinical case management for malaria.

The best of these trainees are then selected to provide ongoing mentorship in their region as laboratory or clinical OTSS supervisors. Supervisor teams, made up of one laboratory and one clinical member, conduct regular OTSS visits to health facilities during which they mentor health workers on key technical components of patient diagnosis and treatment. The laboratory team members focus on improving the quality of diagnostic testing and on communicating test results to clinical staff. The clinical OTSS supervisors help ensure adherence to test results and rational use of medication for malaria and other febrile illnesses.

In addition, MalariaCare is working with implementing partners throughout Western Kenya to provide QA system training to all lower-level health facility staff who use RDTs. While supporting individual health providers, MalariaCare also will help strengthen relevant committees, such as Hospital Medicines and Therapeutic Committees and Kenya's Continuous Medical Education Forum—groups that work with providers to monitor adherence to test results.



*A supervisor reviews clinical registers for provider adherence to malaria diagnostic test results.
Photo: PATH*

Contact MalariaCare

Phone: 202.822.0033

Email: MalariaCare@path.org

