



Appreciation to the Global Fund, the Government of Rwanda, the Roll Back Malaria, the World Health Organization who provided funding and support for this meeting.

Malaria Review and Planning Meeting for East Africa 2010

4-8 October 2010, Serena Hotel, Kigali, Rwanda

WORKSHOP GUIDE AND TOOLS

Organized by WHO Inter Country Support Team for East and Southern Africa, the Republic of Rwanda and the Roll Back Malaria Partnership EARN

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1 Introduction

The annual malaria review and planning meetings are convened every year for national malaria programmes, WHO and their partners in East and Southern Africa. These meetings aim to review the malaria control programme achievements of the previous year and to plan activities for the following year. They also provide an opportunity for countries to peer-review and discuss approaches and strategies in order to achieve set targets and the MDGs.

This is 2010, 10 years after the 2000 Abuja Declaration, 5 years after the Abuja Call and the target year for the achievement of Universal Coverage. This meeting will thus focus on reviewing country programme achievements for the past season and since 2000. The meeting will be held in form of two meetings: the first will focus on strengthening malaria surveillance in high and low burden countries; the second meeting will focus on reviewing the progress made and planning for 2011 and 2015.

2 Purpose of this Document

This document has been drawn to guide national malaria programme managers, facilitators and presenters during the meeting. The information sought in each of the sessions, is expected to be precise, short and sweet!! Additional information that presenters would like to communicate is encouraged but may not be restricted to plenary presentations. On request country specific information that a country would like to share with others may be put on the conference CD which will be made available to you immediately after the meeting has ended. Kindly, note that all presentations and posters are required to be handed in for inclusion on the conference CD. We would like to encourage all presenters to work with the conference organizers to facilitate capturing of this information.

3 Meeting Objectives and Outcomes

The main objectives of this meeting are:

- 1) To promote development of high-quality routine malaria surveillance systems in East and Southern Africa
- 2) To provide a forum for programme review, experience sharing and joint planning for national malaria programmes

Key Outcomes

The key outcomes of the 5 day meeting are as follows:

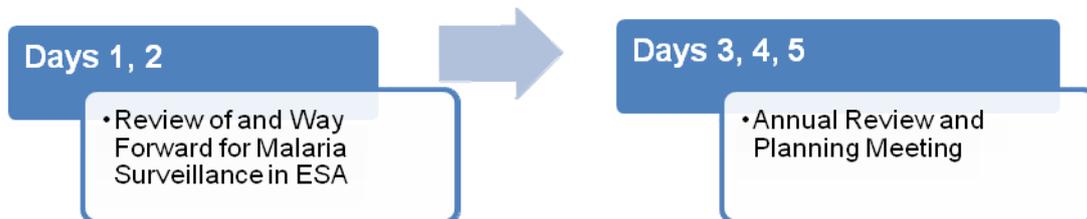
- 1) Routine malaria surveillance reviewed and a plan made for the way forward for strengthening it in East and Southern Africa.
- 2) Progress made by NMPs reviewed, experiences shared and a way forward outlines for each country.

4 Participation

Participants are drawn from the East African Roll Back Malaria Network (EARN) country programmes (Burundi, Comoros, Djibouti, Eritrea, Ethiopia, Kenya, Rwanda, Somalia, North Sudan, South Sudan, the United Republic of Tanzania (Mainland and Zanzibar) and Uganda).

5 Meeting Organization

The workshop is organized by the World Health Organization Inter Country Support Team for East and Southern Africa and the Country Office together with the East African RBM Network (EARN). This meeting is a six day meeting organized to flow as follows:



6 Documentation to the meeting

All programmes are expected to bring the following documentation along for this meeting:

- a) Your national malaria annual report covering the just ended malaria season implementation.
- b) Your draft or final national annual malaria plan for the period 2010-2011 malaria season.
- c) Your current national malaria strategic plan.
- d) Your current Global Fund Proposals under implementation or submitted for Round 10.
- e) A country presentation as outlined in Session XXX.
- f) A 2000-2010 progress report.
- g) Your country WMR 2010 report filled form
- h) Your annual report for 2009
- i) Your monitoring and evaluation plan and surveillance related data and information.
- j) Any other document that the programme deems necessary for the meeting.

7 Presentations

As a general rule, all the presentations should be done in Microsoft PowerPoint. We advise that the number of slides should be limited to a maximum of 10, concentrating on the main issues and the message you would like to communicate. All the presentations, and any other additional information, will be copied onto CD's for each of the programmes to take away after the meeting. The conference will use computer projectors.

8 Facilitators Meetings

At the end of the day, facilitators, chairs and rapporteurs of the day and the following day will meet to discuss the progress of the day's work, key lessons learnt and proposed solutions for the following day. The items for discussions are as follows:

- a) Review of the day's activities and sessions.
- b) Overview of next day's agenda and distribution of tasks for the following day, if appropriate.

9 Meeting Rapporteur

Rapporteur and collection of presentations will be coordinated by WHO IST. The organizers will need good rapporteur from all those assigned to do day rapporteur. Day rapporteurs are requested to produce their report by the end of the day. This report should be discussed with the organizers before the following day, ready for presentation. Note that the rapporteurs should avoid discussing presentations presented but rather discuss and note the issues discussed emanating from the presentations, and their conclusions and action points.

The rapporteurs' report for each day will be structured as follows:

- Key achievements presented by countries
- Issues emanating from presentations and discussions.

10 Conference Methodology and Tools: Session by Session

All presenters and participants are requested to keep to time. If more time is needed for any presentation the conference coordinator should be informed so that adjustments can be made in advance.

Meeting One: Strengthening Malaria Surveillance in ESA

The main objective of this meeting is to promote development of strong routine malaria surveillance systems in East and Southern Africa.

Specific Objectives

- 1) Review the science and evidence behind the use of routine data for surveillance and logistics monitoring
- 2) Review existing country level systems for surveillance and logistics monitoring
- 3) Discuss draft WHO guidelines on surveillance and logistics monitoring
- 4) Develop country work plans for improving routine malaria surveillance monitoring.

10.1 Session 1: Official Opening

The official ceremony timetable will be made available to conference participants separately but prior to the event. During the official opening, objectives of the ARPM will be presented by the organizers. Programme managers are asked to make their team stand and present them one by one. We would like to stress the need for you to stand up when being presented by your programme manager. We are asking all partners taking part in the meeting to do the same, especially if there are several of you from the same organization. We are requesting all to comply with this arrangement in order to gain on time. We are also asking all participants to be in the conference room early on the first day and to start on time. After the official opening by the Minister of Health we are asking all participants to participate in the group photograph to be taken immediately after the conference has been officially opened and before your cup of tea/coffee.

10.2 Session 2: Overview of Malaria Surveillance in East and Southern Africa

This session will present a status of the malaria surveillance system in ESA. This will be followed by an explanatory session on the science, evidence and epidemiology behind routine systems. This session will give practical examples from both low and high burden situations. The last part of this session will give space for countries to present on use of cell phones in malaria surveillance.

10.3 Session 3: Elements of Surveillance in High and Low Burden Countries

This session presents on elements of malaria surveillance in low and high burden countries giving more details about collection, analysis, interpretation, and dissemination of malaria data, including transmission. This session will not deal with the action part of the surveillance loop. A presentation on core indicators, data elements, core graphs and interpretation for high burden countries will also be made. This session should be seen as an open session where participants should be free to ask to enhance understanding. Thus, facilitators are requested to make sure that after presentation they open the sessions up for inputs from countries since putting these concepts into context would be the best way to enhance acceptability and

usability. The session will end with some presentation on use of mapping in surveillance. An example of mapping from a country(ies) will also be given.

10.4 Session 4: WHO Guidelines for Routine Surveillance

This session will discuss topical issues on malaria burden estimation. GMP has developed a method for estimating burden in high and low burden countries. Countries are asked to take up the Excel sheet for the burden estimation and test it in their countries focusing on the assumptions used and closely looking at the outputs (estimated number of cases and deaths). An overview of the WHO/AFRO Routine Surveillance Guidelines will be presented followed by a series of feedback mechanism examples from the lowest level to continental level. In order to gain on time on Session 6 we propose to start Group Work by country after this presentation. The purpose of the group work is to start looking at the materials so far presented and decide on where the malaria surveillance system in your country needs to do in order for it to report on the appropriate key indicators for your country. The following are the key issues to be discussed and a way forward needs to be drawn. This group work will also continue in Session 6.

<p>Step 1 - Indicators Look through the Indicators</p> <ol style="list-style-type: none"> 1) Of these which ones are you collecting at health facility level? 2) Which other ones are you also collecting at health facility level? 3) Of the list which ones are reported to the district level? 4) Which other ones are you reporting to the district level? 5) Of the list which ones are reported to the national level? 6) Which other ones are you reporting to national level? 7) Look at the proposed graphs (which ones can you produce? Any others that you think are important?) <p>Step 2 - Feedback</p> <ol style="list-style-type: none"> 1) What feedback are you providing to the lower levels? 2) How are you disseminating this information to stakeholders? 3) How regular? 4) Do you have capacity to do feedback regularly? 	<p>Step 3 – Supervision</p> <ol style="list-style-type: none"> 1) Do you have malaria focal points at the district and regional levels? 2) Are they supervising the district and health facilities on the trends of disease surveillance indicators? <p>Step 4: Performance Assessment</p> <ol style="list-style-type: none"> 1) Is there quarterly national performance assessment involving regional malaria focal points? 2) Is there quarterly regional performance assessment involving district malaria focal points? 3) Are you using usual monthly meeting of health facility staff at the district level to examine surveillance trends? <p>Step 5: Gap Identification Look at the continuum – collection, analysis, information, dissemination, action Where is the problem situated in order for you to strengthen the system?</p>																																																																																																		
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10.5 Session 5: The Role of Partners in Malaria Surveillance

Malaria surveillance is mainly under the coordination of national malaria programmes. This session will discuss the role and potential roles of partners in strengthening malaria surveillance for the malaria programme. The session will also involve development of a costed way forward for strengthening malaria surveillance in countries. The session will also explore possibilities of using performance based funding for malaria surveillance instead of putting too much emphasis on surveys.

10.6 Session 6: Group Work – Way Forward

This session is designed to discuss the way forward for the various issues discussed in the two days (See Group Work in Session 4). Participants will be divided into country to review appropriateness of surveillance indicators and identify relevant indicators, data elements, data collection, analysis mechanisms, feedback and dissemination mechanisms. The groups will also discuss the way forward for to improve malaria surveillance in the country. The report back format will be communicated to you during the introduction of this session.

Meeting Three: Annual Review and Planning Meeting

The main objective of **Meeting Three** is to provide a forum for programme review, experience sharing and joint planning for national malaria programmes in ESA.

Specific objectives

- 1) To share experiences on MIS, MPR and MSP in East and Southern Africa.
- 2) To review country road maps and progress towards targets and country programme reporting.
- 3) To provide a forum for partners to share experiences in supporting NMCPs.
- 4) To finalize plans and technical support needs for 2011.

This is the main annual review and planning meeting which will involve all countries in East and Southern Africa.

10.7 Session One: Experience sharing on MIS, MPR and MSP in ESA

This session will discuss experiences in the subregion on Malaria Indicator Surveys (MIS), Malaria Programme Reviews (MPR) and Malaria Strategic Planning. The session will expect discussion and comments from the floor.

10.8 Session Two: Technical Updates

This session is reserved for key updates from a sub regional perspective. These updates will discuss just the key issues which are of importance as we move from 2010 to 2015.

10.9 Session Three: Country Progress Updates

In this session the focus is on discussing country progress made towards achieving the 2010 targets. Each country will make a presentation on the key country progress achievements and main gaps. This presentation should be linked to the Roadmap presentations made in previous meetings. The participants of the meeting will be asked to comment on the presentations in order to refocus efforts as we move towards 2015.

The presenters are will focus on achievements for the year but also for the period 2000-2010.

The following outline is to be followed by all presenters:

Slide 1: Name of Country**Slides 2-3: Achievements – Impact 2000-2010**

- a) Reduction in Morbidity
- b) Reduction in Mortality
- c) Malaria epidemiology

Slides 4-6: Achievements – Coverage 2000-2010

- a) Progress made in Vector Control: ITNs/LLINs, IRS, MIP (focus on coverage and numbers delivered over the years).
- b) Case Management: Number of ACTs or 1st line drug delivered or administered, number of RDTs used 2000-2010. You can include other indicators.

Slide 7: Key Factors that facilitated these Achievements**Slide 8: 4 Key challenges and 4 Key solutions as we focus on 2015****Slide 9-10: Progress on the Roadmap**

10.10 Session Four: Progress Reporting

This session focuses on reporting on progress from the lowest to the highest level. This will include discussions on the WMR reporting and Africa Malaria Report. An overview of the 2000-2010 reporting will be also presented and discussed. After this the participants will be put in groups to peer review the country report produced according to the format sent to all ESA countries. Feedback on these reports will be made in plenary.

10.11 Session Five: Partner Forum

This session has been arranged to hear the response from partners and stakeholders to the country needs outlined earlier. For now, this session will be in form of a plenary where all the partners will be asked to say what they will do to support the countries to achieve the 2010 Targets and beyond based.

10.12 Session Six: Planning and Way Forward

Using some of the information from the previous sessions and prior meetings countries will go back to their groups and finalize their plans and identify TA needs for their countries from October 2010 to end 2011. The proposed format for identification of TA follows.

Area of Work	Activity	Type of support	Partner	Proposed Timelines (Months)													
				O	N	D	J	F	M	A	M	J	J	A	S	Q4 11	Q1 12

This session will also discuss conclusions and way forward agreed during the constituency meetings. Each rapporteurs of the constituency will present their recommendations and the meeting will provide their contributions. All stakeholders are included in this and this work will have been done in prior meetings held under SARN. A general discussion will follow before looking and the meeting conclusions and recommendations proposed by the meeting organizers. The meeting will end with a closing ceremony as guided by the Ministry of Health of Rwanda.