PEC Pilot Stakeholder Meeting

To kick start the implementation of the Facility-based PEC Pilot Project, the Ghana team had an engagement meeting with stakeholders from the Ghana Health Service in the 2 intervention regions; Upper East (UER) and Central regions (CR). These meetings were organized to 1. Update stakeholders on VFAN programme activities; 2. Introduce to stakeholders the intended Facility-based PEC Pilot Project and 3. Obtain from stakeholders their inputs on key implementation issues such as Facilities where pilot will be implemented and personnel to be trained, issues of referral uptake and how to enhance that, reporting indicators for the pilot project and the feasibility of implementing a revolving fund system for the sale of reading glasses. Following these engagements, all 4 districts (Bongo district and Talensi district in UER and Agona West and Abura Asebu Kwamankese (AAK) districts in CR, have submitted their list of facilities and participants for the training. A set of tentative reporting indicators have also been put together and suggestions on how to improve referral uptake and improve health promotion. The districts also pledged their commitments to ensure the intervention is successful.

To comply with protocols for stopping the spread of COVID-19, participants were provided with hand sanitizers during the meeting and social distancing was adhered to. The wearing of face mask was also enforced during the engagement meetings.

PEC Pilot Baseline Assessment

A baseline assessment was conducted with the purpose of gathering data that will give deeper understanding of the existing situation in the PHC facilities with respect to PEC, gather feedback from the district management team on issues related to health management, monitoring and supervision of health services and the role the health management team can play in the monitoring and supervision of PEC at the PHC level. The assessment was also an opportunity to understand the knowledge, attitude and perception of community members about eye health. This knowledge will be very useful in the design of a health promotion strategy for the project.

And Prosper picked up a new skill. The assessment was also a great opportunity for capacity building. Racing against time and still with a lot of activities to be conducted, Prosper, the team driver was available to provide support. Prosper was trained and supported to conduct interviews for the community knowledge, attitudes and perceptions assessment.

A total of 40 health facilities were assessed and focused group discussions conducted with the health management team of all four districts. This activity is on-going and data analysis will commence right after the field activities.

Pacesetters: Stephen Leads the Way

Stephen was one of the first set of nurses trained and supervised to conduct school screening in the Agona West District. Stephen was recently posted to a new facility in the district and he saw the opportunity to offer PEC services to his community members. Stephen does vision screening, treats minor ailments for eyes and refers more complex cases.

This is evidence that PEC at PHC level is sustainable and ample sign that the service would be provided even when VFAN pulls out of direct implementation of the intervention.

Collaboration: GHS and VFAN Work Together

Collaboration is the best way and the only way to ensure that PEC is successfully integrated into PHC systems. In the Abura Asebu Kwamankese district, not only did the district health information officer support the baseline team by being a tour guide to the various facilities, she also took part in the data collection process, conducting interviews for knowledge, attitude and perception assessments.

In all four districts, the VFAN team enjoyed great support form the GHS team during the baseline with staff dedicating their time to take the team round to the facilities, mobilizing the facility staff and in some cases community members to participate in the knowledge assessments.