Data Abstraction Tool

FP, ANC, L&D and Immunization-specific analysis

COVID-19 RMNCH Policy Analysis

DRAFT 12/4/2020

*Instructions: Please fill **one** form in for every policy reviewed.*

Name of Country: Kenya

Name of Policy: Guidance on Continuity of Essential Health Services During the COVID-19 Pandemic

Date of Issuance: July 2020

Authority Issuing: Ministry of Health

Name of analyst(s) and date: Katie Williams, 12/4/2020, Marya Plotkin 12/15/2020

Comments on distribution of policy (format, media, levels): Paper draft

Any known mechanisms for enforcing policy (please describe):

Overview: *This guidance, issued by the MOH, is general to all health services rather than being specific to RMNCH, but contains a section on Newborn and Child Health (5.1, pg 16) and Reproductive and Maternal Health (5.2, pg 17) which refer back to April 2020 guidance. The purpose of this guidance is "to advise healthcare managers and healthcare workers on the provision of Essential health care services during the COVID-19 pandemic in Kenya" (pg. 1). The guidance is meant to be used in tandem with existing infection prevention and control guidelines (pg. 1).*

Does this policy include (**BOLD** all that apply): **FP** **ANC** Labor and Delivery/ Intrapartum **Immunization** **Cross-cutting Health Services** **Cross-cutting Population/ Society**

Instructions: Please qualitatively describe specific guidance about the key policy factor described in the policy. Please note any important themes arising under "Other."

Section 1. Key Policy Factors for FP, ANC, L&D and Immunization_____

1a. Family Planning Service Provision

Overview: *FP services remain an essential service during COVID-19, including both the provision of methods and counseling on methods (pg. 4). There was limited FP service provision guidance in this policy. It referenced the earlier Kenya COVID19 Guidelines document, "A Kenya Practical Guide for Continuity of Reproductive, Maternal, Newborn and Family Planning Care and Services in the Background of COVID19 Pandemic"*

Types of methods provided through public sector:

Not mentioned

Outreach versus facility-based service provision (and timing of services):

Not mentioned

Recommendations on multi-month dispensing:

Not mentioned

Method switching:

Not mentioned

Other:

The policy states that resumption of elective surgery (which would include vasectomy and bi-tubal ligation not associated with postpartum care) will take place "when there is a sustained reduction in the new COVID-19 cases in the geographic area for at least 14 days" and when it is clear that the facility has enough human resources and supplies and equipment to support surgical procedures (including PPE, beds both ICU and non-ICU, ventilators, anesthetic and medical surgical supplies). (Pg 6) Additionally, the need for preoperative testing for COVID prior to surgery is discussed with preference for testing clients and getting results 72 hours prior to surgery (pg 26).

1b. ANC Service Provision

Overview: *There was limited ANC service provision guidance in this policy. It referenced the earlier Kenya COVID19 Guidelines document, "A Kenya Practical Guide for Continuity of Reproductive, Maternal, Newborn and Family Planning Care and Services in the Background of COVID19 Pandemic"*

Recommendations on timing and number of visits:

Clinic visits may be reduced to 4 face-to-face and supplemented with consultations via telephone (pg. 17)

Recommendations on multi-month dispensing of ANC medicines:

Not mentioned

Telemedicine visits:

Other:

1c. Labor and Delivery Service Provision (Intrapartum Care)

Overview: *Not included*

Closure of maternity waiting homes:

Support person during labor:

Other:

Triage:

Breastfeeding:

Postpartum FP:

Facility or home-based postnatal care visit:

1d. Immunization Service Provision

Outreach versus facility-based service provision: *The policy states that routine immunization services are to continue, and the guidelines emphasize a preference for less crowded facilities be used for services to minimize exposure (Level 2 and 3 facilities) (pg. 17). If immunization services are conducted at larger health facilities, they should be set up in "separate spaces akin to an outreach post service." Infants and caregivers coming for immunization services should be triaged for possible exposure to COVID and sent to the appropriate point of care.*

Immunization campaigns, which are mentioned as critical for coverage, are to be organized AFTER the pandemic to reach all children in need of immunization (pg. 16).

Change to schedule: *Mothers are to be given specifically scheduled appointments as much as possible (pg. 17).*

Community information on campaigns: *CHV are to be used to mobilize mothers to continue seeking immunization services (pg. 17). The policy emphasizes "continuous communication on availability of health services as well as emergency immunization strategies at all levels" (pg. 17).*

Other: *The guideline refers to Kenya Pediatric COVID-19 Guidance as an additional resource.*

1e. Other

Section 2. Key Policy Factors: Cross Cutting Health Service Provision_____

2a. PPE:

The policy states that health system managers should ensure resources are allocated appropriately, including PPE (pg. 15)

2b. Establishing designated COVID-19 health facilities:

2c. Human Resources for Health (including absenteeism, compensation, work station or shifts, other HRH-related)

2e. Testing health care providers or clients for COVID-19:

2f. Telehealth/Telemedicine

The policy includes a section focused on the use of digital platforms in order to "better manage COVID-19 and maintain essential health services" (pg. 14). This includes video chat or text message alternatives to clinical consultations, digital applications for in-service training, e-prescription mechanisms, and

centralized websites and digital messaging systems for information sharing with providers and patients (pg. 14).

2g. Other cross-cutting health service provision (please describe):

Community mobilization:

Stigma/psychosocial needs: *This guidance states that there should be an addressing of any concerns regarding stigma towards providers or patients impacted by COVID-19 (pg. 14).*

Communication strategies:

Section 3. Key Policy Factors: Cross Cutting Population / Society_____

3a. Curfews and/or restrictions on movement:

Curfews are mentioned as a challenge connected to reported cases of maternal and child deaths (pg. 2).

3b. Face masks:

Mentioned in a flow chart for patient flow for ophthalmic services (pg. 33).

3c. Other (please describe):