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# **RE-THINKING HEALTH CARE SYSTEMS TOWARDS RESILIENT UHC —RESPONSE OF KENYA HEALTH CARE SYSTEM TO COVID-19**

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- Globally, 260 million cases and 5 million deaths from COVID-19 (World Health Organization, 2021).
- As of 5<sup>th</sup> December 2021, Kenya had 255,437 cumulative confirmed cases of coronavirus (COVID-19), with 5,335 deaths and 248,426 recoveries. As of 31 May 2021, Kenya had 0.1% of cases, death and recoveries globally.
- Initial actions by the Ministry of Health in early 2020 included social and preventive measures (social distancing, mask wearing, hand washing).
- Government sent out directives for each county in terms of isolation beds, ventilators, oxygen capacity and training. Each county developed context specific plans for continuing services at facilities.
- Health sector funding increased from government/donors. Counties were funded from the national level for training, supplies and resources.
- Lockdown, curfews, institutions closed.



## KEY ACTIONS UNDERTAKEN DURING THE FIRST 3 MONTHS OF THE PANDEMIC IN KENYA

- **Coordination:** At the onset of COVID-19 in Kenya, Ministry of Health (MOH) launched the National Response and Emergency Committee (NERC) to steer the country's prevention, containment, and mitigation measures.
- **Case Management and Infection Prevention & Control:** e.g., for home-based care for patients with COVID-19 and protocols.
- **Identification of health facilities** managing the COVID-19 cases across the country.
- **Increased Surveillance,** Laboratory services and monitoring Points of Entry.
- **Health information:** Daily reporting of COVID-19 cases which generated demand for daily statistics.





### 1.2 Cumulative Cases

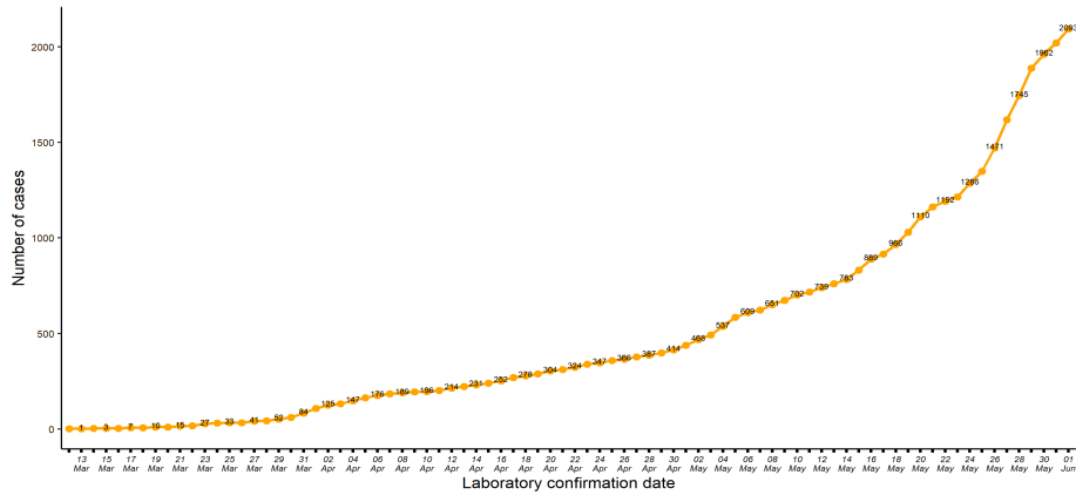


Figure 2: Cumulative case load

- The number of infections steadily increased from March 2020. The rapid increase of infections afforded no time for legal frameworks to be developed.
- The Kenya Ministry of Health produced guidelines to ensure continuity of health services within set standards.

# INTERIM GUIDELINES FOR CONTINUED PROVISION OF HEALTH SERVICES IN THE CONTEXT OF CORONA VIRUS PANDEMIC IN KENYA (2020)

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- Interim Guidelines on Human Resource for Health during COVID-19 response
- Interim Guidance for Continuity of Nutrition Services in the Context of COVID-19 Pandemic.
- Interim Guidance on Provision of Services for Non-Communicable Diseases (NCDs) during the Covid-19 pandemic
- Community health services guidelines
- Guidance for Implementing Home Care for People not Requiring Hospitalization
- COVID-19 Guidance on Comprehensive HIV Service Delivery
- Covid-19 SOP for Counsellors and Psychologists
- Interim Infection Prevention & Control Recommendations for Covid-19

# HUMAN RESOURCE FOR COVID-19 (MOH GUIDELINES MAY 2020).

Projecting and planning	Projecting and planning for the number and cadre of health workers needed for the response in various areas and levels of the response e.g., for setting up isolation and critical care centres for COVID-19 patients; doctor-to-patient ratio is approximately <b>one to 16,000</b>
Management	Planning work shifts, welfare of the workers and risk assessment to mitigate risk of fatigue, burnout and transmission of infections. Staff to patient/ratio according to cadres/specialty
Equipment	Providing appropriate Personal Protective Equipment (PPE) for health workers as recommended by World Health Organisation.
Training	Training and capacity building

# **TRAINING & CAPACITY BUILDING FOR HEALTH WORKERS MANAGING MANDATORY QUARANTINE FACILITIES**

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1. Case management protocol for COVID-19
2. Infection Prevention and control
3. Use of PPEs and its rationalization
4. Community engagement
5. Health worker risk assessment and surveillance

# COMMUNITY HEALTH SERVICES GUIDELINE

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- **SUPPLIES:** Personal Protective Equipment (PPE) and Infection Prevention & Control (IPC) supplies for Community Volunteers and Health Assistants to ensure continued provision of community-based services during the COVID – 19 pandemic:
  - Surgical face masks • Gloves • Hand sanitizer & containers • Soap • Cleaning/disinfecting supplies • Trash bags, trash cans and other receptacles to safely dispose off contaminated PPE.
- **SUPPORTIVE SUPERVISION:** When possible, monitoring will be done on phone.
  - Supervisors and CHVs must observe social distancing and wear basic PPE for all in-person supervision visits
  - Training on new protocols for health messages and infection control measures,
  - Guidance on household visits (e.g., pregnant women, new-born, childcare),
  - Phone contacts





## AN APPROACH FOR MAINTAINING SERVICE USE

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- Use of trained Community Health Volunteers (CHV) for contact tracing and containment, resulted in decreased hospitalization.
- Household visits and referrals for maternal and child health.
- Encouraging facility deliveries.
- Health information: Daily reporting of COVID-19 cases which generated demand for daily statistics.

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- **Monitoring of adherence** to preventive measure and vaccine hesitancy in communities through surveys (MOH 2021)

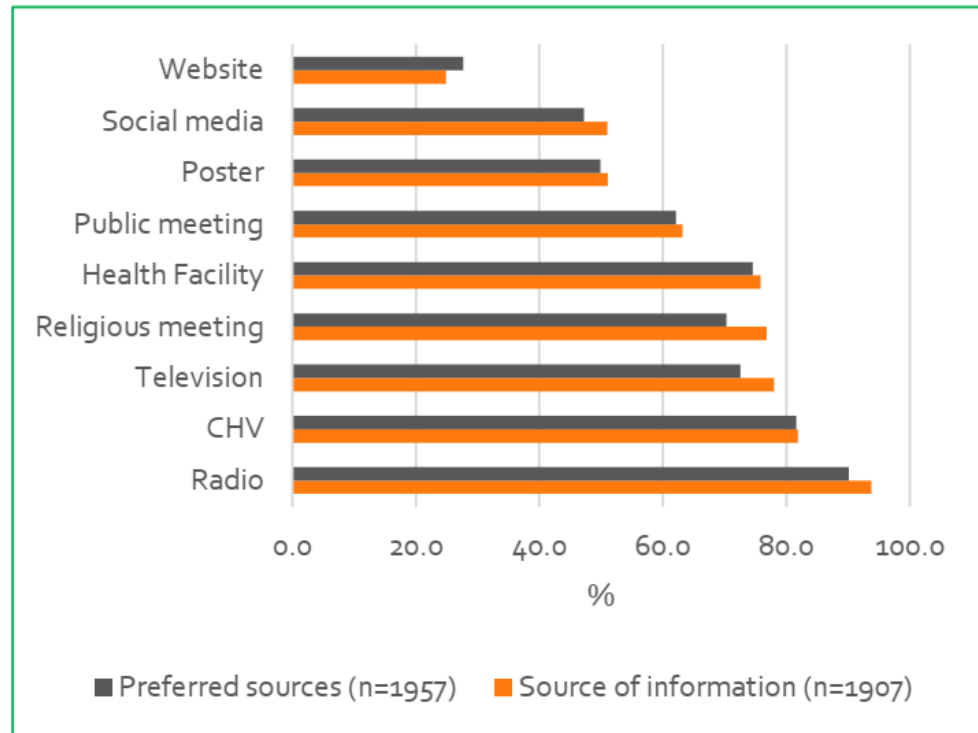


Figure 2: Covid-19 information sources and preferred sources



Ministry of Health

# COVID-19 UPDATE

7th December 2021

New Cases

75

Sample Size

4,771

Positivity Rate

1.6%

Recoveries

8

Recorded Deaths

2

Cumulative Tests

2,863,425

Total Confirmed Cases

255,544

Total Recoveries

248,452

Cumulative Fatalities

5,337

#KomeshaCorona

Call 719 or dial \*719#



Ministry of Health

# COVID-19 UPDATE

7th December 2021

New Cases by Counties

County	Cases	County	Cases
1. Nairobi	26	11. Nyeri	2
2. Kakamega	10	12. Bungoma	1
3. Kericho	5	13. Homa Bay	1
4. Nakuru	5	14. Kitui	1
5. Trans Nzoia	5	15. Migori	1
6. Kiambu	4	16. Nandi	1
7. Mombasa	3	17. Narok	1
8. Turkana	3	18. Taita Taveta	1
9. Uasin Gishu	2	19. Bomet	1
10. Busia	2		

#KomeshaCorona

Call 719 or dial \*719#

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20 million received (7<sup>th</sup> December 2021, MOH), 7m vaccinated. Self-service web portal created by the Ministry of Health to aid in the COVID-19 vaccination process.

#### Services include:

- Vaccinating facilities
- Registration for vaccination
- Vaccination schedule for the second vaccination
- Download of COVID-19 Vaccination Certificate
- Use of health workers and community volunteers for contact tracing and care

# LEARNING FROM COVID-19 RESPONSES TO ACHIEVE UHC

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- Coordinated efforts from multiple actors at global, national, sub-national, including community engagement on:
  - Expertise
  - Funding
  - Resources
  - Information
- Identifying capacities and gaps for planning in normal and crisis periods (e.g., for COVID-19: bed capacities, oxygen, ventilators, workforce were identified and addressed).
- Infrastructure (equipment, health products) preparedness for normal and emergency services.
- Robust time-sensitive Information System (monitoring, evaluation).
- Engagement with communities.
- Health Workers – numbers, training.

