COLLECTION OF FAMILY PLANNING COMMODITIES FROM THE STATE GOVERNMENT

HOW-TO-GUIDE

INTRODUCTION

Access to quality and affordable Family planning (FP) services is crucial in improving Maternal and Child health (MCH) indices in Nigeria. High quality FP services is a key determinant of contraceptive uptake, and availability of a full range of commodities enables a woman to make an informed decision and increases contraceptive uptake and continuation.

In Lagos state, more than 65% of the residents are served by the private sector, therefore eliminating supply barriers associated with the high cost of FP products and services is pertinent to increasing the contraceptive uptake in the state.

Post Pregnancy Family Planning (PPFP) Project

Post-pregnancy Family Planning is an approach to reaching women during pregnancy and in the one post delivery period with the information and services they need to commence using family planning during this crucial time.

The Post Pregnancy period is the period of pregnancy till one-year post delivery including any pregnancy that does not result in a live birth

The PPFP project aims to improve contraceptive uptake in the private sector by integrating FP services along the Maternal and Child Health continuum of care (ANC, delivery, PNC, immunization).

To enable the private sector, provide affordable FP services to its clients, the project recently obtained approval from the Lagos State Ministry of Health for the provision of free commodities to the supported private health facilities.

This collaboration between supported private health facilities and the State Government is based on certain criteria and steps as stated below in this document.



POST PREGNANCY FAMILY PLANNING

FAMILY PLANNING TERMINOLOGIES

RIRF: Requisition Issue and Report Forms

FP reporting cycles: Two monthly (Jan-Feb, Mar-April, May-June, July-Aug, Sep-Oct, Nov-Dec)

NHMIS: National Health Management Information System

DCR: Daily Consumption Records

DHIS: District Health Information System

LGA: Local Government Area

M&E: Monitoring and Evaluation

FP: Family Planning

SDP: Service Delivery Points

ANC: Antenatal Care

PNC: Post Natal Care

COMMODITIES

- From 2012, to reduce the low contraceptive prevalence rate in Nigeria, family planning commodities were provided free in the public health facilities.
- Due to the vibrant private sector in the state, and to reduce missed opportunities, access
 to the free commodities was extended to the private health facilities to enable them
 provide family planning service at a minimal cost to cover the cost of consumables.

Costs approved by the State Government

Commodity	Proposed cost (N)
Condoms	Free
Oral contraceptive pills	N500
Injectables	N500
Intrauterine contraceptive device	1,000
Implants	1,000

ELIGIBILITY CRITERIA

- Availability of a qualified and trained family planning service provider
- Willingness to provide affordable FP services
- Evidence of regular submission of NHMIS monthly summary forms to the LGA on or before the 3rd of the following month
- Regular submission of RIRF to the LGAs every 2 months, irrespective of the availability and source of commodities.

COLLECTION PROCESS

- Step 1: The facility must ensure that the HMIS monthly summary forms are submitted to the LGA Monitoring & Evaluation (M&E) Officers on or before the 3rd of the following month (acknowledged copy must be stamped/collect triplicate copy). This will ensure that the facility data is fed into the DHIS and collated by the State Ministry of Health.
- Step 2: The Facility/FP Records Officer must submit the RIRF and DCR to the LGA Family Planning Manager on the Istworking day of the next reporting cycle (March, May, July, September, November and January).
- **Step 3:** The facility designated FP provider should contact the LGA FP manager a few days before collection of commodities.
- **Step 4:** The commodities will be collected from the LGAs every 2 month, except for emergency orders