

## **QUALITY HEALTH SERVICE APPROVED BUT THERE IS ROOM FOR IMPROVEMENT**

While the quality of ART services in the Mokhotlong district health facilities gets the thumbs up from the served communities, there is room for improvement. This is the reflection from the recent DPE district- Community Lead Monitoring (CLM) feedback and data collection campaign. In the second half of 2022, DPE listened to the voices of citizens served by the Health Centres in the district in relation to the quality of the ART services they received. The data collected touched on the areas such as accessibility, stigma and discrimination, availability of medicines and the conduct of the staff among others. Earlier in April, the DPE presented the general feedback to the District Health Management Team before visiting individual health facilities. In general, citizens appreciate the support and the bulk supply which has significantly reduced the frequency to visit the health facility, which seems to be one of the positive aspects raised in the feedback. The rudeness of nurses and the late opening of the facilities were identified frequently in the feedback. The DHMT was keen to know the facilities with some shortfalls but the finer details and specificities were kept until the individual health facilities were met on the 26<sup>th</sup> and 27<sup>th</sup> of April 2023. During the health facility feedback, it was noted that patients do not take nurses' harsh approach and late openings opening not lightly. There were some facilities which received feedback that patients have been returned on account of stakeouts, the inadequacy of employees in the clinics was seen as one of the issues to be looked at. Some were not happy because of poor service due to a lack of drugs from some health centres and poor staffing. Given the distances that people travel to the facilities, the arrangement to supply patients with bulk medication to be refilled after three or six months is highly appreciated. In this round-up DPE was able to hear voices from a total of 310 people participated consisting of 151 males and 168 females. This number is for the focus group only excluding the individuals that were interviewed. Why exclude them?

This data will be used as a baseline while the newly collected data would be used to facilitate dialogue between patients and communities serviced by the facilities to find solutions for the challenges and improvement in the areas they are working well. This will result in joint advocacy plans where each health facility will identify things it will improve and those to be tackled by the DHMT. Those that the DHMT may not be able to deal with will be transmitted to the national level.

Besides this, DPE is going to use its renowned Constructive Engagement Advocacy approach to ensure that the national government and the parliament are involved in the efforts seeking a solution. This work is part of the Community Led Monitoring on the quality of ART services in Lesotho.

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