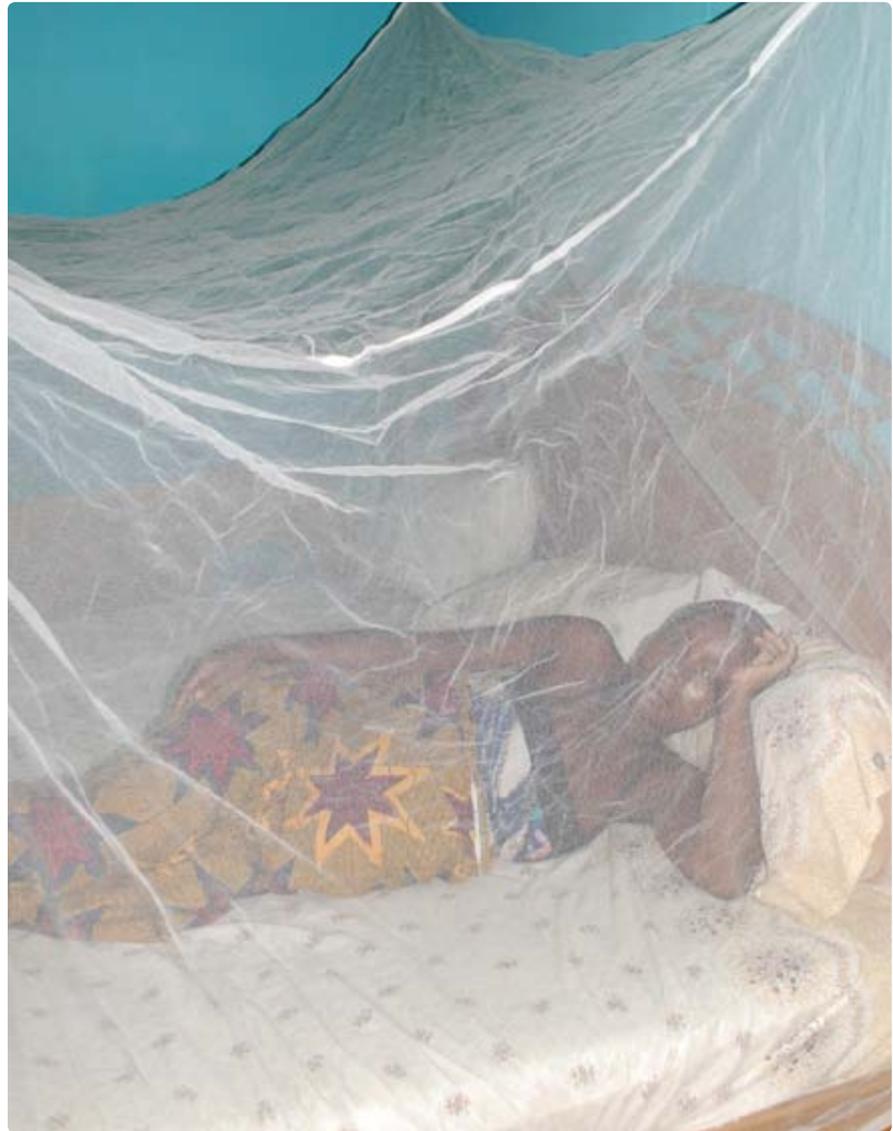


Planned and organised integrated supportive supervision for malaria was non-existent in Nasawara State before 2013. In Wamba general hospital, functional equipment for supportive management including treatment for severe malaria was unavailable, resulting in a challenge in appropriate provision of health care.

In 2013, a malaria integrated supervisory system (MISS) was established and subsequently supervisory visits to the health workers in secondary and primary health facilities began with technical support from MAPS.

**Success Story**

# Lighting up the blood bank

**Supportive supervision identified  
a lack of power at the blood bank at  
Wamba General Hospital**



In late 2014, supervisors realised that Wamba’s blood bank was effectively useless as there was no electricity in the building in which it was housed. The bank wasn’t being used to serve clients that required blood transfusions on account of severe malaria or other conditions, including those most vulnerable such as pregnant women and children.

### Power where it’s needed

The supervisors, together with the facility staff, drew up a plan of action at the visit. The problem was reported to the hospital’s management board as part of the established process of feedback and this resulted in the national electricity grid line being connected to the building. As back-up, an alternative source of power was also provided along with 5,000-watt stabilizers.

A subsequent visit in 2015 revealed that the blood bank is now fully functional and as a result patients with anaemia resulting from severe malaria receive blood transfusions when they need them.

Abdulkarim Toyin, Wamba’s Medical Laboratory Scientist said:

**“Now that we have power the blood bank is helping us to save the lives of people with severe malaria.”**



Abdulkarim Toyin, Medical Laboratory Scientist in Wamba general hospital, explaining the blood bank to the supervisory team.

September 2015

Cooperative Agreement Holder:



Implementing Partners:



Supporting:



MAPS is funded by the USAID through the President’s Malaria Initiative (PMI), implemented in nine states (Benue, Cross River, Ebonyi, Kogi, Nasarawa, Oyo, Kebbi, Akwa Ibom and Zamfara) across Nigeria between 2010 and 2016. FHI 360 is collaborating with Health Partners International and Malaria Consortium to support the implementation of the National Malaria Strategic Plans (2014–2020).