

Project Name: Focus Region Health Project

Number: 641-A-00-09-00030-00

Implementer: JSI

FY 2010 Work Plan

USG Program Element	USG Sub-element	Activity summary	Time Frame	Custom Indicators (*USG OP Indicators in sections below)	Target	Outputs	Budget incl. TA and Indirect costs in USD	Activity Budget (field costs only) in USD
			(Q1 – Q4)					
3.1.6 (Maternal and Child Health)	3.1.6.1: Birth Preparedness and Maternity Services	<p>Improve clinical care and supervision in MNH through:</p> <ul style="list-style-type: none"> Conduct of a cross-sectional maternal and neonatal mortality records' review at district hospitals to identify gaps in standards of care and address them--CR Conduct of maternal and neonatal mortality conferences with district hospital staff and managers quarterly--CR Prioritization of health facilities with poor EmONC outcomes and draw up itinerary for IDS/OJT visits to these facilities to coach/teach service providers on the job. Training/development of a cadre supervisors/trainers in in-depth supervision and on-the-job and supporting them to assist service providers to improve their skills in EmONC at health facilities Provision of needed MNH equipment and furniture for maternity wing/ward at Achimota Hospital--GAR Supporting Ga South District Hospital (Weija) to renovate pavilion for ANC services--GAR Dissemination of IDS/OJT manuals on MNH for use for clinical supervision at health facilities in focus regions 	Q2 - Q4	% Health facilities that provide BEmONC	20%	<ul style="list-style-type: none"> Report on cross-sectional maternal and neonatal records' review produced and disseminated at the facilities for development of local interventions/solutions Reports on mortality meetings prepared and used to track progress of implementation of recommended solutions Facilities with poor EmONC outcomes visited by supervisors and xx service providers assisted and coached on-the-job training to improve their skills Supervisory reports written and shared with facility and DHDs to follow up on service improvement recommendations Hospital equipped and adequately set up to provide in-patient maternal and neonatal care ANC services conducted with improved privacy and confidentiality for client-provider interactions IDS/OJT manuals available and used in supervision of MNH services at all health facilities in focus regions 	411,957	259,992
3.1.6 (Maternal and Child Health)	3.1.6.3: Newborn Care and Treatment	<p>Strengthen the treatment of obstetric and neonatal complications by:</p> <ul style="list-style-type: none"> Conducting Safe Motherhood (LSS/EmONC) Training for Midwives Establishing CPD (Continuous Professional Development) program for training doctors in districts of GAR in EmONC Conducting targeted training of Midwives in GAR on use of the partograph Disseminating copies of National MCH protocols for use by service providers at health facilities in focus regions Procurement of equipment, materials and supplies including pelvic & Baby Anne models for training, supervision & service delivery at health facilities in focus regions Supporting monitoring of QA activities at facilities by regional and district QA committees in Central and Greater Accra regions Supporting the organization of regional QA conference for two regions--GAR & CR 	Q2 - Q4	<p>% of hospitals and health centres that are using current QA action plan</p> <p>No. of hospitals and health centres having emergency packs for PIH and PPH/APH</p>	<p>40%</p> <p>170</p>	<ul style="list-style-type: none"> Doctors from District Hospitals in GAR trained in EmONC as part of their CPD certified by Medical and Dental Council Midwives trained use of the partograph and correctly manage labour and delivery at health facilities National MCH Protocols and MCH Clinical equipment/instruments including anatomical models procured and delivered for service delivery and clinical supervisory activities All district hospitals and health centres in GAR have active QA teams that have developed action plans and implementing quality improvement interventions for services. 	996,617	628,979
3.1.6 (Maternal and Child Health)	3.1.6.6: Treatment of Child Illness	<p>Strengthen newborn care and treatment of sick children including improving referral systems by:</p> <ul style="list-style-type: none"> Disseminating copies of new Child Health policy at all DHDs, Hospitals and HCs during monitoring and supervisory visits. Disseminating copies of Child Health IDS/OJT manuals and make available for use by supervisors during clinical supervision Designing job-aid for the management of neonatal and obstetric emergencies and distributing for use at all health facilities Printing copies of GHS/Standard Treatment Guidelines provide for use by prescribers at health facilities in focus regions Integrating IMNCI and ETAT (Emergency Triage Assessment and Treatment) at 4 selected hospitals--GAR Monitoring IMNCI implementation at facilities--GAR Conducting IMNCI Training for service providers Dissemination of GHS referral policy document to districts Dissemination of GHS standard referral booklet for use by service providers at all health facilities in focus regions Provision of QA manuals and training of teams at health facilities to conduct quality improvement activities for RCH services 	Q2 - Q4	No. of service providers trained in IMNCI	400	<ul style="list-style-type: none"> Child Health Policy, Standard Treatment Guidelines, IMNCI guidelines, Job-aid s and IDS/OJT manuals available and used for clinical supervision and child health services at all health facilities in focus regions Emergency triaging systems for managing sick infants and children designed and introduced at 4 district hospitals in GAR IMNCI approach for service delivery implemented GHS referral policy and disseminated at all district hospitals and health centres for implementation 	452,337	285,476

3.1.6 (Maternal and Child Health)	3.1.6.5: Maternal and Young Child Nutrition, Including Micronutrients	<p>Strengthen Maternal and Young Child Nutrition, including micronutrients by:</p> <ul style="list-style-type: none"> Contributing to development and finalization of National Nutrition Policy through provision of technical assistance to working group Supporting Interagency Nutrition Action Group (INAG) to prepare and implement annual coordination plans on nutrition programs in the country. Disseminating training manuals (Trainers' and Participant Guides) on IYCF. Training of service providers in nutrition counselling skills with emphasis on improving complementary feeding for children < 2yrs old. Supporting development of job aids for IYCF and appropriate complementary feeding. Training staff in 5 districts in IYCF practices and lactation management--WR Training staff on the management of malnourished children --WR 	Q2 - Q4	% of children aged 6-8months who received breastmilk and appropriate complementary foods	70%	<ul style="list-style-type: none"> National Nutrition Policy document developed and finalized to guide implementation of all nutrition-related programs in the country Annual Coordinated Work-Plans for Nutrition Programs in the country developed 5 Districts of Western Region trained in IYCF and lactational management and skilled in identifying malnourished children and providing appropriate treatment of the condition Service providers trained in nutrition counselling skills and promote appropriate complementary feeding for children < 2yrs old. IYCF trainers' and trainee manuals and Job-aids wall chart/poster produced and are used for training and service delivery in focus regions 	245,098	154,685
3.1.6 (Maternal and Child Health)	3.1.6.4: Immunization, Including Polio	<p>Strengthen community services and improve health seeking behaviors through:</p> <ul style="list-style-type: none"> Support for Regional Review meeting on zoning of districts for CHPS strategy--GAR Update of CHO Modules and Supervisors' Manuals(to include Urban CHPS concept), print copies and train CHO Supervisors in updated modules Training/Refresher for CHOs on full content of updated CHO modules Developing and implementing a shared community mobilization and demand-creation strategy in project districts in collaboration with BCS Training newly posted CHNs on FP Counseling skills in 17 districts--CR 	Q2 - Q4	No. of functional CHPS zones	200	<ul style="list-style-type: none"> All GAR districts have mapped or zoned for the CHPS program and targeted new ones made functional CHO Modules and Supervisors Manuals updated, printed and used for training CHOs trained/refreshed in implementation of the CHPS program Community mobilization and behavior change activities accomplished in targeted communities jointly with BCS project 	374,961	236,643
3.1.6 (Maternal and Child Health)	3.1.6.1: Birth Preparedness and Maternity Services	<p>Support the capabilities of clinicians by improving practical training through:</p> <ul style="list-style-type: none"> Conduct of a rapid assessment of the clinical practice component of pre-service training in FP & MNCH Development of training improvement approaches based on findings from assessments in collaboration with other organizations (e.g. JHPIEGO) Training nurse educators and preceptors using training improvement approaches developed to address gaps in partnership with organizations like JHPIEGO Conducting a study to understand the existing gaps in RCH service delivery by private sector health facilities Supporting regional training program for nurse-anaesthetists with resources (textbooks, manuals, teaching aids etc)--GAR Supporting the organization of an inter-stakeholder including public, quasi-gov't and private sectors) forum for strengthening EmONC services in one region--GAR 	Q2 - Q4	% of children that are fully immunized by 12months of age	60%	<ul style="list-style-type: none"> Assessment of clinical training component of pre-service in FP and MNCH conducted and report/recommendations prepared Improved clinical training approach designed or prepared for pre-service institutions Nurse educators and preceptors of xx pre-service institutions oriented to improved approach and use it for clinical training Assessment conducted and report on RCH service delivery scope and gaps in the private sector identified and recommendations for engaging or strengthening services better understood. Nurse-anaesthetist training program strengthened with technical resources Report on stakeholder conference for EmONC in the Accra Metropolis written and disseminated to all partner with recommendations for leveraging of resources and arrangements on appropriate referrals or management of emergencies 	503,816	317,965
		TOTAL BY THIS ELEMENT					2,984,786	1,883,740
		USG OP Indicators for MCH Element			Target			
		Number of women receiving active management of the third stage of labor through USG-supported programs			113,295			
		Number of deliveries with a skilled birth attendant in USG-assisted programs			136,500			
		Number of antenatal care (ANC) visits by skilled providers from USG-assisted facilities			1,022,054			
		Number of people trained in maternal/newborn health through USG-supported programs (women, men)			800			
		Number newborns receiving essential newborn care through USG-supported programs			129,675			
		Number of people trained in child health & nutrition through USG-supported health area programs (women, men)			400			
3.1.7 (FPand RH)	3.1.7.1: Service Delivery	<p>Strengthen access to high quality family planning services by:</p> <ul style="list-style-type: none"> Providing Jadelle implant training for service providers 					1,183,525	746,906

		<ul style="list-style-type: none"> Providing IUD insertion & removal training for midwives Training Doctor-Nurse teams in mini-lap (tubal ligation) and/ no-scapel vasectomy services Developing an approach for improving post partum FP services at hospitals and roll out approach at selected hospitals (5 hospitals per region) Developing the capability and test of a mobile outreach FP services for underserved districts in central and western regions in collaboration with MSI Reviewing clinical supervision in MNH and FP in order to identify and prioritize health facilities with poor EmONC and FP uptake and draw up itinerary for IDS/OJT visits to these facilities to coach/teach service providers on the job. Training for supervisors/trainers in in-depth supervision and on-the-job training approach to enable them supervise service providers to improve their skills in FP at health facilities Supporting GHS to conduct clinical supervisory visits to improve FP services at health facilities Strengthening existing training sites for LAPM (Ridge, Cape Coast & Kwesimintim) 	Q2 - Q4	% of SDPs receiving at least two supervision visits in MCH/FP during the year as evidenced by proper documentation	65%	<ul style="list-style-type: none"> Clinical supervisors and health managers identify and prioritize health facilities with low performance of FP service (particularly with LAPM uptake) and undertake IDS/OJT visits to these facilities to coach/teach service providers on the job. Supervisory report written and shared with facility and DHDs to follow up on service improvement recommendations service providers (Nurses, Midwives, Doctors) trained in LAPM (implants, IUCD, BTL and NSV) and deliver services at their facilities 15 district hospitals in focus regions provided with post-partum FP IEC materials including job-aids, oriented and providing routine counseling and other FP services to post-natal mothers Mobile outreach services for FP (LAPM) established in districts in Central and Western regions in collaboration with MSI Three training sites for LAPM in FRHP regions received minimal structural refurbishments, furniture anatomical models and training aids to improve performance 		
3.1.7 (FPand RH)	3.1.7.2: Communication	<p><u>Improve readiness of sites to meet increased demand for FP services by:</u></p> <ul style="list-style-type: none"> Procuring FP equipment, materials and supplies including pelvic and arm models for training, supervision & service delivery (& replacement skins) Disseminating copies of IDS/OJT manuals on FP and provide for use during supervisory visits to health facilities in focus regions Disseminating quantities of key FP Protocols/Job-aids and provide for service delivery at health facilities in focus regions: <ul style="list-style-type: none"> National Family Planning protocols Family Planning Counseling Flipchart Family Planning Counseling Flipchart (pocket-sized) Postpartum FP posters (the 3 different types) 	Q2 - Q4	No. of policies and protocols updated or disseminated	21	<ul style="list-style-type: none"> FP equipment/instruments and anatomical models procured and delivered for service delivery and clinical supervisory activities at health facilities in focus regions FP Protocols and job-aids available at all SDPs in focus regions and used by service providers 	633,036	399,500
3.1.7 (FPand RH)	3.1.7.3: Policy Analysis and System	<p><u>Strengthen FP commodity supply chain by:</u></p> <ul style="list-style-type: none"> Conducting a desk review of existing reports on FP commodity availability and stockouts in order to determine weaknesses in the current system in the 3 regions. Training trainers (TOT) in regions so that they conduct downstream trainings for regional, district and facility staff in FP and general health logistics and supply-chain management Designing and implementing an early warning system (EWS) for detecting stock-out of FP supplies Advocating for inclusion of FP into NHIS through follow-up on proposals made at National Contraceptive Security meetings Conducting repair/refurbishments at the Regional Medical Stores to improve the storage environment—GAR Training staff in clinical equipment management—GAR Supporting learning and sharing of experiences by QA teams through peer review of institutional QA plans—CR 	Q2 - Q4			<ul style="list-style-type: none"> Summary report on desk-top analysis of FP commodity stock-out levels and patterns for the regions including identified systems weaknesses that need to be addressed to improve delivery. A cadre of Trainers in logistics management prepared for the focus regions and conduct downstream training for health administration and supply-chain managers Early Warning System for FP commodities involving defined functions and responsibilities of service providers, supervisors, managers and use of IT designed and implemented in districts Advocacy tool or package developed and used in orienting NHIA and other stakeholders Repair works on roofing and other parts of the structure completed for Medical Stores in GAR Service Providers at Hospitals, HCs and CHPS compounds in the GAR trained in basics of handling and servicing of simple clinical instruments/gadgets such as BP apparatus, weighing scales, ambu bags in order to maintain their precision and longevity implemented 	285,879	180,414
3.1.7 (FPand RH)	3.1.7.4: Health Governance and Finance (FP)	<p><u>Assess financial management systems and processes at regional and district levels and develop solutions to financial bottlenecks and improve transparency by:</u></p> <ul style="list-style-type: none"> Preparing standard operating procedures for financial management in line with GHS and USG standards and disseminate to GHS, RHD, and DHD staff and partners Building capacity of RHDs to manage subgrants from FRHP – workshops/trainings, creation of separate bank accounts, orientation tools, improvement of office infrastructure and equipment if needed for financial accounting and reporting Developing and operationalizing a performance-based grants system through a test approach Conducting training for 'non-financial managers' on financial management and Accounts Treasury and Finance (ATF) rules—WR 	Q2 - Q4	% of districts (DHMT) receiving financial support for health activities from District Assembly and or other non-MOH/GHS entity	40%	<ul style="list-style-type: none"> Standard Operating Procedures (SOPs) for management of USG provided funds as well as general financial management practice developed and disseminated to RHDs and DHDs in focus regions RHDs oriented and assisted to set up or institute required facilities for managing USG funds or sub-grants Performance-based financing guidelines developed and disseminated to GHS Regional and District level BMCs with top-5 meeting award criteria in each of focus regions identified and provided first grants based on agreed workplans 'Non-Financial Managers' and BMC Managers trained in internal audit functions and ATF rules Focal Persons for NHIS at health facilities in CR trained on new tariffs for health insurance 	446,015	281,474

		<ul style="list-style-type: none"> Organizing workshop on internal audit functions of BMCs for Management staff--CR Training focal persons at facilities on NHIS new tariffs' implementation--CR Conducting workshop for in-charges of health centres on ATF--CR Training finance/admin staff in MS Excel and database management--CR 		No. of performance-Based Financing grants awarded	12	<ul style="list-style-type: none"> Finance and Admin staff in MS Excel program and financial database management in CR 		
3.1.7 (FPand RH)	3.1.7.7: Personnel	<p><u>Improve human resource management and administrative systems by:</u></p> <ul style="list-style-type: none"> Training Medical Superintendents/DDHSs in basic administration and HR management --WR Conducting training in revised staff performance appraisal for District Managers in 5 Districts (one sub-regional zone)--WR Training district transport officers on log-book scheduling, maintenance etc--CR Developing and managing a database for tracking in-service training of service providers Supporting revision of electronic database on health manpower for the region--GAR Supporting training of HR/Admin staff in use of electronic database--GAR Procuring IT equipment (computers/printers/HDD etc) for HR data management--GAR Policy development, advocacy and protocol design support for central level GHS units Training Managers at Regional and District levels in Leadership skills 	Q2 - Q4	No. of health staff and Managers trained in health systems strengthening	100	<ul style="list-style-type: none"> Med. Supts and DDHS in Western Region oriented in basic administration and HR management and provided with updated job descriptions New GHS staff performance appraisal system implemented in 5 districts of the Western Region Software for recording and managing database of in-service training developed and installed for all three focus regions GHS directorates and used by HR staff. IT equipment procured for health directorates in GAR for improved HR data management Transport officers from all districts in CR trained or refreshed in log-book scheduling, maintenance etc for efficient transport management Headquarters units of GHS supported to produce policies and protocols for RCH, FP, HIM and Logistics and Supply-Chain management GHS Regional and District managers trained in leadership skills 	917,431	578,978
3.1.7 (FPand RH)	3.1.7.3: Policy Analysis and System Strengthening	<p><u>Improve clinic safety for reproductive health and other services by:</u></p> <ul style="list-style-type: none"> Conduct whole-site training of health facilities in infection prevention and control in 5 district hospitals and 34 health centres (2 per district)--CR Conduct and orientation program for health managers in use of tools in order for them to conduct situation analyses of workplace safety at health facilities--CR Conduct TOT for selected focal persons for occupational health and safety in order for them to be able to conduct downstream training for facilities--CR Train/Refresh service providers on Adolescent Reproductive Health--CR Train Peer Educators in ARH from 6 selected sites--CR Provide materials for 'adolescent corners' at 6 sites--CR 	Q2 - Q4			<ul style="list-style-type: none"> 39 Health Facilities (Hospitals and HCs) in CR received whole-site training in infection prevention and have improved workplace safety Health Managers and Focal Persons for Occupational Health and Safety trained from all districts in CR and conduct situation analysis in workplace safety and training of staff at health facilities Peer Educators trained in Adolescent Reproductive health to complement work of service providers at adolescent-friendly sites Materials (IE&C, audio-visuales, job-aids etc) provided to set up 'adolescent corners' at 6 sites (health facilities) 	106,190	67,015
3.1.7 (FPand RH)	3.1.7.5: Host Country Strategic Information Capacity	<p><u>Improve district, regional and central level management and use of health information management system by:</u></p> <ul style="list-style-type: none"> Reviewing the RCH data collection and DIMS with the aim of integrating the two systems Developing standard operating procedures for HIM at the district and facility levels Building capacity/train relevant stakeholders in DHIMS (e.g. heads of selected districts & facilities, Health Information Officers, Public Health Nurses & Midwives) Procuring IT equipment to strengthen DHIMS implementation--CR Conducting training on DHIMS software for RHD Unit Heads--CR Conducting training on DHIMS software for DHDs (HIO, DDHS, DDCO, DPHN) in all 17 districts--CR Supporting DHIMS data validation meeting at regional level--CR 	Q2 - Q4			<ul style="list-style-type: none"> RCH data format integrated into DHIMS software and forms part of districts' monthly service reporting Standard Operating Procedures (SOP) developed and disseminated for use in DHIMS at all DHDs Health Information Officers and Health Managers in all districts trained in revised DHIMS software management All 17 DHDs of Central Region have revised DHIMS software with staff trained in its use and have adequate and functioning computers and make timely and quality monthly DHIMS report Review of CHIMS conducted and priority areas of support identified and implemented for the national and regional levels 5 District Health Directorates in WR followed up by Regional Biostats team and supported to operate DHIMS according to national standards DPHNs and Midwives in districts of WR re-trained in correct interpretation, recording and use of RCH service data-collection tools Districts in GAR with prepared semi-annual review meetings reports and identified priority interventions for improving health services Service Providers (Midwives, PHNs, CHNs) in CR trained/refreshed in correct interpretation, recording and use of FP services data-collection tools 	732,857	462,496

		<ul style="list-style-type: none"> - Supporting monitoring and supervision of DHIMS by RHD—CR - Conducting a rapid assessment of Centre for Health Information Management Systems (CHIMS) and provide support for strengthening operations - Conducting follow-ups in 5 districts to strengthen post training DHIMS operations--WR - Conducting refresher training for DPHNs and Midwives in RCH data-collection tools in selected districts--WR - Supporting districts to organize their semi-annual review meetings to include strengthened data analyses and use--GAR - Conducting FP data collection/management training for service providers (Midwives, CHNs, PHNs)—CR - Conducting a baseline assessment in project regions 		<ul style="list-style-type: none"> - FRHP Baseline Assessment conducted and report produced with accurate baseline indicator targets established and used for updating project PMP 			
			No. of staff trained in HIMS	150			
			% of districts submitting complete monthly HIMS report during the most recent quarter	50%			
3.1.7 (FPand RH)		TOTAL BY THIS ELEMENT				4,304,933	2,716,783
		USG OP Indicators for FP Element		Target			
		Number of people trained in FP/RH with USG funds (women, men)		400			
		Number of USG-assisted service delivery points providing FP counseling or services		410			
		Number of counseling visits for FP/RH as a result of USG assistance		1,076,328			
		Couple-years of protection (CYP) in USG-supported programs		257,250			
		Number of service delivery points reporting stock-outs of any contraceptive commodity offered by the SDP		150			
		Contraceptive Prevalence rate (CPR) (modern methods) of married women of reproductive age (MWRA)		17.40%			
3.1.3 (Malaria)	3.1.3.5: Epidemic Preparedness and Response	Work at regional level to resolve bottlenecks in malaria pharmaceutical management systems (financial management, planning, procurement and delivery)			Regional Pharmaceutical Services and Medical Stores management systems improved	104,925	66,450
		TOTAL BY THIS ELEMENT				104,925	66,450
		USG OP Indicators for Malaria Element		Target			
		Number of USG assisted service delivery points experiencing stock-out of		TBD			
		OVERALL TOTAL INCL. ALL ELEMENTS				7,394,644	4,666,973