

931-1180 - (11)

PD-AAH-970

931118000 ~~5311~~
5311

ISN-633

QUARTERLY REPORT #12
(April - June 1981)
MEDEX Phase III, Primary Health Care Systems
Contract No. AID/DSPE-C-0006



University of Hawaii at Manoa

John A. Burns School of Medicine
Health Manpower Development Staff
1833 Kalakaua Avenue, Suite 700 • Honolulu, Hawaii 96815 U.S.A.
Telephone: (808) 948-8643 • WUI Telex: MEDEX 634144 • WUI Cable: MEDEX

QUARTERLY REPORT #12

(APRIL - JUNE 1981)

MEDEX PHASE III, Primary Health Care Systems
Contract No. AID/DSPE-C-0006

I. Specific Services to be Provided:

2.(a)(1) Exploratory briefings in LDCs; informational briefings with AID Missions and host officials:

Dr. Richard Smith was in Khartoum, Sudan, June 20-24 to consult with USAID on the training component of the Northern Region's Primary Health Care Program. His June 26 consultations with REDSO and USAID in Nairobi were to discuss the possibility of applying the MEDEX technology in Zimbabwe and Kenya.

2.(a)(2) Exploratory briefings in LDCs; seminars for Ministry of Health officials, health planners, and other leaders within the medical community:

Dr. Smith and Ms. Joyce Lyons were in St. Lucia, West Indies, June 8-12, to participate as invited observers in a Caribbean Commonwealth meeting on primary health care. The objective was to prepare a strategy and plan of action to assist the participating governments in achieving the WHO goal of "Health for All by the Year 2000." Some of the participating countries were Antigua, Barbados, Dominica, Guyana, Jamaica, and St. Lucia. HMDS's presence at this meeting was an opportunity to investigate the need for a regional MEDEX program as an outgrowth of the MEDEX/Guyana and Antigua nurse-practitioner experiences.

Ms. Lyons met on June 13 in Barbados with Mark Laskin, USAID Health Officer for the Caribbean, to follow up on discussions begun in St. Lucia. USAID/Barbados subsequently requested a consultation visit from HMDS to pursue the possibility of a regional MEDEX program.

2.(b) The Contractor shall draft, develop and produce training modules and related teaching materials for the following four specific categories of training:

To facilitate the integration of field trials and completion of the various MEDEX materials for final submission to AID, HMDS created a

Curriculum Board which met in two formal sessions (April 15 and April 24) and several informal sessions during the quarter. The purpose of the Board is twofold: first, to set final production and publication guidelines for all modules on training materials being produced by HMDS and, second, to review all modules to ensure that they meet these guidelines prior to final submission of the materials to AID. See Addendum A for copies of the Curriculum Board Functional Statement and of the agendas for the April meetings.

The following are the projected dates submitted to AID for completion of the various materials being developed by HMDS (modules, workshop manuals, reference manuals, guidelines, etc.):

Available by January 1982

MLHW Modules:

- Common Skin Problems
- Respiratory and Heart Problems
- Gastro-intestinal Problems
- Genito-urinary Problems
- Infectious Diseases
- Common Medical Conditions
- Diseases of Infants and Children

Available by May 1982

MLHW Modules:

- Dental EENT
- Trauma and Emergency
- Problems of Women
- Labor and Delivery
- Prenatal and Postnatal Care
- Child Spacing
- Community Health I
- Community Health II

Available by June 1982

CHW Modules:

- First AID
- Diarrhea and Dehydration
- Nutrition
- Hygiene
- Clean and Safe Normal Delivery
- High Risk Pregnancies
- Community Cooperation
- Common Clinical Problems
- Child Spacing I
- Child Spacing II

Available by August 1982

MLHW Modules:

Primary Health Care Module
Anatomy and Physiology
Medical History
Physical Examination
Working with Communities and CHW's

Available by January 1983

Formulary
Diagnostic and Patient Care Guidelines
Patient Care Procedures
Training System Evaluation Manual
Curriculum Adaptation Manual
Instructor Preparation Manual
Pre-deployment Manual

Available by March 1983

Framework Paper, Volume 1
Framework Paper, Volume 2
Working with Support Systems
Working with the Health Team
Supervisory Mid-Level Health Workers
Management Operations
Continuing Education Manual
Management Systems Analysis Workbooks and Training
Manual
Area Planning/Management (POEM) Workshop Manual
National Planning/Management (POEM) Workshop Manual
Guidelines for developing, Expanding and Strengthening
PHC Programs
Guidelines for Planning and Evaluation in Primary Health
Care
Guidelines for Management Training in Primary Health Care

2.(b)(1) MEDEX Training Modules:

Dr. Stuart Robson, a consultant to HMDS, provided an external review and drafted an expanded dental portion of the Dental, Eye, Ear, Nose, and Throat module.

While in Guyana, Ms. Lyons conceptualized and outlined a new module, "Working with Communities and CHWs." This module consolidates the information previously in the now-defunct "Working with Communities" and "Training Medex to Train CHWs" modules. Sunil Mehra trained medex students on the use of visuals as an educational tool for teaching CHWs. See Section III.D.

Two reference manuals, "Diagnostic Protocols" and "Patient Care Guidelines" were combined this quarter into a single manual, "Diagnostic and Patient Care Guidelines."

2(b)(2) Management Training Modules:

John Eaton worked as a consultant for HMDS to revise the first draft of the Information Systems Analysis Workbook, and to prepare the first drafts of the Analysis Workbooks for Transportation and Communications Systems. These three workbooks comprise portions of the "Management Systems Analysis Workbooks and Training Manual." This work was a followup to the management drafts he prepared for HMDS last quarter.

Dr. Robert Mack, consultant, prepared the first draft of the task analysis table, student text material, instructional material, and student evaluation material for the Supervisory Middle Level Health Workers module.

2.(b)(3) Community Health Worker (CHW) Training Modules:

The modules dealing with community health were extensively revised this quarter. Five previous modules (Causes of Disease, Community Nutrition, Community Environmental Health, Community Family Planning, and Child Care) as well as portions of the Prenatal Care module were merged and reorganized into first drafts of two new modules, Community Health I and Community Health II.

The units on Malnutrition and on Diarrhea and Dehydration were revised to incorporate information from field trial data from MEDEX country programs. Consultant Dr. Mona Bomgaars assisted HMDS in these revisions, which are part of the new Community Health I & II modules.

2.(b)(4) Continuing Education Materials:

Two continuing education modules, CE Systems and CE Development, were consolidated into the Continuing Education Manual.

2.(c) Technical assistance and leadership in conducting training programs and project planning in LDCs:

2.(c)(1) Technical guidance in project design to USAID Missions and/or host governments in those LDCs where a decision has been made to pursue a MEDEX Primary Health Care program:

Dr. Michael Porter was hired as a consultant to write a final report of the Pakistan Basic Health Services Project in order to provide HMDS with a written summary of the experiences of a country selecting to use the MEDEX technology. This report will be presented to the Government of Pakistan, USAID, and other interested parties.

2.(c)(2-7) Curriculum Adaptation Workshops, Teacher Training Workshops, Preceptor Deployment Workshops, Continuing Education Workshops, and Evaluation Workshops:

No action this quarter.

2.(d) Network strengthening and strategizing:

2.(d)(1) Mobilization of U.S. MEDEX expertise and experience through a network organization of U.S. universities with MEDEX experience:

On April 1, Merrill M. Shutt, M.D., M.P.H., was hired by the University of North Dakota to develop a Division of International Health capable of assisting developing nations plan and implement primary health care programs.

Mr. Ed Klecker was hired by the University of North Dakota as a management specialist.

Mr. John Ketcher, network resident from MEDEX/Washington, was in Lesotho March 22 - April 11 to assist the MEDEX/Lesotho training staff in the teaching of the Trauma and Emergency module. Mr. Ketcher prepared for this responsibility during the preceding quarter, when he was in Honolulu.

Dr. Andrew Penman, MEDEX/Washington, continued his residency training in Honolulu, April 2-18. He outlined a module that could be used to orient physicians to the role of primary health care in developing countries.

A MEDEX core residency course was held at the University of Washington's MEDEX office during the month of May. Attending this course from the University of North Dakota were Judy DeMers, Ed Klecker, and Bud Shutt. From the University of Washington, John Ketcher attended the entire course, while Robert Drickey (physician trainer designate) and William Shaul (MEDEX/Northwest medical director designate) attended part time. Mr. Petrich, Mx. Coles, and Dr. Smith, from HMDS; and Ms. Bonnie Bata from the University of North Dakota served as resource persons for this course. In addition, Mr. Seymour Greben was hired as a consultant to be a resource person regarding planning and administration in developing countries. Richard Blakney (the general coordinator), Bill Callen, Sharry Erzinger, and Andrew Penman from the University of Washington chaired sessions and made presentations.

Drs. Robert Eelkema and Bud Shutt from the University of North Dakota and Mr. Richard Blakney from the University of Washington attended the National Council for International Health's Annual Convention in Washington, D.C., June 14-19. While at the meeting, they researched possible sources of funding from private voluntary agencies for Third World primary health care projects, and met with various AID/Washington officials.

2.(d)(2) Inclusion in the network of those institutions within LDCs which will have become centers of MEDEX expertise:

AID/Washington has asked HMDS to reduce the size and funding of the International MEDEX Conference, originally planned for late October. We are proceeding to determine the feasibility of bringing together only the principals of the Pakistan, Guyana, and Lesotho programs to discuss further problem-solving needs, information dissemination, and areas of further collaboration.

II. Contract Amendment for the services of a development communications specialist, to bring the expertise and findings of development communications to bear on the planning, design, and eventual implementation of MEDEX projects in developing countries.

Mr. Sunil Mehra prepared prototype community education materials, including a strategy for their development and pretesting, while in Guyana. See Section III.D. He revised and prepared prototype community education materials for use in Lesotho. As part of this quarter's significant effort in facilitating the production of training materials, see Section 2.(b), Mr. Mehra developed an analysis of the design of this new production process with the assistance of consultant Ken Tull. Mr. Mehra also began a communication associate review of the instructional materials.

III.A. Travel by HMDS Personnel:

Dr. Boostrom, Mr. Coles, Ms. Lyons, Mr. Petrich, and Dr. Smith attended the Current Activities Strategies Health Meeting in Washington, April 10-12. At the CASH meeting, HMDS presented detailed information on current activities as they relate to AID/Washington and USAID missions overseas. Dr. Boostrom attended this meeting before he returned to Honolulu after his trip to Dubai in March (see Quarterly Report #11). While in Washington, Ms. Lyons met with AID/Guyana officials to discuss the MEDEX/Guyana program. Dr. Smith met with Regional Bureau health officials and consulted with DSB/Health on manpower and systems development as it relates to the evaluation of MEDEX (formally presented to AID/Washington the previous week).

Mr. Neill, to Georgetown and Washington, D.C., May 1 - June 17. Funded by MEDEX/Guyana contract. See Section III.D.

Dr. Smith to Seattle, May 4-18. See Section 2.(d)(1).

Mr. Petrich to Seattle, May 10-21. See Section 2.(d)(1).

Dr. Terence A. Rogers, Dean of the University of Hawaii School of Medicine, to Washington, D.C., May 12-15, to meet with appropriate AID officials in DSB/Health on results of the recent HMDS contract evaluation and to discuss plans for the final two years of the contract.

Ms. Lyons to Georgetown, St. Lucia (West Indies), Barbados, and Washington, D.C., May 13 - June 18. Funded by the MEDEX/Guyana contract, except for per diem and incidental expenses incurred during the stops in St. Lucia and Barbados which were paid from the HMDS core contract. See Sections *III.D. and 2.(a)(2)* for a description of her activities in Guyana and the Caribbean. Ms. Lyons attended the NCIH meeting in Washington, D.C. (see below).

From Washington, D.C., Ms. Lyons flew to London and Geneva, on her way to Khartoum, Sudan, to conduct a primary health care seminar dealing with curriculum development in primary health care. This trip had to be aborted in Geneva when it was discovered that her passport had been stolen. Since the Minister of Health of the Sudan and USAID mission officials were scheduled to leave on a field trip two days after Ms. Lyons' planned arrival in the country, there was not enough time to obtain a new passport and Sudan visa.

Mr. Coles to Seattle, May 22-31. See Section *2.(d)(1)*.

Mr. Mehra to Georgetown, May 15 - June 9. Funded by MEDEX/Guyana. See Section *III.D.*

Dr. Michael Porter, April 18-19, debriefed AID/Washington staff on accomplishments, lessons learned, and the final status of the Pakistan Basic Health Services contract. Dr. Porter was the chief-of-party of this recently completed program. Funded by HMDS core contract.

Dr. Smith, June 6 - July 9, to St. Lucia, the NCIH meeting in Washington, D.C., Khartoum, Nairobi, and Maseru. See Sections *2.(a)(2)*, *2.(a)(1)*, and *III.D.*

Mr. White, June 14-17, to Washington, D.C. See Section *III.E.1.*

The National Council of International Health Conference met in Washington, D.C., June 14-17 to discuss "The Training and Support of Primary Health Care Workers." Dr. Boostrom, Ms. Lyons, Mr. Petrich, and Dr. Smith, presented papers. Dr. Smith's plenary paper was "Implementing Primary Health Care Worker Training in Times of Economic Constraint." Dr. Boostrom discussed "Adaptation and Use of Field-Tested Prototype Materials for Primary Health Care Development." Ms. Lyons' paper was "The Failure of Prevention in Primary Health Care Efforts." Mr. Petrich presented "Management Training of Mid-Level Health Workers and Their Supervisors: The MEDEX Experience." While in Washington, Dr. Smith met with DSB/Health personnel on program planning.

Mr. Dougherty, June 20-27, from Bristol, Tennessee, to Honolulu and return, to meet with HMDS Systems Development Staff to determine suitability for employment as a management specialist. See Section *III.E.1*.

III.B. Consultants to HMDS:

Robert W. Mack, M.D., in Honolulu, March 3-April 3. See Section *2.(b)(2)*.

Mr. John H. Eaton, in Aurora, Colorado, March 23-April 7. See Section *2.(b)(2)*

Michael J. Porter, M.D., in Alderney, Channel Islands, U.K., May 4-15.
See Section *2.(c)(1)*.

Mr. Seymour Greben, in Seattle, May 11-21. See Section *2.(d)(1)*.

Stuart I. Robson, D.D.S., M.P.H., in Honolulu, June 15-26. See Section *2.(b)(1)*.

Mona R. Bomgaars, M.D., M.P.H., in Honolulu for 6 days this quarter.
See Section *2.(b)(3)*.

Mr. Kenneth W. Tull, in Honolulu for 12 days this quarter. See Section *II*.

III.C. Visitors to HMDS:

None this quarter.

III.D. Significant Core Staff Time Devoted to Country Project Activities:

1. GUYANA:

Al Neill traveled to Georgetown, May 1-June 17, to develop a plan for a manpower analysis for the health services, and to initiate implementation of a systematic analysis of health manpower needs. On his return to Honolulu, Mr. Neill stopped in Washington, D.C., for two days to discuss his trip to Guyana with appropriate AID personnel.

Ms. Lyons was in Georgetown May 17-June 6 to provide assistance during the MOH/MEDEX and IDB staff efforts to develop curriculum materials and teaching approaches to be used while preparing medex for their role in the community. The curriculum addresses the following content areas: Individual and health team approaches to working in communities, definition of health interventions, approaches to solving community health problems, and teaching methods for preparing community health workers. In addition, she assisted the staff to plan, staff and schedule the medex's classroom and field experience, prepare the student text and evaluation materials for medex, prepare student learning activities for classroom and field experience phase, and participated in continuing education of tutors.

Ms. Lyons then went to St. Lucia and Barbados, see Section 2.(a)(2). She stopped in Washington, D.C., June 14-17 to debrief AID/Washington personnel on the results of her consultation in Guyana, to discuss the St. Lucia meeting with DSB/Health staff, and to attend the NCIH meeting.

Mr. Sunil Mehra, May 15-June 9, traveled to Georgetown to assist the Ministry of Health/MEDEX training unit to review institutional resources available for developing community education materials, to review and test available community education materials, to assist in the conceptualization and development of community education materials, and to assess the production resources for preparation of such materials. Mr. Mehra also assisted the training staff to design, pre-test, produce, use, and evaluate educational media and demonstrated the use of low-cost media for community education. After his work in Guyana, he debriefed AID Communication Division personnel in Washington, D.C., regarding his visit to Guyana.

2. LESOTHO:

Dr. Smith was in Maseru July 4-10 to conduct an interim evaluation of the MEDEX/Lesotho program's progress and to determine staffing needs for the next phase.

III.E. Other

1. RECRUITMENT AND PERSONNEL:

Mr. White attended the NCIH conference in Washington, D.C., to recruit for various HMDS core contract positions and to meet with AID contract staff to discuss the status of the HMDS core contract budget in light of a possible reduction in funding.

HMDS undertook a number of personnel actions during this quarter to meet the workload of final review, refinement, and submission of the materials:

Mr. David Alt, formerly the MEDEX/Lesotho Project Coordinator, was hired April 1 as the Curriculum Development and Production Director.

Dr. Robert Mack was relocated to Honolulu from Washington, D.C., to begin work on May 4 as HMDS's Evaluation Development Director and to serve as the Medical Associate for curriculum development and production. Dr. Mack was formerly the Regional Training Advisor in Lahore for the MEDEX/Pakistan program.

Mr. Patrick Dougherty was hired to begin work July 8 as HMDS's Systems Development Specialist.

Mr. Kenneth Miyamoto was hired to begin work in mid-July as the Development Education Design Specialist.

Ms. Rosemary DeSanna, formerly an HMDS Program Officer, replaced Mr. Alt as the MEDEX/Lesotho Project Coordinator, on April 1.

IV. Fiscal Status

<u>Budget Category</u>	<u>Total Awarded Yrs 01 - 03</u>	<u>Previous Expenditures/ Encumbrances</u>	<u>12th Quarter E&E</u>	<u>Total E&E To Date</u>	<u>Balance</u>
Salaries	\$1,155,079	\$1,052,369	\$171,976	\$1,224,345	\$(69,266)
Consultant Fees	80,748	70,936	8,649	79,585	1,163
Fringe Benefits	186,669	163,924	26,314	190,238	(3,569)
Overhead	333,463	282,647	31,620	314,267	19,196
Office Rental	127,902	117,535	17,035	134,570	(6,668)
Travel & Transportation	159,707	141,390	21,347	162,737	(3,030)
Allowances	84,402	50,787	3,711	54,498	29,904
Other Direct Costs	141,487	111,900	27,648	139,548	1,939
Equipment, Materials & Supplies	114,579	104,836	16,309	121,145	(6,566)
Sub-Contracts	<u>726,723</u>	<u>426,076</u>	<u>46,442</u>	<u>472,518</u>	<u>254,205</u>
TOTAL	\$3,110,759	\$2,522,400	\$371,051	\$2,893,451	\$217,308

V. MEDEX PHASE III PROJECT STATUS,
SUMMARY OF ACTIVITIES FOR QUARTER #12

MEDEX PHASE III PROJECT STATUS

Summary of activities for Quarter # 12, April-June 1981

Services	Provided This Quarter	Cumulative Total
Exploratory briefings		15
In LDCs	3	
Other	0	
PHC Seminars conducted		16
In LDCs	0	
In Honolulu	0	
Elsewhere	0	
Workshops:		
Curriculum Adaptation	0	3
Teacher Training	0	3
Management/Logistics	0	3
Preceptor/Deployment	0	1
Evaluation	0	1
Continuing Education	0	3
Technical Assistance		
AID/Regional Bureau	0	5
USAID Mission	0	14
LDC Government	0	14
Network Strengthening		
Domestic network meetings	1	3
International meetings	0	2

Module/Manual	ACTIVE THIS QUARTER	Current Status
1. Framework Paper, Volume 1	NO	Outline scheduled to be written and presented to Curriculum Board for approval in August 1981
2. Framework Paper, Volume 2	NO	Conceptualization scheduled for September 1981
3. Primary Health Care Module	NO	Second draft scheduled for January 1982
4. Anatomy and Physiology	NO	Final review and revision scheduled for February 1982*
5. Medical History	NO	Final review and revision scheduled for February 1982
6. Physical Examination	NO	Final review and revision scheduled for February 1982
7. Common Skin Problems	NO	Final review and revision scheduled for July. To be presented in August 1981 to AID for prepublication review.
8. Dental EENT	YES	Final review and revision scheduled for August/September 1981
9. Respiratory and Heart Problems	NO	Final review and revision scheduled for September 1981

*The final review and revision on each module include a medical associate review, an educational associate review, a communication associate review, and an editorial associate review. After the four reviews, the modules go to the Curriculum Board for review and final approval.

Module/Manual	ACTIVE THIS QUARTER	Current Status
10. Gastro-intestinal Problems	NO	Final review and revision scheduled for October 1981
11. Genito-urinary Problems	NO	Final review and revision scheduled for October 1981
12. Infectious Diseases	NO	Final review and revision scheduled for August/September 1981
13. Common Medical Conditions	NO	Final review and revision scheduled for November 1981
14. Diseases of Infants and Children	NO	Final review and revision scheduled for September 1981
15. Trauma and Emergency	NO	In first stage (rough draft)
16. Problems of Women	NO	To be rewritten September/October 1981; Final review and revision scheduled for December 1981 - January 1982
17. Labor and Delivery	NO	To be rewritten September/October 1981; Final review and revision scheduled for December 1981 - January 1982
18. Prenatal and Postnatal Care	YES	To be rewritten September/October 1981; Final review and revision scheduled for December 1981 - January 1982

Module/Manual	ACTIVE THIS QUARTER	Current Status
19. Family Planning	NO	To be rewritten September/October 1981; Final review and revision scheduled for December 1981 - January 1982
20. Community Health I	YES	In first stage (rough draft)
21. Community Health II	YES	In first stage (rough draft)
22. Working With Communities and CHWs	YES	In first stage (rough draft)
23. First Aid (CHW)	NO	Scheduled for field testing in Lesotho, July - November 1981
24. Diarrhea and Dehydration (CHW)	NO	Scheduled for field testing in Lesotho, July - November 1981
25. Nutrition (CHW)	NO	Scheduled for field testing in Lesotho, July - November 1981
26. Hygiene (CHW)	NO	Scheduled for field testing in Lesotho, July - November 1981
27. Clean and Safe Normal Delivery (CHW)	NO	Scheduled for field testing in Lesotho, July - November 1981

Module/Manual	ACTIVE THIS QUARTER	Current Status
28. High Risk Pregnancies (CHW)	NO	Scheduled for field testing in Lesotho, July - November 1981
29. Community Cooperation (CHW)	NO	Scheduled for field testing in Lesotho, July - November 1981
30. Common Clinical Problems (CHW)	NO	Scheduled for field testing in Lesotho, July - November 1981
31. Family Planning I (CHW)	YES	Scheduled for field testing in Lesotho, July - November 1981
32. Family Planning II (CHW)	YES	Scheduled for field testing in Lesotho, July - November 1981
33. Working With Support Systems	YES	In first stage (rough draft)
34. Working With the Health Team	NO	In first stage (rough draft)
35. Supervisory Mid-Level Health Workers	YES	In first stage (rough draft)
36. Formulary (a reference manual)	NO	In first stage (rough draft)

Module/Manual	ACTIVE THIS QUARTER	Current Status
37. Diagnostic and Patient Care Guidelines (a reference manual)	YES	In first stage (rough draft)
38. Management Operations (a reference manual)	NO	In first stage (rough draft)
39. Patient Care Skills (a reference manual)	NO	In first stage (rough draft)
40. Training System Evaluation Manual (a reference manual)	NO	In first stage (rough draft)
41. Curriculum Adaptation Manual (formerly, CA Workshop Manual)	NO	In first stage (rough draft)
42. Instructor Preparation Manual (formerly, Tutor Training Workshop Manual)	NO	In first stage (rough draft)
43. Pre-deployment Manual (formerly, Preceptor Deployment Workshop Manual)	NO	In first stage (rough draft)
44. Continuing Education Manual	YES	In first stage (rough draft)
45. Management Systems Analysis Workbooks and Training Manual	YES	In first stage (rough draft)

Module/Manual	ACTIVE THIS QUARTER	Current Status
46. Area Planning/Management (POEM) Workshop Manual (formerly, District Management Workshop Manual)	NO	In first stage (rough draft)
47. National Planning/Management (POEM) Workshop Manual (formerly, National Management Workshop Manual)	NO	In first stage (rough draft)
48. Guidelines for Developing, Expanding and Strengthening PHC Programs	NO	In first stage (rough draft)
49. Guidelines for Planning and Evaluation in Primary Health Care	NO	In first stage (rough draft)
50. Guidelines for Management Training in Primary Health Care	NO	In first stage (rough draft)
51. Communications Chapter	NO	Not yet conceptualized
Working with Communities } Training Medex to Train CHWS	YES	Consolidated into one module, "Working with Communities and CHWs"
Causes of Disease } Community Environmental Health } Community Family Planning } Community Nutrition } Child Care }	YES	The contents of these modules were merged into two new modules, "Community Health I" and "Community Health II."
Continuing Education #1, Systems } Continuing Education #2, Development }	YES	Consolidated into one manual, "Continuing Education Manual."
STEM Reference Manuals: a) Diagnostic Protocols } b) Patient Care Guidelines }	YES	Consolidated into a single manual, "Diagnostic and Patient Care Guidelines"

ADDENDUM A

CURRICULUM BOARD FUNCTIONAL STATEMENT
CURRICULUM BOARD MEETING AGENDAS

CURRICULUM BOARD
FUNCTIONAL STATEMENT

The Curriculum Board is a body of individuals made up of resident staff in Honolulu and invited participants. The purpose of the Board is two-fold: first, to set production and publication guidelines for all modules or training materials being produced by HMDS, and second, to review all modules to ensure that they meet those guidelines previous to publication. The Curriculum Board is chaired by the Deputy Director of HMDS. There are five permanent members in addition to the Deputy Director. They are the Medical Associate, the Management Associate, the Education Associate, the Editorial Associate and the Communications Associate. A permanent resource person to the Board is the Curriculum Development and Productions Director. Other participation on the Board will be determined according to the specific agenda for a particular meeting. HMDS staff who are not members of the Board, and non-staff specialists residing in Honolulu, may be invited to attend on a meeting by meeting basis.

There are three times during the production of a module that the Curriculum Board would meet and have a direct influence on that module. They are:

1. Post Conceptualization Review - When any section of HMDS has an idea for a module, and has outlined the purpose and the scope of the module, it would come up for review by the CB. The CB would decide at that time whether the proposed module fits into the overall plan of HMDS and whether the proposed structure for the module meets their guidelines. If approved, the module would move on to drafting and testing.
2. Post Field-test Review - When a module has completed testing in the operational programs, and has been evaluated, the module would come up for review by the Curriculum Board. They would set any additional guidelines to be met for the final production of that module. A module is then ready for the final editorial work and rewriting.
3. Pre Publication Review - When a module has completed technical editing and rewriting according to the guidelines established by the Curriculum Board, then the module is ready for a final review by that Board to determine if the guidelines have been satisfied. If all guidelines are satisfied then the module is ready for publication. If not, the module is referred back to the Editorial Associate for clarification and correction.

The Curriculum Board will establish guidelines in the following categories:

- | | |
|--------------------------------------|------------------------------|
| a. Content | i. Module length |
| b. Structure | j. Media usage |
| c. Emphasis | k. Illustration style |
| d. Style | l. Format |
| e. Language level | m. Instructional methodology |
| f. Sequence | n. Field testing |
| g. Distribution of training time | o. Other |
| h. Module consolidation or expansion | |

03/12/81: KWT

AS APPROVED AT APRIL 15, 1981 CURRICULUM BOARD MEETING



University of Hawaii at Manoa

John A. Burns School of Medicine
Health Manpower Development Staff
1833 Kalakaua Avenue, Suite 700 • Honolulu, Hawaii 96815 U.S.A.
Telephone: (808) 948-8643 • WUI Telex: MEDEX 634144 • WUI Cable: MEDEX

AGENDA

HMDS CURRICULUM BOARD MEETING

Wednesday, 15 April 1981
8:30 AM - 4:30 PM
Maile Room, HIMAG (Marks Estate)

- 1.0 Functions of Curriculum Board (R. Powell)
- 2.0 Publication Goals (R. Powell/D. Alt)
 - 2.1 Production and Publication Process
 - 2.2 Materials to be Published and Time Lines
- 3.0 Definition of Standard Components of a Module (J. Rich)
- 4.0 Ratification of Criteria for Instructional Quality, Technical Accuracy, Applicable to All Instructional Materials (J. Rich)
- 5.0 Preliminary Decision on Format and Style for Materials to be Published (S. Mehra)
- 6.0 Approval of Style of Illustrations (K. Tull)
- 7.0 Review and Approval of Status of Modules -- First Stage or Second Stage and Consolidation of Modules (J. Rich)

CB Staff Assignments

- 8.0 Sequence of Prototype Materials and Curriculum (R. Powell)
- 9.0 Use of Media -- Slides and Tapes (S. Mehra)
- 10.0 Other
- 11.0 Set Date for Next CB Meeting

Any agenda items not addressed on Wednesday, April 15, will be carried over to Thursday, April 16.

Participants must bring their own lunch as the group is too small for catering.

DRA:lmo



University of Hawaii at Manoa

John A. Burns School of Medicine
Health Manpower Development Staff
1833 Kalakaua Avenue, Suite 700 • Honolulu, Hawaii 96815 U.S.A
Telephone: (808) 948-8643 • WUI Telex: MEDEX 634144 • WUI Cable: MEDEX

AGENDA

HMS CURRICULUM BOARD MEETING
Friday, April 24, 1981
8:30 AM - 4:30 PM
Lehua Room, HIMAG (Marks Estate)

- 1.0 Introduction and review and Approval of Minutes of April 15, 1981
CB meeting (Powell)
- 2.0 Presentation of Revised Position Description for Associates (Petrich,
Rich, Mehra, Lyons)
- 3.0 Remaining work on Core and Clinical Modules (Rich/Lyons)
- 4.0 Discussion and Approval on New Materials (Petrich)
- 5.0 Discussion and Decision on "Orientation for Physicians to PHC" Module
and "CHW-PHC" Module (Lyons)
- 6.0 Decision on Sequence of Prototype Materials and Curriculum (Lyons)
- 7.0 Decision on How Materials Are to be Bound in Volumes for Printing
(Alt)
- 8.0 Decision on Use of Media -- Slides and Tapes (Mehra)
- 9.0 Presentation on Preliminary Cost Estimates (Alt)
- 10.0 Presentation on Criteria for Showing Three Ethnic Types in CHW
Materials (Mehra)
- 11.0 Other
- 12.0 Set Date for Next CB Meeting

CB Staff Assignments

- 13.0 Cross referencing and indexing modules