

PDMA 262

OPERATIONAL YEAR 3 - JAN.-DEC. 1983

12M 37503

IMPLEMENTATION PLAN
POPULATION PLANNING III - PROJECT NO. 492-0341

Population Planning III (PP III) is a five year project that fits within the framework of the Philippine Population Program Medium-Term Plan (1981-1985). Both have the goal of reducing the population growth rate of the Philippines from 2.3% in 1980, with a population level of about 48 million; to an estimated 2.0% in 1985, with a population level of 53 million.

In order to achieve this goal by 1985, contraceptive prevalence (CPR) among Married Couples of Reproductive Ages (MCRAs) must increase from 43% in 1980 to 53% and contraceptive use effectiveness from 81% (in 1980) to 83.5%. Also, the project will assist in maintaining and improving the nationwide, population program in the following areas:

1. In-place qualified management and field personnel to serve population/family planning program needs.
2. Adequate public and private clinic support and services.
3. Effective Information, Education, Communication (IEC)
4. Effective, reliable contraceptive supplies available to practicing couples.
5. Timely and accurate measures of program progress and fertility reduction.
6. Completed and utilized operations, development, and policy research.
7. An effective Management Information System (MIS).

Seven specific sub-projects that correspond to the broad areas cited above will provide the framework for PP III inputs. Activities under these sub-projects will be as follows:

SUB-PROJECT 1. Outreach/Human Resources Development

(In-place Qualified Management and Field Personnel to Service Population Family Planning Program Needs)

The project will continue to maintain and support field personnel at the approximate level of 3,000 FTOWs and 600 City, Provincial and District Population Officers.

In addition, an estimated 52,000 BSPO volunteers will be deployed. A deployment plan for these BSPOs, and their supporting Full Time Outreach Workers (FTOWs), will be developed by no later than the middle of 1983 following the completion of a geographic coverage assessment. These steps are being taken to assure cost-effective use of BSPOs and FTOWs in relation to clinics and barangay health stations. Also BSPOs and FTOWs may not be fielded in thinly-populated areas where their efforts would have only a marginal effect. Some may even be phased out. At the same time the program will be concentrated in rural areas, its urban component will center attention on depressed areas of the cities and sectors known to receive many in-migrants from the rural areas.

By the end of 1985, Outreach will cover approximately 3.2 million MCRA's, or roughly 50% of the MCRA population, mostly in rural areas. The objective of total MCRA coverage is achieved through the combined public and private elements of the national family planning program, with Outreach designed only to complete the network. This includes service centers in the urban areas, community clinics and the commercial outlets.

The training of BSPOs and the paid field personnel in Outreach is of great and continuing importance. POPCOM Central, its partner agencies, the IBRD, UNFPA, and AID - all of these - will make needed inputs. Each of the three major donors has taken a part of the Outreach structure, or a particular program area for training support, such as IEC, management skills, warehousing, MIS, etc. In this coordinated approach, PP III will assume responsibility for the training and/or retraining of 52,000 BSPOs and 3,000 FTOWs and other directly related activities such as review and revision of Outreach curriculum.

Under PP III, most upgrading of management and technical skills of POPCOM central and regional personnel, and partner agencies' personnel, will be done in-country. Additionally, approximately 52 participants will be provided short-term study and observation training in the U.S. and ASEAN countries, for a total of 58 persons-months of overseas training.

In addition to training, BSPOs will receive other non-monetary incentives, such as term life insurance, umbrellas, T-shirts and the like which are of practical value and which provide status and identification for them in their volunteer job.

SUB-PROJECT 2. Clinic Support

(Adequate Public and Private Clinic Support and Services)

The nationwide, service delivery network of partner agencies (public and private clinics, industrial clinics, static and itinerant

comprehensive family planning service teams), and the commercial sector, back up the Outreach community-based system. They also will help assure services and information to that 50% of the MCRAs in urban areas, and elsewhere, who are not living in Outreach areas.

Coordination Guidelines were developed by PUPCOM and its partner agencies in response to a need for closer coordination among the family planning service providers. The pilot test of the guideline was initiated in 1982, to be completed by the second quarter of 1983. National implementation of the updated guidelines will be initiated in late 1983 through 1984. The specific duties and responsibilities of each service provider, as outlined in the guidelines will strengthen the linkage between the Outreach structure and the clinics.

Altogether, 3,500 clinics and hospitals now provide family planning services, 2,140 of which are public and 1,360 private. Of these, 482 of the public facilities and 358 of the private institutions have the capacity to perform sterilizations.

During the earlier project period, PP II and other donor funds supported 13 itinerant sterilization teams, 6 of which were based in Manila. Beginning in 1981, 11 teams were re-structured to provide comprehensive family planning services (MOH- 1, FPOP- 3, the RPOs- 7). For 1983, MOH shall upgrade 4 additional existing comprehensive FP centers/hospitals by providing additional personnel, training, and logistics and by the establishment of mobile capability. Seven other RCFPCs/hospitals will be identified and mobilized in the remaining regions on a phased basis. Gradually, over the five-year period of the project, the MOH will absorb all cost of the 12 RCFPCs (Regional Comprehensive Family Planning Centers).

Comprehensive service programs, with mobile capabilities, will be developed in provinces where size or geography would make it difficult for the RCFPCs to adequately serve the area, or where the planned geographic assessment of the delivery network indicates a definite need, or where regional mobile capability does not exist, then large private agencies, i.e., the Institute of Maternal and Child Health (IMCH) and the Family Planning Organization of the Philippines (FPOP), coordinating with the Ministry of Health (MOH) and the local governments, will participate in setting up and managing these province-level services, with assistance from PP III. This program thrust is intended to enhance delivery service to achieve increase of the percentage of contraceptive effectiveness.

The subsidy paid to the 840 medical facilities providing sterilization services will be continued. It is estimated that 484,000 voluntary sterilizations will be subsidized during the project period. Also continued from PP II will be payment of transportation subsidies for sterilization and IUD clients and laboratory service fees to provide pap smears and sperm counts.

Additional to the support to be given to IMCH and FPOP for mobile family planning comprehensive clinics, POPCOM will conduct soon a study of all the current private family planning agency program and in consultation with the donors, develop a plan for assisting them. Areas of unmet need for project development which are consistent with The Philippine Population Program Medium Term Plan (1981-1985) will be brought to the attention of AID's centrally-funded contractors and other donors.

Further support to the private sector will be provided through the Ministry of Labor and Employment (MOLE). Currently, only 717 family planning clinics supported by the MOLE are operating at the 1,023 private companies mandated by Presidential Decree to provide family planning services to their employees. Only about half are functioning properly. These clinics are supported by the companies and the MOLE. Project assistance under PP III will go to Logistics, IEC and training of personnel. This project is of special interest as it is the only one that can reach, directly and frequently, a large number of males with an information and service program.

A total of \$1.56 million has been programmed for innovative activities in the private and public sectors. Part will be used to stimulate the development of young adult information and service programs. Part will be used in conjunction with the Population Center Foundation (PCF), and others, in pilot testing, or expanding innovative private sector approaches to contraceptive retail sales and other forms of service delivery. Market research will be supported on production, pricing, promotion and sales of contraceptives. Additionally, a project is now under development for training pharmacy employees to promote contraceptive sales more effectively.

SUB-PROJECT 3. IEC

In order to respond to program objectives, two basic IEC strategies shall continue to be pursued for 1983 and beyond.

Strategy No. 1 involves the maintenance of Task Forces of partner agencies and non-government organizations according to well-defined sectors and integration or development of projects and activities to address the needs and concerns of each specific sector. This is in accordance with the IEC Systems View which reflects the following sectors:

- Married Couples of Reproductive Age (MCRA)
- Pre-Marriage Couples (PMC)
- In-School Youth (ISY)
- Out-of-School Youth (OSY)
- Pre-and-early Schoolers (PES)
- Special Publics (SPs) like the elderly, hard-core resistors, influentials, policy-makers, cultural communities, religious sector, media and others.

Strategy No. 2 involves the streamlining of population messages. This is crucial in order to avoid conflicting messages and achieve unified program impact at all levels. The major concepts to be presented are:

- Small family size and family welfare.
- Delayed marriage.
- Increased acceptance and more effective use of family planning methods.
- Population and other development concerns.

The various IEC activities under Sub-Project 3.1 are categorized under the following: 1) materials development/production; 2) public affairs; 3) training/orientation; 4) distribution; and 5) special projects.

A. Materials Development/Production

Both at central and regional levels, materials in the various media shall be developed/produced/replicated.

B. Public Affairs

Both at central and regional levels, activities and project designed to highlight the public image of the program and the Commission shall be implemented. Activities to focus on the Family Planning Week celebration shall be conducted.

C. Training/Orientation

At the central level, the following training/orientation activities are included: 1) planning and management skills training for key POPCOM IEC staff; 2) maintenance of IEC task force at the central level; and 3) workshop on the repairs/maintenance of AV equipment.

At the regional level, the maintenance of the IEC task forces and the holding of IEC area management conferences will be undertaken.

D. Distribution

A substantial number of IEC print materials are expected to be produced and distributed in 1983. Hence, funds for distribution of IEC materials at central and regional levels are being earmarked.

E. Special Project

This category includes but is not limited to the following:

1. population quiz show at all levels, from district to national;

2. mobile information teams to promote FP at grassroots level;
3. Instant Sagot sa Family Planning;
4. folk and rural theatres; and
5. innovative projects submitted for funding.

SUB-PROJECT 4. Logistics

(Effective and Reliable Contraceptive Supplies Available to all Practicing Couples).

This Sub-Project will continue to conduct activities that will ensure effective and reliable contraceptive supplies at all operational levels. Also included in this sub-project are activities such as rental of storage space for contraceptives at the PPO/CPO level, repair/rehabilitation of vehicles and equipment.

An amount equivalent to \$3,556,000 has also been set aside in 1983 for the procurement of pills and condoms. This will enable the program to follow its policy of maintaining a minimum of eighteen (18) months supply and a maximum of twenty four (24) months supply in-country.

SUB-PROJECT 5. Demographic Measurements/Evaluation

(Timely and Accurate Measures of Program Progress and Fertility Reduction)

To obtain measures of program impact, the continuation of the National Demographic Survey series will be conducted in 1983, and there will be a national fertility and family planning survey in 1985. Attempts will be made to obtain further measures of CPR in 1981 and 1984 through add-ons to the National Census and Statistics Office (NCSO) Quarterly Labor Force Surveys. In addition to the formal surveys, POPCOM/USAID will monitor jointly the project to assess implementation and effectiveness. The monitoring will involve joint travel followed by implementation of findings and recommendations.

SUB-PROJECT 6. Operations and Policy Research

(Completed and Utilized Operations, Development and Policy Research)

Operations, development and policy research will focus on specific areas of program implementation including: testing the effectiveness and cost-effectiveness of innovative projects/activities, studies on the perceptions, attitudes and performance of program personnel, testing new contraceptive methods, in-depth studies on users perspective on family planning, studies on the integration of population in development projects and other policy studies.

In 1984 there will be a national survey of service providers and local government officials aimed at improving management at the field level. The survey will focus on the following areas: contraceptive KAP, family planning management, IEC and training.

Special provisions will be made for supporting research utilization activities for the feedback and dissemination of research results.

SUB-PROJECT 7. Management Information System

(Effective MIS)

The improvement of the POPCOM Management Information System (MIS) will be accomplished by maintaining and refining the MIS revised and implemented in 1982 which integrated POPCOM's clinic and Outreach information systems into one system, based on the service delivery structure outlined in the Coordination Guidelines; as well as component information systems, for IEC, Training, Logistics, Research, Manpower and Financed.

PP III OY 3 support will be concentrated in three areas:

- 1) Development of a nation-wide program for data verification and quality control;
- 2) the printing of the reporting forms and manuals;
- 3) provision of outside computer services to augment the present capability of the POPCOM computer.

NATURAL FAMILY PLANNING METHOD

(More effective use of the natural family planning method)

In the spirit of "cafeteria approach" where all methods of contraception are made available to the individual, and respect for individual choice, a special line item, for Natural Family Planning Method is provided.

This line item will focus on effecting ways and means to improve the effective use of this method. The private sector, specifically religious groups and institutions will be encouraged to develop strategies for effective service delivery, training and special IEC for this method. This will involve the implementation of research action projects for the effective service delivery, the conduct of training of medical and para-medical personnel on the various NFP methods, and the development of special media package for the same.

The specific plans for OY 3 - (1983) for each sub-project are attached.

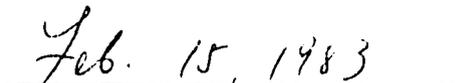
RESPONSIBILITIES

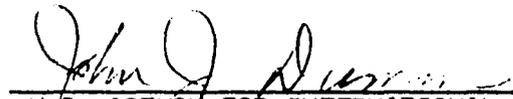
Project management shall be sole responsibility of the Commission on Population, shared with local governments as appropriate. USAID shall cooperate in monitoring and evaluation of the implementation of the project according to guidelines jointly defined and agreed upon and will assist in the procurement of contraceptives and commodities.

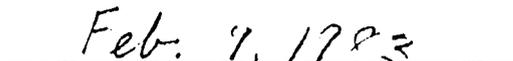
PROJECT REVIEW

- A. Quarterly review of performance against targets shall be made by POPCOM.
- B. Quarterly reports shall be provided by POPCOM to USAID.
- C. The sub-projects will be evaluated according to the Evaluation Plan jointly agreed upon.


COMMISSION ON POPULATION


DATE


U.S. AGENCY FOR INTERNATIONAL
DEVELOPMENT


DATE

Implementation Plan
Sub-Project 1.1 - Outreach
Population Planning III
OY3 - 1983

A. OBJECTIVES

The overall objective of this particular component is to increase the number of Married Couples of Reproductive Age (MCRA) practicing contraception through the organization of community-based delivery networks at the barangay level.

Specifically, the sub-objectives are:

1. To motivate MCRA's to practice family planning to help achieve a national average of 47% PREVALENCE RATE by the end of 1983.
2. To provide necessary family planning information and contraceptive supplies to new and continuing acceptors.
3. To refer acceptors of clinical methods to clinics/centers where such services are available.
4. To refer to appropriate agency workers other development needs of families covered by the network.

B. STRATEGIES

To support the attainment of these objectives, the following activities will be carried out in accordance with the Medium Term Five Year Plan of the Philippine Population Program:

1. The operationalization of 52,000 Barangay Service Points organized in previous years and the maintenance of at least 90% of these BSPs throughout the year.
2. Maintenance and upgrading of knowledge and skills of 2,931 FTOWs, 455 DPOs, and 161 C/PPOs/PPMs.
3. Recruitment, training and deployment of replacements for an estimated attrition of 425 outreach workers (12% attrition rate).
4. Maintenance and upgrading of the skills of Field Support Teams to assist Outreach Project Management at the Central and Regional levels.
5. Achievement of specific targets defined under other components designed to support this component, particularly in:

- a. Clinic Support
- b. IEC
- c. Logistics
- d. Human Resource Development
- e. Demographic Measurement/Activities
- f. Operations and Policy Research
- g. MIS
- h. Natural Family Planning Methods

In addition, the following support activities will be undertaken:

- a. In order to maintain the effective operating density of the outreach workforce, a budget for recruitment, training and deployment of replacements will be provided for 426 outreach workers (12% attrition rate) at ₱2,000 per trainee for 21-day training program.
- b. Regular, joint POPCOM/USAID quarterly planning and operations meetings to review the Outreach Project and determine additional actions necessary to improve performance. Task forces may be created to resolve issues which may arise in the implementation of the Outreach Project.
- c. National conference of FPFPOP personnel to provide a forum for the exchange of experiences among the more than 130 structure heads. This will also enable POPCOM management to establish direct contact, at least annually, with structure heads. Policies and directives significantly affecting Outreach operations can be discussed during this gathering. It can also serve as a consultative forum where field experiences can be used to support plans and strategies to be formulated by the Outreach Project Management.
- d. Continuation of the Project Development and Management Support Fund for the expenses of local governments in covering maintenance and operating costs; expenses in the formulation and preparation of project and other related activities which the Outreach Project Management regularly undertake; supplemental allowance for the staff performing functions over and above their regular duties. This will also include the hiring of supplementary personnel to help in the effective implementation of the various activities under this project.

- e. Non-Monetary incentives for BSP Officers. This activity will provide appropriate incentives to 52,000 BSPOs, such as group insurance, bags, umbrellas, etc. The attached procedures and regional plans established in the Supplemental Implementation Plan for this activity during OY4 PF II will continue to apply.
- f. Provision of funds for Special Projects* to support activities related to and which have direct bearing on family planning program, e.g. income generating self-help projects involving the BSPOs and satisfied acceptors/users clubs, staff development/motivation program for outreach personnel, etc. This scheme will be appropriately coordinated with government and private agencies which have similar activities. The projects to be covered under this will be developed and mutually agreed upon by POPCOM and USAID.
- g. Funds for Pagtutulungan sa Kinabukasan Ikaw, Bangko, Industriya, Gobyerno (PAG-IBIG) (Employer Counterpart) will be provided to outreach personnel in consonance with the mandate promulgated by the Government of the Philippines. Likewise, funds for Cost of Living Allowance (COLA), one week bonus and terminal pay (net accumulated sick and vacation leave) and any additional salary differential required by GOP regulations will be provided, subject to availability of funds.
- h. Field Support Teams (FSTs) - in order to enhance and further strengthen the regional capabilities in the areas of planning, training, implementation, monitoring and evaluation of outreach operations, funds for the hiring of adequate numbers of FSTs or technical experts will be provided. The budget for this item can also be used to hire a maximum of two (2) administrative staff per region to assist these FSTs in the performance of administrative functions.

*This line item is declared as "budgetary reserves". However, USAID, upon the request of POPCOM and the concurrence/approval of OBM, shall make available a portion or all of the funds in the event that actual operations indicate there is a need.

	<u>Total Requirements</u>	<u>P GOP</u>	<u>AID Grant</u>	<u>AID Loan</u>
I. <u>BUDGET</u>				
1.1 Outreach	<u>₱66,974,300</u>	<u>₱47,324,300</u> ^{1/}	<u>₱19,328,000</u>	<u>₱322,000</u>
1.1.1 Recruitment/ Replacement	852,000	852,000	-	-
1.1.2 Salaries	34,096,000	22,162,000	11,934,000	-
1.1.3 Travel Allowances	14,493,000	9,420,000	5,073,000	-
1.1.4 Special Travel Allowances	-	-	-	-
1.1.5 Project Development and Management Support Cost	11,173,300	11,173,300	-	-
1.1.6 FSTs	3,120,000	3,120,000	-	-
1.1.7 Planning & Operations Meeting	-	-	-	-
1.1.8 Special Outreach Conference	322,000	-	-	322,000
1.1.9 Staff Development	-	-	-	-
1.1.10 BSPO Incentives	2,000,000	-	2,000,000	-
1.1.11 PAG-IBIG Fund (Employer Contribution)	<u>918,000</u>	<u>597,000</u>	<u>321,000</u>	<u>-</u>
Special Projects (Non-Add)	<u>(14,411,400)</u> ^{2/}	<u>-</u>	<u>(11,733,000)</u> ^{2/}	<u>(₱2,678,000)</u> ^{2/}
GRAND TOTAL	<u>₱66,974,300</u>	<u>₱47,324,300</u>	<u>₱19,328,000</u>	<u>₱ 322,000</u>

^{1/}Includes LG Share of ₱13,815,000 which is budgeted under items 1.1.2, 1.1.3, and 1.1.5.

^{2/}Under budgetary reserves.

Attachments: Guidelines on BSPO Incentives

12

POPULATION PLANNING III
Schedule of Outreach Personnel Salary Scale
Operational Year 3 (CY 1983)

	<u>P/CPO I-A</u>	<u>P/CPO I-B</u>	<u>P/CPO I-C</u>
Basic Salary	₱ 2,818.00	₱ 2,522.00	₱ 2,311.00
G S I S	267.71	242.44	219.55
Medicare	7.50	7.50	7.50
Workmen's Compensation	10.00	10.00	10.00
	<u>₱ 3,103.21</u>	<u>₱ 2,811.94</u>	<u>₱ 2,548.05</u>
	<u>P/CPO 2nd</u>	<u>P/CPO 3rd</u>	<u>P/CPO 4th</u>
Basic Salary	₱ 2,093.00	₱ 1,894.00	₱ 1,715.00
G S I S	198.84	179.93	162.93
Medicare	7.50	7.50	7.50
Workmen's Compensation	10.00	10.00	10.00
	<u>₱ 2,309.34</u>	<u>₱ 2,091.43</u>	<u>₱ 1,895.43</u>
	<u>P/CPO 5th</u>	<u>APPO I-A</u>	<u>APPC I-B</u>
Basic Salary	₱ 1,553.00	₱ 2,093.00	₱ 1,894.00
G S I S	147.54	198.84	179.93
Medicare	7.50	7.50	7.50
Workmen's Compensation	10.00	10.00	10.00
	<u>₱ 1,718.04</u>	<u>₱ 2,309.34</u>	<u>₱ 2,091.43</u>
	<u>APPO I-C</u>	<u>DPO</u>	<u>FTOW</u>
Basic Salary	₱ 1,715.00	₱ 944.00	₱ 574.00
G S I S	162.93	89.68	54.53
Medicare	7.50	7.50	7.50
Workmen's Compensation	10.00	9.44	5.74
	<u>₱ 1,895.43</u>	<u>₱ 1,050.62</u>	<u>₱ 641.77</u>

Notes:

1. Salary scale was based on Step 3 of JCLGPA Circular No. 8
2. Employer Share:
 - a. CSIS Life and Retirement at 9.5% of the Basic Salary.
 - b. Workmen's Compensation at 1% of salary but not to exceed ₱10.00/month.
 - c. Medicare - ₱250 to ₱349.99/mo. at ₱3.75
 ₱350 to ₱499.99/mo. at 5.35
 ₱500 above at ₱7.50

OUTREACH PERSONNEL TRAVEL RATES
CY 1983

A. Provincial/City Population Officer	₱ 385/mo.
1-A	385/mo.
1-B	385/mo.
1-C	385/mo.
2nd	385/mo.
3rd	385/mo.
4th	330/mo.
5th	275/mo.
B. Assistant Provincial Population Officer	
1-A (rate of 2nd class P/CPO)	385/mo.
1-B (rate of 3rd class P/CPO)	385/mo.
1-C (rate of 4th class P/CPO)	330/mo.
C. District Population Officer	495/mo.
D. Full Time Outreach Worker	305/mo.

SUBPROJECT I
SUPPLEMENTAL IMPLEMENTATION PLAN
Operational Year 4 (1980)
(BSPO Incentive)

I. INTENT OF THE IMPLEMENTATION PLAN

The purpose of this supplemental implementation plan is to provide non-monetary incentives to the Barangay Supply Point Officers who, in the performance of their tasks serve as vital link between the program's service delivery and motivational activities.

II. JUSTIFICATION

The need for an incentive scheme for the BSP network, the basic operational unit of the Outreach Program was discussed in the 1979 Community Outreach Survey (COS) and the OY I evaluation of a joint POPCOM/NEIDA/USAID team. Furthermore, senior staff members of POPCOM and USAID have recommended this innovation to help maintain the existing BSPOs. In some cases, the Regional Offices of POPCOM have already started recognizing the need and have provided material assistance to BSPOs (i.e. BSP kits, signboards, and T-shirts).

The BSPO incentives presented in this implementation plan serve both the personal and official needs of these volunteer workers.

Considering that the BSPOs are expected to do motivational work and follow-up of acceptors within their areas, the following items were suggested:

- a. Life-term Insurance for one year
- b. BSPO bags
- c. Raincoats or umbrella

These items were considered to be most appropriate for this purpose by POPCOM and USAID officers who are continuously in touch with field operations.

III. STRATEGY

1. Funds totalling ₱1,020,000.00 will be allocated to the regions based on the number of BSPs reported to be established as of December 1979. Only 30,000 of the 37,694 BSPs will be covered by the incentive scheme.
- 2) The Regional Offices will be required to submit to Central Office a plan of action which will include the use of funds, financial (accounting and auditing) procedures, management controls not later than 15 June 1980. The plan will also

15
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include the criteria for the selection of the BSPOs who will receive the incentives this year (basic criteria include performance, length of service of the BSPOs, and recommendation from the FTOW).

3. Disbursement of funds by the Regional Offices will only be allowed after their plan of action is approved by POPCOM Central Office and USAID.
4. Cash will not be given to the BSPOs.
5. In cases where it will be more economical and manageable, POPCOM Central Office will negotiate for the manufacture of material incentives or issuance of insurance policies.

Regional allocations will therefore be reduced accordingly.

6. Monitoring and evaluation of the impact of the incentive schemes will be jointly undertaken by the Outreach Project Management staff and the RPOs.

IV. EXPECTED OUTPUT

1. Thirty thousand (30,000) BSPOs will receive incentives this year.
2. This incentive scheme will help maintain the BSPOs in the Program.
3. It will motivate the BSPOs to work more efficiently and more effectively.
4. This incentive scheme will provide an institutional link between the BSP Officers and the Outreach personnel.

V. FINANCIAL PROCEDURES

The Outreach Project Management of POPCOM Central Office in coordination with the different divisions and regional offices shall be responsible for the implementation and monitoring of the BSPO incentive scheme. Consequently, negotiation and execution of contract, procurement and regional allocation of all items as described in the said scheme, including the accounting, and keeping of books and records shall be done in accordance with the approved regional plans.

Likewise, it is understood, that all existing accounting and auditing regulations prescribed by POPCOM and USAID shall be strictly imposed.

Ed P. Callet
COMMISSION ON POPULATION
June

Date

Charlotte Crane
U.S. AGENCY FOR INTERNATIONAL
DEVELOPMENT

May 19, 1980
Date

Regional Allocation
BSPO Incentives
Operational Year IV

<u>Region</u>	<u>No. of BSPOs</u>	<u>Total Cost</u>
I	2,400	781,600
II	1,500	51,000
III	3,900	132,600
IV	4,200	142,800
V	2,100	71,400
VI	2,400	81,600
VII	3,600	122,400
VIII	2,100	71,400
IX	1,500	51,000
X	3,000	102,000
XI	2,100	71,400
XII	900	30,600
NCR	300	10,200
Total :	30,000	71,020,000

Implementation Plan
Sub-Project 1.2 - Human Resources Development/Training
Population Planning III
OY3 - 1983

A. OBJECTIVES

1. Provide continuing skills training for 2359 Outreach personnel (FTOWs/Supervisors) in place in 1983.
2. Provide staff development program for training personnel of central/regional/local outreach structures which shall focus on organizational development, team building and enhancement/strengthening of planning and related management skills.
3. To orient the newly elected and reorient the reelected local officials on the Outreach/Population Program thrusts/strategies. Similar attention will be devoted to the orientation of selected religious, civic and youth groups and other community influentials.
4. Provide formal and refresher training to approximately 8,500 new BSPOs (formal training for 1,200 new BSPOs and refresher training for 7,300 BSPOs).
5. Provide out-country fellowship grants to outstanding outreach workers and selected program personnel for professional growth and development.

B. STRATEGIES

1. Skills Training for Outreach

The sub-project shall provide continuing skills training for all outreach personnel. This shall include specialized training on the following areas to improve effectiveness of outreach workers in performing their task and functions:

- a. FP Refresher (Basic FP with population dynamics)
- b. Community Organization/Motivation Skills Principles and Techniques
- c. Population Dynamics/Demography
- d. Supervisory Skills Training
- e. Project Development/Management

2. Staff Development for Training Staff

To ensure maintenance of effective program management, monitoring and evaluation, and develop skills in human resource management, POPCOM shall continue to provide training for POPCOM Central Office staff, Training Specialists and other program personnel involved in training and staff development.

3. Orientation/Reorientation of Local Government and Selected Groups

POPCOM shall continue to orient/reorient various local government officials on the new thrusts/strategies of the population program. The project will likewise provide for the orientation of selected religious, civic and youth groups and other community influential to augment/support the local officials' involvement in the program. Approximately 1,790 people are expected to be oriented/reoriented.

4. BSPO Training

Approximately 10,000 BSPO recruits shall be provided basic and refresher family planning and motivation skills for more effective motivational and promotional work at the barangay level

The cost factor for this basic 3-day training program shall be a maximum of ₱200/per trainee. The duration of training may vary depending upon the need of the regions and content of training. Deviations from the cost factor would need clearance from Central Office and USAID. Training expenditures to be covered by the prescribed rate would include board and lodging, training materials and supplies, transportation and honoraria for resource persons and facilitators.

As in previous years, regular monthly expenditures shall be submitted to POPCOM Training Division/Finance Division accompanied by the trainees' profile reports using the prescribed format. Both forms shall be certified by the Training Manager, Training Specialist and the Population Program Coordinator or any senior staff acting in such capacity in the absence of the Population Program Coordinator.

5. Participant Training

The program shall provide out-country fellowship grants to selected program personnel for professional growth and development. As priority, outstanding outreach personnel shall be sent to observe or attend special courses on community-based family planning programs in the ASEAN region.

C. BUDGET (P)

	<u>GOP</u>	<u>AID Grant</u>	<u>AID Loan</u>	<u>Total</u>
<u>Local Currency</u>	<u>₱ 115,000</u>	<u>₱1,800,000</u>	<u>₱1,600,000</u>	<u>₱3,515,000</u>
1.2.1 Skills Training for Outreach Personnel	-	-	₱1,500,000	₱1,500,000
1.2.2 Staff Development/ Workshop for Training Personnel	100,000	-	-	100,000
1.2.3 Orientation/Re-orientation of LG Officials	15,000	100,000	100,000	215,000
1.2.4 Redesign of Curriculum & Material Design/Development	-	-	-	-
1.2.5 BSPD Training	-	1,700,000	-	1,700,000
<u>Foreign Exchange*</u>				
Participants	-	<u>₱ 298,000</u> <u>(\$ 33,111)</u>	<u>₱ 212,000</u> <u>(\$ 23,556)</u>	<u>₱ 510,000</u> <u>(\$ 56,667)</u>

*Exchange Rate: \$1 = ₱9.00

21

Implementation Plan
Sub-Project 2 - Clinic Support Services
Population Planning III
OY3 - 1983

A. IMPLEMENTING PLAN SUMMARY

The features of SP 2 PP III OY 3 are essentially the continuation of activities from PP III OY -2 with the expansion of the new strategic approach of organizing itinerant comprehensive family planning service teams that will provide conventional and surgical contraceptive service and back-stop clinical support to outreach workers and doctorless clinics; increase of subsidy rates for tubal ligation and vasectomy procedures; provision for laboratory support services; transportation and complication assistance; and, special and other clinical support services.

B. OBJECTIVES

By the end of 1983, a minimum of:

1. 81,000 sterilization acceptors serviced;
(78,000 tubal ligation and 3,000 vasectomies)
2. 16,667 clients provided with Pap's smear tests, sperm counts or histological examination of vas tissues;
3. 810 complication cases managed.

C. STRATEGIES

During the past years, program planners and managers have tried to come up with innovative strategies to promote and deliver a responsive family planning service network. Because family planning services provided by the program largely depend on the existing national health structures, static clinic services shall be expanded to provide mobility with regionwide or provincial coverage.

1. Comprehensive Itinerant Family Planning Service Teams

Existing static centers with potential for mobile comprehensive family planning services shall be identified and expanded for mobility by respective partner agencies. In addition to the one established in 1982, the Ministry of Health will restructure four additional full time comprehensive family planning centers into regional mobile comprehensive service units by increasing the number of their core staff and their functional skills and providing for more travel allowances to allow wider mobility.

22

Other partner agencies, e.g. FPUP and IMCH, or the Regional Population Offices would likewise identify and contract existing family planning centers with potential for similar services in under-serviced provinces and districts. Eighteen such service teams were fielded in 1982; in 1983, two additional teams shall be fielded.

The organization of CIPST shall follow the POPCOM guidelines for this.

2. VSS Subsidies

Subsidies shall be paid to contracted sterilization services centers providing sterilization services to eligible clients at the rate of ₱200.00 for tubal ligation and ₱120.00 for vasectomy subject to availability of funds and upon agreement by the Medicare Commission. Funds will be reprogrammed from within this SP or from other SPs to meet any increase in the subsidy rate.

Reimbursement of subsidies will be based on actual number of sterilization acceptors reported on the POPCOM prescribed clinic Form FP-2S and/or other reports that may be required by POPCOM.

3. Complication Management Assistance

An average amount of ₱350.00 will be provided for the management of complications arising from sterilization procedures. Reimbursement will be paid on submission of POPCOM-prescribed REMEC or from duly certified by the attending physician and the Regional Population Program Coordinator.

4. Laboratory Services

Laboratory services in the past years had been contracted to 12 individual government and private laboratories locally. The scheme could not provide for wider coverage of service.

To mobilize the services of more than 100 existing laboratories in government hospitals and public laboratories, the Bureau of Research and Laboratories in the Ministry of Health shall be contracted to undertake the laboratory activities.

Pap's smear, sperm count and histologic examination of vas tissues will be provided at an average cost of ₱12.00 per test. This service assures contraceptive users of available diagnostic service to monitor their health and well-being. Reports of these tests shall be submitted to reporting clinics for appropriate medical action and to POPCOM for monitoring and management action.

5. Transportation Assistance to Clients

Transportation assistance to clients living in remote communities desiring clinical contraceptive methods available in hospitals or centers shall continue to be provided at the average rate of ₱12.00 per medically indigent client and when indicated for the client's companions. The attached revised procedures of transportation reimbursement shall apply.

6. Expert advice/service shall be sought when critical issues related to technical, legal and/or management aspects of the program arise in the course of program implementation. Provision for such service is provided for in this line item.

7. The line item other clinic support costs will fund items not covered above such as administrative and maintenance support cost for agencies initiating sterilization services, lying-in centers, hospitals, etc., seminars and consultative meetings with partner agencies, field coordinators and other needs that will enhance service delivery.

D. BUDGET (₱)

	<u>USAID Grant</u>	<u>GOP</u>	<u>Total</u>
Local Currency			
2.1.1 Itinerant Sterilization Teams	-	-	-
2.1.2 Comprehensive Itinerant Family Planning Service Teams	₱2,730,500		₱ 2,730,500
2.1.3 VSS Subsidy - 78,000 tubal ligations - 3,000 vasectomies	6,703,200	9,257,000	15,960,200
2.1.4 Complication Assistance		283,500	283,500
2.1.5 Laboratory Services	200,000		200,000
2.1.6 Transportation Assistance	300,000		300,000
2.1.7 Special Services	60,000		60,000
2.1.8 Other Clinic Support Cost		<u>300,000</u>	<u>300,000</u>
GRAND TOTAL	<u>₱9,993,700</u>	<u>₱9,840,500</u>	<u>₱19,834,200</u>

24

GUIDELINES FOR ITINERANT COMPREHENSIVE
FAMILY PLANNING SERVICES TEAMS*

Objective: To provide comprehensive FP services to MCRAs in service depressed areas.

Guidelines for Comprehensive FP Service Center:

I. Organization:

1. Comprehensive FP Service Team should emanate from existing centers which shall serve as the permanent base of the team.
2. Staff Composition
 - 2.1. The existing clinic personnel are assumed trained in basic FP courses, comprehensive FP technology. Preferably the physician is trained in surgical contraception procedures.
 - 2.2. In addition to the existing trained clinic staff, the following personnel maybe recruited to provide mobile comprehensive FP services:
 - 2.2.1. physician-surgeon - trained and certified in surgical contraception procedures and IUD insertion
 - 2.2.2. nurse/midwife - trained and certified on basic FP courses, comprehensive FP technology and as assistant to physician on VSS procedures.
3. Facilities/Equipments/Supplies
 - 3.1. The institution/hospital should have the facilities and instruments for comprehensive FP services and provisions for support diagnostic, therapeutic medical and surgical FP intervention and or services as per field manual on surgical sterilization.
 - 3.2. The mobile team should be equipped with adequate basic instruments/supplies and materials necessary for the delivery of comprehensive FP services.

*Final draft for review and approval by POPOOM Sterilization Certifying Board

25

To ensure asepsis and safe delivery of FP services, the team should bring a minimum of the following instruments: linens, etc.

3.2.1. Instruments - 10 combined VSS kits (good for 20 sets), and 3 IUD insertion kits

3.2.2. Operating room linens - 30 minilap sheets (computed 25 clients per field operation with 5 extra sheets); 3 sets of gowns and caps; 60 pcs. of gloves

3.2.3. Emergency Instruments and medical supplies - An ambu-bag; emergency medicines and antidote drugs for treating adverse reactions to anesthesia; portable resuscitating equipment.

3.3. Venues/sites to be utilized by the team shall be in accordance with the minimum requirements for sterilization centers as required by the POPOOM Sterilization Certifying Board.

II. Services:

1. Non-surgical and surgical FP methods
2. Medical screening of clients prior to the use of any FP method
3. Medical evaluation of clients referred by FICWs/other agency fieldworkers prior to initial pill dispensing or other related FP services
4. Manage minor complications and/or side effects arising from the use of contraceptives
5. Manage common gynecologic conditions related to FP
6. Pre and post counseling services - this refers not only to sterilization but also in the use of other methods
7. Provide back-up MCH services to FP clients in close coordination with existing service centers that has no physician
8. Collect PAP's specimens (if resources are available and capability exist)
9. Perform post-operative follow-up and other FP related services needed by the client
10. Where physician of the team is a certified trainer, provide in-situ training for physicians who can not leave their place of work.
11. Act as resource person in community assemblies on FP technology and preventive medicines as back-up to field-workers.
12. Where capabilities exist, the center maybe utilized as demonstration or research center for FP technology and laboratory for related tests

III. Deployment Scheme

To institutionalize sterilization services in static centers and maximize utilization of the team, the guidelines for the deployment of mobile team are as follows:

1. Guidelines for deployment of the team:
 - 1.1. Mobile service team will provide sterilization services to MCRAs in areas where there are no sterilization centers; in centers without available trained manpower and in areas where sterilization centers are inaccessible.
 - 1.2. It will complement a local service center wherever demand is heavy or where there is a need to enhance the capability and credibility of local service units.
 - 1.3. It will perform sterilization procedures when the requested procedure is not available locally, e.g. laparoscopy, endoscopy, culdoscopy.
2. Guidelines for processing request for mobile service team:
 - 2.1. Agency personnel and local service units requesting for sterilization services of the team shall prepare, plan and coordinate such activities.
 - 2.1. The plan shall include information on the estimated number of cases, venues and local contract person.
 - 2.3. The request shall be forwarded to the RPO preferably within three to four weeks before the date of operation.
 - 2.4. The RPO shall in turn confirm and finalize the schedule in coordination with the team at least two weeks before the operation.
 - 2.5. The team shall notify the RPO which in turn shall communicate to the field the specific date of arrival of the team. POPCOM Central Management shall be furnished a copy of the notification.
 - 2.6. Where provision of services is initiated by the team itself, the RPO shall be informed accordingly of the scheduled visit, requesting agency, estimated number of cases, venue and local contract person. The RPO shall communicate this information to the PPO/CPO and other partner agencies

2.7. In the case of MOH-CIT, the MOH Regional Field Assistance Unit Supervisor shall coordinate with the RPO. The RPO shall disseminate this information to all concerned.

2.8. Where a private or government hospital facilities will be utilized as venue for the operation, prior arrangements should be made with the Chief of Hospitals and with the physician of Rural Health/Family Planning Centers by CITs. MOH Memorandum Circular No. 39, s. 1978 and POPCOM-MOH joint circular No. 184-CSD, dated 22 July 1981 shall govern the use of MOH hospitals/Rhus.

3. Operating Guidelines:

3.1. All procedures should be done under local anesthesia. Spinal anesthesia may be resorted to only when local anesthesia is not possible and should be administered by an anesthesiologist.

3.2. The team shall establish prior arrangement with a fully equipped hospital for the treatment of clients in the event of major complications occurring during surgical procedures. A stand-by vehicle to transport such clients should be available.

3.3. The team should be available to the client in the area for 24 hours after operation or make prior arrangement with hospital staff for stand-by service.

3.4. Before the team leaves the area, it shall provide the referring agencies, i.e. local service units, a list of clients attended to; and needing further follow-up and management of possible complications.

IV. Guidelines when executing a contract:

1. The Regional Population Office will negotiate the contract with the local institution/agency with potential capabilities to provide comprehensive FP services and not with individual members of the team.
2. The minimum expected output has to be specified in the contract taking into account cost effectiveness.
3. Subsidy money shall be reimbursed on the basis of acceptors output upon submission of reports with supporting documents in accordance to guidelines on subsidy.

28

4. Subsidy level shall be based on the standard rates set by the POPCOM Board of Commissioners with proviso "subject to availability of fund".
5. Proviso on compliance to POPCOM prescribed reporting system should be written into the contract.
6. Copy of the contract shall be submitted to POPCOM central.

V. Roles and Responsibilities:

1. Role of the Regional Population Office
 - 1.1. Negotiate and execute contract with local agency.
 - 1.2. Pay sterilization subsidy based on the standard rates set by the POPCOM Board of Commissioners.
 - 1.3. Timely release of operation and maintenance funds for the team.
 - 1.4. Facilitate operation of the team especially in remote areas, e.g. where supplies maybe limited. Team may provide surgical drugs and supplies to the hospital, the equivalent cost of which shall be deducted from the subsidy reimbursement to the hospital provided prior understanding and agreement by the hospital/clinic concerned with the team and RPO has been made.
 - 1.5. Initiate and coordinate planning of team's schedule between team and structures for each quarter.
 - 1.6. Monitor activities of the team;
 - 1.7. Submit monthly performance of the team to POPCOM central.
 - 1.8. Evaluate performance of the team.
2. Role of Institution/Agency/Team
 - 2.1. Provide comprehensive FP services in areas where needed on the scheduled dates.
 - 2.2. Prepare/plan schedule of activities in coordination with Outreach Structures and RPO for each quarter.
 - 2.3. Arrange sites/venues for services in close coordination with Outreach structures and RPO.

2.4. Comply with POPCOM prescribed record-keeping and reporting system

3. Role of Outreach Structures:

3.1. Motivate MCRAs in the areas of Outreach coverage.

3.2. Plan schedule for teams' services with the team/RPO.

3.3. Organize and arrange for the attendance of motivated acceptors on the scheduled dates of teams' services in the area.

3.4. Provide post-sterilization follow-up and assist in the validation of VSS reports for certification of the RPO.

AMENDED TRANSPORTATION SUBSIDY FOR FAMILY PLANNING CLIENTS

BACKGROUND INFORMATION

One of the contributory factors identified in the continuous downward trend in the performance of clinical methods particularly voluntary surgical contraception and IUD is the inaccessibility of available services from clinic service centers due to transportation cost involved.

Studies have shown that the effectivity of the clinic extends only within the 3 to 5 km. radius. Beyond this, there is a low rate of clinical contraceptive use among couples who live far from the clinics.

Corollary to this, in some regions there are many areas that are not easily accessible to transportation because of the remoteness of the place and the condition of the roads and terrain. In view of this, public utility vehicles passing through the area charge passengers a much higher rate.

In most cases, prospective clients ready to accept clinical methods could not avail of the desired services because they cannot afford to go to the hospital/clinic due to transportation expenses incurred.

Community Outreach Survey (COS) report supports this observation-- that lack of transportation deters residents in DSP areas from travelling to clinic/hospital for clinic services.

To fill this gap, the transportation subsidy scheme for clients residing in remote areas and desiring clinic methods was proposed and was operational in 1980.

OBJECTIVES

1. To assist medically indigent clients in remote areas to avail of desired clinical services;
2. To assist field-workers in their motivational efforts in recruiting clients for clinical methods (IUD, sterilization);
3. To mobilize participation of hospital/clinic personnel in the National Sterilization Program.

IMPLEMENTING PLAN

1. The average amount of available transportation allowance is ₦10.00 per client, round trip. However, in hardship areas, actual cost of transportation assistance will be provided.

In cases where client desires to be accompanied by another person (e.g. spouse, sister, neighbor, etc.) transportation shall likewise be provided to the companion at the same rate.

2. Mode of transportation support scheme
 - 2.1. FICW to utilize ordinary means of public transportation and/or hire a vehicle.
 - 2.2. FICW to negotiate with the PPO/CPO for the use of the structure's vehicle, or the PPO/CPO to negotiate with the Hospital Director/Chief of Hospital for the use of the ambulance. The PPO/CPO shall reimburse expenses for gasoline equivalent to the number of acceptors serviced.
3. Eligibility of prospective clients for transportation subsidy
 - 3.1. Medically indigent client.
4. How to avail of the transportation subsidy
 - 4.1. Supporting documents necessary so that one can avail of the subsidy assistance:
 - 4.1.1. gasoline receipt, tickets, receipt of hire
 - 4.1.2. list of clients certified by FICW, DPO
5. Management of the Scheme
 - 5.1. Responsibility of the Regional Population Office
 - 5.1.1. The RPO shall manage the implementation of the project through the National Population and Family Planning Outreach structures.
 - 5.1.2. The RPO shall coordinate and monitor the project in the region.
 - 5.1.3. The RPO shall orient, disseminate information to partner agencies and outreach structures in the subsidy scheme.

32

5.1.4. The RFO shall receive and appropriately disburse funds for transportation subsidy to PPO, CPO.

5.1.5. The RFO shall submit certified performance report on a monthly basis to POPCOM Central Management.

5.2. Responsibility of the Outreach Structure

5.2.1. The PPO/CPO shall supervise the implementation of the project in the province/city.

5.2.2. The PPO/CPO shall coordinate the activity with partner agencies in the province/city.

5.2.3. The PPO/CPO shall review, approve the list of clients with companion extended transportation assistance.

5.2.4. The PPO shall process and recommend to the PPO/CPO list of clients with companion meeting the requirements for eligibility as certified by the FTOW.

5.2.5. The FTOW shall interview clients recruited, clients referred by agency field-workers, BSPOs and determine which clients are eligible, prepare the necessary supporting documents and recommend to the PPO all eligible clients on a time frame mutually agreed upon.

5.3. Responsibility of agency field-workers

5.3.1. Agency field-workers, clinic personnel shall refer clients to FTOW through the use of the referral slip.

5.3.2. In case the FTOW is nowhere to be found, agency field-workers shall refer cases to the PPO/PPO, CPO as the case may be on a time frame mutually agreed upon.

5.4. Responsibility of the POPCOM Central Management

5.4.1. Formulate guidelines to enhance field operation.

5.4.2. Tap resources from funding agencies.

5.4.3. Disseminate information regarding the availability of transportation subsidy to all national partner agencies.

5.4.4. Monitor project at the regional, provincial and barangay levels.

5.4.5. Evaluate/assess project operation.

6. Record Keeping and Reports

6.1. Outreach Structure

6.1.1. FLOW shall submit the certified list of clients with companion provided transportation subsidy to PPO/CPO thru DPO on a time frame mutually agreed upon.

6.1.1.1. FLOW shall keep a record of all clients given transportation assistance.

6.1.2. DPO shall review the list. If the list of clients is found in order, the DPO shall forward the list to the PPO on a time frame mutually agreed upon.

6.1.2.1. DPO shall keep a record of all clients recommended for transportation assistance.

6.1.3. PPO/CPO shall review and approve grants for transportation subsidy.

6.1.3.1. At the end of every month, PPO/CPO shall prepare and submit to the DPO a certified consolidated report with the necessary supporting documents, i.e. gasoline receipt, tickets, receipt of fare (appendix FP-VSS-1S-1).

6.2. RPO shall prepare in duplicate form a certified monthly report (appendix FP-VSS-1S-2) and submit such form to POPCOI Central Management.

TRANSPORTATION SUBSIDY
FINANCIAL RESPONSIBILITY

1. The funds shall be released quarterly to POPCOM Regional Office based on their allocation under sub-project 2.1.7.
2. The Regional Population Office shall release two (2) months Working Capital Funds (WCF) to Outreach Structures (PPO, CPO).
3. The Regional Population Office shall replenish the WCF of Outreach Structure based on the financial report that will be submitted by the latter not later than the 15th of the following month.
 - 3.1. Where WCF is not feasible, the reimbursement scheme shall be followed. In such cases, the RPO shall reimburse to the PPO, CPO the actual expenses incurred upon submission of the necessary supporting documents.
 - 3.1.1. Accomplished FP-VSS TS-1 form certified by FTOW and certified and approved by the PPO, CPO.
 - 3.1.2. Gasoline receipts.
 - 3.1.3. Trip tickets.
 - 3.1.4. Itinerary of travel of vehicle--if outreach vehicle was used.
 - 3.1.5. Bus tickets in case clients were conducted to service center individually.
4. The PPO/CPO shall ensure that expenses are paid on the day/days that services are rendered.
5. The RPO shall submit on or before the 25th of the following month to POPCOM Central Management the consolidated reports for transportation subsidy of outreach structures.
6. POPCOM Central Management shall consolidate and submit to USAID financial reports of the regions within 30 days after the end of the month being reported.

AID Reimbursement:

AID will reimburse POPCOM all costs of transportation subsidy under this scheme based on submission by POPCOM Central Office of a consolidated FP-VSS-TS-1 report containing the following information, by region:

35

Transportation Subsidy
Financial Responsibility (2)

- a. Number of clients benefitting from the scheme, by type of service (e.g. vasectomy, tubal ligation IUD).
- b. Inclusive dates when subsidy provided (e.g. "Feb-Mar", "Jan").
- c. Number of clients with companions, if any.
- d. Expenditures.

This report to be signed by the project manager monitoring the activity in POPCOM Central Office, will be accompanied by the usual POPCOM certification and can either be submitted to AID as a separate report on voucher form SF 1034, or incorporated in the usual POPCOM monthly financial report to AID, whichever is convenient.

FP-VSS-TS-2

REGIONAL CONSOLIDATED MONTHLY REPORT
Transportation Subsidy

for the month of _____

 Region

Province/City	Total No. of Clients Serviced	Total No. of Companions (if any)	Type of Service			Actual Expenses
			IUD	TL	VSS	

Submitted by:

Certified and approved by:

 Medical Specialist, Clinic Coordinator*

 Regional Population Program Coordinator*

NOTE: Please accomplish this form in duplicate:

original - Central Office
 duplicate - RPO file

*Please type name below signature.

37

IP-VSS-13-1

MONTHLY PERFORMANCE REPORT
Transportation Subsidy

for the month of _____

Province, City

Name of Client	Address	Date of Service	Type of Service			Name of Hospital, Clinic	Name of Companion	Actual Expenses
			ILD	TL	VSS			

Submitted by:

Certified & approved by:

Medical Specialist, Clinic Coordinator*

Regional Population Program Coordinator*

note: Please accomplish this form in duplicate:
Original - Central Office Duplicate - RPO file

*Type name below signature.

38

Number and Distribution of Comprehensive FP
Itinerant Service Teams by Region/Agency
1983

Region	MOH	FPOP	Regl/Provl. CIT
1	1	1	2
2	1		
4			1
5	1		
6			1
7	1		
8			1
9			1
10		2	2
11	1		3
12			1
Total	5	3	12

PP III - SP 2
Mobile Comprehensive Family Planning Service Center

	1982		1983		1984		1985	
	MOH	Others	MOH	Others	MOH*	Others	MOH*	Others
Region I	□	△ △	△	△ △ △	△	△ △	△	△
II			□		□		□	
III							□	
IV				△		△	□	
V		△	△		△	△	△	△
VI		△		△	△	△	△	△
VII		□	□		□		□	
VIII		□		□	△	□	△	△
IX				□	△		△	
X		△ △		△ △ △ △	△	△ △ △	△	△ △
XI		△ △ △ △	△	△ △ △	△	△ △	△	△ △
XII				□		□	△	□
Total	1	12	5	15	9	12	12	9

Legend: □ Regional Module △ District/Provincial

*In view of the current reorganization exercise of MOH, projection for the 1984-1985 development and mobilization of mobile centers for the remaining regions can not be definitely forecasted. However, the original plan to have at least one such mobile service center per region will still be pursued.

Implementation Plan
Sub-Project 3 - IEC
Population Planning III
OY3 - 1983

A. INTENT OF THE IMPLEMENTATION PLAN

Sub-Project 3.1 under the Project Grant Agreement, sets out in broad terms certain goals and objectives, strategy and budget summary for IEC. This implementation plan explains and details the activities of the Sub-Project.

B. SUMMARY STATEMENT

The total funding requirement of Sub-Project 3.1 amounts to ₱2,555,300 for the period covering 1 January 1983 to 31 December 1983.

This document describes the various IEC activities classified under the following line items:

- 3.1.1 Materials Development/Production
- 3.1.2 Public Affairs
- 3.1.3 Training/Orientation
- 3.1.5 Distribution
- 3.1.6 Special Projects

C. SANCTION

Presidential Decree No. 79 issued on 8 December 1972 has two objectives on IEC:

1. to organize and implement programs that will promote a broad understanding of the adverse effects on family life and national welfare of unlimited population growth; and
2. to make family planning part of a broad educational program.

Furthermore, two strategies in the Population Program Medium Term Plan (1981-1985) underscore the importance of IEC. Objective 1-C of Strategy I, is meant "to foster public consciousness of the importance of national population program and continuously keep the public informed of its progress." Strategy 10, on the other hand, is intended "to increase program acceptance and demand for program services through an intensified IEC campaign addressed to the youth, MCRA, husbands and special groups."

D. OBJECTIVES

In the light of Philippine population program directions for 1983-1987, the IEC component shall enlarge its efforts from dissemination of information and generation of messages through various media, to the deeper process of education and value inculcation.

It shall give prime importance to the maintenance of multi-agency cooperation in the conduct of IEC activities. It shall promote key welfare concepts to the different age groups or sectoral concerns among the country's population.

E. MAJOR STRATEGIES

In order to respond to program objectives, two basic IEC strategies shall continue to be pursued for 1983 and beyond.

Strategy 1: Strengthened Multi-Agency Participation.

This strategy involves the organization of partner agencies and non-government organizations according to well-defined sectors and the integration or development of projects and activities to address the needs and concerns of each specific sector. This is in accordance with the IEC Systems View which reflects the following sectors:

- Married Couples of Reproductive Age (MCRA)
- Pre-Marriage Couples (PMC)
- In-School Youth (ISY)
- Out-of-School Youth (OSY)
- Pre-and-early schoolers (PES)
- Special Publics (SPs) like the elderly, hard-core resisters, influentials, policy-makers, cultural communities, religious sector, media, and other.

To broaden PA and NGO participation in planning and project implementation, as well as to facilitate multi-agency coordination and monitoring, IEC Task Forces involving major IEC partner agencies/organizations have been established at national and regional levels, with sub-groups for MCRA, PMC, ISY, OSY and SPs. For 1983, these task forces shall be maintained. Where feasible, IEC task forces at provincial and city shall be maintained. Where feasible, IEC task forces at provincial and city levels shall be set up. The national task force shall also initiate the organization of a sub-group for pre-and-early schoolers.

Strategy 2: Streamlining Population Concepts/Messages

This strategy involves the streamlining of population messages according to the different sectors based on the PUPCOM Board-approved

"Guidelines on the Content and Presentation of Messages for the Philippine Population Program".

This is crucial in order to avoid conflicting messages and achieve unified program impact at all levels. The major concepts to be presented are:

- Small family size and family welfare.
- Delayed marriage
- Increased acceptance and more effective use of family planning methods.
- Population and other development concerns.

Related issues such as birth spacing, individual welfare, reduced incidence of teenage pregnancies and termination of childbearing for those with completed family size shall also be selectively disseminated to appropriate audiences.

F. THE ACTIVITIES

The various IEC activities under this implementation plan are categorized under the following: 1) materials development/production; 2) public affairs; 3) training/orientation; 4) distribution; and 5) special projects.

1. Materials Development/Production

At the Central Office, the following projects have been lined up:

- a. Development/production of video materials for agribus and nutribus;
- b. purchase of copyright/replication of a full length feature film with a responsible parenthood message;
- c. development of prototype materials for out-of-school youth;
- d. production of five sets of slide-tape presentation on each of the sectoral targets of the IEC Systems View.

At the regional level, materials development/production projects will utilize basically the print and the radio media.

2. Public Affairs

Both at central and regional levels, activities and projects designed to highlight the public image of the program and the Commission shall be implemented. Activities to focus on the Family Planning Week celebration shall be conducted.

3. Training/Orientation

At the Central level, the following training/orientation activities are scheduled in 1983:

- a. planning and management skills training for key POPCOM IEC staff, both central and regional;
- b. maintenance of IEC task force at the central level; and
- c. workshop on the repairs/maintenance of AV equipment.

At the regional level, the maintenance of the IEC task forces and the holding of IEC area management conferences have been planned.

4. Distribution

A substantial number of IEC print materials are expected to be produced and distributed in 1983. Hence, funds for distribution of IEC materials at central and regional levels are being earmarked under this Sub-Project.

5. Special Project

Under this category, the following projects have been scheduled for implementation:

- a. population quiz show at all levels, from district to national;
- b. mobile information teams to promote FP at grassroots level;
- c. Instant Sagot sa Family Planning;
- d. folk and rural theatres; and
- e. innovative projects submitted for funding, to include hiring of contractual/casual personnel.

F. BUDGET (P)

	<u>Total</u>	<u>GOP</u>	<u>USAID Loan</u>
3.1.1 Materials development ment/production	P 490,324	P 202,824	P 287,500
3.1.2 Public Affairs	385,360	385,360	-

4/1

Sub-Project 3
Page 5

	<u>Total</u>	<u>GOP</u>	<u>USAID Loan</u>
3.1.3 Training/Orientation	₱ 406,776	₱ 406,776	-
3.1.4 Reserve	-	-	-
3.1.5 Distribution	263,200	263,200	-
3.1.6 Special Projects	<u>1,009,640</u>	<u>1,009,640</u>	<u>-</u>
GRAND TOTAL	<u>₱2,555,300</u>	<u>₱2,267,800</u>	<u>₱287,500</u>

45

Implementation Plan
Sub-Project 4 - Logistics Operation
Population Planning III
OY3 - 1983

A. OBJECTIVE

To strengthen the management of the Logistics Operations at Central and Regional Offices.

B. STRATEGIES

To ensure the successful achievement of this objective, the following strategies will be undertaken:

4.1.1 Shipment and Delivery of Program Commodities

This activity will ensure the flow of contraceptives and other commodities from Central to Regional levels and down to the different Outreach Structures (PPO/CPO/DPO/FTOW/BSPs/Clinics). It will also include the transfer of contraceptives from one region to another. Salaries and other incidental expenses of personnel hired to assist in the shipment and delivery of contraceptives are provided in this budget.

4.1.2 Storage/Insurance

As prescribed in the Logistics Supply System, each Outreach Structure including the Regional Offices and Clinics, should maintain contraceptive stocks adequate to supply the needs of the users. To ensure that contraceptives are properly stored at these levels, there is a need for the PPO/CPOs to maintain the existing storage space being rented and to rent additional warehouse/storage space as needed and as available. Salaries and other incidental expenses of personnel hired for the proper maintenance of the Regional warehouse are provided in this budget.

4.1.4 Registration and Insurance of Program Vehicles

This activity will take care of registering and insuring existing and incoming POPCOM vehicles (2 & 4 wheel) as prescribed by the Bureau of Land Transportation.

4.1.5 Logistics Consultant

This activity calls for the rehiring of the present logistics consultant. He will assist the logistics staff in the area of forecasting, installation of a resupply procedures for contraceptives and training of Outreach personnel on contraceptive resupply procedures.

4.1.6 Training

The main objective of this activity is to provide the Outreach personnel with basic skills/training on logistics/supply management. This activity will also involve the upgrading of the technical skills of the Logistics Plans Officers in the Central and Regional Offices.

4.1.7 Nationwide Contraceptive Inventory-taking and Monitoring

This activity will provide management data on contraceptive inventory levels of all supply points by Region and Province. Until such time that the revised MIS has stabilized its operations, this activity will be a regular undertaking.

4.1.8 Contraceptive Quality Assurance

The purpose of this activity is two-fold. First, it will make available to practicing couples effective and reliable contraceptive supplies. Second, it will provide program managers a basis for decision on the disposition of contraceptive stocks (pills, condoms) in order to eliminate the possibility of arbitrary disposal of perhaps good quality contraceptives. It will involve the testing of all incoming pills/condoms and also those that are at different supply points.

CY 1983
 SP-4 Operations
BUDGET
 (P)

<u>Local Currency</u>	<u>GOP</u>	<u>USAID Grant</u>	<u>USAID Loan</u>	<u>Total</u>
4.1.1 Shipment/Delivery	₱2,292,050	-	-	₱2,292,050
4.1.2 Storage/Insurance	443,096	-	-	443,096
4.1.3 Rehabilitation/ Repair Vehicles	-	-	-	-
4.1.4 Registration/Insurance	522,454	-	-	522,454
4.1.5 Logistics Consultant	-	66,800	-	66,800
4.1.6 Training	-	200,000	-	200,000
4.1.7 Contraceptive Invty.	-	98,200	-	98,200
4.1.8 Quality Assurance	-	20,000	-	20,000
Sub-Total	<u>₱3,257,600</u>	<u>₱385,000</u>	<u>-</u>	<u>₱3,642,600</u>
<u>Foreign Exchange:*</u>				
Commodities	-	-	₱ 300,000	₱ 300,000
Contraceptives	-	-	<u>32,000,000</u>	<u>32,000,000</u>
Sub-Total	<u>-</u>	<u>-</u>	<u>₱32,300,000</u>	<u>₱32,300,000</u>
GRAND TOTAL	<u>₱3,257,600</u>	<u>₱385,000</u>	<u>₱32,300,000</u>	<u>₱35,942,600</u>

*Exchange Rate: \$1 = ₱9.00

48

Implementation Plan
 Sub-Project 5 - Demographic Measurement Activities
 Population Planning III
 OY3 - 1983

A. OBJECTIVE

Demographic Measurement Activities shall aim to provide the program with current and continuing information on fertility, contraceptive prevalence and utilization, as well as measures addressed to the improvement of techniques of data collection and analysis of these techniques.

B. STRATEGIES

1. Financial assistance shall be provided for the 1983 National Demographic Survey (NDS), to be conducted by a consortium of agencies composed of the Office of Population Studies, University of San Carlos; Research Institute for Mindanao Culture, Xavier University and the University of the Philippines Population Institute. The 1983 NDS, fourth in the series of quinquennial demographic surveys (the RPFs in 1978 was considered as the third), hopes to obtain data on current fertility and its determinants, mortality, migration, labor force and family planning practice.
2. Provisions for the continued support/technical assistance of the University of the Philippines Population Institute to the program in the areas of research and evaluation shall be made available.
3. As in the past, provisions shall also be made available to facilitate the joint monitoring of field activities by USAID and POPCOM. At the start of each quarter, POPCOM and AID will develop a joint schedule of travel for sub-project monitors and any special task force members, indicating activities to be observed/evaluated, purpose of travel and other details.

C. BUDGET (P)

	<u>Total Cost</u>	<u>GUP Share</u>	<u>AID Grant</u>
5.1.1 DMA (National Demographic Survey)	P2,628,180		P2,628,180
5.1.2 Service Provider Survey	-	-	-
5.1.3 UPPI/POPCUM Work Agreement	510,000	510,000	-
5.1.4 Evaluation/Monitoring Activities	<u>50,000</u>	<u>-</u>	<u>50,000</u>
GRAND TOTAL	<u>P3,188,180</u>	<u>P510,000</u>	<u>P2,678,180</u>

499

Implementation Plan
Sub-Project 6 - Operations & Policy Research
Population Planning III
OY3 - 1983

A. OBJECTIVE

In the attainment of the overall goal of the National Population Program, Operations Research activities can provide bases for administrative decision-making, reformulating objectives, re-examining resource allocation and solving operational problems.

B. STRATEGIES

1. Operations Research. Operations Research projects will be undertaken both at the central and regional levels. Funds shall continuously be allocated to the regions in line with the ongoing efforts towards strengthening research capability at this level.

Specific areas of interest include:

- a. studies on perceptions, attitudes and performance of trained program personnel;
 - b. evaluative studies on the pre-marital counselling and population education program;
 - c. studies on the effectiveness of innovative projects/strategies;
 - d. in-depth studies on acceptance/non-acceptance of FP methods; and,
 - e. studies on the extent of integration of population dynamics in government development programs.
2. Research Utilization. Activities which increase the likelihood of utilizing research results shall be funded at the national and regional levels. Activities to be supported shall range from workshops for administrators/researchers for the design of research and feedbacks of results, staff development at all levels as well as dissemination/reproduction of completed research studies for use during said conferences/meetings.

To enable the close monitoring of activities, regional travels of sub-project monitors and any special task force member shall be scheduled.

C. BUDGET (P)

	<u>Total Cost</u>	<u>GOP</u>	<u>AID Grant</u>
6.1.1 Operations Research	P 500,000	-	P 500,000
6.1.2 Innovative Approaches to Community Participation	-	-	-
6.1.3 Research Utilization	11,820	-	11,820
6.1.4 Alternative Models for Outreach Network	<u>-</u>	-	<u>-</u>
	<u>P 511,820</u>	-	<u>P 511,820</u>

Implementation Plan
Sub-Project 7 - MIS
Population Planning III
OY3 - 1983

A. OBJECTIVES

The objective of this particular component is to strengthen central management capability to provide program direction through the development and installation of responsive, accurate and timely information systems.

The specific objectives are:

1. to provide indicators on the increase of percentage of Married Couples of Reproductive Age (MCRA) practicing contraceptive;
2. to provide the framework for the total information system;
3. to aid management by providing rapid feedback of information for decision-making;
4. to provide related information for program evaluation;
5. to provide a data bank system for use of all components.

B. STRATEGIES

For this calendar year, the following strategies will be implemented.

1. Data Verification and Quality Control

Inasmuch as the revised Service Delivery Information System was installed in 1982 in 12 Regions, concentration will be placed on data verification to ensure the validity of the data gathered for computer processing. This strategy should encompass activities like refresher courses/training on systems implemented, management and staff orientation/workshops, installation of systems to those areas not yet covered, follow-up and refinements of systems based on special plans or needs. It is envisioned that a National team and Regional teams as used in the SDIS orientation of field personnel would be continued for data verification activities. Identification numbers on cards will be printed and distributed to FTOWs to ensure accurate data storage and retrieval. Additional personnel will be hired to do data control, validation and verification.

2. Computer Processing

Because of the very limited capacity of POPCOM's existing computer system, there is a need to augment its facility either thru a lease or rental agreement. This will ensure timely and efficient processing of input data especially those coming from the field.

3. MIS Forms and Manuals

With the implementation of the new system it was seen that the need for forms was more extensive than previously estimated. Therefore, additional forms and manuals will be printed and distributed to the Regions and other service units.

C. BUDGET (P)

	<u>AID Loan</u>
7.1.1 MIS Development Implementation/ Maintenance	-
7.1.2 MIS Forms	P1,875,000
7.1.3 Staff Development	-
7.1.4 Data Verification and Quality Control	140,000
7.1.5 Computer Processing	<u>400,000</u>
GRAND TOTAL	<u>P2,415,000</u>

52

Population Planning III
Sub-Project - Natural Family Planning
Population Planning III
OY3 - 1983

NATURAL FAMILY PLANNING (NFP)

In the spirit of "cafeteria approach" where all Program methods of contraception are made available to the individual, and in respect of individual choice, a budget item is provided for Natural Family Planning.

The line item will focus on ways and means to promote the more effective use of this method. The private sector and specifically religious groups or institutions will be encouraged to develop strategies for effective service delivery, training and IEC. This will include the implementation of research action projects for effective service delivery, the conduct of training of medical and paramedical personnel on the various NFP methods, and the development of special media package for the same.

A. OBJECTIVES

1. To promote the more effective use of natural family planning;
2. To support or coordinate NFP projects and activities under a medium-term NFP program plan.

B. STRATEGIES

To support the attainment of the above objectives, the following activities will be undertaken:

1. A Task Force on Natural Family Planning Program will be established to develop a medium-term plan for NFP;
2. Action research projects utilizing private hospitals or organizations to render NFP services will be implemented and tested;
3. Training programs for paramedics and other fieldworkers will be undertaken to provide them with adequate knowledge and skills on various NFP methods;
4. Production of print, audio-visual and other IEC materials on natural family planning;
5. Special projects or innovative activities to promote or improve the NFP Program.

C. BUDGET (P)

	<u>GOP</u>	<u>AID</u>		<u>Total</u>
		<u>Grant</u>	<u>Loan</u>	
Natural Family Planning	P500	P2,450	P50	P3,000

63

Population Planning III
Financial Plan & Reimbursement Procedures
Operational Year 3, January - December 1983

A. PROJECT COSTS

The Project's estimated budget is attached as Financial Table, Exhibit A. which identifies, by line item, project costs towards which AID and POPCOM/GOP are contributing funds under the Project Agreement.

Financial reports for local currency project costs shall be accomplished quarterly by POPCOM, using the POPCOM reporting format attached as Exhibit F. POPCOM shall prescribe the details of procedure for the preparation and submission of this report by the Regional Population Officers, Provincial/City Population Officers and others as appropriate. Likewise, AID shall report quarterly on the financial status of budgeted foreign exchange funds. POPCOM agrees to notify AID promptly, in writing, of changes made in the allocation of GOP funds in the sub-projects reflected in the Financial Table. Changes in the financial table involving AID inputs may be made by written agreement between the Executive Director of POPCOM and officials authorized pursuant to Section 9.2 of the Project Agreement to act on behalf of AID.

B. AID PROJECT FUNDING

AID will make appropriate reimbursements of its agreed portion of the project costs, grant and loan, as shown in Financial Table, Exhibit A. Reimbursement will be made to the Treasurer of the Philippines for credit to the account of POPCOM Fund Code 151. AID will notify POPCOM of these reimbursements as they are made and will furnish POPCOM with a copy of the GOP Treasury receipts and AID vouchers covering the reimbursements.

AID will make also direct disbursements to cover appropriate foreign exchange expenditures, both grant and loan.

C. IMPLEMENTATION AGREEMENTS

1. Definitions:

- a. "Implementation Agreements" shall mean the documentation relating to any undertaking by a party other than POPCOM in implementation of the Project and shall principally refer to contracts, grant agreements, memoranda or agreements, etc. which use Project funds.

- b. "Contracts" shall mean implementation agreements which are entered into for the principal purpose of the provision of goods or services to POPCOM and for the benefit of POPCOM.
- c. "Grant Agreements" shall mean implementation agreements which are entered into for the principal purpose of POPCOM supporting a meritorious activity of another party by assisting in the financing of that activity.
- d. "Memorandum of Agreement" shall mean an abbreviated form of implementation agreement which is particularly applicable to grants of simple scope and limited duration.

2. Approval Procedures:

Implementation agreements negotiated by POPCOM to implement mutually approved elements of project implementation plans with AID funding shall observe the following procedures:

- a. Agreements costing ₱450,000 or less will not require USAID advance review.
- b. Agreements costing over ₱450,000 will be submitted to USAID for review before the agreement is executed.
- c. The Legal Office of POPCOM will furnish USAID a copy of all agreements upon their execution.
- d. POPCOM will keep on file for audit at any reasonable time by authorized GOP or AID representatives, copies of all executed agreements.

3. Mandatory Provisions

- a. POPCOM will include in all contracts or grant agreements involving foreign exchange costs the mandatory provisions numbered 1-7 in Exhibit B, with appropriate language changes for grants as necessary.
- b. POPCOM will include in all contracts or grant agreements which involve no foreign exchange costs the mandatory provisions numbered 1, 2, 8 and 9 in Exhibit B.

D. ACTUAL COST REIMBURSEMENTS

AID will reimburse the fixed percentage of the actual costs of local currency line items as indicated under Exhibit A: provided however, that the indicated "U.S. Contribution" amounts, the number of personnel and amounts requested for each category of personnel at the

specified rate of compensation or allowances are not exceeded (see SP-1); and the rate of subsidy for voluntary surgical contraception procedures does not exceed Philippine Medicare rates. Pursuant to the Project Agreement as it will be amended by Amendment No. 2, total disbursements of local currency against the AID contributions to finance agreed upon activities shall not exceed the total dollar amount provided under Section 3.1. Rates for local currency elements shown under Exhibit A may be subject to revision with the prior written agreement of the authorized representatives of POPCOM and AID.

1. Reimbursement Request and Supporting Documentation for Loan and Grant-Funded Activities

a. Salaries and Regular and Special Travel Reimbursement Requests

Immediately after the month covered by the disbursements made by the regional population officers to the local governments for POPCOM's and USAID's share of the costs of Outreach salaries and travel, the RPOs will certify, based on their supervision and knowledge of the program, that the services for which the funds were disbursed have indeed been provided and paid for and will submit the documentation attached as Exhibits C and E to POPCOM central. POPCOM central will consolidate the reports received from the RPOs, and attach voucher SF 1034 and the regular POPCOM certification attached as Exhibit D to the documents, and submit the package to USAID for reimbursement. Annually, the POPCOM and USAID will reconcile the salaries and regular and special travel reports with the Report of Expenditures and Disbursement submitted quarterly by POPCOM Central.

b. Other Reimbursements Requests

Reimbursements requests shall be filed on AID's Standard Form 1034 in an original and four copies, accompanied by a Certified Consolidated Disbursements Report attached herewith as Exhibit F. The Consolidated Disbursements Report shall be prepared by POPCOM Central based upon actual reports received from the regions, and shall be certified correct by the Executive Director of POPCOM or his authorized representative and the Financial and Management Chief. Reimbursements shall be against the POPCOM Central Consolidated Disbursements Report and may be adjusted, if necessary, based on audit by GOP and/or AID.

c. Certification

All reimbursement requests are to be accompanied by the standard Cooperating Country Certification to be signed by the POPCOM Executive Director, or his authorized representative, attached as Exhibit D.

58

2. Processing of Reimbursement Requests

AID will make every effort to reimburse the Cooperating Country for allowable Project Disbursements under the Agreement within two (2) weeks from receipt of requests for reimbursement.

3. Maintenance of Records

Documents supporting expenditures against the Financial Table, Exhibit A, shall be maintained, pursuant to Section B.5 of Annex 2 of the Project Agreement by the consolidating office as well as the originating office.

4. Annual Review of Expenditures

An annual meeting of POPCOM Central and Regional Finance Officers and AID Officials will be held to discuss the status of AID reimbursement and GOP expenditures for the immediately preceding operational year. The details for this meeting will be mutually agreed upon by POPCOM and AID through an exchange of letters.

E. BUDGETARY RESERVES

USAID

The line item Special Projects in the Financial Plan is declared as budgetary reserves. However; USAID, upon the request of POPCOM and the concurrence/approval of OBM, shall make available a portion or all of the funds in the event that actual operations indicate there is a need.

POPCOM

The GOP budgetary reserves of P7.5 million shall be imposed on any item under the GOP portion except for salaries of Outreach personnel and VSS subsidies. The application of the GOP Budgetary Reserves will be left to the discretion of the Regional Officers and S.P. Team Leaders depending on their priorities and needs. The line items that will fall under this budgetary reserves will be determined by the Regional Officers and S.P. Team Leaders before the end of the second quarter.

F. FINANCIAL REPORTING PROCEDURES FOR GRANT AND LOAN REIMBURSEMENT

The following shall be the basis of AID reimbursement to the Cooperating Country for agreed upon sub-project cost elements of the Population Planning III Project.

1. Outreach Sub-Project

a. Provincial/City Population Office

- 1) The Provincial/City Population Offices shall prepare a monthly report for actual amounts paid for salaries and regular and special travel based on the format provided in Exhibit F.1. This report shall be certified correct by the provincial/city treasurer or his/her authorized representative who maintains records, by names and amounts paid, for salaries and travel. Special travel allowance shall be reported by PPOs and CPOs as an element distinct from regular travel.
- 2) These reports shall be forwarded to the Regional Population Office not later than the 15th day of the following month.
- 3) PPOs/CPOs should submit financial reports monthly regardless of whether all reporting units have submitted reports or not.

b. Regional Population Office

- 1) For salaries and regular and special travel disbursements the RPOs shall prepare a "Statement of Payment for Salaries and Travel costs." (See Exhibit E) The report shall be certified by the RPO and the Budget Officer. The RPO shall submit the report to POPCOM Central within 10 days after the end of the month. See D.1.a. above.
- 2) Each Regional Population Officer shall prepare a consolidated Regional Disbursement Report in accordance with Exhibit F, regardless of whether all provinces and cities have reported or not. The regional report shall be certified correct by the Regional Population Officer and the Regional Accountant. The consolidated Regional Disbursement Report shall be submitted to POPCOM Central Office not later than the 25th day of the following month.
- 3) Each RPO shall submit quarterly to POPCOM Central a Report of Expenditures and Disbursements (Exhibit G) not later than 25 days after the end of the quarter.
- 4) Each Regional Population Officer shall see to it that the required financial reports are submitted regularly and on time by the provinces and cities. In cases of non-compliance, the RPO concerned is authorized to withhold releases until the financial reports are submitted.

c. POPCOM Central Office

Rerer to Section D - 1, 2 and 3 for Central office procedures.

2. Clinic Support Sub-Project

a. Clinic/Hospital Level

- 1) Signed voluntary surgical contraception consent forms, Exhibit H, shall be part of the records of a given clinic and/or hospital. These consent forms shall be open to audit at any reasonable time to authorized representatives of POPCOM and AID.
- 2) The consent forms shall be the basis for preparation of POPCOM Form FP-2S, "Sterilization Log Book". Each participating hospital or clinic (Ministry of Health and others) shall prepare POPCOM Form FP-2S and forward it to the applicable Regional Population Office. In the case of MOH hospitals and clinics, a copy of the FP-2S will also be forwarded to the MOH Regional Family Planning Assistance unit.

b. The Regional POPCOM Office

- 1) Each Regional Population Officer shall prepare a regional Consolidated Disbursements Report for non-MOH/NFPO hospitals and centers based on the format attached as Exhibit F. This report shall be certified correct by the Regional Population Officer and the Regional Accountant. The regional report will summarize the information contained in POPCOM FP-2S and will summarize the information contained in POPCOM FP-2S and will include the total number of eligible surgical contraception procedures performed, broken down by female and male cases.
- 2) The regional report shall be submitted to POPCOM Central Office not later than the 25th day of the following month.

c. Ministry of Health - National Family Planning Office (MOH-NFPO)

- 1) Each National Family Planning Office Regional Field Coordinator shall prepare and certify correct for submission to the central MOH/NFPO, a regional consolidated report on MOH Hospitals/centers in accordance with the format attached as Exhibit F. The regional report will summarize the information on POPCOM Form FP-2S and will include the total number of eligible

surgical contraception procedures performed broken down by female and male cases. A copy of the consolidated regional report shall be furnished to the applicable Regional Population Office.

- 2) The Central MOH National Family Planning Office shall consolidate and certify the regional reports. The consolidated report shall be submitted to POPCOM Central Office not later than the 25th day of the following month, setting forth, by region, the number of male and female procedures performed.

3. Other Sub-Projects

Financial reporting and request for AID reimbursement for other sub-project local currency costs will be in accordance with the procedures earlier prescribed for Outreach salaries and travel and VSC procedures, i.e., submission of AID Voucher Standard Form 1034 in an original and 4 copies, accompanied by a Consolidated Disbursements Report appropriately certified by the POPCOM Executive Director, or his authorized representative, and the Financial and Management Chief.

4. Additional Guidelines for Reporting Specific Costs

a. Planning and Operations Meetings and Special Outreach Conference

In advance of each meeting, conference or workshop, POPCOM and AID will agree in writing on the allowable costs for AID reimbursements. Request for reimbursement, under a Consolidated Disbursement Report, shall be accompanied by appropriate paid receipts secured from the facilities, or other entities providing goods or services for the meeting, conference or workshop.

b. Laboratory Service

AID reimbursement will be based upon submission of certified laboratory performance reports.

c. Special Services

This item will be used to finance hiring of part-time consultants and holding of regular meetings utilizing an ad-hoc Sterilization Expert Group. Honoraria for Expert Group members will be paid at allowable consultant rates. Travelling expenses will be reimbursed on actual expense basis, based upon submission of paid receipts.

d. Contracts

Refer to Item C, "Implementation Agreements", for general guidelines.

Requests for reimbursement will be submitted using Exhibit F format, supported by AID Voucher Standard Form 1034 in an original and 4 copies. The same financial reporting procedures will apply to all contracts, whether greater or less than P450,000.

e. Specialized Training (E.G. Training of Logistics Personnel, Paramedic Training, MIS Training, etc.)

Contracts for training should only be executed with firms and/or individuals with an established reputation for expertise in the appropriate field. Requests for AID reimbursement for the cost of training facilities utilized, trainee per diems, and supplies and material shall be accompanied by appropriate paid receipts secured from the individual facility providing the services.

f. Monitoring Activities

AID will reimburse POPCOM for travel and transportation cost to be incurred in implementing this activity.

g. Special Projects

This line item is declared as "budgetary reserves". However, USAID, upon the request of POPCOM and the concurrence/approval of OBM, shall make available a portion or all of the funds in the event that actual operations indicate there is a need.

h. Regional Comprehensive Family Planning Service Centers

The Ministry of Health will submit a proposal for POPCOM and AID review and approval for upgrading the RCFPSCs. Based on the approved proposal, requests for reimbursement will be submitted to AID through POPCOM by MOH, using AID/POPCOM standard reporting procedures. Proposals from RPOs or PAs for comprehensive family planning teams will be reviewed and approved by POPCOM and AID.

i. Operations Research

POPCOM and USAID will agree in writing on any projects not listed in the IP for Sub-Project 6, and any projects that exceed the ceiling stipulated in the O.R. Guidelines.

Normally, AID will reimburse upon receipt of the final research report, accompanied by appropriate documentation of expenditures, e.g., paid receipts. However, this is not intended to rule out AID reimbursement on an incremental basis if indicated by the time required to conduct the research, the time of the year in which the project is initiated, or certain appropriate financial requirements in contracting. In any case, reimbursement of total cost, or the final increment of cost will not be made until the final research report has been submitted.

j. Natural Family Planning

Proposals on Natural Family Planning activities shall be mutually agreed upon by POPCOM and AID. Reimbursements by AID shall be based upon POPCOM submission of certified financial report of expenditures.

Attachments:

- Exhibit A: Operational Year Financial Table
- Exhibit B: Mandatory Provisions
- Exhibit C: Documents required for submission by RPOs for salary and regular and special travel reimbursement requests.
- Exhibit D: Standard Certification
- Exhibit E: Statement of Payments of Salaries and Travel Costs (Regional)
- Exhibit E-1: Statement of Payments of Salaries and Travel Costs (Central-Consolidated)
- Exhibit F: Consolidated (Monthly) Disbursement Report Format (CDR)
- Exhibit F-1: Statement of Releases and Disbursements, Provincial/City Population Office
- Exhibit G: Report of Expenditures and Disbursements - Submitted Quarterly
- Exhibit H: Consent Form for Voluntary Sterilization Procedure

65

POPULATION PLANNING III
OPERATIONAL YEAR 3
CY 83
(000)

FINANCIAL TABLE
EXHIBIT 2

SP	SUB-PROJECTS	(P)					(\$)					RATIO	
		REQUIRE- MENTS	GOP	AID	GRANT	LOAN	REQUIRE- MENTS	GOP	AID	GRANT	LOAN	GOP	AID
LOCAL CURRENCY		120,047	63,815	56,232	48,880	7,352	13,339	7,090	6,249	5,431	818	53%	47%
A. Sub-Projects													
1.1	OUTREACH	66,974	47,324 ^{A/}	19,650	19,328	322	7,442	5,258	2,184	2,148	36	71%	29%
1.1.1	Recruitment/Replacement	852	852	-	-	-	95	95	-	-	-	100%	-
1.1.2	Salaries	34,096	22,167	11,934	11,934	-	3,788	2,462	1,326	1,326	-	65%	35%
1.1.3	Travel Allowances	14,493	9,420	5,073	5,073	-	1,611	1,047	564	564	-	65%	35%
1.1.4	Special Travel Allowances	-	-	-	-	-	-	-	-	-	-	-	-
1.1.5	Project Development and Management Support Cost	11,173	11,173	-	-	-	1,241	1,241	-	-	-	100%	-
1.1.6	FSTs	3,120	3,120	-	-	-	347	347	-	-	-	100%	-
1.1.7	Planning and Operations Meetings	-	-	-	-	-	-	-	-	-	-	-	-
1.1.8	Special Outreach Conference	322	-	322	-	322	36	-	36	-	36	-	100%
1.1.9	Staff Development Motivation	-	-	-	-	-	-	-	-	-	-	-	-
1.1.10	BSPD Incentives	2,000	-	2,000	2,000	-	222	-	222	222	-	-	100%
1.1.11	COLA and PAG-IBIG Fund (employer contribution)	918	597	321	321	-	102	66	36	36	-	55%	35%
1.2	H.R.D	3,515	115	3,400	1,800	1,600	391	13	378	200	178	3%	97%
1.2.1	Skills Training for Outreach	1,500	-	1,500	-	1,500	167	-	167	-	167	-	100%
1.2.2	Staff Development for Training	100	100	-	-	-	11	11	-	-	-	100%	-
1.2.3	Orient/Reorient LG Officials	215	15	200	100	100	24	2	22	11	11	7%	93%
1.2.4	Redesign of curricula and Materials Design/Development	-	-	-	-	-	-	-	-	-	-	-	-
1.2.5	BSPD Training	1,700	-	1,700	1,700	-	189	-	189	189	-	-	100%
1.2.6	VSS Training	-	-	-	-	-	-	-	-	-	-	-	-
1.2.7	Evaluation	-	-	-	-	-	-	-	-	-	-	-	-

66

SP	SUB-PROJECTS	(P)					(\$)					(%)	
		REQUIRE-	(P)		(P)		REQUIRE-	(\$)		(%)			
		MENTS	GOP	AID	GRANT	LOAN	MENTS	GOP	AID	GRANT	LOAN	GOP	AID
2.1.	CLINIC SUPPORT	19,834	9,840	9,994	9,994	-	2,203	1,093	1,110	1,110	-	50%	50%
2.1.1	Itinerant Sterilization Teams	-	-	-	-	-	-	-	-	-	-	-	-
2.1.2	Itinerant Comprehensive F/P Team Units	2,731	-	2,731	2,731	-	303	-	303	303	-	-	100%
2.1.3	VSS Subsidies	15,960	9,257	6,703	6,703	-	1,774	1,029	745	745	-	58%	42%
2.1.4	Complication Assistance	283	283	-	-	-	31	31	-	-	-	100%	-
2.1.5	Laboratory Services	200	-	200	200	-	22	-	22	22	-	-	100%
2.1.6	Transportation Assistance	300	-	300	300	-	33	-	33	33	-	-	100%
2.1.7	Special Services	60	-	60	60	-	7	-	7	7	-	-	100%
2.1.8	Other Clinic Support Costs	300	300	-	-	-	33	33	-	-	-	100%	-
3.1	I E C	2,555	2,253	287	-	287	284	252	32	-	32	89%	11%
3.1.1	Materials development/ production and conduct of media activities	490	207	287	-	287	55	23	32	-	32	42%	53%
3.1.2	Public Affairs	385	385	-	-	-	43	43	-	-	-	100%	-
3.1.3	Training/Orientation	407	407	-	-	-	45	45	-	-	-	100%	-
3.1.4	Research	-	-	-	-	-	-	-	-	-	-	-	-
3.1.5	Logistics/Distribution	263	253	-	-	-	29	29	-	-	-	100%	-
3.1.6	Special Projects	1,010	1,010	-	-	-	112	112	-	-	-	100%	-
4.1	LOGISTICS	3,643	3,258	385	385	-	404	362	42	42	-	89%	11%
4.1.1	Shipment and Delivery	2,292	2,292	-	-	-	255	255	-	-	-	100%	-
4.1.2	Warehouse and Insurance	443	443	-	-	-	49	49	-	-	-	100%	-
4.1.3	Rehabilitation/Repair of Vehicles	-	-	-	-	-	-	-	-	-	-	-	-
4.1.4	Insurance/Registration of Program Vehicles	523	523	-	-	-	58	58	-	-	-	100%	-
4.1.5	Logistics Consultant	67	-	67	67	-	7	-	7	7	-	-	100%
4.1.6	Training	200	-	200	200	-	22	-	22	22	-	-	100%
4.1.7	Contraceptive Inventory	98	-	98	98	-	11	-	11	11	-	-	100%
4.1.8	Contraceptive Quality Assurance	20	-	20	20	-	2	-	2	2	-	-	100%
5.1	DMA/EVALUATION	3,188	510	2,678	2,678	-	355	57	298	298	-	16%	84%
5.1.1	DMA (Nat'l Demo Survey)	2,628	-	2,628	2,628	-	292	-	292	292	-	-	100%
5.1.2	Service Provider Survey	-	-	-	-	-	-	-	-	-	-	-	-
5.1.3	UPPI/POPCOM Work Agreement	510	510	-	-	-	57	57	-	-	-	100%	-
5.1.4	Evaluation/Monitoring Activities	50	-	50	50	-	6	-	6	6	-	-	100%

57

SP	SUB-PROJECTS	(P) TOTAL				(\$) TOTAL				RATIO			
		REQUIRE- MENTS	GOP	AID	AID GRANT	REQUIRE- MENTS	GOP	AID	GRANT LOAN	GOP	AID		
6.1	OPERATIONS AND POLICY RESEARCH	512	-	512	512	57	-	57	57	-	-	100%	
6.1.1	Operations and Policy Research	500	-	500	500	56	-	56	56	-	-	100%	
6.1.2	Innovative Approaches to Community Participation	-	-	-	-	-	-	-	-	-	-	-	
6.1.3	Research Utilization	12	-	12	12	1	-	1	1	-	-	100%	
6.1.4	Alternative Models for Outreach Network	-	-	-	-	-	-	-	-	-	-	-	
7.1	M I S	2,415	-	2,415	-	268	-	268	-	268	-	100%	
7.1.1	MIS Development Implementation and Maintenance	-	-	-	-	-	-	-	-	-	-	-	
7.1.2	MIS Forms	1,875	-	1,875	-	208	-	208	-	208	-	100%	
7.1.3	Staff Development	-	-	-	-	-	-	-	-	-	-	-	
7.1.4	Data Verification and Analysis	140	-	140	-	16	-	16	-	16	-	100%	
7.1.5	Computer Processing	400	-	400	-	44	-	44	-	44	-	100%	
B.	Special Projects	14,411	-	14,411	11,733	2,678	-	1,602	1,304	298	-	100%	
C.	Natural Family Planning	3,000	500	2,500	2,450	50	333	55	278	272	6	17% : 83%	
<u>FOREIGN EXCHANGE</u>		32,810	-	32,810	298	32,512	3,646	-	3,646	33	3,613	-	100%
	Commodities	300	-	300	-	300	33	-	33	-	33	-	100%
	Contraceptives	32,000	-	32,000	-	32,000	3,556	-	3,556	-	3,556	-	100%
	Participant Training	510	-	510	298	212	57	-	57	33	24	-	100%
TOTAL PROJECT COST		152,857	63,815	89,042	49,178	39,864	16,985	7,090	9,895	4,464	4,431	42% : 58%	
LESS BUDGETARY RESERVES		21,911	7,500	14,411	11,733	2,678	2,435	833	1,602	1,304	298	-	
NET PROJECT COSTS		130,946	56,315	74,631	37,445	37,186	14,550	6,257	8,293	4,160	4,133	43% : 57%	

Exchange Rate \$1 = P9.00

A/ Includes LG share of P13,815,000.00 which are budgeted under Line Items 1.1.2, 1.1.3 and 1.1.5.

B/ This line item is declared as budgetary reserves. However, USAID, upon the request of POPCOM and the concurrence/approval of OBM, shall make available a portion or all of the funds in the event that actual operations indicate there is a need.

C/ The GOP budgetary reserves of P7.5 million may be imposed on any item under the GOP portion except for salaries of Outreach personnel and VSS subsidies. The application of the GOP Budgetary Reserves will be left to the discretion of the Regional Officers and S.P. Team Leaders depending as to their priorities and needs. The line items that will fall under these budgetary reserves will be determined by the Regional Officers and S.P. Team Leaders before the end of the second quarter.

MANDATORY PROVISIONS

The following mandatory provisions should be included in all agreements funded, in whole, or part, with AID funds:

1. LEGAL EFFECT OF AID APPROVALS AND DECISIONS

The parties hereto understand that the Agreement has reserved to AID certain rights such as, but not limited to, the right to approve the terms of this agreement, the Contractor or Grantee, and any or all plans, reports, specifications, subcontracts, bid documents, drawings, or other documents related to this agreement and the project of which it is part. The parties hereto further understand and agree that AID, in reserving any or all of the foregoing approval rights, has acted solely as a financing entity to assure the proper use of United States Government funds, and that any decision by AID to exercise or refrain from exercising these approval rights shall be made as a financier in the course of financing this project and shall not be construed as making AID a party to the agreement. The parties hereto understand and agree that AID may, from time to time, exercise the foregoing approval rights, or discuss matters related to these rights and the project with the parties jointly or separately, without thereby incurring any responsibility or liability to the parties jointly or to any of them. Any approval (or failure to disapprove) by AID shall not bar the Government or AID from asserting any right, or relieve the Contractor/Grantee of any liability which the Contractor/Grantee might otherwise have to the Government or AID.

2. AUDIT AND RECORDS

- A. The Contractor/Grantee shall maintain books, records, documents, and other evidence and shall apply consistent accounting procedures and practices sufficient to reflect properly all transactions under or in connection with the contract. The foregoing constitute "records" for the purpose of this clause.
- B. The Contractor/Grantee shall maintain such records during the contract term and for a period of 3 years after final payment. However, records which relate to appeals under any "Disputes and Appeals" clause or litigation or the settlement of claims arising out of the performance of this agreement shall be retained until such appeals, litigation, or claims have been finally settled.
- C. All records shall be subject to inspection and audit by the Government and/or AID (or their authorized agents) at all

reasonable times. The Contractor/Grantee shall afford the Government and/or AID proper facilities for such inspection and audit.

- D. The Contractor/Grantee further agrees to include in all its sub-agreements hereunder a provision that the subcontractor/grantee agrees that the Government and/or AID, or any of their authorized agents, shall, until the expiration of 3 years after final payment under the sub-agreement have access to and the right to examine any records of such subcontractor/grantee involving transactions related to the sub-agreement.

3. HOST COUNTRY TAXES

- A. The Contractor/Grantee and those of its employees who are not citizens or permanent residents of the host country shall be free of all taxes, fees, levies, or impositions imposed under laws in effect in the host country with respect to all work and services performed under this contract.
- B. The personal effects (including vehicles) of the Contractor/Grantee and those of its employees who are not citizens or permanent residents of the host country shall be free of all taxes imposed under laws in effect in the host country with respect to such personal effects.
- C. The Government will allow the Contractor/Grantee to import free of customs and duties such materials and equipment as may be required for the services under this agreement provided such items not consumed in agreement performance, re-exported or transferred to the Government at the conclusion of the agreement.

4. NATIONALITY AND SOURCE

- A. Unless otherwise specified below or in the clause entitled "Air Travel and Transportation," all goods and services provided by the Contractor or any subcontractor under this contract shall have their nationality, source, and origin in those countries listed in AID Geographic Code 941 in effect on the date of acquisition and/or in the Philippines.

B. Definitions

(1) Source

"Source" means the country from which a commodity is shipped to the Cooperating Country or the Cooperating Country itself if the commodity is located therein at the time of purchase.

However, where a commodity is shipped from a free port or bonded warehouse in the form in which received therein, "source" means the country from which the commodity was shipped to the free port or bonded warehouse.

(2) Origin

The "origin" of a commodity is the country or area in which commodity is mined, grown, or produced. A commodity is produced when through manufacturing, processing, or substantial and major assembling of components a commercially recognized new commodity results that is substantially different in basic characteristics or in purpose or utility from its components.

(3) Nationality

(a) A contractor providing services under an AID-financed contract for services must fit one of the following categories 1), 2), or 3) to be eligible for AID financing:

- 1) An individual who is a citizen of and whose principal place of business is in a country included in the authorized geographic code or a non-U.S. citizen lawfully admitted for permanent residence in the United States whose principal place of business is in the United States;
- 2) A corporation or partnership that is incorporated or legally organized under the laws of a country or area included in the authorized geographic code, has its principal place of business in a country or area included in the authorized geographic code, and meets the criteria set forth in either subparagraph a. or b. below:
 - a. The corporation or partnership is more than 50% beneficially owned by individuals who are citizens of a country or area included in the authorized geographic code. In the case of corporations, "more than 50% beneficially owned" means that more than 50% of each class of stock is owned by such individuals; in the case of partnerships, "more than 50% beneficially owned" means that more than 50% of each category of partnership interest (e.g., general limited) is owned by such individuals. (With respect to stock or interests held by companies, funds or institutions, the ultimate beneficial ownership by individuals is controlling.).

- b. The corporation or partnership:
- i. has been incorporated or legally organized in the United States for more than 3 years prior to the issuance date of the invitation for bids or request for proposals, and
 - ii. has performed within the United States administrative and technical, professional, or construction services under a contract or contracts for services and derived revenue therefrom in each of the 3 years prior to the date described in the preceding paragraph, and
 - iii. employs United States citizens in more than half its permanent full-time positions in the United States, and
 - iv. has the existing capability in the United States to perform the contract;

or

- 3) A joint venture or unincorporated associations consisting entirely of individuals, corporations, or partnerships which fit categories 1) and 2) above. However, joint ventures with firms wholly or partially owned by the host government are ineligible.
- (b) A duly authorized officer of the firm shall certify that the participating firm meets either the requirements of subparagraphs (2) a. or (2) b. In the case of corporations, the certifying officer shall be the corporate secretary. With respect to the requirements of subparagraph (2) a., the certifying officer may presume citizenship on the basis of the stockholder's record address, providing the certifying officer certifies, regarding any stockholder (including any corporate funds or institutional stockholder) whose holdings are material to the corporation's eligibility, that the certifying officer knows of no fact which might rebut that presumption.
- (c) Citizens or firms of any country not included in AID Geographic Code 935 are ineligible as suppliers, contractors, subcontractors, or agents in connection with AID-financed contracts for services. However,

72

non-U.S. citizens lawfully admitted for permanent residence in the United States are eligible.

- (d) The nationality policy of paragraph B above, does not apply to the employees of contractors or subcontractors but all contractors and subcontractor employees engaged in providing services under AID-financed contracts must be citizens of countries included in AID Geographic Code 935 or non-U.S. citizens lawfully admitted for permanent residence in the United States.

5. AIR TRAVEL AND TRANSPORTATION

A. The Contractor shall be reimbursed for the costs of economy class commercially scheduled air travel:

- (1) Round trip air fares for the contractor's employees assigned to work in the host country and their authorized dependents.
- (2) Other round trips as budgeted and specifically provided for in specific contract clauses.

Per diem during such travel shall be paid in accordance with the Contractor/s usual practice.

B. Use of U.S. Flag Air Carriers

- (1) The Contractor shall utilize U.S. flag air carriers for international air transportation of personnel (and their personal effects) or property to the extent service by such carrier is available, in accordance with the following criteria:
 - (a) Passenger or freight service by a U.S. flag air carrier is considered available even though:
 - 1) Service by a non-U.S. flag air carrier can be paid for in excess foreign currency, or
 - 2) Service by a non-U.S. flag air carrier is preferred by the Contractor or traveler needing air transportation, or
 - 3) Service by a non-U.S. flag air carrier is more convenient for the Contractor or traveler needing air transportation.
 - (b) Passenger service by a U.S. flag air carrier will be considered to be unavailable:

- 1) When U.S. flag air carriers offer only first class service, and less than first class service is available from non-U.S. flag air carriers, or
 - 2) When the traveler, while en route, has to wait 6 hours or more to transfer to a U.S. flag air carrier to proceed to the intended destination, or
 - 3) when any flight by a U.S. flag air carrier is interrupted by a stop anticipated to be 6 hours or more for refueling, reloading, repairs, etc., and no other flight by a U.S. flag air carrier is available during the 6 hour period, or
 - 4) When by itself or in combination with other U.S. flag or non-U.S. flag air carriers (if U.S. flag air carriers are unavailable) it takes 12 or more hours longer from the origin airport to the destination airport to accomplish the mission than would service by an non-U.S. flag air carrier or carriers.
 - 5) When the elapsed travel time on a scheduled flight from origin to destination airports by non-U.S. flag air carrier(s) in 3 hours or less, and service by U.S. flag air carrier(s) would involve twice such scheduled travel time.
- (2) In the event that the Contractor selects a carrier other than a U.S. flag air carrier for international air transportation, it will include a certification on vouchers involving such transportation which is essentially as follows:

CERTIFICATION OF UNAVAILABILITY OF U.S. FLAG AIR CARRIERS

I hereby certify that transportation service for personnel (and their personal effects) or property by U.S. flag air carrier was unavailable for the following reasons:
(state reasons)

- (3) The terms used in this clause have the following meanings:
- (a) "International air transportation" means transportation of persons (and their personal effects) or property by air between a place in the United States and a place outside thereof or between two places both of which are outside the United States.
 - (b) "U.S. flag air carrier" means one of a class of air carriers holding a certificate of public convenience and

necessity issued by the Civil Aeronautics Board, approved by the President, authorizing operations between the United States and/or its territories and one or more foreign countries.

(4) The Contractor shall include the substance of this clause, including this paragraph (4) in each subcontract or purchase order hereunder, which may involve international air transportation.

C. At least one week prior to the commencement of any international travel, the Contractor shall notify the AID Mission identifying the traveler and date of arrival.

6. MARKING

The Contractor shall ensure that all equipment and materials (commodities) and their shipping containers if any, carry the official AID (red, white, and blue clasped hands) emblem. Emblems shall be affixed by metal plate, decal, stencil, label, tag, or other means, depending upon the type of commodity or shipping container and the nature of the surface to be marked. The emblem placed on the commodities shall be as durable as the trademark, company, or brand name affixed by the producer. The emblem on each shipping container must remain legible until the container reaches the consignee. The last set of digits of the AID identification number or the pertinent agreement or other document shall be marked in characters at least equal in height to the shipper's marks on each shipping container.

7. WORKMEN'S COMPENSATION INSURANCE (FOREIGN EXCHANGE)

The Contractor, before commencing performance under this contract shall maintain coverage through worker's compensation insurance or security covering each employee to the extent required by the Defense Base Act of the United States, but in any event equivalent to coverage required by law or custom in the location where the contractor employee is performing services.

8. WORKMEN'S COMPENSATION INSURANCE (LOCAL CURRENCY)

The Contractor/Grantee, before commencing performance under this agreement shall maintain coverage through workmen's compensation insurance or similar security covering each employee to the extent required by law or custom in the location where the contractor's/grantee employee is performing services.

9. LOCAL SERVICES

No foreign procurement or travel is authorized by this agreement.

15

DOCUMENTS REQUIRED FOR SUBMISSION BY RPO'S FOR
SALARY AND TRAVEL COSTS REIMBURSEMENT

1. Xerox copy of check released to Provincial/City Treasurer by the Regional Population Office

ACCOUNT # 010-840112-3

TREASURER OF THE PHILIPPINES
 Commission on Population
 Region VI, Iloilo

Check No. SN **7-200** 101-8
 JUNE 22, 1981

PAY TO THE ORDER OF **THE CITY TREASURER BAGUO CITY NFPD PROJECT** **43,816.85**

THIRTY THREE THOUSAND EIGHT HUNDRED SIXTY & 85/100 ONLY PESOS

SIGNATURE
VIOLATA T. NUBAG
 Population Project Officer

COUNTER SIGNATURE
MANUEL G. AREJOLA
 Regional Officer

PHILIPPINE NATIONAL BANK
 HEAD OFFICE

AGENCY	OFFICER	STATION	FUND
A0040	H-130	0690	101
PROGRAM	PROJECT	EXPENSE	SECTOR
01	01	D-10-00	10

Iloilo Branch

2. Xerox copy of Official GOP receipt signed by Provincial/City Treasurer

OFFICIAL RECEIPT

PROVINCIAL/CITY TREASURER'S GENERAL RECEIPT

Received from *[Handwritten Name]* the sum of *[Handwritten Amount]* Pesos, P. Philippine currency, of *[Handwritten Date]* 1981.

For *[Handwritten Purpose]*

[Handwritten Signature]
 Provincial/City Treasurer

[Handwritten Signature]
 Deputy

18-214

Date _____

C E R T I F I C A T I O N

The undersigned hereby certifies that: (1) payment of the sum claimed under the cited project is proper and due and that appropriate refund to AID will be made promptly upon request of AID in the event of non-performance, in whole or in part, under the project or for any breach of terms of the project; (2) the information on the fiscal report is correct and such detailed supporting information as AID may require will be furnished by the GOP (POPCOM) promptly to AID on request, and (3) all requirements called for by the project to the date of this Certification have been met.

Executive Director
POPCOM

STATEMENT OF PAYMENTS OF SALARIES AND TRAVEL COSTS
COMMISSION ON POPULATION
REGIONAL POPULATION OFFICE _____
FOR THE PERIOD _____

<u>Province/City</u>	<u>Total</u>	<u>Salaries</u>	<u>Travel Allowances</u>	<u>Special Travel</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Certified Correct: _____
Regional Budget Officer Date

This is to certify that based on my knowledge and supervision of the program, the services for which the above funds were disbursed have indeed been provided and paid for

Regional Population Officer Date

12

CONSOLIDATED STATEMENT OF PAYMENTS OF SALARIES
AND TRAVEL COSTS
COMMISSION ON POPULATION
FOR THE PERIOD _____

<u>Region</u>	<u>Total</u>	<u>Salaries</u>	<u>Travel Allowances</u>	<u>Special Travel</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Certified Correct:

Approved by:

Financial & Management Chief

Executive Director

CONSOLIDATED DISBURSEMENTS REPORT

Population Planning III Project
 (Operational Year 3-1983)
 For the Period _____

Sub-Projects ^{1/}
For cost-shared and USAID Funded

Central*

Region*

Region*

Region*

(Use Additional Sheets)
for Additional Regions)

A. Sub-Project

S.P.1.1

- 1.1.2
- 1.1.3
- 1.1.4
- 1.1.7
- 1.1.8
- 1.1.9
- 1.1.10
- 1.1.11

S.P.1.2

- 1.2.1
- 1.2.5
- 1.2.6
- 1.2.7

S.P.2

- 2.1.2
- 2.1.3
- 2.1.5
- 2.1.6
- 2.1.7

S.P.3

- 3.1.1

S.P.4

- 4.1.5
- 4.1.6
- 4.1.7
- 4.1.8

db
 1/ Refer to Financial Table

Consolidated Disbursements Report
 Page 2

<u>Sub-Projects</u> For cost-shared and USAID Funded	<u>Central*</u>	<u>Region*</u>	<u>Region*</u>	<u>Region*</u>	<u>(Use Additional Sheets for Additional Regions)</u>
S.P.5					
5.1.2					
5.1.4					
5.1.5					
S.P.6					
6.1.1					
6.1.2					
6.1.3					
6.1.4					
S.P.7					
7.1.1					
7.1.2					
7.1.3					
7.1.4					
7.1.5					
B. Innovative Activities	_____	_____	_____	_____	
GRAND TOTAL	=====	=====	=====	=====	

The undersigned hereby certify that disbursements shown on this report are true and correct for the period indicated.

 **Executive Director

 Date

 **Financial and Management Chief

 Date

*These headings may be appropriately changed for reporting by the Regional Population and Ministry of Health Offices.

**These titles may be appropriately changed for reporting use by the Regional Population and Ministry of Health Offices.

8/

Republic of the Philippines
 Province/City of _____
 Office of the Governor/City Mayor

Provincial/City Population Office
 STATEMENT OF RELEASES AND DISBURSEMENTS
 For the Month of _____ 19 _____

	RELEASES		
	<u>POPCOM</u>	<u>LOCAL GOV'T.</u>	<u>TOTAL</u>
Cash:			
Carry over, previous year(s)	₱xxx	₱xxx	₱xxx
Current year:			
Previously Reported	xxx	xxx	xxx
This Month	xxx	xxx	xxx
Total Cash Available	<u>₱xxx</u>	<u>₱xxx</u>	<u>₱xxx</u>
In Kind:			
Previously Reported	₱xxx	₱xxx	₱xxx
This Month	xxx	xxx	xxx
Total In Kind	<u>₱xxx</u>	<u>₱xxx</u>	<u>₱xxx</u>
GRAND TOTAL	<u>₱</u>	<u>₱</u>	<u>₱</u>

	DISBURSEMENTS					
	<u>THIS MONTH</u>			<u>TOTAL TO DATE</u>		
	<u>CASH</u>	<u>KIND</u>	<u>TOTAL</u>	<u>CASH</u>	<u>KIND</u>	<u>TOTAL</u>
I. POPCOM						
1. Salaries						
a. _____ PTO/CFO x ₱	---	---	---	---	---	---
b. _____ DPOs x ₱	---	---	---	---	---	---
c. _____ FLOWs x ₱	---	---	---	---	---	---
2. Salary-Related Costs						
a. _____ PTO/CFO x ₱	---	---	---	---	---	---
b. _____ DPOs x ₱	---	---	---	---	---	---
c. _____ FLOWs x ₱	---	---	---	---	---	---
3. Travel						
a. _____ PTO/CFO x ₱	---	---	---	---	---	---
b. _____ DPOs x ₱	---	---	---	---	---	---
c. _____ FLOWs x ₱	---	---	---	---	---	---
4. Others (Specify)						
Sub-Total	---	---	---	---	---	---
II. Local Government						
1. Salaries						
a. Outreach						
1) _____ PTO/CFO x ₱	---	---	---	---	---	---
2) _____ DPOs x ₱	---	---	---	---	---	---
3) _____ FLOWs x ₱	---	---	---	---	---	---
b. Administrative	---	---	---	---	---	---

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2. Salary-Related Costs	_____	_____	_____	_____	_____	_____
a. Outreach	_____	_____	_____	_____	_____	_____
1) _____ IFO/CFO x \checkmark	_____	_____	_____	_____	_____	_____
2) _____ IFOs x \checkmark	_____	_____	_____	_____	_____	_____
3) _____ FTOWs x \checkmark	_____	_____	_____	_____	_____	_____
b. Administrative	_____	_____	_____	_____	_____	_____
3. Travel (Outreach)	_____	_____	_____	_____	_____	_____
a. _____ IFO/CFO x \checkmark	_____	_____	_____	_____	_____	_____
b. _____ IFOs x \checkmark	_____	_____	_____	_____	_____	_____
c. _____ FTOWs x \checkmark	_____	_____	_____	_____	_____	_____
4. Others	_____	_____	_____	_____	_____	_____
a. Supplies and Materials	_____	_____	_____	_____	_____	_____
b. Communication	_____	_____	_____	_____	_____	_____
c. Travel-Administrative Staff	_____	_____	_____	_____	_____	_____
d. Office Rental	_____	_____	_____	_____	_____	_____
e. Others (Specify)	_____	_____	_____	_____	_____	_____
Sub-Total	_____	_____	_____	_____	_____	_____
TOTAL	=====	=====	=====	=====	=====	=====

The undersigned hereby certify that: (1) rates of compensation and allowance; and (2) number of personnel, by category, as shown on this report are true and correct for the period indicated.

Certified Correct:

Approved By:

Prov'l./City Treasurer

Project Director

VERIFIED AND FOUND CORRECT:

Prov'l./City Auditor

83

Report of Expenditures* and Disbursements
For the Quarter Ending _____

<u>Sub-Projects</u> ^{1/}	Total This Quarter		Total To-date	
	<u>Expenditures</u>	<u>Disbursements</u>	<u>Expenditures</u>	<u>Disbursements</u>

GRAND TOTAL

_____	_____	_____	_____
vvvvvvvvvvvv	vvvvvvvvvvvv	vvvvvvvvvvvv	vvvvvvvvvvvv

CERTIFIED CORRECT BY:

Financial and Management Chief

APPROVED BY:

Executive Director

1/ Refer to Financial Table

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POPCOM/CSD

CONSENT FORM FOR VOLUNTARY STERILIZATION PROCEDURE*

I, _____ of legal age and sound mind, and residing at _____ voluntarily present myself to be sterilized by the following procedure _____ to prevent future pregnancy. _____ (specify procedure to be performed)

I understand that:

- 1. There are temporary methods of preventing pregnancy I can use instead of sterilization for planning my family;
2. That sterilization is a surgical procedure, the details of which my physician has explained to me;
3. That the procedure involves risks;
4. That if successful, I will be unable to have any more children;
5. That although the operation is known to be effective and irreversible, there are instances of failure.

Understanding all these, if the surgical procedure will necessitate other added surgical or medical measures or procedures, I hereby grant permission to carry out these additional measures or procedures.

Signature of Consenting Spouse

Signature of Client

Date

Date

I hereby certify that I have fully explained the above information to the client and spouse and that they consented to the performance of the operation.

Date

Signature of Physician authorized asst.

Witness (1)

* To be translated in the language dialect of the client as needed.

(1) Same sex, speaks language of client.

Handwritten initials or mark in the bottom right corner.