

The following report corresponds to that Modified Scope of Work item by item and addresses each of the expected outputs and accomplishments of the project.

a. Monitoring Sub-grants

Sub-grants were provided to the following nine organizations during the period of the project:

FUDECO	- Fundación de Desarrollo Comunitario
IDDI	- Instituto Dominicano de Desarrollo Integral
ADOPLAFAM	- Asociación Dominicana de Planificación Familiar
FCH	- Fundación Contra el Hambre
AAVI	- Aguas Videntes
CARITAS	- Caritas Dominicana
SSID	- Servicio Social de Iglesias Dominicanas
AED	- Acción Evangélica de Desarrollo
MUDE	- Mujeres en Desarrollo

Programmatic

1. From October 1990 to April 1991, the Associate Technical Director, Dr. Emma Ottolenghi, visited the NGO field projects in Regions IV and VI during promoter trainings and during regional technical committee meetings at least once a month in each region. (September 1990 and May 1991 were spent in starting-up and phasing-down activities.) The Regional Technical Coordinator in Region VI, Jennifer Metzler, spent at least four days per week working with the NGO's field staff in their training and field management activities, the initiation and support of a health information system (HIS) with one NGO, and in Regional Technical Committee (COSASO) meetings and workshops. (See Annexes: Informes Región IV & VI).

In Region VI, at the initiation of the last phase of the project, the position of Regional Technical Coordinator had been vacant for several months. The regional secretary, Mrs. Isabel Montilla, had been filling all the coordinating activities, providing logistical support and organizing regional technical meetings and workshops. Dr. Hector Guerrero was hired by SCF on a half-time basis to be Regional Technical Coordinator in November 1990, but despite his best intentions and several visits by the Associate Technical Director for the purpose of training him to fulfill his scope of work, he was not able to satisfy what was expected of him. His contract was terminated in April 1991.

2. The Associate Technical Director assisted meetings and trainings conducted by the NGO's in Region O. As a follow-up to these activities, the NGO's received feedback on both positive achievements and where improvement was needed.

3. and 4. With NGO's whose sub-grants were extended (FUDECO, IDDI, ADOPLAFAM, FCH, AGUAS VIVIENTES, CARITAS, SSID and AED) and the one who received a new sub-grant (MUDE), the Associate Technical Director met with the administrative and technical staff to review the technical contents of their proposals and modify them as necessary.

5. The HIS Associate Director worked intensively and closely with one sub-grantee, Aguas Vivientes (AAVI), to establish a model HIS in ten communities and train local personnel from this NGO in the planning, implementation and uses of a community-based HIS. At the termination of the SCF agreement, this AAVI health information system is functioning and the AAVI health manager is fully trained. Five other NGO's are in various stages of implementing a health program incorporating this HIS, using their own resources. The health managers of the NGO's are prepared to support each other in implementing a health strategy which incorporates an HIS, using the instruments and materials developed with PSI/SCF. The health director of AAVI will continue to act as the main resource.

6. The Associate Technical Director worked with Dr. Josefina Coen of the Dominican Pediatric Society and with Ms. Cecilia Michel of the Ministry of Health (SESPAS) Diarrheal Disease Program to plan and establish six community oral rehydration units ("Hogares de Hidratación Comunitaria"), three in a rural setting with Fundación Contra el Hambre (FCH) and three in an urban setting with Instituto Dominicano de Desarrollo Integrar (IDDI). It is projected that these six will serve as models for other units with the strategy to "blanket" entire barrios with them. Enough equipment for 24 such units was purchased. The funds for this activity were from a designated contribution to the Save the Children Federation from the ARCO Foundation and has been accounted as cost-sharing from SCF (See Annex: Informe de Hogares de Hidratación Comunitaire).

PSI Bulletin: PSI/SCF produced two issues of the "Boletín" between September 1990 and May 1991. The first one focussed on "Breastfeeding". The second one focussed on "Growth Monitoring" featuring articles written by the Director and Trainer of Caritas Dominicana (See Annex: Boletín).

Financial

1. and 2. Financial Analyst Rafael Pueriet of SCF prepared monthly financial reports on each of the sub-grants and provided technical assistance as requested by the participating NGO's (See Annex: Informe de las Sub-Donaciones).

b. Training Modules

PSI/SCF produced a set of six training modules as follows:

1. The Promoter (which includes a job description, a strategy for knowing the community and communication skills. This module combines the information outlined in the first three points of the Modified Scope of Work)
2. CDD/ORT (Diarrheal Disease Control/Oral Rehydration Therapy.
3. Breastfeeding.
4. Prevention of Low Birth Weight.
5. Birth Spacing.
6. Growth Monitoring.

These modules, intended to be utilized by trainers to train promoters, establish the learning objectives, contents, non-formal education methodology and needed resources to accomplish the objectives in each intervention. The contents were agreed upon by the NGO's, SESPAS, and other technical personnel who participated in workshops organized to analyze the KAP and focus group study results. The modules were printed in the quantity of 1000 each. Approximately half of them have been distributed as of June 7, 1991. (See Annexes: Informe de Actividades Educación y Comunicación; and the "Semester Report for October 1, 1990 to March 31, 1991" for details on the process for the production of these and all other materials). The sub-grantee NGO's participated in every step of the development of the materials. The intensity of their involvement varied according to their time availability.

c. Educational Materials

1. Investigation: Focus groups and KAP studies were carried out on Growth Monitoring, Development/Nutrition, and Low Birth Weight. These and studies completed prior to September 1990 on Diarrhea, Oral Rehydration Therapy and Breastfeeding were analyzed with the technical staff of the NGO's during two workshops of two days each.

2. Flip Charts: Five flip charts, companions of Training Modules 2 to 6, were produced in the quantity of 225 each. These are to be used by the promoters to train mothers in the child survival interventions. Each flip chart consists of ten "pages" which were silk-screened on

broadcloth in five or six colors, carrying pictorial messages which are the same as those in the learning objectives in the companion module. On the reverse side of each "page" are the simple messages in bold letters to prompt the promoter. Approximately 80% of the flip charts were distributed by June 7, 1991; the remainder are in the PSI program office ready for distribution.

Posters: A diarrhea prevention poster was produced in the quantity of 1000 and distributed to the sub-grantee NGO's.

Booklets: A 12-page booklet on breastfeeding directed to mothers was produced in the quantity of 3000. It consists of 12 pages with simple cartoon-like illustrations in black and red, with very simple and short texts printed in large letters.

d. Health Information System (HIS)

The PSI/SCF, after its Scope of Work was modified, reduced its activities in the HIS sector to:

- establishing Dominican expertise in the implementation of a health program which uses an HIS;
- instituting a model system with sub-grantees, Aguas Vivientes;
- producing HIS instruments in response to NGO requests;
- producing a series of guides on how to implement a health program which uses a community-based HIS;
- giving technical assistance to NGO's who requested it in planning and implementing systems in their project areas with their own resources.

(See Annex: HIS Report).

e. Advisory Committee and "Comité Ampliado"

The Advisory Committee (a.k.a. Comité Asesor) was restored to activity in January 1991 and there were a total of four meetings until May 1991. The committee membership was expanded to include two members designated by the Comité Ampliado bringing the membership total to eight -- two from PSI, two from USAID, two from SESPAS, two from Comité Ampliado. (See Annex: Comité Asesor).

The Comité Ampliado met intensively in November, December and January to define its own purpose, norms and operational guidelines. Since January 1991, it has met bi-monthly. The Comité Ampliado consists of the Directors of the participating NGO's and meetings are attended by one person each from the PSI/SCF, USAID and SESPAS. The latter three have a voice but no vote at the meetings. (See Annex: Comité Ampliado).

f. Service Delivery and Interventions

1. The "Service Delivery Model" document developed by Dr. Mónica Ortega, former Associate Technical Director, in early 1990 was revised following the recommendations made by Dr. Lee Hougen, formerly of the Health Programs Division of USAID/Dominican Republic. The following changes were introduced by Dr. Erma Ottolenghi:

2. The technical narrative was reduced from 58 pages to 22 preserving the less academic portions and focussing on risk management, identification, and follow-up of populations at risk.

3. Three annexes were reviewed and corrected:

- Job descriptions for the primary health delivery team: family, promoter, nurse, rural clinic doctor.
- Norms for each of the child survival interventions.
- Activities of each team member in delivering each intervention and instruments necessary for documentation, supervision, follow-up and feedback.

4. The supervision of child survival service delivery was expanded and a sample supervisory instrument was included.

5. Birth spacing was added to all the annexes.
(See Annex: Informe - Modelo de Prestación de Servicios).

Other Technical Activities: The materials which were in existence and collected by the project were organized and indexed by the Training Coordinator in a Documentation Center located in the PSI/SCF office. (See Annex: Informe de Capacitación).

g. Logistics

1. Motor Pool: PSI/SCF provided vehicle support for SESPAS through the motor pool in Regions IV and VI and in Santo Domingo. This was above and beyond the support originally envisioned as SCF provided not only normal vehicle and driver availability but all the vehicles were used during three immunization campaigns that took place from September 1990 to May 1991. Also, four vehicles in Santo Domingo were used for a nationwide survey on EPI coverage in March and April 1991. The cost of the latter was approximately \$RD 15,000, of which SESPAS reimbursed PSI/SCF \$RD 8,200 out of funds they had received specifically for the survey. SESPAS was not able to

reimburse fully because they had overspent their budget. It should be noted that the EPI survey was not part of the Modified Scope of Work nor included in the PSI/SCF budget.

2. ORS Packets: PSI/SCF assisted the NGO sub-grantees in obtaining one lot of ORS packets to be distributed to promoters trained in CDD/ORT. The packets were obtained by a process of negotiation with SESPAS; however, SESPAS borrowed back (within the same week) 5,000 of the 20,000 they had supplied. The strategy was to be that once this lot of ORS packets had been distributed, the NGO's would be responsible for periodically obtaining more supplies directly from SESPAS to replenish what was used. PSI/SCF believes that SESPAS is not able to fulfill this responsibility in the foreseeable future and other mechanisms will have to be utilized to respond to the demand created by the training of promoters, mass media, social marketing, etc. (See Annex: Informe - Sobres de Rehidratación Oral).

3. Infant Weighing Scales: There is an inventory of 909 infant weighing scales in store in the PSI office. These are for promoters working with the new NGO sub-grantees and SESPAS, once they are trained in growth monitoring.

h. SESPAS.

1. and 2. Modules and Flip Charts: SESPAS technical personnel contributed to the production of these materials and completed prototypes of all of the materials have been provided to SESPAS in Santo Domingo.

3. SESPAS was invited and participated in all Comité Ampliado and Advisory Committee meetings.

4. The Service Delivery Model was revised and submitted to USAID and SESPAS.

5. SESPAS received vehicle support throughout the duration of the project as described in section (g. 1.) above.

6. No weighing scales were provided to date to SESPAS due to the fact that no promoters were trained by SESPAS.

7. ORS packets were obtained from SESPAS as described in the section (g. 2.) above.

ATTACHMENT 2

18 OCT 1989

KPMG Peat Marwick

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October 8, 1989

Mr. Craig Sarsony
Director
Finance and Administration
Save the Children Federation
Child Survival Program
Calle Santiago #352
Santo Domingo, D. N.

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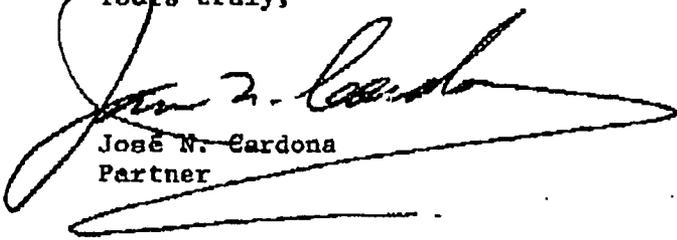
Dear Mr. Sarsony:

We are enclosing our comments and observations regarding the internal accounting control and administrative procedures, noted during our review of the Child Survival Program for the eleven months ended May 31, 1989.

Should you need any additional information on this or any other matter, do not hesitate to contact us at your earliest convenience.

Please acknowledge receipt of the enclosures by signing the duplicate of this letter and returning it to us as soon as possible.

Yours truly,


José N. Cardona
Partner

JNC/avc

Enc.



Firma Miembro de
Klynveld Peat Marwick Goerdeler

COMMENTS OF F.D. DIRECTOR

currently studying the alternatives to
situation.

in agreement with this
condition. Although our information
incomplete, even complete information
reconciliation difficult because we do
not have a report which states only
expenditures. As of September 1,
we are going to have two Financial

expenditure Report - Report which
lists all expenditures by the office and
this is sent to Westport monthly.

Local Expense Report - Report that
includes our local expenditure report
for Home Office charges. This report
is kept in the local office to monitor
our expenditures versus program

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SITUATION NOTED

RECOMMENDATION

BENEFIT DERIVED

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II. CHILD SURVIVAL PROGRAM

8. Legal Entity

In 1988, Save The Children Federation was awarded the administration of U. S. AID funded program, better known as child Survival Program, for implementation in the Dominican Republic. Originally, this program was going to be administered through the STC representative in the Dominican Republic, Fundación para el Desarrollo Comunitario, Inc. (FUDECO). However, since FUDECO is also going to be one of the subgrantees of this program, the Agency for International Development (AID), which is the funding agency for this program, requested not to have FUDECO to also act as the Coordinating Private Voluntary Organization (PVO) for STC in the country. This situation causes a problem to the Child Survival Program, since it lacks legal power to act as an employer sign contracts or do anything from a legal standpoint.

We recommend that the administration decides which is the best alternative to operate locally. We believe STC should apply to open a branch in the Dominican Republic in order to have a legal personality locally. Conversely, it should look for another institution or incorporate a new institution to legally represent STC.

Will allow STC to execute effectively the program, comply with regulations, and protect itself from events of noncompliance resulting from the lack of legal status.

We are solve this

9. Expenses Incurred by Head Office

While comparing the figures in the monthly report to the accounting records we noted that some expense categories were not in agreement. Further investigation revealed that the reason for such differences were because of expenses incurred directly by Head Office but not accounted for in the local records because of lack of supporting documentation. Such expenses were included based on information sent or provided to the local accountant from Head Office.

We recommended that expense reporting be based on supported transactions only, and that figures included in the expense reports agree to balances in the general ledger. Valid project expenses incurred by other units should be reported to the local office, along with its support, for inclusion in the local accounting.

Will allow for a better control of project expenditures and budget control. Further, expenditures will be adequately supported eliminating the risk of having questionable expenditures in the event of an audit by regulatory agencies.

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