



आपूर्ति व्यवस्था तथा बाल स्वास्थ्य सहयोग सेवा परियोजना

Logistics and Child Health Support Services Project

HMG Ministry of Health Project in cooperation with USAID

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PD ABT-574
12/25/99

November 22, 1999.

Dr. Glenn Post,
Chief, O/HFP,
USAID, Nepal.

**SUBJECT: Contract 367-C-00-97-00082-00
Nepal Logistics and Child Health Support Services Project
Quarterly Report -July 1- September 30, 1999.**

Dear Glenn,

Please find herewith our quarterly report for the period July 1 through September 30, 1999 for subject contract.

In the ARI Section, for the first time, we have included information on the monitoring reports that we are receiving from the INGO partners. We are beginning to develop a system to provide regular feedback to the INGOs and districts on the findings of the collective analyses.

I look forward to receiving any feedback that you may have regarding this report.

Yours sincerely,

Penny Dawson,
Team Leader,
JSI/Nepal.

Cc. Lyndon Brown, O/HFP, USAID
JSI/Boston

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JSI QUARTERLY PERFORMANCE MONITORING REPORT

PROJECT NAME: LOGISTICS AND CHILD HEALTH SUPPORT SERVICES PROJECT

PROJECT NUMBER: 367-C-00-97-00082-00

REPORTING PERIOD: 1 July 1999-30 September 1999

Background:

The Logistics and Child Health Support Services Project began on June 15, 1997 and is scheduled for completion June 14, 2002. The total contract budget is \$11,950,136.

The contract activities will contribute to achieving the Nepal USAID Mission's strategic objective two, reduced fertility and improved maternal and child health, by providing management and logistical support and limited technical assistance to the following programs:

- Logistics management of health commodities,
- National Vitamin A Deficiency Control Program,
- National Control of Acute Respiratory Infection Program,
- National Control of Diarrheal Disease Program,
- National Female Community Health Volunteer Program,
- National Traditional Birth Attendant Program,
- National Family Planning Program,
- MOH Department of Health Services Financial Section.

Report Organization:

Each quarterly Performance Monitoring Report is organized by performance objective with major activities during the quarter that contributed toward the performance goal listed under the objective. Any problems, unanticipated events or significant accomplishments are detailed in the discussion section for each objective.

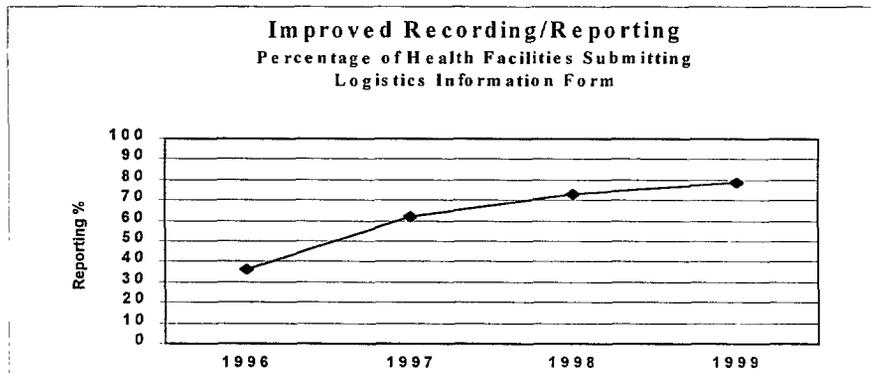
A summary of expenditures, organized by contract LIN numbers, appears at the end of the Report.

Integrated Logistics Management

EOP Result	Year 3 Milestone	Progress Toward Milestone
a) LMIS fully functioning in all 75 districts with 80 percent of functioning facilities reporting in a timely and accurate manner.	70%	75%

Major Activities:

- District and Regional Logistics Management Information System (LMIS) feedback reports (4th Quarter, 2055/56) were generated/checked and dispatched to all districts and regions.
- New ERA staff, on behalf of Logistics Management Division (LMD), entered 3,578 LMIS quarterly reporting forms data of which 527 forms were from previous quarters.
- Preliminary Assessment Report to determine the feasibility of Information Management System for Regional Medical Store (IMS-RMS) was completed.
- PipeLine Report for July-September 1999 was prepared and circulated among donor agencies and concerned Divisions of the Department of Health Services (DHS).
- JSI and LMIS computers were made Y2K compliant.
- Edward Wilson from FPLM/Washington assessed the current LMIS situation and prepared a report on future directions for LMIS.
- Percentage of facilities submitting LMIS forms in a timely and accurate manner continues to improve.



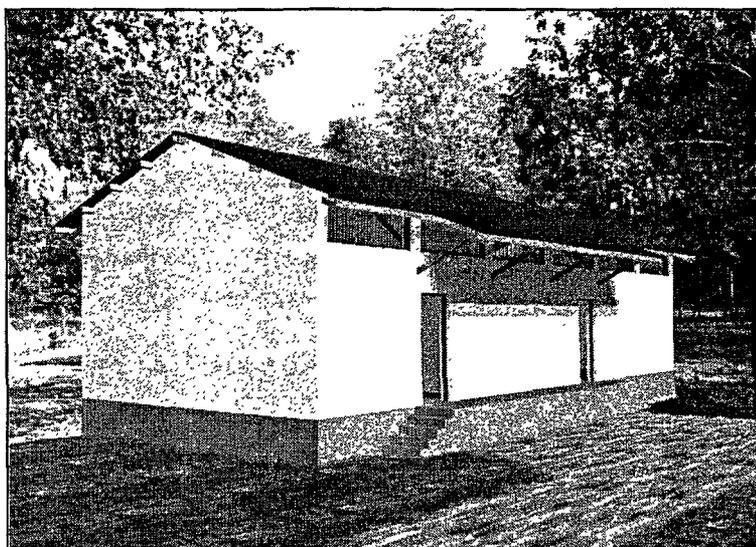
Discussion:

- Contract support to the LMIS section of LMD and Health Management Information System (HMIS) is scheduled to end 31 December 1999.
- Alternative strategies to support LMIS are being considered.

EOP Result	Year 3 Milestone	Progress Toward Milestone
b) 70 Percent of sample storage facilities at each level meet acceptable standards for storage of all MOH products.	60%	92%*

Major Activities:

- Continuing the initiative begun last quarter for district store construction (see computer-generated view of store prototype below) Project staff assisted LMD to complete the detailed questionnaire for technical assistance required by JICA. Two different sets of forms were submitted, one for funding a feasibility study, the other for construction of district stores. The Ministry of Health, Planning Division has been informed that the Japanese government has accepted the feasibility study. Further details are pending.



▲ District Health Commodities Store for Logistics Management Division, DHS

- Twenty-one racks and 27 pallets were provided to health facilities.
- Assistance to the LMD to upgrade the skills of central and regional level warehouse staff continued.
- Assistance from JSI to facilitate the Strengthening Drug Management at District Level (SDMD) program under the DDA/RPM Project and GTZ/PHC Project is ongoing. Activities include curriculum development for rational prescribing and dispensing and development of a training plan.

* Using acceptable logistics standards, 60 health facilities (generally two district stores, 4 HP stores and 6 SHP stores of each region) were sampled and rated good, satisfactory, or poor by JSI Regional Field Office staff.

- Assisted the National Health Training Centre (NHTC) to determine the logistics training annual target for FY 2056/57 (1999/2000). The target was approved by the National Planning Commission.
- Assisted NHTC to develop an Inventory Control Procedure (ICP) training strategy. A total of 1,150 In-charges and storekeepers from all 16 Eastern Region districts are expected to participate. Nine Hundred Fifteen health facilities will be covered.
- Conducted a four-day workshop to develop a training manual (curriculum) and procedure manual for ICP training.
- Basic Logistics Training materials (manual, booklets, training aids etc.) printed and supplied to four Regional Training Centres (RTC), i.e., Central, Western, Mid-Western and Far-Western. Participants for this training are newly appointed logistics personnel from various health institutions.
- A need assessment workshop was organized for LMD store personnel to improve LMD Teku warehouses. Eleven store personnel participated.
- Participated in the FCHVs' Training Manual review workshop at NHTC Sept. 6-16, 1999. Logistics session initiated and incorporated in training. Expected outcome of the logistics session is to provide FCHV awareness of how to obtain, protect and deliver commodities safely to clients.
- Organized a three-day Basic Logistics Training (BLT) refresher TOT for RTC staff and JSI logistics field staff. Objective of the TOT was to strengthen and improve skill and knowledge by exchanging ideas and experiences. Fifteen participants were trained.
- Logistics field staff assisted DHO Bardiya in developing a paper for presentation on logistics at a planning and evaluation workshop organized by GTZ and DHO. They also assisted the DHO Kailali and Kanchanpur to auction old vehicles, motorcycles, refrigerator, deep-freeze and typewriter.
- During this quarter, MASS Support Team (MST) worked with MOH staff to reorganize stores in the following district hospitals:
 - Jiri (Dolkha), Malangawa (Sarlahi), Dhading, Trisuli (Nuwakot), Bharatpur (Chitwan), Makwanpur, Jaleswor (Mahottari), and Dadeldhura.
- Auctioning of unusable commodities was undertaken in the following district hospitals:

District hospitals	Proceeds from Auctioning Unusable Commodities	Area Cleared (square feet)
Bhojpur (Bhojpur)	3,560	64
Bharatpur (Chitwan)	20,000	225
Jomsom (Mustang)	750	64
Tamgash (Gulmi)	9,500	180
Shandikharka (Arghakhanchi)	3,700	150
Total	37,510	683

- Evaluation meeting to determine deposal method for unusable vehicles lying at the Department of Health Services (Teku) complex was conducted. Bidding was invited for 15 vehicles.
- MASS distributed 4 steel racks (received from USAID/Nepal) to different district health offices. Another five pallets remain to be distributed.

Discussion:

- MASS will work with MOH staff of the following district hospitals to reorganize stores in the coming quarter:
 - Gularia (Bardiya), Baitadi, Darchula and some districts in Far Western Region which are accessible during the winter.
- MASS Support Team will followup with MOH staff to auction unusable commodities in the following district hospitals where store reorganization activities has been completed:
 - Terhathum, Panchthar, Nawalparasi, Bahadurgunj (Kapilbastu), Rasuwa, Ramechhap, Bhaktapur, Bara, Rautahat, Sarlahi and Makwanpur.

EOP Result	Year 3 Milestone	Progress Toward Milestone
c) Percentage of MOH health institutions which report a stock out for any contraceptive method during the year reduced from 40 percent to 10 percent.	30%	Condom - 15% Depo - 5% Oral Pills - 12%

Major Activities:

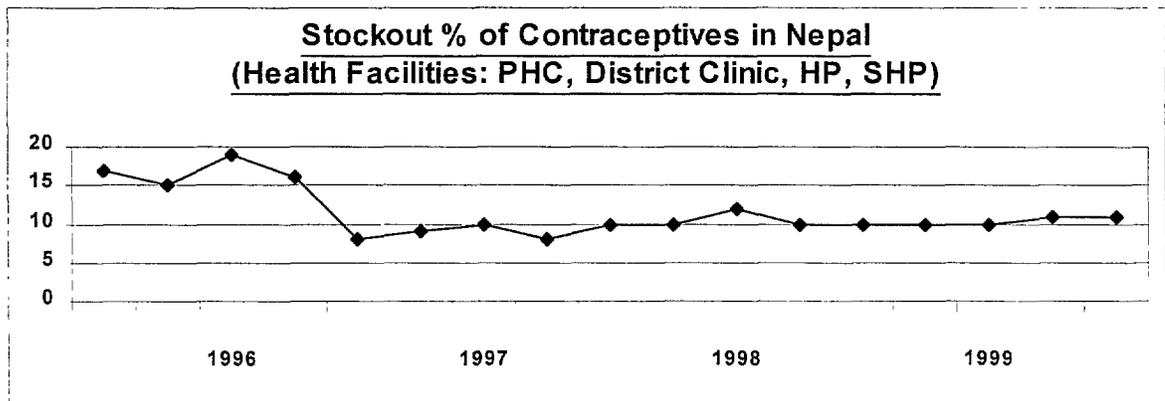
- Project staff continued to supervise and monitor logistics activities. This activity contributes to the accomplishment of all logistics objectives. The number of visits this quarter:
 - District stores-93, Regional Medical Stores (RMS)-39. Others facilities: Primary Health Centers (PHCs)-33; Health Posts (HPs)-56; Sub-Health Posts (SHPs)-72; Regional Directorates (RD), National Training Center (NTC) and I/NGOs-28.
- JSI staff facilitated delivery and movement of the following quantities of contraceptives and program items to various health facilities:

Item	Quantity	Item	Quantity
Condom	23,000 pieces	Norplant	50 sets
Depo	24,100 vials	ORS	3,000 Pkts
Oral pills	1,100 cycles	Medicines and Other	53 cartons
Polio	13200 vials	Measles	450 vials
BCG	500 ampules	DPT and TT	300 vials each

- JSI Deputy Team Leader and Logistics Advisor, Field Monitoring visited RMSs Nepalgunj, Biratnagar, RD Surkhet, DHOs Surkhet, Bardiya, Sunsari, Rauthat; and DPHOs Morang Dhanusa stores as well as health facility stores below district level to monitor stock situation using LMIS information and supervise the store standards.
- Held JSI logistics staff biannual meeting to prepare the logistics workplan for Year 1999/2000.
- Logistics Advisor, Field Monitoring and Logistics Advisor, LMIS visited Regional Medical Store (RMS) Nepalgunj and DPHO Rupendehi stores to monitor the stock situation and to discuss with RMS authorities installation of inventory system in the RMS.
- Reviewed with Child Health Division (CHD) program managers FY 2055/56 targets for ORS, Vitamin 'A', and cotrimoxazole 100/20 (P) to determine national stock requirements.
- Compiled program items distribution status of 2055/56 fourth quarter for all 75 districts and initiated necessary follow-up.
- Produced and distributed revised Logistics Transportation District Profiles for Eastern, Central, Western and Mid-Western Regions. (Far-Western completed earlier).
- Organized a distribution team meeting at LMD under the chairmanship of Dr. S.S. Jha, Director of LMD, to discuss improvement in utilization of private transport.

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- Analyzed district-level drug procurement data in an effort to improve district drug procurement.
- Regional logistics staff attended Regional NID review meeting/workshops.
- Logistics Management Team (LMT) members of Central and Eastern regions attended regional review meeting in their respective regions.
- Organized a meeting at the JSI Regional Field Office Mid-West to brief the newly appointed Regional Director on logistics and initiated a joint supervision visit with RD in DHO Kanchanpur and health facilities to monitor logistics activities.



Discussion:

- Monitoring of Central and Regional Medical Stores for timely distribution of commodities continues by the LMD distribution and transportation team with assistance from JSI.

EOP Result	Year 3 Milestone	Progress Toward Milestone	
d) 60 Percent of facilities where inventory control procedures (ICP) have been introduced have adequate stocks of essential commodities.	60%	Condom Depo Oral Pills ORS Vit A Cotrim. 100/20mg.	93% 92% 90% 80% 92% 76%

Major Activities:

- JSI and LMD staff continued to monitor and supervise activities in ICP districts.
- Assisted LMD in designing required forms for ICP expansion.
- Organized a meeting to discuss and decide ICP expansion strategy in the Eastern Development Region (EDR). Main decisions were: expand ICP program in EDR from third quarter of 2056/57, expand ICP program to all districts of EDR at one time, set authorized stock level/emergency order point (ASL/EOP) by central level for each health facility (HF) using last four quarters LMIS reports and include order worksheet as part of the LMIS form.
- Attended training on Inventory Control and Warehousing Management organized by Management Association of Nepal.

Discussion:

- Sufficient availability of program products as well as contraceptives, ORS and Cotrimoxazole in ICP districts to enable all health facilities to be supplied to their authorized stock level (five- month consumption) has been a persistent problem. ICP is being expanded to all districts of the Eastern Region, which will require more stock and other constraints will be much larger. This will be a real test of the logistics system's capability and its future prospects.

National Vitamin A Deficiency Control Program (NVAP)

EOP Result	Year 3 Milestone	Progress Towards Milestone
a) 75 districts participating in Vitamin A capsule distribution and nutrition education activities	62 Districts	59 districts

Major Activities:

- Introductory training was completed in six districts (Taplejung, Solukhumbu, Pyuthan, Sankhuwasabha, Udayapur, Okhaldhunga) and refresher training was completed in six districts (Panchthar, Ilam, Dhankuta, Tehrathum, Bhojpur, Khotang).

Total participants are summarized below:

Type of Training	District Level	HP Level	Community Level	Total
Introductory	70	2,323	5,266	7,659
Refresher	270	3,335	6,205	9,810
Total	340	5,658	11,471	17,469

- One-day multisectoral meetings were held in Makwanpur, Chitwan, Tanahun and Manang districts. Mustang district is scheduled for October 8, 1999.
- Personnel from National Planning Commission (NPC), Eastern Regional Health Directorate, JSI, USAID and LINKAGES observed the Vitamin A trainings at different levels.
- With support from UNICEF, an orientation at NTAG on deworming was conducted for two groups of trainers. In the first group, 15 trainers and in the second, 8 trainers were oriented.
- A two-week TOT program was conducted for 15 newly appointed trainers from Pyuthan district.
- Drafted Amrit Newsletter; prepared pocket diary, 2057 Calendar, and animal sources poster; and key-rings with Vitamin A information. To create awareness of capsule distribution, TV spots, radio messages and cinema slides were developed.
- As requested by CHD, the appointment of Computer Operator was extended for the period July 17, 1999 to July 16, 2000.

- Designed and printed Dashain and Dipawali greeting card with National Vitamin A Program information/messages.
- Conducted street drama training organized by CECI/MARD for CEAPRED and SAPPROSE in Surkhet and Dailekh.

Discussion:

- The Vitamin A Program in October 1999 is in hilly districts. Trainers conducting preparatory training faced a number of problems due to monsoon rain and difficult terrain. Porters were scarce and when available, charged more than normal rates. Rivers were swollen and difficult for trainers to cross. On occasion, the inflated rivers swept trainers down river some distance. Landslides and swollen rivers forced them to detour to reach certain VDCs.

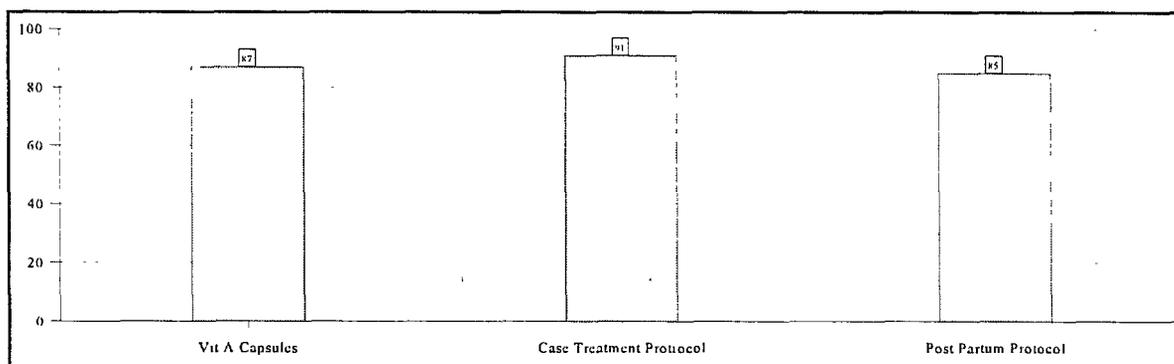
EOP Result	Year 3 Milestone	Progress Towards Milestone
b) National average of 70 percent of children in target area 6 – 60 months of age who have received Vitamin A capsule during national capsule distribution day	70%	98%

Major Activities:

- Mini-survey
 - Data collected last quarter were reviewed and checked for completeness.
 - Survey data was entered, computerized and analyzed using EPI Info and dBase programs.
 - Analyzed data was reviewed and key findings of the mini-survey including capsule coverage, mothers' knowledge on sources of Vitamin A, number of capsules needed, FCHV register, missed children, etc. were recorded.
 - Results of the mini-survey conducted after the Baisakh (April) distribution:

Districts	Phase	Coverage (%)
Mustang	X	98
Panchthar	XI	98
Ilam	XI	97
Khotang	XI	99
Bhojpur	XI	99
Manang	X	98
Tehrathum	XI	100
Dhankuta	XI	99
Average		98.5

- JSI Child Health Field Officers (CHFOs) conducted supervisory visits to support Vitamin A activities at 78 health facilities and observed availability of Vitamin A Capsules, Case Treatment Protocol and Post Partum Protocol as shown below:



- Ninety-four percent of 86 interviewed FCHVs had knowledge of 2 animal sources of Vitamin A.

Other Nutrition:

- CHFOs reviewed growth monitoring and iron supplementation activities at 78 health facilities in different regions of Nepal.
- Due to unavailability of iodine test kits, JSI Child Health Field Officers could not test the iodine content of salt as much as expected. However, they tested the iodine content of salt at 7 locations and found that 6 (86%) of the salt samples had at least some iodine content (defined as 7, 15 or 30 PPM)¹

¹There is not consensus on the level of accuracy of salt testing solutions. While some data suggest that trained observers can differentiate between the color change reflecting different levels of iodine, most feel the solutions provide a 'presence or absence' reading. Programmatically it is helpful to know whether household salt has been iodized (presence of any iodine), hence the reporting of this proportion. The proportion of adequately iodized salt reported (greater than 30ppm) is likely to represent a wide range, given the limitations of the salt test solution

EOP Result	Year 3 Milestone	Progress Towards Milestone
c) 75 districts reporting use of vitamin A case management protocols, including measles case management, through HMIS	40 districts	No Data This Quarter

Major Activities:

- Conducted District Level Introductory and Refresher Orientation in the following districts.

<i>Type</i>	<i>Level</i>	<i>District</i>	<i># Of Participants</i>
Introductory	District	Solukhumbu	31
Refresher	District	Ilam	51
		Dhankuta	51
		Terathum	45
		Bhojpur	42
Total			220

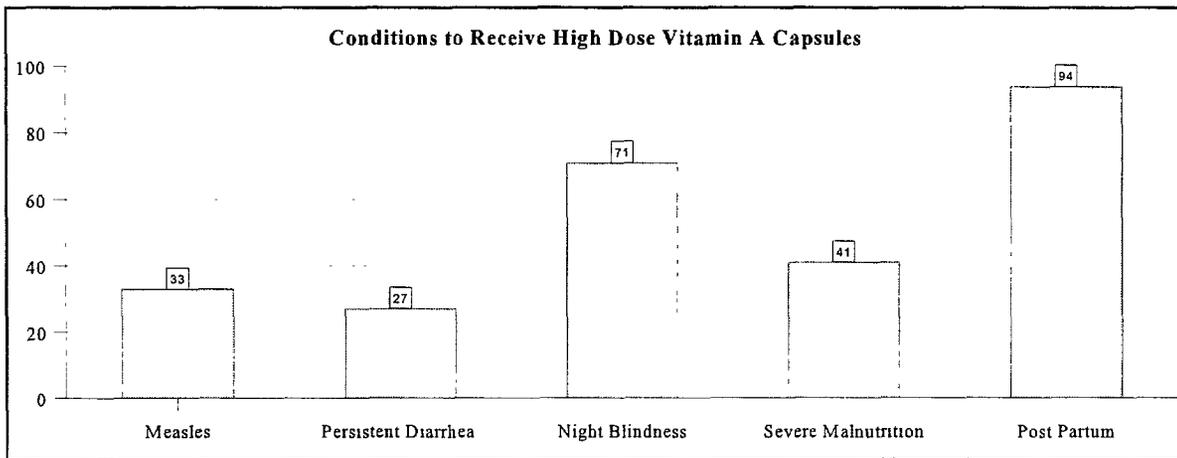
- During the introductory and orientation, program focus was given to case treatment and sharing experiences.
 - The revised HMIS Form (including the number of cases treated with Vitamin A Capsules) was discussed.
 - Discussion with multi-sectoral participants focussed on how they could create community awareness with their regular activities.
 - HP In-charges stated they have been providing case treatment and post partum dosing.
- At the following institutions, held meetings and gave orientation on treatment protocol and post partum dosing:
 - DHS
 - Siddhi Memorial Hospital, Bhaktapur
 - District Public Health Office, Bhaktapur
 - Sunaulo Pariwar, Nepal
- Case treatment and post partum dosing monitoring follow-up visits were made with:
 - CARE/Nepal
 - Dr. John Ross, Pharmacist, Patan Hospital
 - Dr. Indira Basnet, Human Resource Development Manager, Safer Motherhood Project

- P.K. Prajapati, Chairman, Samajik Sewa Kendra, Bhaktapur

- A class on case treatment and post partum dosing was held for managers of The Asia Foundation partner organizations.
- Met with Senior Gynecologist Dr. Sanu Maiya Dali, Sarbanga Swastha Sadan, and supplied IEC materials at her request.

JSI Monitoring of Case Treatment Information:

- JSI Child Health Field Officers (CHFOs) carried out interviews with 86 FCHVs and asked them to name the conditions (unprompted) which require high dose Vitamin A capsules. The results are shown below:



National Control of Acute Respiratory Infection Program

EOP Result	Year 3 Milestone	Progress Toward Milestone
a) Fourteen districts will participate in the National Community-based ARI Program.	10 Districts	11 Districts

Major Activities:

- Expansion of the Community-Based Integrated Management of Childhood Illnesses (CB-IMCI) program continued during this quarter with District Level Planning Meetings and Orientations to district level decision makers in new districts (Nawalparasi, Bardiya and Kanchanpur). Total participants: Planning Meetings - 35 (Nawalparasi - 13, Bardiya - 10, Kanchanpur - 12) and orientations - 57 (Nawalparasi - 14, Bardiya - 15, Kanchanpur - 28).
- JSI Child Health Field Staff provided technical assistance to Community-based ARI/CDD (CBAC) districts to conduct:

Meeting	Districts	Participants
District Level Monitoring Meetings	Jhapa	52
	Morang	68
	Sunsari	53
	Total	173
VHW/MCHW/FCHVs Review/Monitoring Meetings	Parsa	813
	Makwanpur	388
	Total	1,201

- CB-IMCI workplan for year 1999/2000 was signed for expansion to Nawalparasi, Bardiya and Kanchanpur districts.
- Facilitated a CB-IMCI TOT in Chitwan. Among the 14 participants five are JSI child health staff.
- Provided support to Nawalparasi's Health Post In-charge (HPI) level and Sub-Health Post In-charge (SHPI) level training. The participants: HPI - 15, SHPI - 99.
- Printed: CHW pictorial manual - 1500, CHW treatment book - 1500, VHW/MCHW reporting/recording forms - 500, HF Level recording/reporting forms - 500, CHW Trainers guide - 100, DDC Orientation Chart - 200, DDC/VDC Orientation Booklet - 1400, VHW/MCHW Level Manual on IMCI - 500.

Discussion:

- MASS provided logistical support for the District Level Monitoring Meetings and VHW/MCHW/FCHVs Review/Monitoring Meetings listed above and supported CHD administrative staff per the supplemental workplan.
- MASS provided support for supervisory visits by two CHD staff to four districts.
- MASS supplied photocopy paper, toner, etc. to the CDD/ARI Section.
- As requested by CHD and MOH, the appointments of Messrs. Shyam Nepal, Data Analyst; Sadhana, Yadav, Computer Operator; and Tek Bahadur Koirala, Computer Operator, MOH were extended. Mr. Sunil Kumar Singh, Monitoring and Supervision Specialist was appointed for the period July 17, 1999 to July 16, 2000.
- MASS staff photocopied 14 Nepali manuals and four English manuals for trainers and recorded three videocassettes to be used for VHW/MCHW level training in Nawalparasi.

EOP Result	Year 3 Milestone	Progress Toward Milestone
b) Sixty percent of children 0-60 months of age with pneumonia symptoms will be referred or treated appropriately by FCHVs and VHWs in target districts.	60%	89% (Marking 3rd day followup) 96% (Marking consistent age/dose) 89% (Marking consistent age/dose and third day followup)*

* treated cases only

Major Activities:

- JSI's Child Health Field Officers (CHFO) conducted monitoring visits in support of the ARI program:

Level	# of visits
Health Post	45
Sub-Health Post	68
Community	403
Total	516

Pneumonia Symptoms Knowledge and Skill of the CHWs Assessed During Supervision by CHFOs:

District Category	Knew 2 Cut Off Rates	Counted RR Rate Correctly	Knew 4 Or More Than 4 Danger Signs	Knew Cotrim Dose for 2 Age Groups	Had Cotrimoxazole
A (143)	92%	90%	99%	100%	66%
B (260)	85%	85%	96%	90%	85%
Total (403)	87%	87%	97%	94%	78%

A Districts - commenced before 1998/99 (Jhapa, Morang, Sunsari, Makwanpur, Parsa, Chitwan)

B Districts - commenced in 1998/99 (Siraha, Rauthat, Bara, Rasuwa, Bajura)

- CHFOs distributed 5,500 cotrimoxazole tablets and seven timers to health facilities and community level health workers.
- USAID/Nepal's SO2 Strategic Review Team visited JSI Field Office at Hetauda and met FCHVs in Chitwan involved with community-level treatment of pneumonia.
- Team Leader and Program Officer/CH visited INGOs (CARE International, SCF US, PLAN International) with SO2 Team.
- Child Health Review Meeting was held (August 24-28) to review the past six months performance.

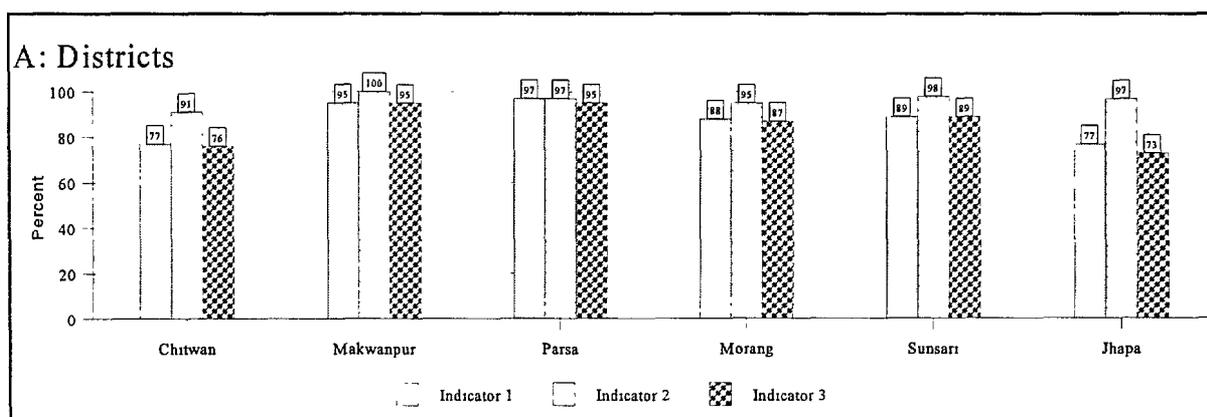
Discussion:

- During regular monitoring visits, CHFOs collected treatment data on community health worker (CHW) performance. CHWs followed-up 1138/1271 (90%) of the 10 most recent treated cases. They followed-up 50/60 (83%) of the 10 most recent referred cases for a total followup of 1188/1331 (89%) treated or referred cases. Their records were correct in 96% (1222/1271) of cases showing the appropriate cotrimoxazole dose according to age group.

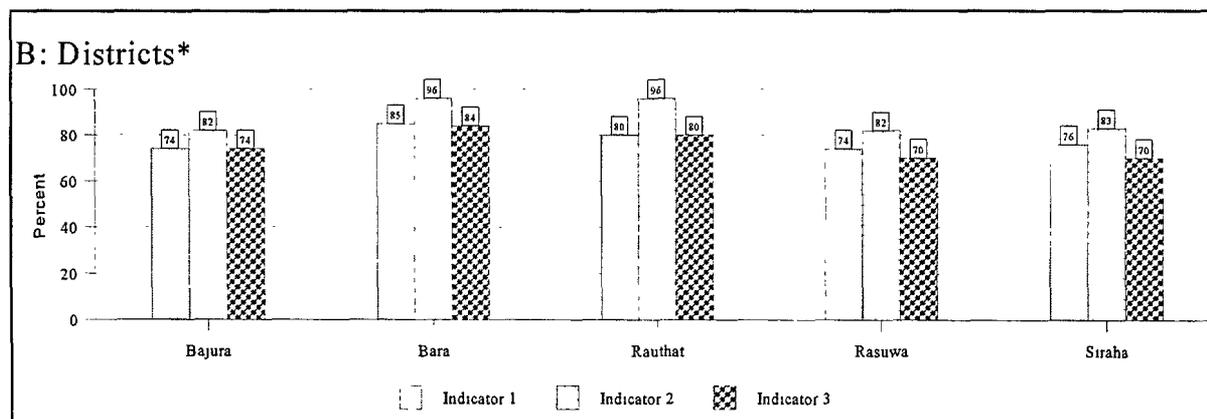
- During this quarter the following monitoring reports were received from I/NGO partners:

I/NGOs	Districts	# CHWs interviewed	Time period of interviews
ADRA	Rasuwa	48	Jun
CARE	Bajura	71	No Date
SCF/US	Siraha	108	Jestha (May/Jun)
PLAN	Bara	89	Aug/Sept
	Rauthat	73	Jul/Sept

- Results of interviews conducted in this quarter are included in the “progress toward milestone” calculation. Reports that are received late are analyzed for programmatic use immediately and will be presented in the annual performance report.
- Comparison of district-wise status of performance indicators (April 1 - September 30, 1999)



Indicator 1 - Marking 3rd day followup, Indicator 2 - Marking consistent age/dose, Indicator 3 - Marking consistent age/dose and 3rd day followup (only treated cases).



Indicator 1 - Marking 3rd day followup, Indicator 2 - Marking consistent age/dose, Indicator 3 - Marking consistent age/dose and 3rd day followup (only treated cases).

* Combined results from JSI and I/NGOs monitoring reports.

National Control of Diarrheal Disease Control Program

EOP Result	Year 3 Milestone	Progress Toward Milestone
a) The MOH will distribute at least 1,100,000 ORS packets per year.	1,100,000	724,758*

*Distributed during April 1999 - June 1999

Major Activities:

- CHFOs conducted supervisory visits to support CDD/ARI/Child Health activities in 15 districts (in addition to ARI program supervision):

Level of Visits	# of Visits
District Health Office	17
Health Post	39
Sub-Health Post	39
VHW/MCHW	42
FCHV	88
Total	225

- CHFOs distributed: ORS -1,847 packets; blue measuring cups - 48; oral pills -105 cycles; condoms - 50; CDD/ARI Posters (5 types) - 101 sets; other IEC materials -93; ORT Corner sets - 15; other (Vitamin A Treatment Protocols, mother's booklets, scissors, Vitamin A capsules) - 38.
- CHFOs monitored the adequacy of storage standards in 29 health facilities.

Discussion:

- Ninety-nine percent of the 78 health facilities visited had ORS stock on the day of the visit and 82% (64/78) had ORT/corner materials but only 56% of the 64 ORT/corners were functioning.
- Ninety-four percent of the visited HFs had measuring devices for preparation of ORS. Staff at 97% of the HFs which had measuring devices could measure the correct volume of water.
- Sixty-three percent of the 88 FCHVs interviewed had ORS on the day of the visit and 97% were able to demonstrate the correct preparation, including the correct volume of water.
- When CHFOs are involved in facilitating CB-IMCI trainings, the number of monitoring visits they can conduct greatly decreases. In the last quarter (April-June) they conducted a total of 444 visits as compared to 225 this quarter.

National Female Community Health Volunteer Program

EOP Result	Year 3 Milestone	Progress Toward Milestone
a) 75 Percent of active FCHVs reporting provision of MCH services to their MOH supervisors	60%	FCHVs reported* distributing commodities in past one month as follows: ORS 78% Condoms 52% Pills 47% At least one Activity 83% Vitamin A (last round) 98%

*During interviews with JSI CHFO and DHO Staff

Major Activities:

- CHFOs and DHO staff conducted interviews with 88 FCHVs and collected information on the services (ORS, condoms and oral pill distribution) provided. Results are summarized under “Progress Toward Milestone”.
- CHFOs and DHO staff conducted interviews with 86 FCHVs (in NVAP districts) and collected information on their participation during the April 1999 round of Vitamin A capsule distribution.
- Collected information from 44 districts about FCHVs elected as a ward member and analyzed. In NVAP districts, 6% of the 14681 FCHVs elected as ward member. In non-NVAP districts, 4% of the 11813 elected as ward member. Eight percent of the 2594 FCHVs elected in ARI program districts and 5% of the 23900 FCHVs elected in non-ARI program districts. Overall 5% of the 26494 FCHVs elected as ward member in 44 districts.

Activities of the Program Officer/FCHV

- Assisted the Family Health Division (FHD), FCHV Section to prepare for the five Regional Review Workshops.
- Assisted the NHTC and the FHD to prepare an instruction manual for district health staff to conduct FCHV’s Refresher Review Meetings.
- Assisted FCHV Section, FHD in preparing the district-wide target and budget of the FCHV program for FY 2056/057 (1999-2000).
- Worked with Demographer, FHD to review the questionnaire prepared by the Research Group for Health Economics and Development to study the Female Volunteer program in four municipal areas.
- Served as a team member to develop curriculum to train the SHPIs on FCHV Program activities.
- Visited Rasuwa district to assist District Health staff in preparing schedules for the VHW/MCHW/FCHV Refresher Review and monitoring meetings.

- Printed a curriculum developed by FHD to facilitate FCHV Program district Review Meetings. The curriculum was distributed to DHOs with necessary instructions.
- FHD has already sent instruction letter to DHOs to supply oral pills, condoms and ORS packets to FCHVs. However, most DHOs have not still supplied adequate pills, condoms and ORS packets to FCHVs.
- Effective from FY 2056/057 (1999/2000), the HMIS Section, has modified its forms to include a section on FCHV distribution of oral pills, condoms and ORS packets.
- As requested by the director of FHD, Messrs. Dhan Kumar Rai, FCHV Coordinator, and Madhabi Bajracharya, Office Secretary, were reappointed for the period July 17, 1999 to July 16, 2000.
- MASS provided logistical support for supervisory visits by 3 staff from DHS to one district and 3 regional medical stores.
- A vehicle was provided to FHD personnel going on FP clinical methods (IUD/Norplant) Strengthening Orientation (New Sites) program in Bankatawa HP of Banke district and FP supervision to Surkhet and Kailali districts.
- Stationery request was made by FCHV/FHD and delivery of requested items is in progress.

Discussion:

- The FCHVs are non-paid volunteers and need to be regularly supported by health personnel to motivate them to continue their voluntary work. The majority of FCHVs are not getting adequate support from Village Health Workers and Maternal Child Health Workers.

National Traditional Birth Attendant Program

EOP Result	Year 3 Milestone	Progress Toward Milestone
a) Supplemental Workplans for the National Traditional Birth Attendant Program successfully implemented each year.	2056/57 workplan completed	No Supplemental Workplan for 2056/57

Major Activities:

- No supplementary workplan for 2056/57.

National Family Planning Program

EOP Result	Year 3 Milestone	Progress Toward Milestone
a) Supplemental workplans for the National Family Planning Program successfully implemented each year.	2056/57 Workplan Completed	Supplemental workplan implementation in progress

Major Activities:

- MASS provided logistical support for supervisory visits by two directors and 3 officer level staff from DHS to six COFP training sites and 11 districts.
- MASS provided logistical support for the following training activities:

Activities	Participants
Family Planning Clinical IUD/NORPLANT Refresher Training	30
No-Scalpel Vasectomy (NSV) Training	4
Minilaparotomy	2
NORPLANT for Paramedics and Nurses Training	4
Total	40

- Minilap/laparoscopy consent cards (65,000) and Vasectomy Consent cards (35,000) were printed and delivered to LMD for FHD. Similarly post operation instruction leaflets (35,000 for males and 65,000 for females) were printed and delivered.
- Dr. Yamuna Suwal of Maternity Hospital went to Baglung Hospital with the JHPIEGO CFWC from September 13 to October 6, 1999.
- Mr. Mohan Lal Shrestha, Administrative Assistant, FHD was re-appointed for the period July 17, 1999 to July 16, 2000.

Discussion:

- HMG implemented a 5-day work week in Kathmandu Valley beginning August 17, 1999. Many NHTC training programs conducted in Kathmandu Valley will require more days than budgeted in the supplementary workplans. NHTC has requested an increase in number of total days for affected training and amendment to the budget. Guidance from USAID is pending.

Department of Health Services Financial Section

EOP Result	Year 3 Milestone	Progress Toward Milestone
a) Statements of expenditure and request for reimbursement report for MOH Redbook support submitted correctly to USAID on time each year beginning in 1998.	2056/57 statements submitted on time	Statement of 2055/56 expenditures prepared

Major Activities:

MASS staff:

- Assisted in the collection and preparation of Statement of Expenditure for Reimbursement, FY 2055/2056.
- Collected district and central level distributions of funds data by program along with budget code numbers.
- Reviewed USAID/N commitment and Red Book budgets for FY 2056/2057 (1999/2000). Helped clarify discrepancies between budgets and explain the Red Book budget process at a meeting held at USAID/N.
- Assisted in the preparation of implementation letter required by Office of the Financial Comptroller General for release of program fund for FY 2056/2057 (1999/2000).

Discussion:

During the next quarter MASS will:

- Followup with Office of the Financial Comptroller's General for the release of Red Book funds for FY 2056/2057.
- Assist in collecting and preparing FY 2055/2056 (1998/1999) expenditure reports for submission to USAID/N for reimbursement.

EOP Result	Year 3 Milestone	Progress Toward Milestone
b) Financial audits and reviews, beginning in 1998, reveal no significant problems in tracing financial information, and documentation is readily available for the review.	95% of 2056/57 costs allowable	No Data This Quarter

Major Activities:

- Provided detailed information on process for maintaining program-wide accounts and reports required for reimbursement claim as per USAID/N accounting procedures.

Discussion:

During the next three months, MASS will assist with the following activities:

- Field visits in consultation with Financial Section, DHS to:
 - a) check and collect statements of expenditures; help in preparing and submitting on time;
 - b) discover the nature of problems in submitting reports in a timely manner and assist in solving such problems.
- MASS performance in providing financial management support to Financial Section of DHS will be compiled in a report that will provide information on various difficulties in budgeting and accounting activities.

From July 1 - September 30/99
RESULTS OF RECORD* REVIEW FOR PNEUMONIA CASES
TREATED OR REFERRED BY COMMUNITY HEALTH WORKERS (FCHVs/VHWs/MCHWs)

Districts	# Inter'd	Cases Treated							Referred Cases		
		# / % of VHW/MCHWs/FCHV who treated cases	# of 10 most recent cases	# / % of Cases marking consistent age and dose	# / % of * Cases marking consistent age/dose and 3rd day followup	# / % of Cases marking 3rd day followup	# / % of VHWs/MCHWs/FCHVs who referred cases	# of 10 most recent cases	# / % of cases marking third day followup		
	143	125 (87%)	845	810 (96%)	757 (90%)	767 (91%)	6 (4%)	21	12 (57%)		
	260	126 (48%)	426	412 (97%)	369 (87%)	371 (87%)	24 (9%)	39	38 (97%)		
total	403	251 (62%)	1271	1222 (96%)	1126 (89%)	1138 (90%)	30 (7%)	60	50 (83%)		

Districts: Jhapa, Morang, Sunsari, Makwanpur, Chitwan, Parsa

* Treated cases only

Districts: Siraha, Rasuwa, Bara, Rauthat, Bajura

Key Performance Indicator of This Quarter is

Marking consistent age and dose:	96%
Marking consistent age/dose and 3rd day followup:	89%
Marking third day followup:	89%

John Snow Inc. / Nepal
Nepal Logistics and Child Health Support Services Project
Contract # 367-C-00-97-00082-00
July 1 - September 30, 1999

N #	SERVICES	TOTAL BUDGETED AMOUNT	EXPENDITURES AS AT Jun 30, 1999	EXPENDITURES THIS QUARTER (Jul/Aug/Sep)	REMAINING UNEXPENDED BALANCE
1	Integrated Logistics	\$2,617,390	\$947,915	\$122,290	\$1,547,185
2	Vitamin A Deficiency Control Program	3,707,719	1,599,187	145,167	1,963,365
3/4	Respiratory Infection/Diarrheal D. Control Program	2,248,232	763,586	94,857	1,389,789
5	Female Community Health Volunteer Program	508,984	161,868	15,719	331,397
6	Traditional Birth Attendant Program	343,439	75,810	6,913	260,716
7	Family Planning Program	1,501,898	398,959	34,865	1,068,073
8	DOH Services Financial Section	229,317	44,898	3,819	180,600
5	Invitational Travel	122,867	31,571	1076	90,220
0	Participant Training				
5	Equipment	50,500	116,331		(65,831)
	Nepal Field Expenditures for September, 1999			141,768	
2	Fixed Fee	619,790	207,014	21,235	391,541
Total Costs Plus Fixed Fee		\$11,950,136	\$4,347,139	\$587,710	\$7,015,287

JOHN SNOW INC./NEPAL
Nepal Logistics and Child Health Support Services Project
CONTRACT #367-C-00-97-00082-00

OBLIGATION INFORMATION AS OF SEPTEMBER 30, 1999

CONTRACT START DATE: June 15, 1997
CONTRACT END DATE : June 14, 2002

10/29/99

Obligation	Contract Modification No	Obligated Amount	Fund Cover Period
June 25, 1997	Original	\$851,961	October 30, 1997
September 28, 1997	#1	\$2,000,000	June 15, 1998
October 16, 1998	#3	\$2,000,000	July 31, 1999
June 24, 1999	#4	\$1,627,200	March 31, 2000
	Total Obligated	\$6,479,161	

Total Obligated Amount (+) **\$6,479,161**
Spent as of Sep 30, 1999* (-) **\$4,935,003**
Balance Obligated Amount for the period 9/99 - 4/00 **\$1,544,158**

Month	Estimated Expense Monthly Average	Balance Obligated Amount
Oct, 1999	\$200,000	\$1,344,158
Nov, 1999	\$200,000	\$1,144,158
Dec, 1999	\$250,000	\$894,158
Jan, 2000	\$250,000	\$644,158
Feb, 2000	\$230,000	\$414,158
Mar, 2000	\$230,000	\$184,158
Apr, 2000	\$200,000	(\$15,842)

Note: Contract Modification No.2 - Integrate budget of CLINs 300 and 400 into one CLIN 300.

***including Nepal September, 1999 expenses.**