PD-ABT-575

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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February 9, 2000.

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 – October 1- December 31, 1999.

Dear Glenn,

Please find herewith our quarterly report for the period October 1 through December 31, 1999 for subject contract. I look forward to receiving any feedback that you may have regarding this report.

During the current quarter, it was discovered that the data used to determine the progress toward the milestone for logistics indicator "b" (storage facility standards) was not being calculated in a random manner. Data for this indicator for the first quarter of the third contract year have been recalculated and the revised progress percentage (65%) is shown on the attached sheet.

As described in the current quarter's report, data for this indicator are now being randomized by a computer program to ensure objectivity. This method of random selection of storage checklists will be used for the remaining time of the contract for logistics indicator "b".

Yours sincerely,

Penny

Penny Dawson,
Team Leader,
JSI/Nepal.

Cc. Lyndon Brown, O/HFP, USAID/Nepal
JSI/Boston
MASS
NTAG

File: QTR32WPD

Revised
July - September 1999

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%	65%

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.

B

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 October 1999- 31 December 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.`

c

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%	64%*

* 1st quarter, 2056/57

Major Activities:

- District and Regional LMIS Feedback Reports (1st Quarter, 2056/57) were generated/checked and dispatched to all districts and regions.
- New ERA staff, on behalf of Logistics Management Division (LMD), entered 2,868 LMIS quarterly reporting forms.
- Development of a computer program for Regional Medical Store is on going.
- Pipeline Report for August-October 1999 was prepared and circulated in November among Donor Agencies and concerned Divisions of Department of Health Services (DHS).
- Development of Windows-based Logistics Management Information System for LMIS Unit began.

Discussion:

- Contract support to the LMIS Section through New ERA will end 31 January 2000. JSI will continue limited support to LMIS using funds unspent in the New ERA subcontract. New ERA declined to continue LMIS under a no-cost extension. MASS will most likely be engaged for LMIS work effective 1 February 2000.

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%	68%

Major Activities:

- To reflect new HMG financial rules, the District Basic Logistics Training (DBLT) Curriculum and Procedure Manual were revised.
- DBLT curriculum, 150 copies of the Basic Logistics Procedures Manual and training materials were printed and supplied to Eastern region health facilities and four Regional Training Centres (RTCs), i.e., Central, Western, Mid-Western and Far-Western.
- Basic Logistics Training (BLT) was conducted for below district level (PHCs, HPs and SHPs) for newly recruited logistics personnel at Central, Mid-Western and Far-Western RTCs. A total of 107 logistics personnel were trained.
- JSI Logistics Management Teams (LMTs) supported and monitored DBLT training at Pathaliya Training Centre, ICP training in Okhaldhunga, Solukhumbu, and Khotang Districts and BLT training at the Surkhet and Dhangadi RTCs.
- Mid-Western LMTs organized in Nepalgunj a two-day workshop on logistics activities for DHO, PHO and Storekeepers of Jajarkot, Rolpa, Rukum and Salyan Districts.
- MASS Support Team worked with MOH staff to reorganize stores in the following District Hospitals:

  Sarlahi Mahottari Bhaktapur Doti

- MASS organized Auctioning Evaluation Committees in the following district hospitals:

  Sarlahi Rasuwa Ramechhap
  Bhaktapur (re-evaluation) Nawalparasi Tehrathum

- Auctioning of unusable commodities was conducted in the following District Hospitals:

District Hospital (District)	Proceeds (Nrs)	Area Store Vacated (sq ft)
Dhunche (Rasuwa)	595	80
Ramechhap (Ramechhap)	7200	216
Parasi (Nawalparasi)	15200	200
Bhaktapur (Bhaktapur)	62100	456
Kusma (Parbat)	4105	80
Total	**89200**	**1032**

- MASS assisted in auctioning twenty-six (26) unusable vehicles at the DHS complex at Teku. Nepal Rs. 5.54 million was realized and deposited in the HMG Consolidated Fund. A large area of land occupied by these vehicles was cleared.

Discussion:

- The method of selecting LMT store checklists (for logistics standards) has been modified to be more random. Effective the first quarter of the Project's third year, LMT Logistics Checklists will be placed in a pool at the end of a quarter. Each checklist will be assigned a number. Then, a computer-generated list of numbers will be used to determine the 60 reports per quarter that will be tallied to determine the "Progress Toward Milestone."

- LMTs now focus on stores whose reports indicate they are under performing; this will result in a conservative report on the condition of health storerooms.

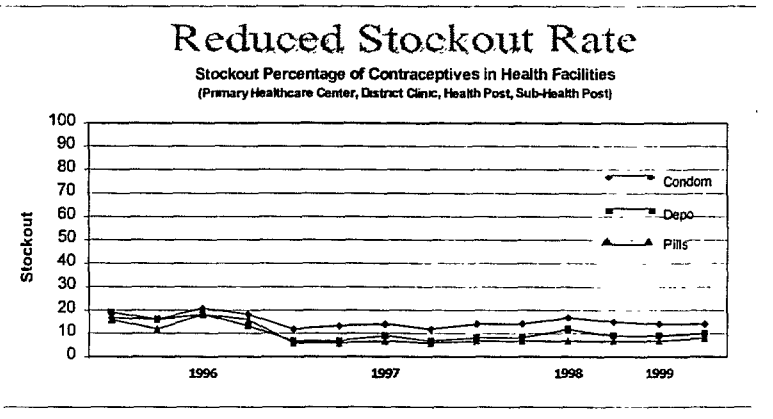
- MASS will work with MOH staff of the following District Hospitals to reorganize stores in the coming quarter.

  Gularia (Bardia) Darchula Sindhupalchowk

- MASS will work with MOH staff to clean and reorganize Teku LMD Warehouses.

- MASS will follow-up with MOH staff to auction unusable commodities in the District Hospitals where Phase I activities have been completed.

EOP Result	Year 3 Milestone	Progress Toward Milestone
c) Percentage of MOH health institutions which report a stockout for any contraceptive method during the year reduced from 40 percent to 10 percent.	**30%**	**Condom 14%** **Depo 10%** **Oral Pills 8%** (Rates from 1st qtr NFY 2056/7)



Major Activities:

- Project staff conducted logistics supervision and monitoring visits as follows:

  98 District stores, 27 RMSs, Other facilities; 16 PHCs, 47 HPs, 55 SHPs, 24 RD, RTC and I/NGOs. This activity contributes to the accomplishment of all logistics objectives.

- LMTs attended pre-NID meeting called by the Regional Director, Eastern Region at the UNFPA office, Biratnagar, WRHD Kaski, Chief District Officer's Office Banke and FRHD, Dhangadi.

- LMTs supervised and monitored the NID program in Saptari, Morang, Kathmandu, Dang, Banke, Doti and Kailali Districts.

- LMTs and Central JSI logistics staff supervised and monitored National Vitamin A distribution program in Rautahat, Kaski, Pyuthan, Dang, Surkhet, Parsa and Bara Districts October 29 and 30, 1999.

- LMT, Senior Logistics Advisor and Logistics Advisor, Field Monitoring visited Chitwan DPHO, Khairahani PHC, Makwanpur DHO, Parsa DPHO and Matiwan Dumaria HP of Rautahat District, Sunsari DHO, Morang DPHO, Dhankuta DHO and RMS Biratnagar to monitor stock situation and supervise store standards.

- One Central Region LMT briefed the Central Regional Director about logistics activities in Mahottari and Dhanusha during a supervision visit.

- LMTs Western, Mid-Western and Far-Western Regions attended Regional Review Meetings in their regions.

- LMT Mid-West attended NID review meeting with RD, DHSP, WHO, UNICEF and GTZ representatives.

- LMT Mid-West assisted the Regional Office to issue letters to 14 DHO/DPHOs whose LMIS 1st Quarter reporting status was low.

- LMT Mid-West met with Plan International, INF, TAF, and I/NGOs staff to discuss logistics issues including LMIS reporting by I/NGOs.

- LMT Far-West attended an orientation program of Nepal Red Cross Society on Reward Program in Doti.

- LMT Far-West made a joint supervision visit with the RD to DHO Baitadi and below district-level health facilities.

- LMT Far-West accompanied the RD to the Far-West RHTC, Red Cross Society Kailali and Doti Districts, Care Nepal, SCF/US, and NLR/WHO/UNFPA regional offices.

- "MOH Logistics Distribution Network" profile for the Far-Western Development Region was revised and finalized.

- JSI staff facilitated delivery and movement of the following quantities of contraceptives and program items to various health facilities during their routine field visits:

Item	Quantity	Item	Quantity
Condom	1,55,500 pieces	Norplant	30 sets
Depo	9,480 vials	ORS	14,200 packets
Oral pills	7,900 cycles	Ferrous Sulphate	14,000 tablets
IUD	350 pieces	Cotrimoxazole	7,100 tablets

Discussion:

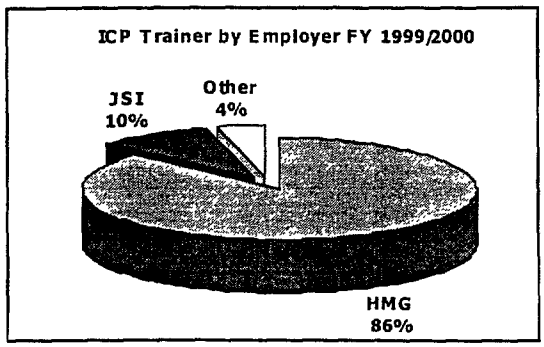
- Dejunking at Teku Warehouse is in progress.

- 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 92%** **Depo 88%** **Oral Pills 94%** **ORS 94%** **Vitamin A capsules 88%** **Cotrim. 100/20mg. 63%**

Major Activities:

- Organized a four-day Inventory Control Procedures (ICP) Training of Trainers for 14 participants at Kathmandu. Participants were from the Eastern Regional Training Centre, Regional Health Directorate, District Public Health Office, Regional Medical Store of Eastern Region, National Health Training Centre, Logistics Management Division and JSI regional field offices.
- Implemented two-day ICP training for staff from all health institutions of Eastern Region (16 districts) involved in ICP. This quarter, 709 In-charges and Store Keepers were trained at 6 training points (sub centres). NHTC/RTC staff conducted 86% of the training.



- Distributed 1,340 ICP Procedure Manuals and training materials to all health facility staff attending ICP training.
- JSI Central personnel and LMTs from Eastern and Central Regions continue to monitor and follow-up in initial ICP implementation Districts (Ilam, Dhankuta, Saptari, Sunsari, Chitwan and Makawanpur).
- JSI Central staff visited RMS Biratnagar, DHO Sunsari and Dhankuta to follow-up ICP program implementation. District Stores had adequate program items and were making correct supplies to the health facilities.
- Authorized Stock Level/Emergency Order Point (maximum/minimum inventory level) Reports for all health facilities (905) in the Eastern Region were produced. The Reports are based on LMIS data. These reports were distributed during Eastern Region ICP Training.
- Order Quantity Determination Forms were supplied to all facilities of the Eastern Region. The form will be used for requesting ICP program items from the District Store.
- Up dated the ICP program monitoring tools (stockout trend) and provided information to Eastern and Central JSI Field Offices.

Discussion:

- ICP is being expanded in all districts in the Eastern Development Region. Private carriers contacted by LMD for Fiscal Year 1999/2000 failed to perform to date, resulting in difficulty transporting commodities to ICP Districts. Project staff are working with LMD and the private carrier to resolve the problems and begin transport of commodities.

National Vitamin A Deficiency Control Program

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 and Refresher Training and one-day multisectoral meetings were organized before the October 1999 round of capsule supplementation.
  - TOT training for 19 trainers was conducted in NTAG offices. During the TOT, participants discussed and shared opinions and experiences on effective training methods, problems during trainings and ways to solve these problems.
  - Scheduled Introductory Training for the October round of capsule supplementation was completed before October. Refresher training for six Districts (Panchthar, Ilam, Dhankuta, Tehrathum, Bhojpur, Khotang) was also completed before October.
  - A total of 1,433 participants including 562 FCHVs received Refresher Training at community level in Bhojpur in October. One-day multisectoral meetings organized in Chitawan, Makwanpur, Tanahu, Manang and Mustang Districts saw a total of 125 participants.
- Introductory Training at District level for the April 2000 round of capsule supplementation was completed in 4 out of 5 expansion Districts: Lalitpur, Bhaktapur, Kathmandu and Nuwakot.

Details of District-Level Training Participants

District	Health	Local Dev.	Adminis-tration	Agr.	Ed.	Women Dev.	NGO/ INGO	Total
Lalitpur	31	5	1	4	4	2	8	55
Bhaktapur	37	11	3	2	4	1	10	68
Kathmandu	36	1	1	4	2	2	8	54
Nuwakot	33	14	2	4	3	0	7	63
Total	**137**	**31**	**7**	**14**	**13**	**5**	**33**	**240**

- Introductory training at health-post level was completed at 11 and 9 sites in Lalitpur and Bhaktapur Districts, respectively.

Details of Health Post-Level Training Participants.

District	Health	Local	Adminis	Ag.	Ed.	Wome	NGO/	Total
Lalitpur	58	57	0	24	200	1	32	372
Bhaktapur	37	28	0	25	100	0	14	204
Total	**95**	**85**	**0**	**49**	**300**	**1**	**46**	**576**

- Community-Level Introductory Training in Lalitpur District was completed. Training was conducted in 25 training centers as suggested by the District Health Office.

Details of Community Level Training Participants

District	FCHV	VHW	MCHV	Local Dev.	Ag.	Women Dev.	NGO/ INGO	Total
Lalitpur	531	45	27	310	108	7	81	1109

- On October 29 - 30, 1999 Vitamin A was supplemented to children 6 - 60 months in 59 Vitamin A Program districts. *Over 3,130 FCHVs, by mobilizing community people, dosed approximately 2.5 million children in these two days.*

- Staff from GOs, NGOs, CBOs and INGOs (including observers from UNICEF, AusAID, USAID and JSI) observed and supervised the October capsule supplementation. One hundred eighty-two government officials from different ministries (MOH, Local Development Ministry, National Planning Commission, Women Development Division) reported observing and supervising capsule supplementation at different sites in 59 districts.

- To disseminate Vitamin A messages and supplementation dates, table calendars, Vijaya Dashami greeting cards, New Years greeting cards, hoarding boards, wall paintings and pamphlets were designed and circulated to GOs, CBOs, NGOs and INGOs. Two weeks before the October 1999 round, Vitamin A messages were beamed through NTV, Vitamin A rallies organized in various Districts and radio spots broadcast nationally and regionally in local languages (Nepali, Maithali, Bhojpuri, Tharu, Gurung and Magar). During the training and promotion period, Vitamin A magic shows were staged at 140 locations.

- The training schedule for the April 2000 round of capsule supplementation was finalized with coordination and feedback from NHTC. The training schedule was sent to program Districts and NGOs/INGOs for their reference.

- A logistics plan for transporting training materials to the April 2000 round of Vitamin A training sites was designed. The training materials were packed and arranged for transportation according to the plan.

EOP Result	Year 3 Milestone	Progress Towards Milestone
b) National average of 70 percent of children in target areas 6 to 60 months of age who have received a Vitamin A capsule during the preceding national capsule distribution day	70%	No Data This Quarter

Major Activities:

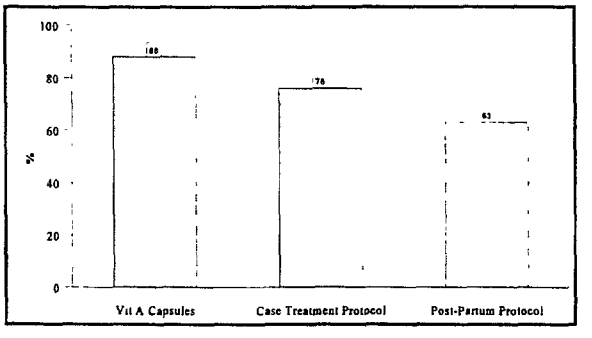
- The mini-survey for the October round of capsule supplementation was conducted immediately after capsule supplementation to assess capsule coverage, promotion campaign and program effectiveness.
- The following activities were performed in preparation for conducting the mini-survey.
  - Dr. Robin Houston, short-term consultant for Monitoring and Evaluation, worked for 20 days with NTAG monitoring staff to update mini-survey documents, tools and datasets. He observed promotion campaigns and capsule supplementation in Sankhuwasabha with Roy Miller, Director of MOST. Dr. Robin also observed the mini-survey in Morang with Lyndon Brown, JHU CS Fellow of O/HFP, USAID/Nepal
  - Per Dr. Houston's recommendation, all computerized mini-survey data were transferred to the Access Program.
  - Questions on iodine, iron and CDD and ARI were added in the mini-survey to determine if this information could be collected without hampering the mini-survey and increasing cost.
  - The districts for mini-survey of the October 1999 round were randomly sampled through a customized computer program developed in dBase. Fifteen districts were sampled :

Districts	Phase
Saptari	I
Morang	II
Kailali	III
Rupendehi	IV
Bardiya	V
Darchula	VI
Dolpa	VII
Gulmi	VIII
Lamjung	IX
Taplejung	XII
Sankhuwasabha	XII
Udaypur	XII
Okhaldhunga	XII
Solukhumbu	XII
Pyuthan	XII

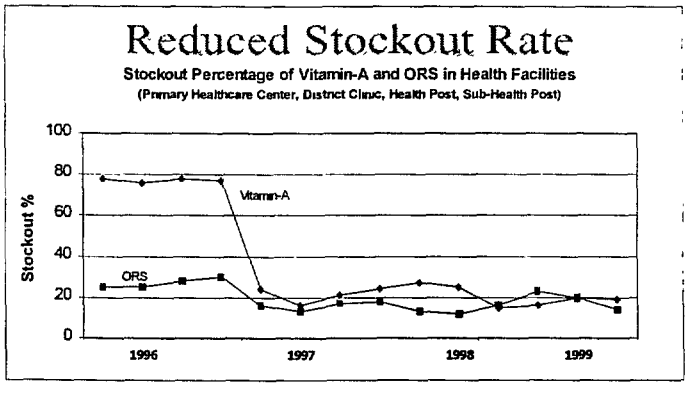
- A series of meetings with the trainings section of NTAG were held to discuss how mini-survey orientation could be delivered to the enumerators.

- Mini-survey team was hired and provided 3 days training.
- A mini-survey questionnaire was printed, including questions for iodine, iron, CDD and ARI.
- An orientation program was held November 15 - 19, 1999 to share knowledge and skills regarding mini-survey methodology and tools. The objective was to enhance enumerators knowledge and skills. The 50 enumerators, NTAG staff and DHO statistics assistants were briefed about the objective of the survey, its tools and techniques and the norms to be followed.
- Field practice tests were conducted in several VDCs in Lalitpur District before the mini-survey was carried out to ensure correct administration of the mini-survey.
- Mini-surveys started on November 18, 1999 and were completed on December 14, 1999 in 15 districts. Enumerators were supervised and assisted by the Monitoring and Evaluation Section of the National Vitamin A Program (NVAP).
- The mini-survey was carried out in 20 of 25 clusters in Dolpa District prescribed by the methodology because most of the inhabitants of the five clusters omitted had migrated to the terai to avoid the cold.
- On completion of the field work by the enumerators, the data recording sheets were brought to Kathmandu. Data coding and entry were done following the protocol developed by the NVAP. Results will be presented in the next Quarterly Report.

- Eighteen JSI Central and Field Level Staff monitored the October round of Vitamin A distribution in 167 sites of 19 districts.
- JSI Child Health Field Staff (CHFS) conducted supervisory visits to support Vitamin A activities at 67 health facilities. The percentage of observed availability of Vitamin A capsules, Case Treatment Protocols and Post Partum Protocols is shown:



- Ninety-seven percent of 206 interviewed FCHVs had knowledge of two animal sources of Vitamin A.
- Nationwide the stockout rate of Vitamin A capsules has dropped from 80% in 1996 to 19% in the latest reporting quarter (1st quarter NFY 2056/7). The percent of service delivery facilities stockout of ORS has fallen to 14%.



Other Nutrition:

- JSI Central and Field-Level Staff monitored NID at 155 sites in the first round on November 21, 1999 and 138 sites in the second rond on December 19, 1999.
- Due to unavailability of iodine test kits, JSI Child Health Field Officers could not test the iodine content of salt this quarter.

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**	**45 Districts**

Major Activities:

- Review of the period Srawan - Kartik 2056 (July 15 - November 15, 1999) HMIS Summary Report revealed that 45 districts reported use of Vitamin A capsules for case treatment.

Progress and Achievements in Case Treatment and Post-Partum Dosing:

- Orientation for HMIS recording of cases treated with high dose Vitamin A was given to all visited health institutions. Health personnel were taught how to complete HMIS forms.

Activities Performed in Parbat District:

- NTAG staff visited the following institutions/organizations to share ideas regarding case treatment and post-partum dosing:

  - Met with Program Assistants (Supervisors) responsible for different programs in the Prabat District Health Office and shared experiences on case-treatment and post-partum dosing/monitoring from their field visits to Health-Posts.

  - The Delivery Register of the District Hospital, Parbat showed the following number of cases receiving post-partum dosing in the last six months.

Month, 2056	# of Post Partum Dosing
Baishak	5
Jestha	7
Ashad	11
Srawan	11
Bhadra	9
Aswin	12
Total	**55**

  - During the training of Medsa Du Mont (MDM) an NGO working in Parbat District, organizers and participants (village maintenance workers) were briefed on NVAP, case-treatment, post-partum dosing and case referral.

  - Briefed Prem Prasad Adhikari, Program Coordinator of NESDO (NGO), Parbat, on case treatment and post-partum dosing. He was requested to share messages on case treatment and post-partum dosing to the female members of the Micro-Credit Project for Women.

Activities Performed in Kaski, Myagdi and Baglung Districts:

- Visited and briefed the following persons on case treatment and post-partum dosing. Also, shared ideas on disseminating information at the community level and discussed referral of cases to the nearest health institution if VAD cases are encountered.

S/N	Name	Designation	Institute/Organization
		Kaski District	
1	Mr. Dilli Baral	Health Ed. Technician	Dist. Pub. Health Office
2	Mr. Ghana S. Baral	Act.Regional Director	WRD of Health Services
3	Mrs. Hem Lata Lama	Senior PHN	"
4	Mr. Yogendra Mandal	Health Educator	"
5	Mr. Dambar Bdr. Baniya	Health Ed. Technician	"
6	Dr. S. S. Tulachan	Superintendent	WR Hospital
7	Ms. Savitri Yogi	Assistant Matron	"
8	Mr. Kaji Man Gurung	Field Officer	JSI
9	Mr. Govind Gurung	"	"
10	Mr. Rajan K.C.	Prog. Mgmn.	FPAN
11	Mr. Sarad Koirala	Field Officer	UNICEF, WR Field Office
12	Ms. Sulochana Pokhrel	Field Prg. Officer	SCF, UK
13	Mr. Khem Raj Sapkota	Program Officer	Red Cross Society
14	Mr. Padam Shrestha	Development & Training Officer	INF
		Myagdi District	
15	Mr. Arbinda Kushbaha	Community Health Officer	INF
16	Mr. Ramesh Shrestha	Chairman	JESIS
17	Mr. Rajendra Pd. Acharya	Chairman	NRCS
18	Dr. Indra Pd. Poudel	Dist. Health Officer	Dist. Health Office
19	Mrs. Kamala Poudel	Staff Nurse	"
20	Ms. Prativa Koirala	F.P. Assistant	DHO
		Baglung District	
21	Dr. Murari Pd. Upadhyay	DHO	District Health Office
22	Group of subordinates of supervisory level	Supervisors	"
23	Mr. Bhim Shrestha	Field Officer	MDM
24	Mr. Deepak Kadel	Teacher	NRCS
25	Mr. Ram Bdr. Bhandari	Chief of the Centre	Nepal Netra Jyoti Sangh
26	Mr. Rishi Ram Sharma	Mayor	Baglung Municipality

- Orientation was given to 5 staff nurses, including a Korean Volunteer, on case treatment, post- partum dosing at the Kaski District FPAN office. A discussion was held on ways to disseminate messages on case treatment and post partum dosing to the community.

- Briefing was given to the Community Auxiliary Workers (CAW) on NVAP, case treatment and post partum dosing during training organized by the Nepal Red Cross Society, Baglung. CAWs shared these messages with the community in their working areas.

Case Treatment and Post-Partum Dosing in Five New Districts:

- During the introductory orientation program in the new Districts, a special session on case treatment and post-partum dosing was conducted. During this session, emphasis was placed on maintaining the stock of Vitamin A capsules in each health facility and recording and reporting of case treatment and post-partum dosing. Multisectoral participants of this orientation program shared ideas and views on case treatment and post partum dosing and explored ways of disseminating Vitamin A messages. All health facility staff were oriented about the new HMIS form and how to record and report the cases treated with high dose Vitamin A capsules. Districts and number of participants were:

Districts	# of Multisectoral Participants
Lalitpur	53
Bhaktapur	68
Kathmandu	54
Nuwakot	63
Rasuwa	34
Total	**272**

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**	**12 Districts**

Major Activities:

- Expansion of the Community-Based Integrated Management of Childhood Illnesses (CB-IMCI) Program (first phase training/orientation) was completed this quarter in Nawalparasi District. In Bardiya, HPI- and SHPI-level training was completed. Number of persons trained or oriented is shown in the Table below:

District	Training				Orientation	
	HPI	SHPI	VHW/ MCHW	FCHV	VDC Members	MGM*
Nawalparasi	15	99	84	715	667	9654
Baridya	18	24	Will be completed during next reporting period			
Total	**33**	**123**	**84**	**715**	**667**	**9654**

* MGM - Mothers Group Meeting

- Training materials packed and transported to each training venue.

- JSI Child Health Field Staff provided technical assistance to Community-based ARI/CDD (CBAC) districts to conduct VHW/MCHW/FCHVs Review/Monitoring Meetings:

District	FCHV	VHW	MCHW	Total
Jhapa	404	47	37	489
Sunsari	417	44	38	499
Morang	518	62	36	615
Siraha	970	104	64	1138
Bara	861	93	35	989
Rauthat	815	89	19	923
Bajura	239	22	18	279
Rasuwa	138	13	8	159
Total	**4,362**	**474**	**255**	**5,091**

- JSI Child Health Field Staff assisted with the VHW/MCHW Review/Monitoring Meeting in Makwanpur District. Thirty-four VHWs and 27 MCHWs participated.

Discussion:

- MASS provided logistical support for VHW/MCHW-Level Trainings, FCHV-Level Trainings, Mothers' Group Meetings and Review Refresher Meetings and supported CHD administrative and supervisory staff per the supplemental workplan.

- MASS provided support for supervisory visits by 3 CHD staff to 3 districts.

- MASS supplied to the CDD/ARI Section: 39 reams photocopy paper, 3 packets glossy photo paper, 1 packet transparency sheets, 2 dozen pens, 2 dozen pencils, 6 pieces plastic ring files, 6 boxes computer disks, 3 packets OHP sheets, 5 bottles photocopy toner.

- As requested by CDD/ARI Section, MASS photocopied/printed: 18 copies Nepali/English manuals for trainers, 3 copies video cassettes for VHW/MCHW-level Training, 20 copies each Patient Registration Forms, Referral Cards (under 2 months) and Referral Cards (2 months to 5 years), 100 copies Nepali certificates, 500 copies English certificates, 2.000 copies Classification Cards, 1,000 copies VDC/DDC Orientation Booklets.

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 third day follow-up** 95% **Marking consistent age/dose** 87% **Marking consistent age/dose and third day follow-up***

* treated cases only

Major Activities:

- JSI's Child Health Field Staff and I/NGO Staff conducted monitoring visits in support of the ARI program as follows:

	Level	# of visits
JSI	Health Post	31
	Sub-Health Post	36
	Community	521
	Total	**588**
I/NGO	Health Post	6
	Sub-Health Post	9
	Community	371
	Total	**386**
Grand-Total		**974**

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

I/NGO	District	# CHWs Interviewed	Interview Time Period
ADRA	Rasuwa	33	October - December
SCF/US	Siraha	254	October - December
PLAN	Bara	31	October - December
	Rauthat	53	October - December
Total		**371**	

- Findings from monitoring visits with CHWs (FCHVs, VHWs, MCHWs) are summarized below:

CHWs' Pneumonia Symptoms Knowledge and Skill assessed During CHFS' Supervision:

District Category	Knew 2 Cut-Off Rates	Counted RR Rate Correctly	Knew 4 or More Danger Signs	Knew Cotrim. Dose for 2 Age Groups	Had Cotrimoxazole
A* (222)	95%	99%	97%	99%	67%
B (670)**	83%	90%	96%	96%	68%
Total (892)	**94%**	**92%**	**97%**	**96%**	**68%**

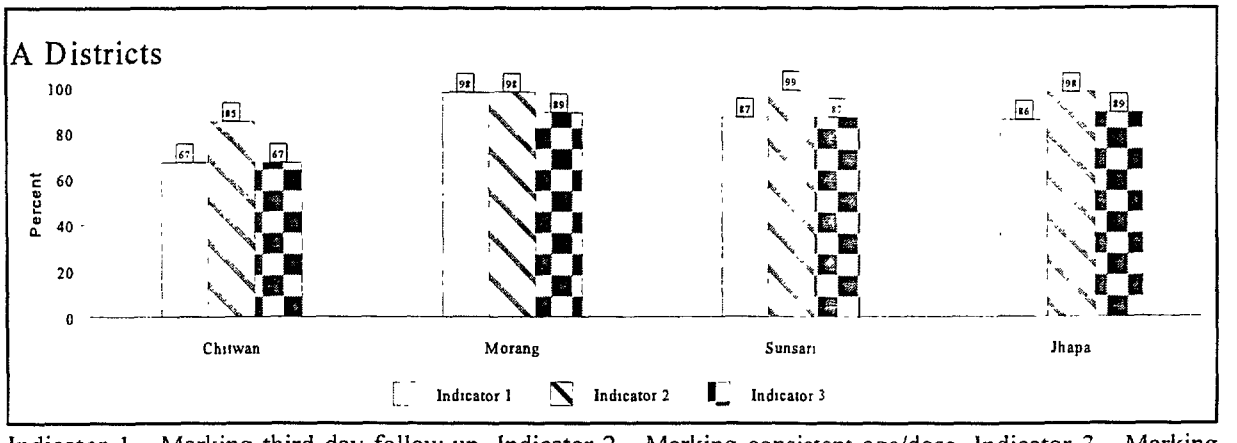
**A Districts - commenced before 1998/99 (Jhapa, Morang, Sunsari, Makwanpur, Parsa, Chitwan)*
***B Districts - commenced in 1998/99 (Siraha, Rauthat, Bara, Rasuwa, Bajura)*

- CHFOs facilitated the distribution of 204,600 cotrimoxazole tablets, 79 timers and 2,766 various ARI materials to health facilities and Community-Level Health Workers.

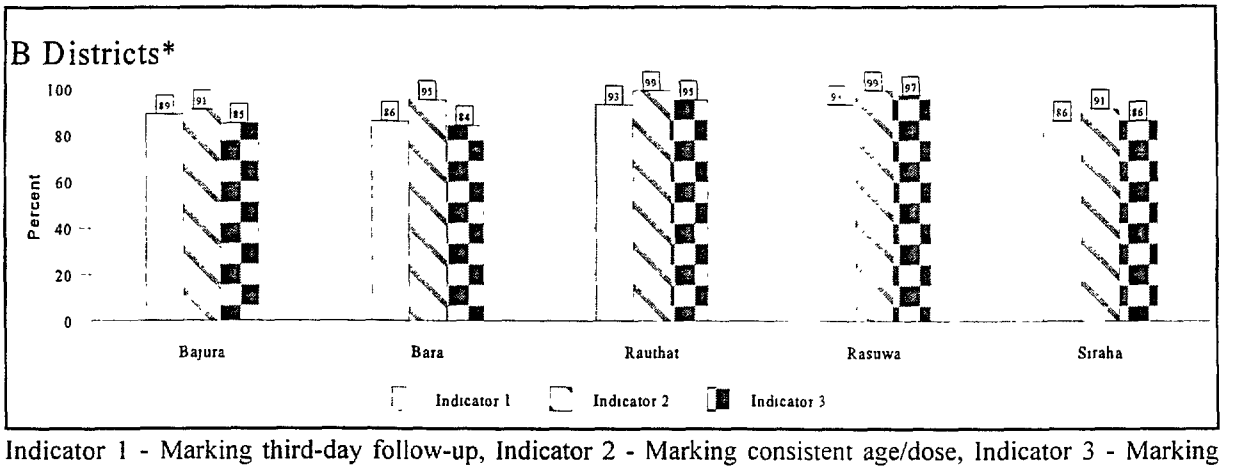
Discussion:

- During regular monitoring visits, CHFS and I/NGO staff collected treatment data on community health worker (CHW) performance. CHWs followed-up 3,451/3.824 (90%) of the 10 most recent treated cases. They followed-up 186/274 (68%) of the 10 most recently referred cases for a total follow-up of 3,637/4,098 (89%) treated or referred cases. Their records were correct in 3,651/3,824 (95%) of cases showing appropriate cotrimoxazole dose according to age group.

- Comparison of district-wide status of performance indicators (October 1 - December 31, 1999)* are graphed below:



Indicator 1 - Marking third day follow-up, Indicator 2 - Marking consistent age/dose, Indicator 3 - Marking consistent age/dose and third day follow-up (only treated cases).



Indicator 1 - Marking third-day follow-up, Indicator 2 - Marking consistent age/dose, Indicator 3 - Marking consistent age/dose and third-day follow-up (only treated cases).

* Combined results from JSI and I/NGO 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**	**579,032***

*Distributed July 15 - October 15, 1999

Major Activities:

- CHFOs conducted supervisory visits to support CDD/ARI/Child Health activities in 10 districts in addition to ARI program supervision:

Level of Visits	# of Visits
District Health Office	10
Health Post	23
Sub-Health Post	44
VHW/MCHW	45
FCHV	167
Total	**289**

- CHFOs distributed: ORS - 30,054 packets; blue measuring cups - 354; oral pills - 208 cycles; condoms - 1,200; CDD/ARI Posters (5 types) - 49 sets; other IEC materials - 52; other (Vitamin A Treatment Protocols, mother's booklets) - 10.

- CHFOs monitored the adequacy of storage standards in 35 health facilities.

Discussion:

- Eighty-four percent of the 67 health facilities visited had ORS stock on the day of the visit and 94% (63/67) had ORT/corner materials but only 60% of the 63 ORT/corners were functioning.

- Ninety-seven percent of the visited HFs had measuring devices for preparation of ORS. Staff at 95% of the HFs which had measuring devices could measure the correct volume of water.

- Fifty-six percent of the 169 FCHVs interviewed had ORS on the day of the visit and 99% 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 can not increase significantly. In the previous quarter (July-September), they conducted 225 visits compared with 289 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 following commodities in past one month:** **ORS 57%** **Condoms 37%** **Pills 38%** **At least one activity 72%** **Vitamin A (last round) 99%**

*During interviews with JSI CHFO and DHO Staff

Major Activities:

- CHFOs and DHO staff conducted interviews with 206 FCHVs (in NVAP districts) and collected information on their participation during the last round of Vitamin A capsule distribution.
- CHFOs and DHO staff conducted interviews with 169 FCHVs and collected information on the services (ORS, condoms and oral pill distribution) provided. Results are summarized under "Progress Toward Milestone."

Activities of the Program Officer/FCHV

- Participated in the FCHV district refresher/review meeting at District Health Office, Nuwakot October 12 - 13, 1999. All District Health Office staff and health post in-charges attended. Achievements of the FCHV program and plan for future action were discussed.
- Assisted Family Health Division, FCHV Section to prepare the FCHV Service Report Form. The Service Report Form must be prepared quarterly by VHWs and submitted to respective Health Posts/Sub-Health Posts. The Health Post will submit consolidated reports to the District Health Office, which submits them bi-annually to the Regional Health Directorate office with a copy to the Family Health Division, DHS.
- Assisted in preparing guidelines and budget for the FCHV observation visit program for five regional health directorate offices.
- Briefed new Focal Person, Mr. Rishi P. Lamichhane, FCHV Section, Family Health Division on the status of the FCHV Program and activities to be carried out at the central and district levels during 2056/57 (1999/2000). Ms. Srijana Shrestha, Public Health Officer, formerly responsible for the FCHV Program at Family Division, was transferred to the District Health Office, Ramechhap.
- Visited Dhanusha from October 28-31, 1999, to support Vitamin A capsule distribution program activities in the District. Visited Bhaktapur November 21, 1999, to support the NID Program activities in the District. Similarly, visited Parsa, Makwanpur and Nawalparasi Districts to support FCHV program activities and observe/participate in FCHV Refresher/Review meetings and ARI FCHV Training Program.

Discussion:

- MASS provided support for supervisory visits by two FCHV/FHD staff to 5 districts.
- MASS supplied to FCHV coordinator: 5 reams photocopy paper, 18 pilot pens, 18 ballpoint pens, 2 dozen pencils, 12 letter boxes, 1 table pencil cutter, 3 correction pens, 1 box marker pens, 3 glue sticks, 6 note-books, 6 register books, 3 reams fullscape paper, 6 index files, 2 rolls paper tape, 6 packets paper clips, 4 plastic files, 4 sketch pencils, 1 box computer disks, 2 packets pins, 1 bag. Office Secretary was supplied with stationery items.
- A vehicle was provided to FHD personnel going on Supervision and Clinical Methods Strengthening (IUD/NORPLANT) Site Selection Program in Tanahun, Kaski, Syangja, Chitwan, Rauthat, Bara and Parsa from November 24, 1999 - December 2, 1999. The vehicle expense was borne by the FCHV supplementary workplan.
- The FCHV training and refresher/review meeting site should be at a place suitable to the FCHVs, not according to the convenience of health personnel. During FCHV refresher/review meeting, more time should be devoted to analyze FCHV records and discussing problems and constraints in implementing the FCHV program activities rather than reviewing FCHV manuals in detail.

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 the following training activities:

Activities	Participants
Family Planning Clinical Method Strengthening (IUD/NORPLANT) Orientation	68
Mini-lap Training	7
IUD Basic Training	3
PAC Training	4
PAC Training (4 days extra)	2
COFP and Counselling Combined with Pre-Test	14
NORPLANT for Paramedics and Nurses	2
COFP and Counseling Trainer's Update	16
Total	**116**

- MASS provided support for supervisory/follow-up visits by 5 FHD/NHTC staff to 10 districts.
- MASS provided support for PAC follow-up by Dr. Yamuna Suwal of Maternity Hospital to Baglung district.
- Purchased and delivered 8,000 Fallope Ring Bands to LMD for FHD as requested by FHD.
- Paid for 118 Vasectomy cases at Bahunepati Health Service Implementation Committee, Sindhupalchowk.
- Purchased 3,000 VIREX packets from Nepal CRS company and delivered to LMD for FHD.

Discussion:

- Minilap Training, IUD Basic Training and Non-Scalpel Vasectomy Trainings are scheduled for next quarter.
- FHD has requested Clinical Methods Strengthening (IUD/NORPLANT) initial supplies/equipment for 8 sites. The list of supplies needed revision. MASS is following-up with FHD for an updated list.
- Under line item J of FP Supplementary Workplan, five NGOs were selected by the Family Planning Outreach Coordination Committee to undertake mobile VSC outreach services in selected districts of all five regions. The NGO/INGOs are Nepal Fertility Care Centre (NFCC), Family Planning Association of Nepal (FPAN), B.P.Koirala Memorial Health Foundation (BPKMHF), Sunaulo Parivar Nepal/Marie Stopes International (SPN/MSI) and Adventist Development and Relief Agency (ADRA). The five NGO/INGOs have been advanced money equivalent to 50% of estimated sterilization cases.

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**	**Procedures established**

Major Activities:

- Collected Central-and-District-level appropriation of funds for all programs for NFY 2056/2057 (1999/2000).
- Assisted in the collection and preparation of final outstanding Statement of Expenditure for NFY 2055/2056 (1998/1999).
- Helped in preparing documents for Letter of Release Order, up to 70% (combined first and second trimester) for all USAID/N-supported programs.
- Visited the following Districts December 14-28, 1999 to review financial systems:

Banke	Bardiya	Surkhet	Kailali
Kanchanpur	Kapilbastu	Doti	Dadeldhura

A trip report was prepared and is on file with MASS and JSI/N.

Discussion:

During the next three months, the following activities will be undertaken:

- Contact with Districts to determine if HMG/N Letter of Release Order received.
- Meeting with the Fiscal Section of DoHS to discuss reallocation of budget up to the 25% approved in Implementation Letter (USAID/N budget commitment document). The objective of the meeting will be to provide this information officially to all Regional and concerned District offices.
- Field visits in consultation with Fiscal Section, DoHS to: 1) Check and collect Statements of Expenditures; 2) Help in preparing expenditure statements and submitting in time; 3) Determine the nature of problems in accounting activities and 4) Assist in solving such problems.

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 their review.	**95% of 2056/57 costs allowable**	**No Data this Quarter**

Major Activities:

- Helped in solving inconsistencies/discrepancies found between Workplan and Red Book budgets for NFY2056/2057 (1999/2000).

  Reviewed budget
  Located budgetary problems
  Attended budget meetings
  Clarified USAID/N commitment and HMG/N Red Book
  Informed key staff of Red Book budget process

RESULTS OF RECORD* REVIEW FOR PNEUMONIA CASES TREATED OR REFERRED BY COMMUNITY HEALTH WORKERS (FCHVs/VHWs/MCHWs)

PERIOD 10/01/1999 to 12/31/1999

Type of Districts	# Interviewed	Treated											Referred			Treated/ Referred	
		VHW/MCHW/ FCHVs Who Treated Cases		Total # of 10 Most Recent Cases Reviewed	Cases Marking with Consistent Age and Dose		Cases Marking with Consistent Age/Dose and 3rd day Followup		Cases Marking 3rd Day Followup		VHWs/MCHWs/ FCHVs Who Referred Cases		Total # of 10 Most Recent Cases Reviewed	Cases Marking 3rd Day Followup		Cases Marking 3rd Day Followup	
		#	%		#	%	#	%	#	%	#	%		#	%	#	%
A	222	211	95%	1,786	1,739	97%	1,552	87%	1,633	91%	40	18%	189	124	66%	1,757	89%
B	670	455	68%	2,038	1,912	94%	1,793	88%	1,818	89%	39	6%	85	62	73%	1,880	89%
Total	892	666	75%	3,824	3,651	95%	3,345	87%	3,451	90%	79	9%	274	186	68%	3,637	89%

* 10 most recent Cases

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

B Districts: Siraha, Rasuwa, Bara, Rauthat, Bajura

Milestone Indicator for This Period:

Marking 3rd day followup:---------- 89%

Marking consistent age and dose:---------- 95%

Marking consistent age/dose and 3rd day followup:---------- 87%

John Snow Inc. / Nepal
Nepal Logistics and Child Health Support Services Project
Contract # 367-C-00-97-00082-00
October 1, 1999 - December 31, 1999

#	SERVICES	TOTAL BUDGETED AMOUNT	EXPENDITURES AS AT Sep 30, 1999	EXPENDITURES THIS QUARTER (Oct/Nov/Dec)	REMAINING UNEXPENDED BALANCE
	Integrated Logistics	$2,617,390	$1,070,359	$126,790	$1,420,240
	Vitamin A Deficiency Control Program	3,707,719	1,744,354	138,848	1,824,517
/4	Respiratory Infection/Diarrheal D. Control Program	2,248,232	858,443	84,488	1,305,300
	Female Community Health Volunteer Program	508,984	177,587	13,005	318,392
	Traditional Birth Attendant Program	343,439	82,723	12,448	248,268
	Family Planning Program	1,501,898	433,825	49,421	1,018,653
	DOH Services Financial Section	229,317	48,717	7,430	173,170
	Invitational Travel	122,867	32,647	1685	88,535
	Participant Training				
	Equipment	50,500	116,331		(65,831)
	Nepal Field Expenditures for December, 1999			194,229	
	Fixed Fee	619,790	228,249	21,706	369,835
	Total Costs Plus Fixed Fee	$11,950,136	$4,793,235	$650,051	$6,506,850

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

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

1/20/00

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

l Obligated Amount (+)	$6,479,161
t as of Dec 31, 1999* (-)	$5,443,286
ıce Obligated Amount for the period 1/00 - 4/00	$1,035,875

Month	Estimated Expense Monthly Average	Balance Obligated Amount
Jan, 2000	$250,000	$785,875
Feb, 2000	$230,000	$555,875
Mar, 2000	$230,000	$325,875
Apr, 2000	$200,000	$125,875

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

uding Nepal December, 1999 expenses.