



Healthy Mother/Healthy Child Project

Quarterly Performance Monitoring Report Option Period Quarter Nine October 1 – December 31, 2003



John Snow, Inc.
Arabic Software Engineering (ArabSoft)
Clark Atlanta University
The Manoff Group, Inc.
TransCentury Associates

In collaboration with
The Ministry of Health and Population
Cairo, Egypt
and
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ACRONYMS

AWP	Annual Workplan
BEOC	Basic Essential Obstetric Care
CAP	Community Action Plan
CBT	Competency Based Training
CBTM	Competency Based Training Methodology
CDA	Community Development Association
CDS	Community Development Specialist
CEOC	Comprehensive Essential Obstetric Care
CHC	Community Health Committee
CNI – DMT	Community Needs Identification and Decision Making Tool Process
CNI - RHS	Community Needs Identification and Rapid Household Survey
COP	Chief of Party
CPAP	Continuous Positive Airway Pressure
CQI	Continuous Quality Improvement
CTO	Cognizant Technical Officer
DCOP	Deputy Chief of Party
DH	District Hospital
DSMC	District Safe Motherhood Committee
DT2	Development Training Two
EMS	Emergency Medical Services
EOAC	Essential Obstetric Anesthesia Care
EOC	Essential Obstetric Care
EONC	Essential Obstetric Nursing Care
ER	Emergency Room

FGC	Female Genital Cutting
GALAE	General Authority for Literacy and Adult Education
GH	General Hospital
GOE	Government of Egypt
GSMC	Governorate Safe Motherhood Committee
GWU	George Washington University
HIO	Health Insurance Organization
HIS	Health Information System
HM/HC	Healthy Mother/ Healthy Child
HSMC	Hospital Safe Motherhood Committee
HU	Health Unit
I.V.	Intravenous
IC	Infection Control
IEC	Information, Education and Communication
IFA	Invitation for Application
IIE/ DT2	Institute of International Training/ Development Training Two
IIT	Integrated Implementation Team
IMCI	Integrated Management of Childhood Illnesses
IPC	Interpersonal Communication
JSI	John Snow, Inc.
MCH	Maternal and Child Health
MCH/ FP	Maternal and Child Health/ Family Planning
MHIS	Management Health Information System
MIS	Management Information System
MMSS	Maternal Mortality Surveillance System
MOC	Memorandum of Cooperation
MOE	Ministry of Education

MOHP	Ministry of Health and Population
MOISA	Ministry of Insurance and Social Affairs
NAMRU3	Naval American Medical Research Unit 3
NC	Neonatal Care
NCU	Neonatal Care Unit
NGO	Non Governmental Organization
NICHP	National Information Center for Health and Population
NID	National Immunization Day
NICU	Neonatal Intensive Care Unit
NMMS	National Maternal Mortality Study
NMMR	National Maternal Mortality Ratio
Ob/Gyn	Obstetric and Gynecology
OJT	On Job Training
OR	Operation Research
PHC	Primary Health Care
QA	Quality Assurance
QPMR	Quarterly Performance Monitoring Report
RFP	Request for Proposal
RFQ	Request for Quotation
RHS	Rapid Household Survey
SHIP	Student Health Insurance Program
SMC	Safe Motherhood Committee
SWOT	Strengths, Weaknesses, Opportunities and Threats
TCA	TransCentury Association
TOT	Training of Trainers
UHC	Urban Health Center
US	United States

USAID United States Agency for International Development

WE World Education

INTRODUCTION

Pursuant to Section F.4.1 of the John Snow, Inc/U.S. Agency for International Development (JSI/USAID) Contract No. 263-C-00-98-00041, JSI is required to submit Performance Reports summarizing the progress of major activities in process, indicating any problems encountered and proposing remedial actions as appropriate. These reports are to be submitted quarterly for calendar quarters ending the last day of March, June, September and December for each year of the Contract.

This current Quarterly Performance Monitoring Report (QPMR IX) represents the ninth quarter of the Option Period contract and covers the period from October 1 through December 31, 2003.

This document is organized according to the nine tasks of the contract along with a section on contract administration. Each task contains a narrative with the following sections:

- Accomplishments
- Constraints
- Proposed Actions to Overcome Constraints

The attached annexes document progress in the following aspects of the Project:

Annex A: Status of the Option Period Performance Milestones

Annex B: Maps of Target Governorates

Annex C: Contract Staff List

Annex D: Summary of implementation status in Minya

Annex E: Summary of implementation status in Assiut

Annex F: Summary of implementation status in Sohag

Annex G: Summary of implementation status in Giza

Major Events during This Quarter

Visit of the Director of the USAID Mission to Minya Governorate

- USAID Mission Director, Associate Director for Human Resources Development and Democracy, Director of the Office of Population and HM/HC CTO, USAID visited Minya Governorate on October 21 and 22, 2003 to follow up and observe the implementation of USAID-funded projects in the areas of Health and Population, drinking water and education.
- The USAID visiting team met with H.E. General M. Hassan Hemida, Governor of Minya on the evening of October 21, 2003 when they discussed the status of accomplishments of USAID funded project and the future plan for cooperation. After the meeting the Governor and the Director of USAID mission viewed the photos display assembled in the lobby of the Governorate Headquarters showing the achievements of different projects and listening to short briefings on each one of them, this was followed by a question and answer session.
- After touring the photo display, the Governor and the Director of USAID Mission attended a press conference.
- On October 22, 2003. The Governor and the Head of USAID mission inaugurated the newly renovated and upgraded Obstetric and Neonatal Departments of Mallawi District Hospital. The renovation, equipping and training health providers in the two departments were done with technical and financial support from USAID through HM/HC Project.

Meeting with Minya Governor-Women's Health and Literacy Activity

- World Education Egypt Country Director, Mr. Bill Potter, JSI Deputy Chief of Party, Mr. Sobhi Moharram, and the Central GALAE Activity Coordinator, General Mohamed Said, met with the Minya Governor at his office on October 1, 2003. The purpose of the meeting was for World Education and GALAE to introduce the Women's Integrated Health and Literacy Activity to the Governor and to seek approval for program implementation in Minya.
- The Governor explained that all development work in the Minya Governorate is planned and implemented using a process of teamwork and information sharing among the main governmental offices. The Governor had invited the Under Secretaries of Education and Health, the GALAE chief, and the Minya Governorate MIS Chief to share in the program orientation discussion.
- The meeting was very favorable and concluded with the Governor providing the following outcomes:
 - Approval and support for World Education and its partners to implement the women's integrated literacy activity in Minya.
 - Agreement with the selection of Mallawi as the activity's pilot district in Minya.
 - Encouragement for the MOE Undersecretary and the Governorate MIS Chief to collaborate with the MOHP Undersecretary and GALAE Chief on implementation of the Minya pilot phase.

- The meeting in Minya was televised, which greatly assisted in publicizing the women's integrated health and literacy activity throughout the Minya Governorate.

HM/HC Coverage Profile (September 15, 2003)

	District	Population 2002	Estimated Female Population	Estimated females in Reproductive Age	Estimated Pregnant Females	Live Birth 2001
Aswan						
1-	Aswan	281116	139166	64657	18492	7940
2-	Daraw	83028	41103	19096	5462	2410
3-	Kom Ombo	239696	118661	55130	15767	7213
4-	Nasr Nouba	67068	33202	15426	4412	2090
5-	Edfu	303160	150079	69727	19942	7158
	Total	974068	482212	224036	64074	26811
Luxor						
6-	Luxor Bandar	153758	76118	35364	10114	4748
7-	Bayadaya	207380	102663	47697	13641	6062
	Total	361138	178781	83062	23756	10810
Qena						
8-	Qous	290764	143943	66876	19126	9661
9-	Esna	279835	138532	64362	18408	8397
10-	Arnant	134578	66623	30953	8853	3888
11-	Qena	433934	214819	99805	28544	13897
12-	Deshna	253374	125433	58276	16667	10126
13-	El-Wakf	55765	27606	12826	3668	1651
14-	Neqada	116895	57869	26886	7689	3322
15-	Qift	99873	49442	22971	6570	3282
16-	Naga Hamadi	373504	184903	85906	24569	11707
17-	Abu Tesht	284926	141052	65533	18742	10714
18-	Farshout	118568	58697	27271	7799	4168
	Total	2442016	1208919	561664	160636	80813
Sohag						
19-	Sohag	491362	243249	113013	32322	16700
20-	Tahta	97526	48280	22431	6415	9871
21-	Gerga	95368	47212	21935	6273	11424
22-	Tema	271455	134384	62435	17856	9646
23-	El Balyana	314696	155790	72380	20701	11816
24-	Dar El Salam	255235	126354	58704	16789	10531
25-	Saqolta	134839	66752	31013	8870	5630
26-	Geheina	167839	83089	38603	11040	5714
27-	Maragha	256801	127129	59064	16892	8754
28-	Akhmeim	248191	122867	57084	16326	9132
29-	El Mounshaa	334757	165721	76994	22020	12497
	Total	2668069	1320826	613656	175506	111715
Assiut						
30-	Gharb Assiut	195048	96558	44861	12830	10241
31-	Shark Assiut	148614	73571	34181	9776	2433
32-	Markaz Assiut	321602	159209	73968	21155	10010
33-	El Ghanayem	83206	41191	19137	5473	3249
34-	El Kouseyah	289810	143470	66656	19064	10823
35-	El Fath	191574	94839	44062	12602	6092
36-	Sahel Selim	110114	54512	25326	7243	3963
37-	El Badary	172151	85223	39595	11324	6535
38-	Sedfa	128454	63591	29544	8450	4508
39-	Dayrout	364139	180267	83752	23953	14520
40-	Abnoub	247541	122545	56934	16283	9982
41-	Manfalout	327159	161960	75247	21521	13245
42-	Abu Tieg	222922	110357	51272	14664	8170
	Total	2807334	1387294	644537	184338	103771

Menya						
43-	Menya	604974	299492	139144	39795	19673
44-	Samalout	457960	226713	105331	30125	17231
45-	Abu Qurkas (Fekreya)	378522	187387	87060	24899	13660
46-	Deir Mowas	244173	120878	56160	16062	9433
47-	Beni Mazar	368458	182405	84745	24237	13714
48-	El Edwa	156462	77456	35986	10292	6190
49-	Mattay	194236	96156	44674	12777	7260
50-	Maghagha	342477	169543	78770	22528	12933
51-	Malawi	562867	278647	129459	37025	24438
Total		3310129	1638678	761330	217740	124532
Beni-Suef						
52-	Beni suef	414912	205402	95430	27293	12456
53-	Ehnesia	226434	112096	52080	14895	8614
54-	El Wasta	292805	144953	67345	19261	10680
55-	El Fashn	270931	134124	62314	17822	10568
56-	Beba	268724	133032	61807	17677	9489
57-	Nasser	225166	111468	51788	14811	7521
58-	Somosta	160242	79328	36856	10541	5726
Total		1859214	920403	427619	122299	65054
Fayoum						
59-	Sennoures	332648	164677	76509	21882	12174
60-	Etsa	393183	194645	90432	25864	14567
61-	Bandar Fayoum	260830	129124	59991	17157	7619
62-	Tamia	246959	122257	56801	16245	8959
63-	Markaz El Fayoum	305314	151146	70222	20084	10325
64-	Ibshway	450840	223188	103693	29656	16234
Total		1989774	985037	457648	130887	69878
Giza						
65-	El Wahat EL Bahareya	25116	12434	5777	1652	823
66-	North Giza (Imbaba Kism)	523265	259042	120351	34420	13315
67-	Etfeih	199548	98786	45896	13126	8224
68-	El Saff	224572	111174	51652	14772	9300
69-	El Badrashein	285858	141514	65747	18804	11373
70-	El Ayat	280872	139046	64601	18476	10760
71-	Giza District	180568	89390	41531	11878	5766
72-	El Hawamdeya	115376	57117	26536	7589	3980
73-	Osseim	193751	95916	44563	12745	17925
74-	El Warrak	395259	195673	90910	26000	9490
75-	Menshaat El Qanater	391502	193813	90045	25753	10894
Total		2815687	1393905	647608	185216	101850
Slum Areas						
76-	Gharb El Mataar	45437	22494	10451	2989	1108
77-	Basatin Shark	298000	147525	68540	19602	983
Total		343437	170019	78991	22591	2091
Grand Total		19565866	9686074	4500149	1287043	697325

C.10.1 TASK ONE: Basic Package of Essential Services Established and Standards Defined

Accomplishments:

Activity No. 1.1: Phasing in New Districts / Governorates

Activity No. 1.1.1: Establish and Orient Facility Safe Motherhood Committees

- The Safe Motherhood Committees of all general and district hospitals of Phases III & IV, except El-Wahat District Hospital, were oriented on their roles and responsibilities and method of work. These hospitals are:

	Governorate		Hospital
1	Giza	1	Etfeih DH
		2	El Saff DH
		3	El-Tahrir GH
		4	Osseim DH
		5	El Ayat DH
		6	Badrashein DH
		7	Hawamdeya GH
		8	Imbaba GH
2	Minya	1	Mallawi DH
		2	Mattay DH
		3	El Edwa DH
		4	Maghagha DH
3	Assiut	1	Sahel Selem DH
		2	Abnoub DH
		3	Sedfa DH
		4	El Badary DH
		5	Abu Tieg DH
		6	Manfalout DH
		7	Dayrout DH

Activity No. 1.1.2: Select BEOCs

- Based on the district profiles that were prepared by Task Three, the implementation team conducted a number of field visits and in consultation with the district health authorities selected the anchor facilities in accordance with the selection criteria. Fifty Four Basic Essential Care units were selected as follows :

Governorate	District		BEOCs
Minya	Mallawi	1	Mallawi Medical Center
		2	OM Komoos Medical Center
		3	Kalandol Integrated Hospital

		4	Naway Integrated Hospital
		5	Beni Kalled Women Health Center
		6	Al Barsha Women Health Center
	Mattay	1	Manshiet Menbal Women Health Center
	Maghagha	1	Dahamro Women Health Center
		2	Bartabat Integrated Hospital
		3	Dahrout Health Unit
	Edwa	1	Atf Heder Integrated Hospital
Total Selected BEOCs for Minya			11
Assiut	Badary	1	El Othmania Women Health Center (El Tadamon)
	Sahel Selem	1	Sahel Selem Medical Center
	Sedfa	1	Sedfa Maternal and Child Health Center
	Abu Tieg	1	El Dowina Integrated Hospital
	Manfalout	1	Hawatka Integrated Hospital
		2	Arab Beni Shokir Women Health Center
	Dayrout	1	Kodiet Mubark Integrated Hospital
		2	Dashlute Integrated Hospital
Abnoub	1	Al Mabda Integrated Hospital	
Total Selected BEOCs for Assiut			9
Giza	Etfeih	1	Soal Health Center
		2	Qababat Integrated Hospital
	El-Saff	1	Arab Abo Sa'ed Women Health Center
		2	El-Hayy Health Unit
		3	El-Saff Maternity
	Hawamdeya	1	MCH Center
	Ayat	1	Nasria Integrated Hospital
		2	Matania Integrated Hospital
		3	Barnasht Urban Health Center
	Badrashein	1	Badrashin Maternity
		2	Menshat Dahshour Health Unit
		3	Abo Ragwan Women Health Unit
	Warraq	1	Gezerat Mohammed Health Unit
		2	Bashteel Integrated Hospital
	Wahat Bahareya	1	Qabala Health Unit
		2	Al-Qasr Health Unit
		3	Mandiaha Health Unit
4		Al-Zabbo Health Unit	
5		Al-Boweitty Maternal & Child Health Center	
	Osseim	1	El Meitemideya Integrated Hospital

		2	Nahia Integrated Hospital
		3	Saquil Integrated Hospital
		4	Kerdasa Integrated Hospital
		5	Barageil IH
	Agouza	1	Maternal & Child Health Center in Imbaba
	Menshat Qanater	1	Baharmos Medical Center
		2	Atrees Women Health Unit
		3	Om Dinar Health Unit
		4	Nekla Integrated Hospital
	North Giza	1	Madinet El Ommal Medical Center
		2	Aziz Ezzat Medical Center
		3	El Bouhy Women Health Center
		4	Imbaba Urban Health Center
Total Selected BEOCs for Giza			34
Total for the three Governorates			54

Activity No. 1.1.3: Assist General / District Hospital to Conduct Self-Assessment and Development of Improvement Plans

- General and district hospital profiles of Phases III & IV of the Option Period in Minya, Assiut & Giza were developed and facility self-improvement plans were conducted by Facility Safe Motherhood Committees.
- General and district hospital profiles of Phases I & II of the Option Period were updated on monthly basis; each profile includes:
 - Facility baseline assessment.
 - Facility plan for renovation with schedule of implementation.
 - List of commodities needed for each hospital and schedule of procurement, delivery and installation.
 - Human resources development plan for the hospital, including training plan and status of implementation.
 - Reports on management and clinical performance indicators (retrospective and summary of concurrent indicators) produced by the monitoring team.
- Updating the facility self-improvement plans for Phases I & II of the Option Period hospitals is on going monthly through the meetings of SMCs, the problems were identified, discussed and corrective actions were taken at the facility level and governorate level through the Governorate Safe Motherhood Committees.

Activity No. 1.2: Monitor the Implementation of the Renovation Plans

- Renovation activities supported by USAID/JSI in hospitals of the Option Period / Phase II are completed in El-Mounshaa DH, Maragha DH and Geheina DH in Sohag and in Beni Mazar DH and Fekreya DH in Minya and Ghanayem DH in Assiut.

- Renovation activities planned and supported by HM/HC Project were completed in Deir Mowas and Mallawi DHs in Minya and El Kouseyah and Badary DHs in Assiut.
- Sites for renovation in Gerga, Tema, Saqolta, Akhmeim and El Balyana District Hospitals in Sohag were handed over to contractor.
- Contacts are on-going with HM/HC, MOHP and Assiut New Community Agency to ensure that the construction of Dar El Salam District Hospital will comply with the standards and specifications.
- The selection of the needed interim spaces was completed in Edwa and Mattay district hospitals/Minya, Abnoub, Abu Tieg, Sahel Selem, Dayrout and Manfalout District hospitals/Assiut and Etfeih DH, Tahrir GH, Hawamdeya GH, Ayat DH, Badrashein DH, Imbaba GH/Giza.
- Blue prints, cost estimates and bill of quantities were developed by JSI engineers, reviewed by clinical teams and will be submitted to HM/HC to start the bidding process.
- Coordination and monitoring activities are on-going with HM/HC, MOHP and Giza Health Directorate to ensure that the construction of Osseim and Wahat District Hospitals and to ensure their compliance with the standards and specifications.
- As for the selected BEOCs of the Option Period/ Phases III & IV, the blueprints were developed according to standards and reviewed by the clinical teams/JSI and the final list of selected BEOCs will be sent to HM/HC Project.

Activity No. 1.3: Monitor the Delivery, Installation, Staff Training on New Commodities and Maintaining and Repairing Out-of-Order Equipment

- In coordination with task 11, commodities were delivered to all Option Period/ Phase II hospitals except Tema, Saqolta, Akhmeim, Dar El-Salam, Balyana and Gerga DHs in Sohag where renovation by HM/HC is yet to be completed. In those hospitals the interim commodities were delivered.
- Delivery of commodities completed to some of the hospitals of Phase III namely; Mallawi DH/Minya and Sedfa DH and Badary DH/Assiut.
- The biomedical engineers conducted 73 person/day visits to the Ob/Gyn, NC, CSSD and OR departments of the facilities of both the Base and Option Period to maintain and repair equipment that are out-of-order. During these visits, technical assistance was provided and on-the-job-training sessions were conducted to the hospital maintenance staff.

Activity No. 1.4: Implementation Integrated Field Visits to Monitor the Implementation of PES

- Integrated visits by JSI Implementation Team including Clinical Supervisors, Field Office Specialists, Biomedical Specialists and Implementation Specialists continued to accomplish the following tasks:
 - Discuss the status of implementation of activities at the facility level.
 - Assure information flow among different members / departments.
 - Identify problems at facility level and develop facility improvement plan.
 - Identify problems requiring involvement of higher levels of authority.

- Integrate and coordinate activities at the facility level.
- The three day integrated visit is organized as follows:
 - During the first and second day of the integrated visit, members of the team conduct their own regular OJT/supervisory activities in the target facilities.
 - A regular meeting/group discussion is held on the evening of the second day to prepare for the next day’s SMC meeting. During this meeting, problems are identified, discussed and appropriate corrective actions suggested. Problems and weak points are identified through records review (patients’ sheets, hospital statistics, etc.) meetings with the staff and hospital management, comments from clinical supervisors and direct observation of the staff performance.
 - On the third day, the HSMC holds a meeting during which the problems are raised and possible solutions are suggested for decisions to be taken by the hospital management or to be raised to a higher level of authority.
- JSI Integrated Teams paid a three day visit per facility per month during this quarter to the following facilities:

Governorate		Facility
Sohag	1	Sohag GH
	2	Tahta DH
	3	Gerga DH
	4	Maragha DH
	5	Terna DH
	6	Geheina DH
	7	Akhmeim DH
	8	Saqolta DH
	9	Balyana DH
	10	Dar El Salam DH
	11	El Mounshaa DH
Assiut	1	Assiut GH
	2	New Eman GH
	3	Specialized Hospital
	4	El Ghanayem DH
	5	El Kouseyah DH
	6	Abnoub DH
	7	Abu Tieg DH
	8	Badary DH
	9	Dayrout DH
	10	Sedfa DH
	11	Sahel Selem DH
Minya	1	Minya GH
	2	Samalout DH
	3	El Fekreya DH
	4	Beni Mazar DH
	5	Deir Mowas DH
	6	Mallawi DH
	7	Mattay DH
	8	Edwa DH

Governorate	Facility
9	Maghagha DH

Activity No. 1.5: Upgrade the Managerial Capacity of Hospital Management and Hospital Safe Motherhood Committee

- Three workshops on quality management were conducted for four days as follows:
 - The first workshop was attended by a total of 22 participants representing hospital SMCs from Mallawi and Mattay District Hospitals from December 15-18, 2003 in Minya.
 - The second workshop was attended by a total of 24 participants representing hospital SMCs from Ayat and Badrashein and Hawamdeya District Hospitals from December 21-24, 2003 in Giza.
 - The third workshop was attended by a total of 24 participants representing hospital SMCs from Sedfa and Badary and Sahel Selem District Hospitals from December 28-31, 2003 in Assiut.
- The objective of the workshop was to enhance capabilities in the areas of planning, facility management, monitoring, and quality care and service standards compliance.

Activity No. 1.6: Coordinate the Phasing-out and Develop Sustainability Plans from Target Governorates

- The draft of the final completion report for the achievements and sustainability of HM/HC Project activities in Sohag Governorate is under development.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.2 TASK TWO: Pre/ In-Service Training System Designed to Disseminate Standards to Public and Private Providers

Accomplishments:

Activity No. 2.1: Disseminate Standards and Build Training Capacity

- Two Pre-service Training workshops were conducted: one for Sohag Governorate and the other for Minya Governorate.

Governorate	From	To	No. of Participants
Sohag	December 6	December 15	31
Minya	December 20	December 29	35
Total			66

- A three day workshop for the Neonatal Supervisors Team of HM/HC on “How to Use Different Monitoring Indicators to Evaluate Clinical Performance According to CBTM” was conducted on December 29-31, 2003. Thirty physicians and nurses attended this workshop.

Activity No. 2.2: Sustain, Organize and Implement EOC Training Clinical Supervision

- Based on the results of the MMSS, selected districts of Qena, Beni Suef and Fayoum Governorates were visited to help health providers develop improvement plans that address avoidable factors contributing to maternal deaths.
- Two CEOC workshops were conducted in Menya and Giza Governorates, where 27 obstetricians, from the general and district hospitals, were trained to identify the causes of maternal death, highlight the avoidable factors, substandard care and harmful practices that are contributing to maternal deaths. The workshops were held as follows:

#	Governorate	Date	Facility/Hospital	Number/ Facility	Total
1	Menya	October 7-16	Maghagha	15	
			El Edwa	3	18
2	Giza	December 16-25	El Saff	6	
			Etfeih	3	9
Total					27

- Continuous OJT/clinical supervisory visits were paid to 34 General & District hospitals in Sohag, Assiut and Minya Governorates (Phases I, II & III hospitals), in addition to two district hospitals in Giza (El Saff & Etfeih District Hospitals). Each of these hospitals was visited from three to nine days per month by clinical supervisors to ensure the compliance with the EOC protocols.

- The Concurrent Assessment Clinical Performance Monitoring Indicators are being used in Sohag, Assiut and Minya facilities and have started to be used in two districts of Giza Governorate, to monitor progress of the obstetricians towards competency and mastery of the Essential Obstetric Care skills. The Concurrent Assessment tool has proven to be very helpful to the obstetricians to identify their areas of weakness and to include corrective actions in their Clinical Self Improvement Plans.
- CEOC training materials are in process of technical review according to the latest evidence-based medical research. This updating will include the CEOC Protocol, CEOC Modules, CEOC Flowcharts and CEOC Concurrent Assessments.
- A complete set of the newly developed training materials for the primary health care physicians, including BEOC Protocol, BEOC Flow-Charts, BEOC Concurrent Assessments in addition to BEOC Modules and Resources were field tested and now ready for publication and regular use in BEOC Training interventions.

Activity No. 2.3: Sustain, Organize and Implement NC Training and Clinical Supervision

- The following Basic and Advanced Neonatal Care Workshops for Physicians were conducted during the period from October - December 2003:

#	Governorate	Workshop	Date	Facility/ Hospital	Number /Facility	Total
1	Assiut	Advanced N. Care	October 11-15	Dayrout	4	
				Geheina	1	
				Sahel Selem	2	
				Manfalout	2	
				Assiut General Hospital	1	
				Armant	1	
				Saqolta	2	
				El Badary	1	14
2	Minya	Advanced N. Care	October 12-16	Mattay	5	
				Ebshway	2	
				Mallawi	7	
				El Edwa	3	
				Maghagha	5	
				Beni Mazar	1	
				Samalout	4	26
3	Minya	Basic N. Care	December 7-10	Minya G.H.	1	
				Kouseyah	2	
				Mallawi	9	
				Maragha	3	
				Mounshaa	2	
				Maghagha	1	

			Sahel Selem	2	
			Dayrout	2	
			Manfalout	2	
			El Edwa	1	25
Grand Total					65

- The following Resuscitation Sessions were conducted as an integral part of the following CEOC and BEOC workshops during this quarter:

- **CEOC Workshops:**

#	Governorate	Date	Facility/Hospital	Number/ Facility	Total
1	Menya	October 7-16	Maghagha	15	
			El Edwa	3	18
2	Giza	December 16-25	El Saff	6	
			Etfeih	3	9
Total					27

- Technical assistance was provided to Phases I & II of the Option Period facilities through continuous visits to Minya, Assiut and Sohag facilities; in addition to the facilities of Giza Governorate (four facilities). Each of these facilities was visited monthly for three days by the clinical supervisor to ensure implementation of neonatal protocols.
- Infection control and resuscitation training for Neonatal and Obstetric staff was also conducted. The clinical supervisory practice concentrated on emphasizing the use and sustainability of the QA checklists for assessment of the training (Concurrent Checklist) and Clinical Performance (Retrospective Checklist). A total of 340 supervisory days were carried out during this quarter.
- The training program for I.V. fluid preparation and mixing was provided to additional four NICUs:

Governorate	From	To	No. of Trainees		Total
			Physician	Nurse	
I.C. Mattay	October 7	October 9	6	14	20
I.C. Dayrout	October 20	October 22	15	13	28
I.C. Sahel Selem	December 9	December 11	5	14	19
I.C. Mallawi	December 14	December 16	14	14	28
Total			40	55	95

Activity No. 2.4: Sustain, Organize and Implement Nursing Lead Trainer/Clinical Supervisor Training

- Technical assistance and continuous OJT/Clinical Supervisory visits were continued to district hospitals in Sohag, Assiut, and Minya Governorates, and started in two facilities in Giza (El Saff and Etfeih District Hospitals). Each of these facilities was visited for three days by nursing supervisors to ensure implementation of the EONC protocols.
- One EONC workshop for nurses was conducted in Giza Governorate. Twenty five nurses were trained on nursing procedures in the Obstetric

Department and delivery room. The workshop was held from December 6-11, 2003.

- Two Neonatal Care Workshops for Nurses were conducted in Assiut Governorate from December 13-15, 2003 with total number of participants 38.

Activity No. 2.5: Sustain, Organize and Implement Nurse Midwifery Training and Clinical Supervision

- A Midwifery Training Course was completed in Minya where 25 nurse midwives passed the training course successfully and are now ready to be graduated as licensed midwives. The Graduation Ceremony will be held on January 12, 2004.

Activity No. 2.6: Strengthen Other Clinical Support Services

Activity No. 2.6.1: Anesthesia Services

- OJT for safe obstetric anesthesia (preoperative visits, monitoring during operation time and at recovery time, general and regional anesthesia, infection control) to all the 11 CEOC hospitals of Sohag Governorate, 9 CEOC facilities of Minya and 11 facilities in Assiut. The supervisory visits were regularly conducted at a rate of one to two visits for each hospital monthly.
- Three day EOAC workshop was conducted for 45 physicians in Minya, Assiut and Giza in the basics of safe obstetric anesthesia, and how to manage the hypovolemic shock. The table below shows location and the dates of the workshops.

Governorate	From	To	No. of Participants
Minya	October 7	October 9	10
Assiut	October 14	October 16	10
Giza	December 29	December 31	25
Total			45

- Assessment of the present status of anesthesia equipment and procurement plan to provide the missing items was developed.
- In Cooperation with the EOC coordinator cases of maternal mortality were investigated and avoidable causes discussed with staff and administration of the concerned hospitals, developing a self-improvement plan at each facility.
- As an integral part of two CEOC workshops that were conducted, in Minya, & Giza covering (27) obstetricians a special session was allocated to explain the correct means of fluid therapy, blood transfusion, the management of hypovolemic shock and methods to decrease the maternal mortality rate due to blood loss.

Governorate	From	To	No. Of Participants
Minya	October 7	October 16	18
Giza	December 16	December 25	9
Total			27

- Anesthesia modules were developed and are now undergoing final review.
- The manual for the anesthesia training program is undergoing final technical review.
- Clinical performance monitor indicator (concurrent assessment) for anesthesia is developed and used in all Governorates and the data base entry system is being developed.
- The anesthesia equipment module was developed and is being edited.
- The hypovolemic shock module was developed and is now being edited.
- The second edition of the anesthesia protocol was developed and is now being edited.

Activity No. 2.6.2: Emergency Medical Services (EMS)

- *Service standards for EMS* were completed and incorporated in the CQIS Manual.
- A manual of Maternal and Neonatal Emergency Medical Service, for Physicians was developed and is being refined.
- A binder on *Emergency Service for Obstetric and Neonatal Care in Upper Egypt Pilot Hospitals* was developed to summarize the processes and progress of this activity. The binder will be used to coordinate actions with relevant sectors in the MOHP.
- A draft *Emergency Room Manual for Nurses (Arabic)* was developed and is being revised.
- An organizational structure for Emergency Departments (ED), compatible with the local context, was developed and set up in the following facilities:
 - El-Minya General, Samalout, Maghagha, Deir Mowas and Mallawi District Hospitals (Minya),
 - Sohag General, Tahta, Tema and El-Balyana District Hospitals (Sohag),
 - Assiut and El-Eman General, El-Kouseyah and Dayrout District Hospitals (Assiut),
 - Tahrir General and Ayat District Hospitals (Giza).
- OJT supervisory visits were conducted at four general hospitals (Minya, Sohag, Assiut, and New Eman) and seven district hospitals (Samalout, Tahta, Kouseyah, Tema, Maghagha, Deir Mowas and Balyana District Hospitals) and started at Tahrir General, Ayat, Mallawi and Dayrout District Hospitals. Visits were conducted once per month for each of the eleven facilities. A total of 67 visits were conducted for the 15 facilities during the period from October to December 2003. Clinical supervisory visits were completed at Sohag Governorate in January 2004.
- One EMS workshop for physicians was conducted in Assiut Governorate from December 9-10, 2003 for 24 participants.
- One EMS workshop for nurses was conducted in Sohag Governorate from October 8-9, 2003 for 25 participants.
- Concurrent Assessment forms for EMS were developed and are being used. This tool aims at objective evaluation of CBT of service providers and to help facilitators develop their Self Improvement Plans. An electronic version of the Concurrent Assessment is being developed with the help of Task Four to computerize the collected data.
- Emergency Medical Service Package for Training of Pre-Service Physicians was developed. This package aims at providing those newly graduate doctors

with training materials required for proper management of essential emergency cases with emphasis on major causes of maternal and neonatal mortalities.

- Two Pre-service Training workshops in Emergency Medical Services were conducted at Sohag and Minya Governorates.

Governorate	Date	No. of Participants
Sohag	December 14	28
Minya	December 24	35
Total		63

- A simple Emergency Room clinical notes sheet was developed and is being applied in pilot hospitals (Assiut General and Samalout District Hospitals).
- Emergency Medical Services Modules were completed (10 modules) and sent for editing.

Activity No. 2.6.3: Blood Bank Services

- OJT for blood transfusion and application of the protocol, orientation to blood components and their practical use, orientation to the Central Blood Bank services and how to benefit from these services.
- One day workshop was conducted where 27 physicians were trained on the basics of the blood banking system, blood preparations, components, transfusion and cooperation with the central blood bank, equipment, and how to deal with the workshops; the table below shows location, dates and participants of the workshops:

Governorate	Date	No. of Participants
Minya	October 2	11
Assiut	October 13	9
Giza	December 28	7
Total		27

- Blood Bank Protocol was developed and is undergoing editing.
- Blood Transfusion services standards and Blood Bank monitoring checklists were developed and edited.
- Infection Control Protocol in Blood Banks is under development.
- Blood Bank module is under development.

Activity No. 2.6.4: Laboratory Services

- The laboratory activities are conducted in cooperation with the Central Department of Laboratories, MOHP. The Laboratory Services component of HM/HC activities aims to develop physician skills in requesting appropriate tests and interpreting test results, particularly in critical cases. The above mentioned activities also help in bridging the communication gap between clinicians (laboratory users) and laboratory technicians (service providers). Activities also aim to better coordinate the link between hospitals, the Governorate Health Department and the MOHP Central Laboratory Department. Training of Technicians on the technical use of equipment will

be the responsibility of the Central Laboratory Department at the MOHP as agreed.

- A Guide to Clinical Aspects of Laboratory Services was drafted and is currently being revised in cooperation with the Central Department of Laboratory.
- A list of essential laboratory investigations for General and District Hospitals was developed in conjunction with the Central Laboratory Department, MOHP.
- A list of available laboratory investigations during and after regular working hours was developed by the Laboratory Department in each of the pilot hospitals.
- A policy on the use of the Integrated Laboratory was developed in each governorate to provide bacteriological laboratory services for hospitals where this was lacking. Implementation of the policy started in Assiut and El-Minya General Hospitals. Strengthening of this integrated microbiology service needs combined effort from HM/HC, Central Department of Laboratory, and Local Governorates.
- Laboratory Committees have been established in pilot hospitals in the three governorates of the Option Period. The duties of these committees are as follows:
 - Establish and monitor laboratory services at the hospital
 - Issue local guidelines
 - Solve local problems, and
 - Follow-up on the use of the laboratory manual
- A national revised *Laboratory Request Form* has been developed in cooperation with the Central Laboratory Department. Pilot testing of the new laboratory request form was started in Assiut General Hospital.
- A *Laboratory Service Standards* was developed and included in the CQIS manual. It will target the laboratory committee members.
- A *Laboratory Checklist* was developed to be used by JSI Clinical Supervisors during their field visits to collect information, monitor performance, and record incidence reports related to laboratory services in their visited facilities. All incidence reports are discussed with the Central Department of Laboratory on monthly basis. Corrective actions are taken by the Central Department of Laboratory.
- Two laboratory workshops were conducted in Assiut and Minya Governorates. The workshop provided a summary of laboratory activities to hospitals other than "Pilot Hospitals". The Training Laboratory Materials are distributed to all participating hospitals.

Governorate	From	To	No. of Participants
Minya	October 2	October 2	21
Assiut	December 11	December 11	26
Total			47

- Concurrent Assessment for Laboratory Service was developed and completed. This tool aims at objective evaluation of CBT of service providers and help facilitators to develop their Self Improvement Plans. An electronic

version of the Concurrent Assessment will be developed with the help of task 4 to computerize the collected data.

- A questionnaire on available laboratory resources and root causes for deficiency is collected from participating hospitals to be discussed with Central Laboratory Department in Cairo.

Activity No. 2.7: Infection Control Activities

- Supervisory visits were conducted in all Option period/ Phase I and Phase II hospitals and started in Phase III hospitals, during which efforts were made to emphasize the importance of a comprehensive approach to Infection Control.
- The quarterly integrated Infection Control OJT/Supervisory follow-up visits were conducted to the following hospitals:
 - Sohag General Hospital, Tahta, Gerga, Maragha, Tema, Geheina, Balyana, Dar El Salam, Saqolta, Akhmeim, and Mounshaa District Hospitals/Sohag.
 - Assiut General Hospital, New Eman General Hospital, Specialized Hospital, Ghanayem, Kouseyah, Badary, Sedfa, Abnoub, Sahel Selem, Dayrout and Manfalout District Hospitals/Assiut.
 - Minya General Hospital, Samalout, Abu Qorkas, Beni Mazar, and Deir Mowas, Mallawi and Edwa, District Hospitals/ Minya.
 - Etfeih, Saff, Ayat, Badrashein, Hawamdeya and Osseim District Hospitals/Giza.
- The concurrent assessment checklists for infection control were distributed to all clinical supervisors to be used during their OJT visits to monitor the infection control compliance of the hospital staff.
- A plan to change behavior related to infection control activities was developed. The plan is based on the results of a research study that indicate sepsis as the third leading cause of both maternal and neonatal deaths.
- There are different issues related to Infection Control in each hospital that affect sepsis rates. Six major infection control procedures have been highlighted due to their importance and will be addressed, namely they are:
 - Proper hand washing & scrubbing
 - Proper IV Preparation and medicine preparation
 - Proper use of protective devices
 - Proper processing of instruments
 - Proper patient preparation
 - Proper waste disposal
- Five CSSD and Three OR workshops were conducted during the period from October till December 2003 as follows:

Governorate	Workshop	From	To	No. of Participants
Giza	CSSD	November 1	November 3	32
Giza	CSSD	November 4	November 6	27
Giza	CSSD	November 15	November 17	13
Assiut	CSSD	November 14	November 16	25
Giza	CSSD	December 9	December 11	26
Giza	OR	November 4	November 6	33
Giza	OR	November 10	November 13	28
Giza	OR	December 2	December 4	24
Total				208

- Two Infection Control training sessions were conducted as integral part of the EOC workshops in Minya on October 14, 2003 and Giza on December 23, 2003 for 27 participants (18 in Minya and 9 in Giza).

Activity No. 2.8: Involve Private Sector Services Providers

- Local syndicates, MOHP Private Sector Department and the Pharmacy Inspection Department continue to provide JSI with updated information on private sector providers at Sohag, Assiut and Minya. The information includes the number of private clinics, polyclinics, private hospitals, and pharmacies in the targeted governorates.
- Two CBT EOC training course was conducted for private physicians as follows:

Governorate	From	To	No. of Participants
Minya	October 15	October 16	18
Giza	December 24	December 25	9
Total			27

Activity No. 2.9: Implement IMCI Program in New Governorates

- No activities were conducted this quarter.

Activity No. 2.10: Conduct Refresher Courses for Dayas

- No activities were conducted this quarter.

Activity No. 2.11: Teleconferencing and Off-Shore Training

- (See 7.5 of this report)
- A plan was discussed during this quarter for the off-shore training program for the year 2004.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

Activity No. 2.12: Assist MOHP to Pilot Test Adapted HM/HC Project Interventions in Urban Slum Areas

Activity No. 2.12.1: Develop a Situation Analysis

- A visit to Gharb El-Mattar Medical Center to collect some of the data necessary to complete Part-I of the adapted tool concerning the community diagnosis activity. Some of the data were available at the center and others had to be retrieved from the North Giza Zone. This step was facilitated by the already acting agreement between the HM/HC project and Giza Health Governorate.
- A field visit to El-Basateen Urban Health Center was also conducted to collect the data necessary for the community diagnosis purposes. Most data were available but as yet a visit to the Central Information Center in Cairo Governorate needs to take place for completion of needed information. In

addition a visit to El-Basateen Zone took place after a letter had been sent from the project to the Director to ensure facilitation and cooperation and for confirmation of some of the data concerning the schools and population education status.

- The Chief of Party visited the Basateen Sharq UHC and Garb El-Matter UHC to finalize the proposed renovations of the two places. The COP added some changes for which the approval of Dr. Hennawy was received and the final changes were sent to the engineering and the procurement department of JSI for action.

Activity No. 2.12.2: Adapt HM/HC Project Interventions in 1-2 Slum Areas

- A two day Maternal Mortality Surveillance System workshop was conducted on October 1-2, 2003 for El-Basateen Sharq Health Office to orient the staff as well as to introduce the basic forms used and the proper way to fill them. Nineteen Participants attended the workshop. The list included the three health levels concerned with the MMSS. The participants included the health clerk and supervisor from the health office, Health District Director and Assistant, Preventive Medicine Assistant, MCH and PHC Directors at governorate level. The Medical Director of El-Basateen Sharq Medical Center also attended the workshop.
- A second workshop on MMSS, attended by 27 participants, was conducted on December 15-16, 2003 to introduce the system to the health staff of other Health Offices in EL-Basateen catchment's area to secure proper filling of the forms. This workshop was planned due to the need for staff replacement between the neighboring Health Offices to compensate for any deficiencies that might occur in cases of replacement or vacation of the personnel and to ensure sustainability of the already adjusted registration system. The seven Health Offices in the area of El-Basateen catchment area were identified from the district Health Office and clerks as well as Health Office physicians were invited to attend the workshop.
- Materials needed for the Second International Conference on Urban Health-in New York were developed.
- JSI participated in the international conference on urban health held in the United States (New York) by Poster presentation. Introducing the overall objective as well as the specific ones of the project in slum areas, the poster presented the preliminary situation analysis of the two slum areas selected for the intervention. The model and the implementation process were also included in the poster design. Attendance at the conference gave participants an opportunity to discuss similar experiences and lessons learned from other activities implemented in different parts of the world that share the same problems and conditions. The organizing committee was approached for future collaboration and for access to the conference presentations as well as the final actual outcomes and recommendations.
- A one day workshop was conducted on December 8, 2003 to set up the Community Health Committee (CHC) in El-Basateen Sharq area. The meeting was attended by twelve local community representatives. The members of the committee were elected. The committee was give orientation about the project, the future steps and their tasks/ responsibilities as members

of the committee. The urgency of the active participation and positive attitude by the CHC members was emphasized.

- The above activity in El-Basateen Sharq area was followed by a workshop for Community Needs Assessment (CNA). A five day workshop was conducted on December 13-18, 2003 to identify and prioritize the different problems in the community and the possible ways for a correct solution as perceived by the community. Twenty one participants attended this workshop in El Basateen Center. The CNA implies the selection of Raedats who were selected by the members of the CHC being women within the catchment area. Training took place of Raedats on data collection and the proper use of the specific designed tool they will use.
- The community diagnosis activities for Gharb El Mattar started as well, only the formulation of the Community Health Committee (CHC) took place. The members were selected and their orientation regarding the project and its goals were explained.
- A two day workshop for the NGOs of North Giza was conducted on December 14-16, 2003. The active local NGOs were identified and were invited to participate in a two day workshop to orient their representatives on the project goals and expectations. The project achievements and previous activities in the field of improving maternal and neonatal morbidities and mortalities were presented and different activities were highlighted. The proposed activities for future involvement and the rules to follow if cooperation and collaboration will be planned were explained. The workshop objectives were successfully achieved as letters for agreed participation started to flow into the office. The NGOs capacity-building activity is taking place now.
- A three day workshop for Training of Trainers for further activities with Dayas was conducted on December 8-10, 2003. The opening ceremony was attended by Dr. Elsayed Hammouda the MOH/P undersecretary for North Giza who highlighted the importance of proper training for TBAs as long as they continue to practice in the community and given that their services are widespread in under-privileged communities i.e. the slum areas. The Chief of Party and Deputy Chief of Party explained the goals of the project in slum areas and the importance of trained birth attendants and necessity for conducting delivery in a clean/safe manner following the developed protocols to guard against harmful practices during birth. The workshop was organized so as to gather staff from the two slum areas in one place, to foster competition, challenge them and help them benefit from the experience of others. The number of participants was 27, representing the three health care levels (Facility, district and governorate) of North Giza and Cairo governorate. The TOT included Ob/GYN doctors and Chief nurses and nurses from different levels and from the referral hospitals. Also attending were the MCH director and the PHC director at the governorate level. Dr Salwa Farag from the HM/HC project was one of the chief trainers of this workshop. The closing ceremony was attended by Dr. Gipson and Mr. Sobhi who collected participant feedback. They will participate in the future training of the Dayas.
- A three day Quality Improvement workshop was conducted on December 21-23, 2003. Dr. Nabih Ismail from HM/HC together with JSI group conducted the sessions targeting the assessment of the facility staff and improving their

registration skills. The 18 participants were Doctors and Chief Nurses from El-Basateen Sharq Urban Health Center. Forms, registration procedures as well as interpretation of findings were the main issues addressed during this workshop. A one day site visit took place to identify any obstacles and constraints in the field that may obstruct the proper implementation. OJT was planned to take place when the team paid a monthly visit to the facility for empowering staff with new skills and for continuous monitoring of improvement.

Activity No. 2.12.3: Assist in the Development and Monitoring a Plan to Improve Perinatal Health Care Services and Their Utilization in Slum Areas

- The Project is still developing the plan.

Activity No. 2.13: Facilitate and Document MCH and IMCI Training Interventions at BEOC Level

- No activities were conducted this quarter.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.3 TASK THREE: Public and Private Provider Partnership with Communities to Develop and Manage Districts Plans

Accomplishments:

Activity No. 3.1: Community Level Involvement

- During this quarter, eight community needs assessments were done and community action plans (CAPs) were developed in two districts in Assiut, two Districts in Minya, and one District in Giza and one slum area in Cairo. These CAPs were submitted to District Health and Safe Motherhood Committees for incorporation into the district health plans.
- Potential BEOC facilities were selected and will undergo further assessment by Task One for final selection to start implementing the Phases III and IV MCH activities.

Activity No. 3.2: District Level Involvement

Activity No. 3.2.1: Safe Motherhood Committees

- Two orientation workshops for DHCs and DSMCs were conducted in Assiut Governorate according to the following schedule.

Date	District	No. of Participants
December 9	Dayrout (26) Manfalout (23)	49
December 10	Abnoub (20), Sahel Selem (21)	41
Total		90

Activity No. 3.2.2: District Plans

- One three-day workshop on management and planning was conducted in Assiut, during the period from 15-18 December 2003. A total of 16 participants from the SMCs in the two districts (Dayrout and Sahel Selem) and managers of BEOCs in both districts, attended this workshop. Participants were asked to bring a situation analysis based on district data for MCH services for the practical training sessions of the workshops. The analysis was also used to develop district HM/HC plans based on the revised Guidelines for District Planning and Monitoring. A session on service provider sensitization was added to the workshop agenda and was conducted by Task Seven. A training report was developed that included the results of pre/post tests, participation and course evaluation.

Activity No. 3.2.3: Monitoring Activities

Meetings were continued for district SMC members.

- Quarterly progress reports were developed by district SMCs detailing achievements during the quarter (July – September) of 2003. These achievements were compared to the planned activities of annual work plans (AWPs) and HM/HC indicators.

Activity No. 3.3: Governorate Level Participation

- Six joint Safe Motherhood and Health Committees meetings were conducted and were attended by 535 participants representing members of governorate and district Safe Motherhood and Health Committees from Minya, Assiut and Sohag to review quarterly progress reports.
- The six meetings were conducted as follows:

Governorate	Date	Districts	No. of Participants
Minya	December 28	Beni Mazar , Deir Mowas	94
Minya	December 30	Minya, Samalout, and Abu Qurkas	97
Assiut	October 22	Assiut Shark, Gharb, and Markaz	87
Sohag	December 7	Sohag – Maragha-Geheina and Akhmeim	105
Sohag	December 8	Tema & Gerga and Mounshaa	78
Sohag	December 9	Dar Al Salam & Balyana & Tahta and Saqolta	74
Total			535

Activity No. 3.4: National Level Oversight

- Two coordination meetings were conducted on December 2 and 11, 2003 with TAHSEEN team members. The purpose of these meetings was to discuss the plan for implementation of integrated HM/HC-FP activities and training of the District Safe Motherhood Committees on planning and management, in two districts in Minya Governorate. (for more details on this meeting see task 12: Coordination Activities)

Activity No. 3.5: Continuous Quality Improvement**Activity No. 3.5.1: Quality Improvement**

Integrating with the activities implemented in the slums areas, training on the service standards and monitoring checklists for BEOC facilities has been conducted.

A Quality Assurance Training workshop for PHC activities in the slum areas was conducted in Cairo Governorate on October 21-23, 2003. 18 participants attended the workshop representing BEOC physicians, governorate and district level supervisory teams with close coordination with HM/HC project Quality Assurance Unit.

Activity No. 3.5.2: Support Monitoring Activities

- Quality reports covering both managerial and clinical aspects of performance for obstetric & neonatal departments in the third quarter (Q3), 2003 have been produced and submitted to SMCs. The reports illustrated the areas of improvement as well as the areas of deficiencies with the main causes behind these deficiencies in both managerial and clinical care processes. The reports were effectively used during SMC meetings to identify problem areas and

opportunities for improvement. They were also used as critical inputs for developing self-improvement plans.

Activity No. 3.5.3: Coordination Activities

- See Task 12.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.4 TASK FOUR: Monitoring System in Place to Track Utilization and Impact and Provide Feedback

Accomplishments:

Activity No. 4.1: Assist the MOHP to Set Up MHIS Centers at District Level in Coordination with Family Planning

- Currently, 82 district Management Health Information Systems (MHIS) centers in Upper Egypt are operating.

Activity No. 4.2: Design and Upgrade User Friendly Software for MHIS

- The pilot Implementation of the upgraded MHIS application started in March 2003 and continued till the end of October 2003. NICHIP and HM/HC project verified the results of pilot implementation with the three governorates MHIS centers in Sohag, Minya, and Assiut.
- Currently, a local area network is installed in Assiut and Minya Governorates premises to include all staff members of MHIS center and some technical departments who have user access to computers in the governorate premises. All other governorates in Upper Egypt have local area networks installed at the governorate MHIS Center.
- An Implementation Guide is developed and presented to NICHIP and HM/HC project for approval. The Implementation Guide will be tested during this quarter.
- Training for MHIS technical specialists and users who are responsible for data management and use took place during this quarter as follows:

Course Name	Participants	Location	From	To	No. of Part.
MHIS For Governorate MHIS Center Managers	MHIS Center Managers in Upper Egypt Governorates	Cairo	October 11	October 16	12
TOT For Lower Egypt Implementers	Central Level Implementation Team	Cairo	October 6	October 9	16
MHIS for Statistical Technicians	Upper Egypt Governorate MHIS Center Team	Cairo	December 4	December 18	23
MHIS for Statistical Technicians	Upper Egypt Governorate MHIS Center Team	Cairo	December 20	December 24	21

Activity No. 4.3: Develop and Implement Quality Assurance Checklist for the District MHIS Centers

- Currently, a comprehensive manual for quality assurance system is developed to include:
 - Procedures for District and Governorate MHIS Centers operating the upgraded MHIS system
 - Data quality monitoring system
- Development of training material is under way for Governorate MHIS Center Managers.

Activity No. 4.4: Data Use Workshops

- Data Use Workshop materials is under revision to adopt and adjust to changes in the MHIS application and implementation procedures taking place all over Egypt.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.5 TASK FIVE: Research Activities

Accomplishments:

Activity No. 5.1: Identify and Conduct Operation Research Studies

Seven additional operations research studies should be completed by March 15, 2005. Approval was received on three topics:

- *Impact of the use of CPAP on neonates with respiratory distress*: proposal completed, data collection tool developed awaiting piloting.
- *Collaborative patterns between specialists during and immediately following deliveries*: proposal completed data collection tools development are in progress.
- *Hospital practices for normal delivery in Upper Egyptian Governorates*: proposal development is in progress, data collection tools revision are in progress.

Activity No. 5.2: Training on the Maternal Mortality Surveillance System (MMSS)

- MMSS was introduced to those members of the safe motherhood committee in four governorates who had missed out on training: Sohag, Assiut, Minya and Giza. A total of 162 members who had missed were trained as follows:

Governorates	Date		Number of Participants
	From	To	
Sohag	November 15	November 16	38
Assiut	November 17	November 18	41
Minya	November 19	November 20	49
Giza	December 09	December 10	34
Total			162

- On Job Training (OJT) was conducted for the Health Officers / Clerks and District Health Managers in three governorates: Sohag, Giza and Minya during this quarter. A total of 152 health offices were visited at 17 districts in the three governorates:

Governorates	Date		Number of District Visited	Number of Health Office Visited
	From	To		
Sohag	November 08	November 13	6	44
Giza	November 15	November 19	6	48
Minya	December 20	December 24	5	60
Total			17	152

Activity No. 5.3: Monitor the Implementation of Maternal Mortality Surveillance System (MMSS) in Nine Upper Egypt Governorates

- Performance monitoring for selected Health Offices, Health Districts and Health Directorates was conducted in the governorates of Sohag, Giza and Minya during this quarter.

C.10.7 TASK SEVEN: Better Social Community Services

Accomplishments:

Activity No. 7.1: Community Needs Identification and Decision-Making

- Eight one-day workshops were held in Assiut, Minya, Giza, and the slum area of El-Basateen in Cairo to train Community Health Committees (CHCs) on the Community Needs Identification and Decision-Making Tools (CNI-DMT).
- The workshops were attended by 64 participants representing CHC members, heads of local administration units, Health Directors of the districts and managers of the health facilities in these communities. The main purpose of the workshops was to agree on the scheduling of the Rapid Household Survey Workshops that will be conducted in their communities and the nomination of the Outreach workers who will be trained to conduct the surveys. The eight workshops were conducted in the following communities:

Governorate	District	Community	Date
Assiut	Dayrout	Dashlout	November 5
		Kodeit Mubarak	November 6
	Abnoub	El-Maabda	December 10
Minya	Mattay	Mansheit Menbal	November 18
	Mallawi	Mallawi	December 3
Giza	El-Saff	El-Saff	November 5
		Arab Abu Mesaed	December 8
Cairo	El-Basateen (Slum area)	El-Basateen	December 9

- Eight five-day workshops were held in eight communities in Assiut, Sohag, and Minya, to train Community Outreach Workers on conducting Community Needs Identification-Rapid Household Survey (CNI-RHS). Fifteen Outreach Workers from each community (a total of 150) were selected and trained on the CNI-RHS process, and they subsequently conducted the process in each of the following communities:

Governorate	District	Community	From	To
Assiut	Dayrout	Dashlout	November 16	November 20
		Kodeit Mubarak	November 16	November 20
	Abnoub	El-Maabda	December 14	December 18
Minya	Mattay	Mansheit Menbal	December 7	December 11
	Mallawi	Mallawi	December 14	December 18
Giza	El-Saff	El-Saff	November 16	November 20

		Arab Abu Mesaed	December 21	December 25
Cairo	El-Basateen (Slum area)	El-Basateen	December 13	December 18

- The main objectives of the workshops were to learn how to use the RHS to identify:
 - Key behaviors related to MCH issues – whether they are followed by women or not
 - Whether danger signs during pregnancy, delivery, postpartum and care for the newborn are known by women or not
 - Main obstacles that could hinder accessing the MCH services in these communities.
- To conduct the RHS, a random sample of 50 mothers with a baby less than one year old was selected from the Birth Registers of the health units for interview during the RHS.
- Over a five-day period, the RHS interview process was conducted in each community and the results were manually tabulated and finalized for appropriate action.
- The workshops were preceded by the development of community profiles for each of the eight communities. These profiles included basic data collected from the local administration units and health units of the communities. The main purpose of these profiles is to portray communities with their unique characteristics, services, and resources.
- Following the RHS, the previously mentioned eight CHC workshops were conducted to:
 - Share the results of the RHS
 - Identify the community needs/problems related to MCH issues
 - Prioritize and analyze these problems
 - Suggest alternatives for solutions to address these problems and meet the community needs
 - Develop Community Actions Plans (CAPs) to guide the community actions in this respect
- The action plan workshops were attended by 325 participants who represent CHCs members, Community Outreach Workers who conducted the CNI-RHS process and Heads of the Village Executive Councils in these communities.
- The CAPs describe the problems/needs of the community, their priority order, their causes, suggested interventions, and the responsible persons and time frame for each intervention. Some of the CAPs problems/needs are addressed at the community level. Others that are beyond the capability of the community are submitted to the district to be incorporated in the district health plans.

Activity No. 7.2: Community Health Education

Activity No. 7.2.1: Health Care Providers Sensitization

- One workshop was conducted on December 15-18, 2003 for 16 health providers and decision-makers from the districts of Dayrout and Sahel Selem in Assiut. Participants were alerted to the community perceptions and beliefs

related to MCH issues. The main objective was for health providers to recall these perceptions and beliefs during interaction with patients.

Activity No. 7.2.2: Integrating HM/HC Messages in the Literacy Curricula of General Authority for Literacy and Adult Education (GALAE)

- During this Quarter, World Education (WE) started to implement the Memorandum of Cooperation signed with GALAE and MOHP to develop ten more health messages. To do this, WE requested the technical support of JSI to implement this activity in Minya. An agreement was made to conduct the activity in the district of Mallawi.
- As a result, an orientation workshop was coordinated for WE in Minya on October 1, 2003 where representatives from GALAE headquarters and Minya Branch and MOHP were invited and briefed on the main initiative of the ten health messages and the associated activities. Roles were assigned to each party.
- In preparation for the orientation workshop, field visits were conducted to three literacy classes in Om Tesaa & El-Bayadia communities, Mallawi District in Minya Governorate. These classes are run by health facilities. The main objective of the field visits was to survey with the students the health topics they would likely see in the literacy curriculum of GALAE. These topics will serve as a basis for the next stage which will be the development of the new ten health messages.

Activity No. 7.3: Training of Health Educators

- During this quarter, a three day training workshop was conducted in Sohag Governorate December 23-25, 2003, using the trained trainers in the TOT workshop that was conducted in Minya during the previous quarter. Twenty five participants attended the training workshop.
- A four day training workshop was conducted in Minya Governorate from 28-31 December 2003 using the trained trainers. Twenty five participants attended the workshop.
- A TOT manual was used in Minya TOT workshop and is currently being pre-tested to be modified and used in the six day workshop in Giza next quarter.
- JSI organized a TOT workshop in Minya for senior health educators from Minya, Assiut and Sohag from September 6-11, 2003. Twenty four health educators attended the workshop, eight from each governorate. By the end of the training participants presented a plan for health education relevant to the targeted audience of HM/HC project.
- The training workshop was conducted over six days and was designed to be followed by three meetings (one day each) with at least a 45 day interval between every meeting. The first meeting was conducted in Minya City on October 23 and 23 participants attended (8 from Minya, 8 from Assiut, and 7 from Sohag). During the meeting participants presented a report on the implementation of their activities in the three governorates. The previous period showed more focus on maternal and neonatal issues with the use of HM/HC communication materials, health educators worked with other junior educators at the unit level and collaboration with other organizations and NGOs. Based on the training and their plans, participants worked in their communities in implementing activities. The following table shows the

number of seminars and community meetings conducted by participants during this quarter following the TOT workshop:

Governorate	District	Seminars	Topics
Minya	Minya city	1	FGM
	Abu-Korkas	1	Safe Delivery
	Samalout	20	Safe Delivery, FGM
	Edwa	4	Safe Delivery, Post - Natal Danger Signs, FGM
	Mattay & Beni-Mazar	6	Antenatal Care
Assiut	Ghanayem	7	Antenatal Care, Hospital Delivery
	Manfalout	10	FGM
	Sahel Selim	14	Different Reproductive Health Issues
	Assiut Shark	6	Hospital Delivery, FGM
	El-Fath	10	Thyroid Hormone, Health Services Available
	Badary	4	Antenatal Care, Hospital Delivery
	Kouseyah	10	Hospital Delivery, Antenatal Care, Thyroid Gland
Sohag	Mounshaa	8	Antenatal Care Counseling Skills
	Dar El-Salam	3	Breastfeeding
	Saqolta	4	Diarrhea, Dehydration
	Maragha	4	Child Health

Activity No. 7.4: Female Genital Cutting

Activity No. 7.4.1: Activities Targeting the Community and the Non-Medical People

- During this quarter, forty four participants: social workers, health educators, and community outreach workers from local NGO's were trained on advocating against FGC in a refresher two day workshop that was conducted in Assiut Governorate.
- Forty two participants from Sohag participated in a two day refresher workshop for advocating against FGC, and using the low literacy materials.
- Fifty two participants: social workers, health educators, and community outreach workers from local NGO's were trained on advocating against FGC in a three day workshop that was conducted in Sohag Governorate.

Governorate	From	To	No of Participants
Assiut (refresher)	October 8	October 9	21
Assiut (refresher)	October 11	October 12	23
Sohag 1 (refresher)	October 22	October 23	22
Sohag 2 (refresher)	October 22	October 23	20
Sohag 1	December 9	December 11	26
Sohag 2	December 9	December 11	26
Total			138

- A one day visit was conducted to Minya Governorate to monitor health educators as they were conducting seminars advocating against FGC. Two seminars were attended with the Health Education Department: the first was for a group of 30 school girls and the other was conducted in the Eastern General Medical Center and attended by mothers visiting the health center. The visit was followed by meetings with key figures from NGOs such as: Jesuits, Freres, San Marc and Hawa Organizations to evaluate the impact of FGC activities and materials.

Activity No. 7.4.2: Activities Targeting the Health Providers

- During this quarter, a FGC Manoff consultant provided input for revising the FGC training module and for developing an FGC training protocol. The module and the protocol will be finalized and printed during the next quarter.
- The consultant is also working on documenting the FGC activities throughout the project.

Activity No. 7.5: Engaging the Private Sector

- No activities were conducted during this quarter.

Activity No. 7.6: Continuing Community Activities

- HM/HC Brochure:
 - The Arabic version of the brochure has been drafted, revised, approved by USAID and MOHP, and is in the process of design and printing.
- HM/HC Publications:
 - During this quarter a number of 100,000 copies of each of the MCH complication flyers (F1, F2, F3, and F4), about danger signs for the mother during pregnancy, delivery, and postpartum as well as danger signs in the newborn together with the four corresponding mini-posters were printed through the HM/HC PIL fund and were delivered to the JSI warehouse. During the next quarter, a distribution plan will be developed and implemented.
 - 20,250 Admission Sheets were also printed through the HM/HC PIL fund and delivered to the JSI warehouse. During the next quarter, a distribution plan for the admission sheets will be developed and implemented.
 - Three posters were designed and printed. The first poster was displayed the Intervention Model for Slum Areas for the Second International Conference on Urban Health in New York, the second

was displayed the Adolescent Anemia Prevention Program for The Second Conference for School Health in Beirut and the third was displayed at the National Maternal Mortality Study: Egypt 2000 for the American Public Health Association meeting in San Francisco.

- Regional Conference of NMMSS Results in Minya:
 - A logistics plan and tentative agenda for holding a Regional Conference on NMMSS Results in Minya was developed. The Regional Conference will include: Fayoum, Beni Suef, Minya, and Assiut.
- Teleconferences Activity:
 - Duplication of 1500 CDs of the power point presentations of the teleconferences was finalized.
 - The teleconferences CD covers were designed and printed this quarter.

Activity No. 7.7: Strengthen IPC Training for Physicians and Nurses

- Previous workshops were evaluated and analyzed depending on the pre and post test scores that were tabulated question by question for every participant. The report was drafted for 1000 pre and post tests with graphic representation of the pre and post-tests results. The average of right answers was found to range from 40%-60 % before training and from 72%-95% after training for physicians in all governorates. The corresponding ratio for nurses was 30%-40% and 60%-70% respectively. The pre and post tests were modified accordingly and the IPC module was revised and modified as well as the perception exercises being added. The training was rescheduled to extend to two days training for both physicians and nurses instead of one. The post test timing was also changed to happen before the role play scenarios so as to avoid hasty answers.
- Two IPC workshops were conducted in Sohag with 48 participants (physicians and nurses). Each workshop lasted for two days the first for 23 physicians and the second for 25 nurses. The two workshops were held on December 15-16, 2003.

Activity No. 7.8: Behavior Change

- A draft plan was developed by a Manoff consultant and is under revision and finalization.

Activity No. 7.9: Gold Star

- A final design for the MCH Gold Star Sign for PHC health facilities and hospitals was produced and is waiting final decision on accreditation and award.

Activity No. 7.10: Iron Supplementation Program

- Distribution of iron tablets to target students started in all districts of Assiut during October 2003. It started in all districts of Sohag during December 03. While in Minya it started in about 50% of schools of all districts during November and December 2003.
- Cups are still under production and distribution.

Activity No. 7.11: Health Education Activities to Support SHIP in Schools

- Health education activities are taking place in target schools. Trained science teachers are conducting two sessions for each target class, one addressing smoking and the other addressing anemia.
- The program's CDs were delivered to Sohag, Assiut and Minya to be distributed with other IEC materials. These CDs will only be delivered to schools that have no VCRs and have computers. Each CD contains the 2 films - the training film that shows the procedures for iron supplementation in schools and the health education film.
- Printed IEC materials are still under production and distribution. It is expected to be handled to target schools by the beginning of the second semester.
- Five SHIP staff from JSI, HIO & MOHP participated in the "Second Conference for School Health in Arab Countries". The conference was held in Beirut during December 3-5, 2003. The Adolescent Anemia Prevention Program was introduced through a poster presentation. Booklets and flyers were handed out. Participants showed interest in the program specially the IEC materials. The conference provided a good chance for exchange of experiences among participants from different countries

Constraints:

- There is a delay in delivering the iron tablets to some districts in Minya Governorate due to the limited capability of the production line to manufacture the required amount of iron tablets.
- Manufacturing the cups is also still in process so there is a delay in delivering cups to most of the target schools.

Proposed Actions to Overcome Constraints:

- Selecting another pharmaceutical company to produce iron tablets in addition to the current company. This proposal is in the process of investigation and study by relevant staff in HIO and MOHP.
- Accelerate the process of cup manufacturing and distribution to target schools.
- Another solution for the shortage of cups is to purchase chewable iron tablets. This option is still under study by HIO/SHIP Coordinator. This will spare the effort of producing, transporting and distributing cups. It will also alleviate the effort of transporting and distributing water to the students in the classrooms. This should increase the compliance of the students with the least logistical efforts.

C.10.10 TASK TEN: Small Grants Program**Accomplishments:****Activity No. 10.1: Management and Monitoring of the Base Period Awarded 120 Grants**

- A total amount of L.E 434,077.00 was disbursed to 50 NGOs in accordance with the grant contracts' financial scheme.
- The table below shows the distribution of grants by governorate.

Governorate	Installment in L.E	Number of NGOs
Beni Suef	58,471	6
Qena	14,758	6
Fayoum	45,660	5
Minya	170,493	16
Assiut	57,745	6
Sohag	86,950	11
TOTAL	434,077.00	50

Activity No. 10.2: Training Awarded NGOs (Technically and Financially)

- Seven training workshops on communication skills were conducted for 33 NGOs in Minya, Assiut and Sohag and were attended by 193 Outreach Workers, 35 Supervisors and 25 Technical Managers as per the following table:

Governorate	Date of workshop	Outreach Worker	Supervisor	Technical Manager
Minya	October 5-9	83	13	6
	October 12-16			
	October 19-23			
Assiut	October 5-9	20	4	2
Sohag	October 5-9	90	18	17
	October 12-16			
	October 19-23			
Total		193	35	25

- Participants were introduced to the Healthy Mother/ Healthy Child project and to their roles as outreach workers. Also, they were trained on how to establish rapport with the population and community for which they are responsible and on the different communication and reporting skills. The last day of the workshop was allocated for focusing on technical issues such as FGC and Child diseases.
- Four training workshops on financial management were conducted for 33 NGOs in Minya, Assiut and Sohag and were attended by 63 Financial Managers as per the following table:

Governorate	Date of workshop	Financial Managers Trained
Minya	30 Sept-1 October October 8-9	29
Assiut	October 14-15	12
Sohag	October 21-22	22
Total		63

Activity No. 10.3: Provide Grants to Capable Local NGOs through Standardized Mechanism

Two workshops were organized for the Ministry of Insurance and Social Affairs (MOISA) in Giza and Cairo Governorates. Participants were introduced to HM/HC Project and the Small Grant Program.

- Out of 200 IFA letters distributed to the Districts' Directors, 63 NGOs responded to JSI with a Letter of Intent:

Governorate	Date of workshop	Number of Participants	Number of IFA letters distributed	Number of Letters of Intent received by JSI	
				Urban Slum Areas	Others
Giza	November 16	27	150	3	58
Cairo	November 18	15	50	2	N/A
TOTAL		41	200	5	58

- Interested NGOs were contacted and invited to attend a one day workshop during which 61 NGO representatives were given an overview on the Healthy Mother/Healthy Child Project and the Small Grants Program:
- The table below shows the workshops dates and number of participants:

Governorate	Date of workshop	District	Number of Participants On the basis of 1 executive senior manager per NG
Giza	December 14	Haram	7
		Boulak	6
		Omraneya	8
	December 15	El-Ayat	3
		El-Saff	1
		Badrashein	5
		Hawamdeya	3
		Etfeih	3
		Agouza	3
		Haram	1
		Wahat	1
	December 16	6 th of October	6
		Dokki	2
		Warrak	3
		Boulak	1
		South Giza	4
North Giza		1	
	Imbaba	1	
Cairo	November 18	Basateen	2
TOTAL		19 Districts	61 NGOs

- 39 NGOs (out of 61) sent JSI an invitation for assessment.
- Up to the present date 13 NGOs were assessed by the JSI Team in Cairo and Giza Governorates as per the schedule below:

Governorate	Date of assessment	District	Number of NGOs assessed
GIZA	December 21	Boulak	2
	December 22	Haram	2
	December 23	Haram	2
	December 24	Omraneya	2
	December 28	Haram (Faisal)	2
	December 30	Imbaba & Mounib	3
Cairo	December 29	Basateen	1

Activity No. 10.4: Evaluation, Closing and Setting Plan for Sustainability

- No activities were conducted this quarter.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.11 TASK ELEVEN: Commodity Procurement Program

Accomplishments:

Activity No. 11.1: Commodities

- JSI/TCA completed the procurement process and issued Purchase Orders for a total of US\$6,982,736. The total amount committed to date is 78% of the total procurement budget.
- TCA has procured the following items this quarter per the Life of Contract Procurement Plan:
 - Offshore medical equipment
 - Local medical furniture, equipment, and supplies
- USAID approved two groups of awards from IFB #13 for medical equipment. Seven contracts were issued totaling \$588,537.
- Purchase orders were awarded for local medical commodities.
- The two sample Preemicare incubators arrived in the US for testing by ECRI. A draft report was issued and submitted to ICS and Preemicare for follow-up.
- Waiver requests for laryngeal masks and local medical commodities were submitted to USAID by JSI and approved.
- JSI and TCA have accepted delivery and installed the following items for Option Period recipient locations this quarter:
 - Medical equipment, furniture, and supplies in completed Phase One and Phase Two facilities.
 - Air conditioners for Phase Two facilities (General/District Hospitals and BEOCs) and for District Health Offices.
 - Office furniture for selected District Health Offices.
 - Office furniture and computing equipment for District Health Information Centers.
- A comprehensive spreadsheet was developed to define the remaining local and offshore procurement requirements.
- Inventory in the warehouse was maintained and a physical inventory was completed.
- The computerized Commodity Procurement Database was maintained and is producing required reports.
- Distribution reports were provided to the GOE Customs Representative and Sales Tax Authority as required.
- The Procurement Milestone documenting the procurement of \$5.5 Million in commodities was submitted and approved by USAID.

Activity No. 11.2: Renovations

- All the bidding, contracting and financial procedures related to the renovation process were implemented according to the renovation plan.
- Two contracts were signed for minor renovations in Mallawi and Al Ghanayem District Hospitals.
- Two RFQs were issued for renovations in Basateen Sharq UHC, Cairo and Gharb El-Matar UHC, Giza for a total estimated cost of LE 92,700.
- A total amount of LE 148,319 has been paid during this quarter and LE 74,325 is still obligated

Activity No. 11.3: Publications

- During this quarter selected IEC materials (including flyers and mini-posters) and admission sheets were printed using the remaining funds from the PIL. A distribution plan for these materials is being finalized and delivery will begin in the New Year.
- Approximately 1,500 CDs related to the medical teleconferences were produced. The CD includes an auto-play presentation containing power point presentations related to the eight teleconferences produced.
- Video covers were produced for each of the eight-teleconference video tapes produced for a total of 2,400 video covers.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.12 TASK TWELVE: Coordination Activities

Accomplishments:

MOHP/ USAID/ JSI Monthly Coordination Meetings

- The first monthly coordination meeting was held at HM/HC Project On October 19, 2003.
- Participants were: Dr. Esmat Mansour, MOHP Undersecretary for Integrated Health Care/HMHC Executive Director; Dr. Nahed Matta, HM/HC Team Leader, USAID; Dr. Reginald Gipson, Chief of Party, JSI; Mr. Sobhi Moharram Deputy Chief of Party, JSI and Mrs. Marwa Kamel, Communication Specialist, JSI.
- The purpose of the meeting was:
 - To review and approve the outline of the MMSS Regional Meetings to present the results of the MMSS 2002 to the executive and elected leaders as well as the Key Health Officials of a number of governorates that constitute a semi-homogenous region. The main objective of this event is to strengthen areas of weaknesses of MMSS and mobilize other governmental agencies, NGOs and political leaders to reduce maternal and neonatal mortality in their regions.
 - To discuss the results of MMSS 2002 and develop a plan to extend the technical assistance to cover all Egyptian governorates: Lower Egypt, urban governorates and frontier governorates.

Conclusion and Recommendations:

- The final and best outline of the five Regional Meetings was approved. (Attachment A: An Outline of a Regional Meeting)
- A plan to expand the technical assistance provide to the MMSS to cover all Egypt was discussed , and agreement was reached on the following courses of action:
 - Conduct a training program for Directors of Preventive Care and MCH at the governorate level in all the remaining 17 governorates for two days on the components of the system, MMSS data and information flow, data and information analysis, supervision and quality assurance of data, development of plans of action for corrective actions in consultation with the Safe Motherhood Committee.
 - Conduct a TOT program for Assistant District Health Mangers to train the Health Office physicians and clerks.
 - Support and monitor the local training programs organized at the governorate level to train the HOs.
 - Organize a one day meeting that involves the Director of MCH, Preventive Care and HIS at the governorate level (27 governorates) to discuss the automation and reporting system of MMSS.
- The second coordination meeting during this quarter was held on December 3, 2003 and concentrated on the action required to disseminate the MMSS results, consolidate the system and develop a plan of action for its upgrading. (Attachment B: Minutes of the Meeting)

MOHP General Directorate for Quality

- A meeting was held in the MOHP with Dr. Bassioni, head of the General Directorate for Quality. The aim of the meeting was to coordinate the development of Obstetric and Neonatal department manuals that cope work with the Directorate ones. Additionally, the possibility of supporting efforts for facilities accreditation was discussed

USAID/JSI/Catalyst

- Mr. Chris McDermott, Chief of health and Population Division, USAID called for a meeting on December 4, 2003 to review and discuss progress achieved so far in coordination and integration of MCH/FP activities in Minya. Chiefs of Party of JSI and Catalyst and their aids who attended the meeting presented their contributions to this process. It was agreed to consolidate this process and involve the MOHP counterparts from the central level in overseeing and implementing activities to ensure government ownerships.
- During the meeting an agreement was reached to arrange for a second field visit to Minya on the third week of January 2004. The visit will involve USAID and contractors to touch base with the Governor and health key officials to follow up on the visit of the USAID/Mission Director.
- The participants were advised that an assessment team will visit Cairo by the second half of February to prepare a situation analysis on health information systems and come up with recommendations in this regard.

TAHSEEN Project

A- Integrated Incentive System

- MOHP/MCH/FP and TAHSEEN Project organized a three day workshop from 8-10 October, 2003 in Movenpick Hotel, Cairo Media City, 6th of October City to present and review the current system of incentives implemented by MCH Department and FP Department of MOHP.
- The workshop was attended by representatives of front line providers at the primary health care level as well as the supervisory level at district, governorate and central levels.
- The purpose of the review is to allow participants from the two departments to identify points of strength and weakness in the two systems and develop an alternative integrated system.
- The workshop concluded its review and discussion by recommending a number of alternatives that will require further study to decide their feasibility for implementation before submitting the best and preferred alternative to the decision makers at the Ministry.

B- District Health Planning in Mallawi and Mattay

- A meeting was held on December 2, 2003 and attended by concerned staff of the two parties: Catalyst and JSI. Topics that were discussed included district profiles, the district health planning process, and data use workshops and community/NGOs activities.
- JSI submitted a quarterly workplan with calendar (December 2003/February 2004) for its activities in the selected districts for integration of FP/MCH for

information sharing to avoid scheduling conflicts and for planning joint activities.

- It was agreed to call for another meeting to coordinate and integrate clinical training. (Attachment C: Minutes of the Meeting)

C- Post-Abortion Counseling Training Module/Supervision System

- Dr. Ton van der Velden, Quality Specialist, TAHSEEN Project accompanied by a Catalyst training consultant met with JSI team on December 11, 2003 at JSI office. The purpose of the meeting is to provide TAHSEEN team with JSI feed back on the two pieces of work mentioned above and developed by TAHSEEN.
- Dr. Amr Fathy and Dr. Maali Gomei, JSI Clinical Supervisors, provided their general and specific comments on the PAC counseling training modules to Dr. Mohamed Abdel Aziz, TAHSEEN Training Consultant.
- Similar review and comments were provided on the integrated system for FP/MCH supervision by JSI team to be taken in consideration in the second draft of the system.

Communication for Healthy Living (CHL)

A- Develop Family Health Communication Strategy Workshop

- CHL Project organized a strategic planning workshop on October 14-16, 2003 in Alexandria. The goal of the workshop is to develop family health communication strategy in support of Egypt's national health goals. To achieve this goal. The objectives that were set up for this workshop were:
 - To understand MOHP national health priorities in the areas of FP/RH, MCH, Family Medicine, Infectious Diseases, Chronic Diseases and Healthy Lifestyle.
 - To analyze the health needs of family members.
 - To design measurable behavioral objectives.
 - To identify health communication priority areas for the next year.
 - To establish systems for interagency collaboration and coordination activities.
- Forty four undersecretaries of the MOHP, MOI, USAID, Chiefs of Party of USAID health and population projects and key officials from concerned ministries and projects participated in this workshop.
- By the end of the workshop. The participants developed a matrix of desired health behaviors by life stage.

B- Cooperation in the Area of FGM

- On the invitation of CHL Chief of Party, Mr. Ron Hess. Dr. Ihab Abdel Ghany, JSI Community Health Specialist and Ms. Lauren Goodsmith, Communication Consultant, FGM, visited the CHL Project to provide an overview of HM/HC Project in the area of FGM prevention activities to date, and explore potential areas of cooperation.
- The JSI team offered a brief summary of the inter-organizational collaboration that informed the planning of HM/HC's FGM-related activities, the participatory development of the low literacy outreach materials, and the "integrated" approach to anti-FGM advocacy reflected in these materials (versus the older "health-consequences" approach that has contributed to

increased 'medicalization' of the practice). They described the dissemination of the FGM materials, the development of the health educators' manual currently used in FGM outreach training, the format of the workshops, and the participant "pool" (i.e., MOHP health educators and social workers and NGOs). They also described the Project timetable for upcoming workshops and geographical areas of activity during the base and option periods.

- During the course of the meeting, the CHL team members were given copies of the following FGM prevention materials: leaflet and booklet (both with English translations); matching card set; "Mercy for Girls" videotape and discussion guide; and a copy of the current (revised) health educators' manual. The EOC training module for medical professionals and the FGM counseling cards were discussed, but it was explained that both are currently being finalized, and copies were not left with CHL.
- CHL team members acknowledged HM/HC's leading role in regard to FGM prevention activities, and suggested that CHL could help to sustain efforts in areas that the HM/HC Project has phased out of, for example, by reprinting FGM outreach materials (through the SIS). They also felt that HM/HC materials can help inform CHL's upcoming development of a "packet" of family health messages and a flipchart on family planning and reproductive health. As noted by Ron Hess, this would help insure that accurate and consistent messages regarding FGM would be reflected in CHL materials.
- The CHL team expressed interest in the possibility of sending a few participants to upcoming HM/HC outreach training workshops on FGM and would like to be informed of intended dates of these workshops. They also asked if it would be possible to obtain a list of those who have participated in these workshops to date, along with their organizational affiliations, so that they could potentially be considered as resource people and/or candidates for additional training. CHL's own training activities will include 5-day TOT workshops on family health, followed by "step-down" workshops, in four governorates (Minya, Qena, and two others yet to be determined). The majority of participants will be MOHP personnel from different divisions, with some NGO members (identified through CHL partner Save the Children).
- In addition, the CHL team members raised the importance of encouraging religious leaders' participation in the effort against FGM — and the challenge that this represents in light of contrasting views. CHL will be conducting workshops for religious leaders, and would invite HM/HC's technical input in their development.

Partnership in Health Reform (PHR+)

- A meeting was held on December 17, 2003 with Mr. Zohair Fakeeh, Communication Advisor from ABT Associates, who is coming for a visit to Egypt to develop a strategic plan on the IEC activities to the PHR Plus project. A presentation on the HM/HC IEC strategy and activities were presented. Further collaboration and opportunities for joint activities were discussed.

World Education/ Women's Integrated Health and Literacy Activity

A- USAID Funded Projects Consultation to Integrated Health and Literacy Activity

- In January 2003, World Education began implementation of the Ford-funded Expanded Women's Integrated Health and Literacy Activity, under the auspices of a Memorandum of Cooperation signed in September 2002 between GALAE, the Ministry of Health and Population, USAID, World Education, the Ford Foundation and JSI.
- As part of the Activity, World Education will work with HM/HC-JSI to build on the curriculum development work conducted during the pilot phase, to develop ten (10) additional integrated health and literacy lessons. In consultation with GALAE, JSI, and the Ford Foundation, World Education has selected the Minya Governorate (Mallawi District), as the location to develop and test the new lessons during the period: October 2003 – June 2004.
- The USAID CTOs for TAHSEEN, Communication for Healthy Living (CHL) and HM/HC Project met on September 27, 2003 with the Chiefs of Party of the contractors providing the technical assistance to the three projects to share an orientation on this activity and discuss expansion in Minya governorate.
- At the request of USAID-Health and Population Office representatives of the three USAID funded projects attended a meeting with Mr. Bill Potter, World Education Representative in Egypt, to discuss coordination of the respective projects interest in participating in World Education Ford Funded Women's Integrated Health and Literacy Activity. (Attachment D: Summary Meeting Notes)

B- Orientation of Stakeholders in Minya/Mallawi

- The World Education Egypt facilitated a one-day Program Overview and Orientation Meeting at the Cleopatra Hotel in Minya Governorate on October 1, 2003.
- Main activity stakeholder groups represented were in the meeting i.e., Officials from Central GALAE & Minya Branch, Officials from MOP, Officials from Minya Governorate Women's Affairs Dept., Director of HM/HC Information Unit, Save the Children, John Snow Inc., and World Education/ Egypt.
- The objectives of the orientation meeting were:
 - to provide activity stakeholders with an overview of the Integrated Health and Literacy
 - to develop a shared understanding of the materials development activity to be implemented in Minya (i.e. to develop, pilot, and refine sample curricula that integrate women's health into literacy skills development)
 - to develop an activity outline for start-up and implementation in Minya, and
 - to solicit stakeholder input concerning the start-up process.
- By the end of the day the participants agreed upon a start-up action plan. (Attachment E: Progress Report)

C- Key Findings of a Study to Measure the Impact of Health/Literacy Activity

- Ms. Jane Russell, Senior Program Advisor, WE, HP and Mr. Bill Potter, WE Country Representative met with JSI team on December 7, 2003 to discuss

- joint activities to develop ten new literacy lessons integrating health messages in Mallawi District, Minya Governorate to agree on next steps.
- The next step in developing the new ten lessons is to organize and conduct a workshop to select the ten health topics to be integrated in the literacy curricula of GALAE. The workshop is scheduled to take place on late January 2004.
 - WE briefed JSI team on progress achieved so far in developing additional five literacy lessons that deal with environmental health with support from USAID Environmental Health Program (EHP) in Ezbbat Nawar.
 - Through Ford Foundation donation to WE to develop ten new lessons with technical inputs from JSI, WE contracted the American University's Social Research Center to conduct a study to assess the impact of the previously developed and applied five lessons on health knowledge and practices of the teachers, learners and households in the two slum areas of Giza and Cairo.
 - WE and JSI met on December 9, 2003 with Dr. Esmat Mansour, MOHP Undersecretary for Integrated Health Care and HM/HC Executive Director to share with her the findings of the research conducted by AUC/SRC on the impact of integration of health activity in literacy program. It was agreed during this meeting to organize another one on February 23, 2004 to disseminate the findings of the study, present the plan for development of the new ten lessons and the plan to institutionalize the activity.

Save the Children

- On October 29, 2003, JSI met with Save the Children team who conducted a research in Minya Governorate on "Improving the Pregnancy Outcomes through Positive Deviance". They presented the major results of the research which was a joint effort between TUFTS University, Save the Children and MOHP.
- The presentation of the results of the research, which was conducted in two villages in Minya with a third village as control area indicates that reasons for LBW include: pregnancy intake, day-time rest, household assistance, exposure to second hand smoke and UTI. The project succeeded in reducing the prevalence of LBW in the two villages through the following interventions:
 - Quality antenatal care
 - Micronutrients supplementation treatment of urine tracing infection
 - Counseling / social mobilization.

WHO/MOHP (NID)

- JSI provided four consultants to serve as observers of the National Immunization Days (18-21 October, 2003). After briefing with WHO/MOHP officials, the consultants were assigned the responsibility of monitoring the NID activities in high risk districts and selected randomly health centers to observe the implementation of NID and assess the outcome of the vaccination process at all levels.

UNICEF:

- JSI/SHIP Specialist together with SHIP coordinator in HM/HC participated in the Roundtable Dissemination Meeting on the Study of "Adolescents Media Habits in Egypt: What We Know and What We Need to Know". The meeting

was organized by UNICEF. It was held in October 19, 2003 in the UNICEF Cairo office.

Contract Administration

Accomplishments:

- Full and part time staff positions were filled for the Option Period. A Contract Staff List detailing employee names and positions can be found in Annex C.
- A contract modification was signed obligating the contract additional funds.
- The JSI budget-tracking tool was updated monthly, actual and projected expenses were entered.
- JSI provided monthly expenditure estimates to USAID as required.
- JSI use of PIL funds is being tracked daily and reconciled with the Project on a monthly basis.
- Project inventory records were updated and reviewed for accuracy.
- The Giza field office was opened and is fully staffed.
- Travel and registration paperwork for MOHP counterparts attending workshops was processed.
- The SF294 for the reporting period prior to September 30, 2003 was completed and submitted to USAID.

Constraints:

- None

Proposed Actions to Overcome Constraints:

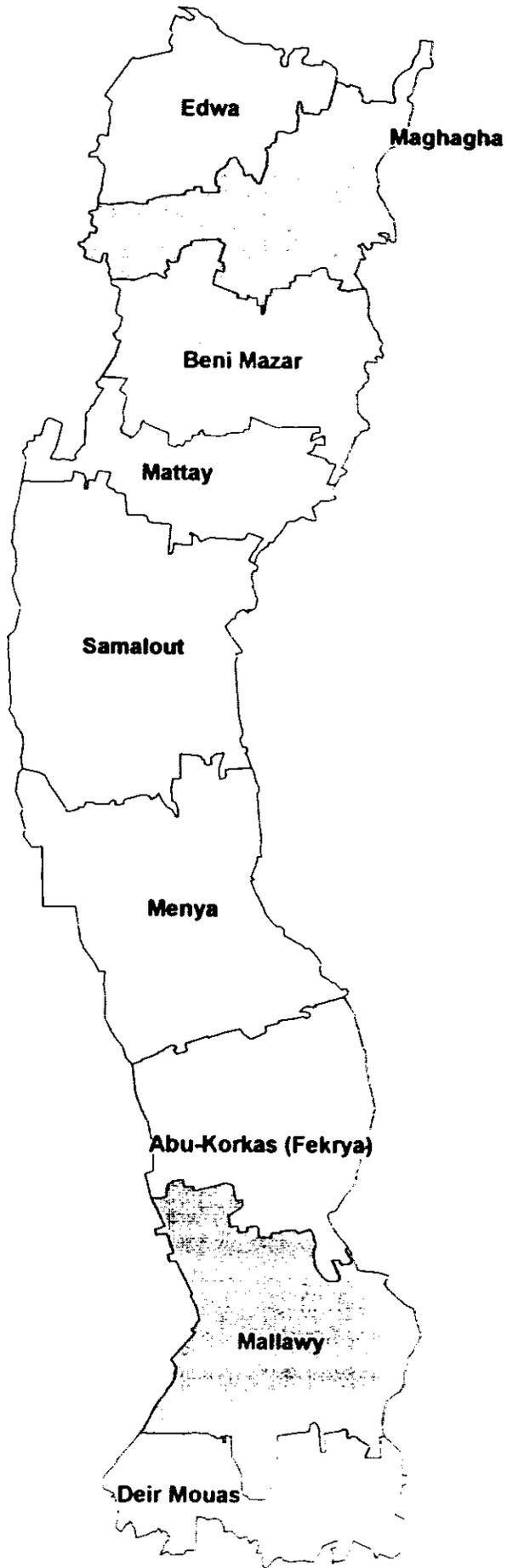
- None

**ANNEX A: STATUS OF THE OPTION PERIOD
PERFORMANCE MILESTONE**

No.	Date Due	Task No.	Milestone	Submitted	Validated	Approved	Comments
1	3/15/2002	11	Development of HM/HC Project Procurement Plan	4/14/2002	✓	USAID	
2	9/15/2002	1	Implementation of basic package in 12 additional districts for a cumulative total of 37 districts.	3/15/2003	✓	6/2/2002	Completed
3	9/15/2002	2	Assist in the coordinated implementation of IMCI training in at least one additional target governorate.	9/8/2002	✓	5/21/2003	Completed
4	9/15/2002	3	12 Additional District Health Plans and Monitoring Systems developed and implemented for a cumulative total of 37 districts.	9/12/2002	✓	9/30/2002	Completed
5	9/15/2002	4	Assist MOHP to establish 70 district MCHS centers.	9/8/2002	✓	12/21/2002	Completed
6	9/15/2002	5	Community Action Plans developed and implemented in 12 additional districts for a cumulative total of 37 districts.	9/8/2002	✓	2/3/2003	Completed
7	9/15/2002	7	Community Action Plans developed and implemented in 12 additional districts for a cumulative total of 37 districts.	9/8/2002	✓	9/30/2002	Completed
8	9/15/2002	10	A cumulative total of 140 small grants awarded to NGOs in target districts.	9/8/2002	✓	9/30/2002	Completed
9	9/15/2002	11	Procurement of \$ 5.5 Million of Project commodities.	9/13/2002	✓	10/3/2002	Completed
10	3/15/2003	1	Implementation of basic package in 16 additional districts for a cumulative total of 53 districts.	3/14/2003	✓	5/11/2003	Completed
11	9/15/2003	2	Assist the MOHP and HIO to maintain the Adolescent Anemia Prevention Program in the five original UE governorates and phase into the new target governorates.	9/15/2003	✓	11/12/2003	Completed
12	9/15/2003	3	5 Additional District Health Plans and Monitoring Systems developed and implemented for a cumulative total of 53 districts.	9/15/2003	✓	11/9/2003	Completed
13	9/15/2003	4	Assist MOHP to establish 75 district MCHS centers.	9/15/2003	✓	11/9/2003	Completed
14	9/15/2003	5	5 operations research studies completed.	10/9/2003	✓	11/9/2003	Completed
15	9/15/2003	7	Community Action Plans developed and implemented in 16 additional districts for a cumulative total of 53 districts.	9/15/2003	✓	11/12/2003	Completed
16	9/15/2003	7	Assist the MOHP and HIO to maintain the Adolescent Anemia Prevention Program in the five original UE governorates and phase into the new target governorates.	9/15/2003			
17	9/15/2003	7	Assist the MOHP and HIO to maintain the Adolescent Anemia Prevention Program in the five original UE governorates and phase into the new target governorates.	9/15/2003			
18	9/15/2003	10	A cumulative total of 140 small grants awarded to NGOs in target districts.	9/15/2003	✓	11/12/2003	Completed
19	9/15/2003	11	Procurement of \$ 5.5 Million of Project commodities.	3/15/2003	✓	11/9/2003	Completed
20	9/15/2004	1	Implementation of basic package in 17 additional districts for a cumulative total of 70 districts.				
21	9/15/2004	2	Complete implementation of MCH-FP integrated package of services in one pilot district including Health Sector Reform.				
22	9/15/2004	3	17 Additional District Health Plans and Monitoring Systems developed and implemented for a cumulative total of 70 districts.				
23	9/15/2004	4	Assist MOHP to establish 80 district MCHS centers.				
24	9/15/2004	5	Assist MOHP in the development and pilot test of a national maternal mortality surveillance system.				
25	9/15/2004	7	Community Action Plans developed and implemented in 17 additional districts for a cumulative total of 70 districts.				
26	9/15/2004	10	A cumulative total of 160 small grants awarded to NGOs in target districts.				
27	9/15/2004	11	Procurement of \$ 7.5 Million of Project commodities.				
28	3/15/2005	1	Implementation of basic package in 5 additional districts for a cumulative total of 75 districts.				
29	3/15/2005	2	Assist the MOHP/Urban Health Department to pilot test adapted HM/HC interventions in 1-2 urban slum areas.				
30	3/15/2005	3	5 Additional District Health Plans and Monitoring Systems developed and implemented for a cumulative total of 75 districts.				
31	3/15/2005	4	Assist MOHP to establish 85 district MCHS centers.				
32	3/15/2005	5	12 operations research studies completed.				
33	3/15/2005	5	Monitor implementation of surveillance system in target governorates of Upper Egypt.				
34	3/15/2005	7	Community Action Plans developed and implemented in 5 additional districts for a cumulative total of 75 districts.				
35	3/15/2005	10	A cumulative total of 170 small grants awarded to NGOs in target districts.				
36	3/15/2005	11	Procurement of \$ 9 Million of Project commodities.				

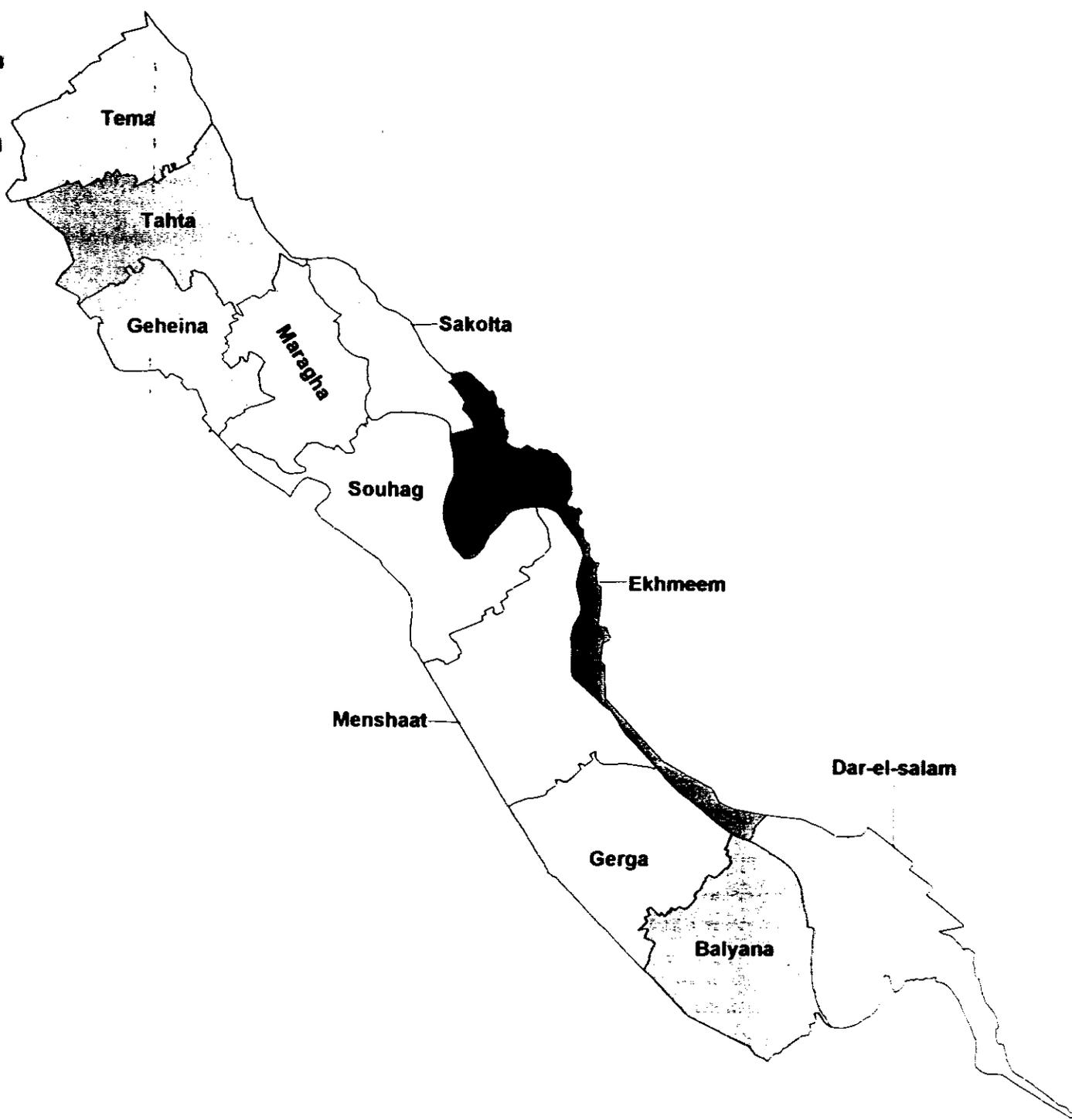
ANNEX B: MAPS OF TARGET GOVERNORATES

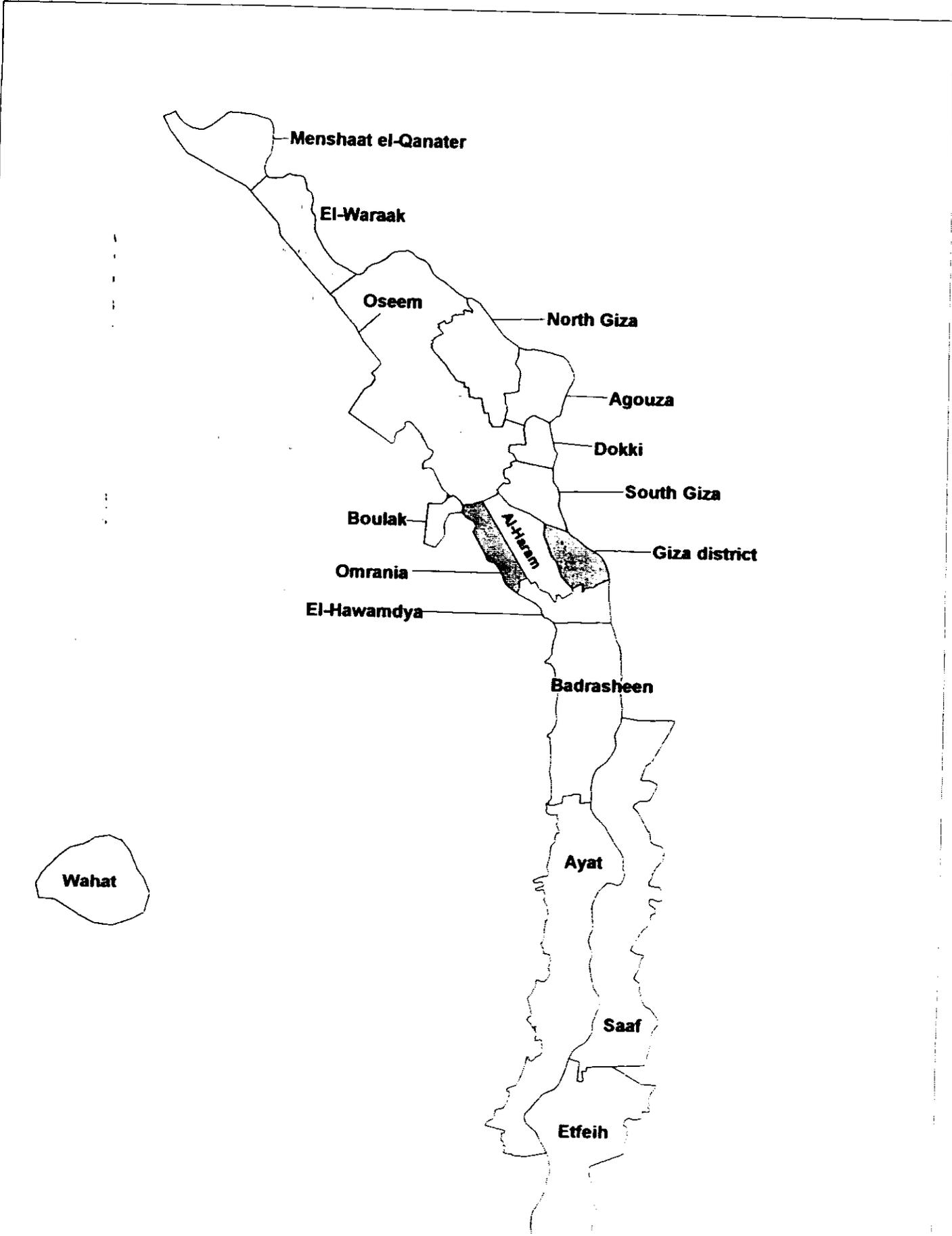
**Menya
Governorate**





Assiut Governorate





Giza Governorate

ANNEX C: CONTRACT STAFF LIST

**John Snow, Inc. HM/HC
Staff Names and Titles
Option Period - December 31, 2003**

John Snow, Inc. Full-Time Employees	
Reginald Gipson	Chief of Party
Sobhi Moharram	Deputy Chief of Party Coordinator for Tasks 1, 3, 4, 5, 7 & 10
Tom Coles	Health Providers Training Supervisor Coordinator for Task 2
Katrina Kruhm	Project Administrator Coordinator for Task 11
Hassan El Sheikh	Implementation Team Coordinator Task Team Member: Task 1 & 2
Mohsen El-Said	Implementation Specialist (Assiut & Menya) Task Team Member: Task 1
Abdel Moneim Hamed	Implementation Specialist (Sohag & Giza) Task Team Member: Task 1
Dalia Raafat	Architect & Quantity Surveyor Task Team Member: Task 1
Nevine Mohsen	Junior Field Civil Engineer Task Team Member: Task 1
Lamiaa Mohsen	Perinatal Coordinator Task Team Member: Task 2
Mohamed Moustafa	Training Specialist Task Team Member: Task 2
George Sanad	Health Management Specialist Task Team Member: Task 3
Dalia Hassan	Health Management Assistant Task Team Member: Task 3
Wafaei El-Sakkary	Quality Assurance Specialist Task Team Member: Task 3
Sherif El-Kamhawy	Quality Assurance Assistant Task Team Member: Task 3
Khaled Abdel Fattah	Senior Systems Analyst (Arabsoft) Task Team Member: Task 4
Sameh Gamil	Senior Systems Engineer (Arabsoft) Task Team Member: Task 4
Adel Hakim	Maternal Mortality Surveillance System Specialist Task Team Member: Task 5
Khaled Nada	Operation Research Specialist Task Team Member: Task 5
Marwa Kamel	Communications & Behaviour Change Specialist Task Team Member: Task 7
Ihab Abdel Ghani	Health Education Specialist Task Team Member: Task 7
Heba Rafik	Public Relations, Communications & Contracting Specialist Task Team Member: Task 7
Dalia Sherif	Health Communications Specialist Task Team Member: Task 7
Khaled El-Sayed	Community Development & Mobilization Specialist Task Team Member: Task 7

Name	
Maha Anis	SHIP Implementation & Training Specialist Task Team Member: Task 7
Hana Abdel Megeid	Program Assistant (SHIP) Task Team Member: Task 7
El-Sayed Kishta	NGOs Small Grants Specialist Task Team Member: Task 10
Ingy Kotb	NGOs Small Grants Assistant Task Team Member: Task 10
Mohamed Mansour	Procurement & Commodity Logistics Specialist Task Team Member: Task 10 & 11
Marion Charobim	Procurement Specialist Task Team Member: Task 11
Ola Zakaria	Administrative / Contracting Specialist Task Team Member: Task 11
Hazem Mansour	Financial Manager & Deputy Administrator
Amr Obeid	Senior Accountant
Bassem Reda	Senior Accountant
Ayatallah Mohamed	Accountant
Naglaa El-Bakri	Office Manager
Manar Adel	Administrative / Personnel Specialist
Rami Ezzy	Senior Network Administrator
Amr Hassan	Assistant Network Administrator
Gihan Iskandar	Senior Program Assistant (COP)
Mariam Samir	Program Assistant (MMSS)
Passant Al-Ashkar	Program Assistant (Management)
Neveen Sami	Program Assistant (Health Providers Training Supervisor)
Neveen Fathi	Program Assistant (Tasks 3 & 4)
Nesrine Sobhi	Program Assistant (Perinatal)
Sameh Sabry	Program Assistant (Slum Areas)
Amira Diao	Executive Secretary
Dina Khairy	Executive Secretary / Travel Assistant
Ola Hussein	Secretary
Nashwa Bahgat	Secretary
Roaa Ibrahim	Secretary
Dina Bahader	Secretary
Mai Qandil	Receptionist / Secretary
Cherine ElKemary	Assistant Editor / Formatter
Iris Guirguis	Data Entry Assistant
Walid Salah	Data Management Assistant
Tarek El-Nadi	Senior Driver
Adel Kamel	Driver
Ali Yassin	Driver
Hassaballah Mostafa	Driver
Ayman Mohamed	Messenger/ Expeditor
Ahmed Moawad	Expeditor/Storekeeper
Mohamed Harbi	Messenger / Storekeeper
Ayman Mirghani	Photocopy Clerk / Messenger
Hassan Fawzi	Office Clerk / Messenger
Khaled El-Ghoneimy	Office Clerk / Messenger
Essam Adel	Porter

Mohamed Taha	Porter
Sayed Eid	Porter
Part-Time Employees	
Nevine Hassanein	Slum Areas Development Coordinator
Omaima Kamel	Slum Areas Development Specialist
Mohamed Rashad	Architectural & Engineering Specialist
Ahmed Osman	Field Civil Engineer
Mohamed Helmy	Electrical Engineer
Khaled Saber	Bio-Medical Engineer
Iman Radwan	Bio-Medical Engineer
Mahmoud AbdelRahman	Bio-Medical Engineer
Walid Saber	Bio-Medical Engineer
Hussein Khamis	Support Services Coordinator
Sabry Hamza	EOC Coordinator
Ashraf Shawat	Support Services Coordinator (Anesthesiology & Blood Banks)
Ahmed Farag	Anesthesiology Specialist
Fareed Farouk	Anesthesiology Specialist
Mokhtar Abdel-Hai	Anesthesiology Specialist
Hany ElSayed	Blood Bank Specialist
Amr Abul Fadl	Emergency & Laboratory Specialist
Amr Abdallah	Emergency & Laboratory Specialist
Walid Abdel Gabbar	Emergency & Laboratory Specialist
Ahmed Ashraf Wegdan	Infection Control Specialist
Alaa Abou Zeid	Infection Control Specialist
Ahmed Hamdy	Midwifery Trainer
Mohamed Cherine	Master Trainer / Clinical Supervisor
Mohamed Sabry	Master Trainer / Clinical Supervisor
Amr Fathi	Clinical Supervisor
Abdel-Ghaffar Mohamed	Clinical Supervisor
Ahmed Fahim	Clinical Supervisor
Ahmed Samy	Clinical Supervisor
Ahmed Mohamed	Clinical Supervisor
Hossam Ahmed	Clinical Supervisor
Ihab El-Nashar	Clinical Supervisor
Karim Wahba	Clinical Supervisor
Khaled El-Sheikha	Clinical Supervisor
Khaled Azmy	Clinical Supervisor
Magdy Tawfik	Clinical Supervisor
Mahmoud Rizk	Clinical Supervisor
Mahmoud Shokry	Clinical Supervisor
Mohamed Mahmoud	Clinical Supervisor
Mohamed Morad	Clinical Supervisor
Sayed Mostafa	Clinical Supervisor
Tarek Khalaf	Clinical Supervisor
Ahmed Reda	Neonatal Clinical Supervisor
Ahmed Abdel Salam	Neonatal Clinical Supervisor
Ahmed Tarek	Neonatal Clinical Supervisor
Aly Bayoumi	Neonatal Clinical Supervisor

Dahlia El-Sebaei	Neonatal Clinical Supervisor
Hala Atta	Neonatal Clinical Supervisor
Hisham Ali	Neonatal Clinical Supervisor
Mostafa Abdel Azeem	Neonatal Clinical Supervisor
Ossama Abdel Salam	Neonatal Clinical Supervisor
Salah El-Din Ahmed	Neonatal Clinical Supervisor
Sherif Mohamed	Neonatal Clinical Supervisor
Ismail El-Hawary	Neonatal Specialist
Maaly Guimei	Senior Nurse Advisor
Rosario Raz	Nursing Master Trainer
Abeer El-Kotb	Nursing Trainer / Supervisor (EOC)
Amira Morsy	Nursing Trainer / Supervisor (EOC)
Amaal Fathy	Nursing Trainer / Supervisor (EOC)
Azza Mohamed	Nursing Trainer / Supervisor (EOC)
Hamida Alam El-Din	Nursing Trainer / Supervisor (EOC)
Hanan Said	Nursing Trainer / Supervisor (EOC)
Hanan Abdel Fattah	Nursing Trainer / Supervisor (EOC)
Hoda AbdelAzeem	Nursing Trainer / Supervisor (EOC)
Nadia Abd-Allah	Nursing Trainer / Supervisor (EOC)
OmElSaad Farouk	Nursing Trainer / Supervisor (EOC)
Rasha Adel	Nursing Trainer / Supervisor (EOC)
Sabah Mohamed	Nursing Trainer / Supervisor (EOC)
Sahar younes	Nursing Trainer / Supervisor (EOC)
Sahar Moussa	Nursing Trainer / Supervisor (EOC)
Soad Ramadan	Nursing Trainer / Supervisor (EOC)
Enayat El-Sayed	Nursing Trainer / Supervisor (NC)
Heba Ezzat	Nursing Trainer / Supervisor (NC)
Marzouka Gadallah	Nursing Trainer / Supervisor (NC)
Rabab El-Sayed	Nursing Trainer / Supervisor (NC)
Randa El-Sayed	Nursing Trainer / Supervisor (NC)
Salwa Ali	Nursing Trainer / Supervisor (NC)
Entisar Mohamed	Nursing Trainer / Supervisor (OR/CSSD)
Gehan Ahmed	Nursing Trainer / Supervisor (OR/CSSD)
Iman Abdel Samea	Nursing Trainer / Supervisor (OR/CSSD)
Lobna Mohamed	Nursing Trainer / Supervisor (OR/CSSD)
Madiha Mohamed	Nursing Trainer / Supervisor (OR/CSSD)
Mervat AbdelKader	Nursing Trainer / Supervisor (OR/CSSD)
Sahar Ahmed	Nursing Trainer / Supervisor (OR/CSSD)
Sahar Nagieb	Nursing Trainer / Supervisor (OR/CSSD)
Safaa Mohamed	Nursing Trainer / Supervisor (OR/CSSD)
Yousria ElSayed	Nursing Trainer / Supervisor (OR/CSSD)
Said El-Dib	Community & Health Management Coordinator
Olivia Riad	Management Specialist
Donald Benson	Publications Coordinator
Assiut Field Office	
Abdel Aziz Mohamed	Maternal & Child Health Specialist
Tarek Abdel-Wahed	Health Planning & Management Specialist/ Field Office Manager
Mohamed Youssef	Community Development & Mobilization Specialist

Akram Yehia	Field Program Assistant (SHIP), Assiut & Sohag
Mahmoud Ahmed	Administrative Assistant
Mohamed Ali	Driver
Giza Field Office	
Marwan Abdel Fattah	Maternal & Child Health / Field Office Manager
Hala Mahmoud Sadek	Health Planning & Management Specialist
Ahmed Ramadan	Community Development & Mobilization Specialist
Ashraf Saad	Administrative Assistant
Mohamed Labib	Administrative & Logistical Assistant
Ibrahim AbdelMawgood	Secretary
Gamal Abdel-Azeem	Driver
Rabie AbdelNabi	Office Clerk / Messenger
Minia Field Office	
Gihan Shafik	Maternal & Child Health Specialist
Amgad George	Health Planning & Management Specialist Field Office Manager
Mostafa Sayed	Community Development & Mobilization Specialist
Ahmed Hosni	Field Program Assistant (SHIP)
Samah Khalifa	Administrative Assistant
Walaa AbdelMoneim	Secretary
Ahmed Al-Kassem	Driver
Gamal Ahmed	Office Clerk / Messenger
Sohag Field Office	
Gamal El-Korashy	Maternal & Child Health Specialist Field Office Manager
Ossama Ibrahim Mohamed	Health Planning & Management Specialist
Israa Ibrahim	Community Development & Mobilization Specialist
Ashraf Mostafa	Administrative Assistant
Mohamed Sayed	Administrative Assistant
Mohamed Badawi	Secretary
Hassan Abbas	Driver
Seoudi Fayez	Office Clerk / Messenger

ANNEX D: SUMMARY OF IMPLEMENTATION STATUS IN MINYA

Option Period

Status of Implementation

September 16, 2001 - September 15, 2003

Minya Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Minya Governorate

Project No.	Project Name	Project Type	Funding Source	Completed	Not Completed			Comments/ Action Required
					IFB Issued	Contract Awarded	Expected Date for Completion	
Minya District								
Minya District Hospital								
		CEOC	MOHP/ USAID/JSI	yes				
		NCU2	MOHP/ USAID/JSI	yes				
		CSSD	MOHP/ USAID/JSI	yes				
		OR	MOHP/ USAID/JSI	yes				
		LP	MOHP/ USAID/JSI	yes				
		ER	MOHP/ USAID/JSI	yes				
		Lab						
	Bank Medical Center		JSI	Yes				
	I.H.U.		JSI	Yes				
			JSI	Yes				
			JSI	Yes				
	El Gabal I.H.		JSI	Yes				
Sambout District								
Sambout District Hospital								
		CEOC	USAID/JSI	Yes				
		NCU2	USAID/JSI	Yes				
		CSSD	USAID/JSI	yes				
		OR	USAID/JSI	Yes				
		LP	USAID/JSI	Yes				
		ER	USAID/JSI	Yes				
		Lab						
22	Qulosna I.H.		JSI	Yes				
23	Daqoof I.H.							did not need renovation
24	El Saleba I.H.U.		JSI	Yes				
25	Manshiat El Sheraie I.H.		JSI	Yes				
26	El Baycho I.H.		JSI	Yes				

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
Abu Qirbas District							
3.1	Abu Qirbas District Hospital						
	CEOC	JSI	Yes				
	NCU	JSI	Yes				
	CSSD	JSI	Yes				
	OR	JSI/MOHP	Yes				
	LP	JSI	Yes				
	Abu Qirbas Integrated Health Unit	JSI	Yes				
Deir Mawas District							
Deir Mawas District Hospital							
	CEOC	MOHP	Yes				
	NCU	HMHC	Yes				
	CSSD	MOHP	Yes				
	OR	MOHP	Yes				
	LP	HMHC	Yes				
	ER						
4.2	Deir Mawas Maternity	JSI	Yes				
4.3	Nazlet Badraman Integrated Hospital	JSI	Yes				
4.4	Beit Harham Health Unit	JSI	Yes				
Beni Mazar District							
Beni Mazar District Hospital							
	CEOC		Yes				
	NCU		Yes				
	CSSD		Yes				
	OR		Yes				plan to renovate female OR, and make extension for CEOC, HMHC
	LP		Yes				
5.2	Sandafa Integrated Hospital	JSI	Yes				
5.3	Beni Ali Integrated Hospital	Social Fund	NO				It is expected to finish by the end of September.
5.4	Abu Garg Women Health Center	JSI	Yes				

1 - CEOCs & BEOCs

1.2 - COMMODITIES

Minya Governorate

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
Minya District					
Minya General Hospital					
	CEOC	Yes			
	NCU2	Yes			
	CSSD	Yes			
	OR	yes			
	LP	Yes			
	ER	Yes			
	Lab				
Suzan Mubarak Medical Center					
		yes			
Dangheer I.H.U.					
		Yes			
		Yes			
Ikingi I.H.					
		Yes			
Ikingi El Gabal I.H.					
		Yes			
Samalout District					
2.1	Samalout District Hospital				
	CEOC	Yes			
	NCU2	Yes			
	CSSD	Yes			
	OR	Yes			
	LP	Yes			
	ER	Yes			
	Lab				
2.2	Gulosna I.H.				
		yes			
2.3	Daqoof I.H.				
		Yes			
2.4	El Saleba I.H.U.				
		Yes			
2.5	Manshiat El Sheraié I.H.				
		Yes			

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
3	Abu Qurkas District				
	3.1 Abu Qurkas District Hospital				
		CEOC	Yes		
		NCU			to be delivered by March 2004
		CSSD	Yes		
		OR	Yes		
		LP	Yes		
3.2	Asmar Integrated Health Unit	Yes			
4	Deir Mowas District				
	4.1 Deir Mowas District Hospital				
		CEOC	Yes		
		NCU	Yes		
		CSSD	Yes		
		OR	Yes		Equipped By JESSICA. JSI provided only supplies
		LP	Yes		
		EP	Yes		
4.2	Deir Mowas Maternity	Yes			
4.3	Nazlet Badraman Integrated Hospital	Yes			
4.4	Beni Haraam Health Unit	Yes			
5	Beni Mazar District				
	5.1 Beni Mazar District Hospital				
		CEOC	Yes		
		NCU	Yes		
		CSSD	Yes		
		OR	Yes		
		LP	Yes		
5.2	Sandata Integrated Hospital	Yes			
5.3	Beni Ali Integrated Hospital	No	No		Pending Completion of Renovations
5.4	Abu Garg Women Health Center	Yes			

2 - District Health Planning & Management

Minya Governorate

Districts	ID	SMC Members Trained										MMSS Members Trained													
		Planning and Management Training (# trained)		Quality Improvement (# trained)		Data Use Training		# of Health Committee members Oriented		TOT (# trained)		Service Improvement Fund	District Health Plan Developed	Quarterly Review Reports	# of GSMCs Meetings	# of DSMCs Meetings	# of SMCs & HCAs Joint Meetings	SMC Members (# trained)		Health Offices (Physicians and Clerks) (# trained)		Ob/Gyn Specialists (# trained)		MMSS OJT (# of Days)	
		A	P	A	P	A	P	A	P	A	P							A	P	A	P	A	P	A	P
Minya Governorate		22		22		0	10	12		11		5			13		4	24		450		87		126	6
1	Minya District	17		17			19	20		8		10	2	5			4					45		13	
2	Bamalout District	16		16		4	15		3		10	2	5				4				8		19		
3	Abu Qurkas District	10		10		0	8	15		2		6	2	5			2		47		8		24	2	
4	Deir Mawas District	12		12		0	7	34		0		0	1	1			2		41		3		13	2	
5	Beni Mazar District	12		12		0	7	38		0		0	1	1			2		48		6		24	2	

Option Period

Status of Implementation

September 16, 2003 - September 15, 2004

Minya Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Minya Governorate

Anchor Facilities	Funding Source	Completed	Not Completed			Comments/ Action Required
			IFB Issued	Contract Awarded	Expected Date for Completion	
1 Minya District						expected awarding contract by January 2004
1.1 Minya District Hospital	HM/HC	NO	Yes			
CEOC	HM/HC	NO				
NCL	HM/HC	NO				
CSSD	HM/HC	NO				
OR	HM/HC	NO				
LR	HM/HC	NO				
2 Minya District						
2.1 Minya District Hospital	HM/HC	No	Not Comple			
CEOC						
NCL						
CSSD						
OR						
ER						
LR						
3 Baharro WHC						
3.1 Baharro WH						
3.2 Baharro PHU						
3 Mathey District						expected awarding contract by March 2004
3.1 Mathey District Hospital	HM/HC	No	Not Comple			
CEOC	HM/HC	No				
NCL	HM/HC	No				
CSSD	HM/HC	No				
OR	MOHP	Yes	Yes	Yes	Yes	
ER	MOHP	Yes	Yes	Yes	Yes	
LR	HM/HC					

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
4	Malawi District						
4.1	Malawi District Hospital	HM/HC	Yes	Yes	Yes	Yes	completed & functioning
	CEOC	HM/HC	Yes				
	NCU	HM/HC	Yes				
	CSSD	HM/HC	Yes				
	OP	HM/HC	Yes				
	EP		NA				
	LR		NA				
4.2	Malawi MC	JSI	NO				expecting awarding contract by January 2004
4.3	Om Komas RHC	JSI	NO				expecting awarding contract by January 2004
4.4	Kalandol IH	JSI	NO				expecting awarding contract by January 2004
4.5	Nwaya IH	JSI	NO				expecting awarding contract by January 2004
4.6	Bedford RHC	JSI	NO				expecting awarding contract by January 2004
4.7	Al Basheh WHU	JSI	NO				expecting awarding contract by January 2004

Anchor Facilities		Delivery			
		Delivered	Partial	Expected Date for Completion	Comments/ Action Required
4	Malawi District				
4.1	Malawi District Hospital				
	CEOC	Yes			
	NCU	Yes			
	CSSD	Yes			
	OR	Yes			
	ER	Pending Request from Dr. Khamis			
	LR	Yes			
4.2	Malawi MC				
4.3	Om Komos RHC				
4.4	Kalandoul IH				
4.5	Naway HG				
4.6	Beni Khaled WHC				
4.7	Al Barsha WHU				

1 - CEOCs & BEOCs
1.3 - Training
Minya Governorate

Legend		Minya Governorate																
		1.1	1.2	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	4.5	4.6	4.7		
		Minya Governorate	1.1	1.2	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	4.5	4.6	4.7	
Number of Physicians Trained	NC Physician Trained on Basic NC	Actual	5		12				10		23							
		Planned																
	NC Physician Trained on Advanced NC	Actual	5		12				10		13							
		Planned																
	NC Competency	Actual	4		8				5		7							
		Planned																
	NC Mastery	Actual																
		Planned																
	NC/ OJT (# of Days)	Actual	10		8				10		11							
		Planned	3		3				3		3							
	Number of Physicians Trained	EOC Physician Service Providers	Actual	3		15				6		17						
			Planned															
(EOC Basic Competency)		Actual																
		Planned																
(EOC Mastery)		Actual																
		Planned																
Number of Physicians Trained	EOC/ OJT (# of Days)	Actual	0		0						0							
		Planned	6		6						6							
	EOC Anesthesia	Actual	10															
		Planned																
	EOC Anesthesia Competency	Actual																
		Planned																
Number of Physicians Trained	EOC Anesthesia Mastery	Actual																
		Planned																
	EOC Anesthesia/ OJT (# of Days)	Actual	4		5				5		7							
		Planned	2		3				2		3							

Legend		Many Governments	1.1	1.2	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	4.5	4.6
			El Edeis DH	Al Hader H	Maghaya DH	Dahrms WHO	Baraba H	Dahrou HU	Mistry DH	Manshet Manshet WHU	Maklaw DH	Maklaw MC	Maklaw WHO			
Number of Physicians Trained	EOC (Infection control)	Actual	3		15				0		0					
		Planned	0		0				0		0					
	Infection control Team	Actual	0		0				0		0					
		Planned	0		0				0		0					
	IC Competency	Actual	0		0				0		0					
		Planned	0		0				0		0					
	IC Mastery	Actual	0		0				0		0					
		Planned	0		0				0		0					
	IC/OJT (# of Days)	Actual	0		0				0		0					
		Planned	0		0				0		0					
	Private sector (physicians)	Actual	7		32				3		11					
		Planned	0		0				0		0					
Private sector (pharmacists)	Actual	92														
	Planned	0														
Number of Nurses Trained	NC Nurses	Actual	3		6				4		3					
		Planned														
	NC Nurses Competency	Actual	3		6				3		3					
		Planned	3		6				4		3					
	NC Nurses Mastery	Actual	4		2				4		4					
		Planned														
	NC Nurses/OJT (# of Days)	Actual	6		6				7		12					
		Planned	2		2				2		2					
	EOC Nurses	Actual	2		3				6		5					
		Planned														
	EOC Nurses Competency	Actual														
		Planned														
EOC Nurses Mastery	Actual															
	Planned															
EOC Nurses/ OJT (# of Days)	Actual															
	Planned	6		6						6						

Legend Number of Physicians Trained <input type="checkbox"/> Number of Nurses Trained <input type="checkbox"/> Number of Lead Trainers Trained <input type="checkbox"/> HSMC <input type="checkbox"/>		Geographic Regions 1.1 1.2 2.1 2.2 2.3 2.4 3.1 3.2 4.1 4.2 4.3 4.4 4.5 4.6 4.7															
		1.1	1.2	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	4.5	4.6	4.7	
Number of Nurses Trained	Emergency Services for Nurses																
	Actual			10													
	Planned			5													
	ER Competency																
	Actual			4													
	Planned			4													
	ER Mastery																
	Actual			3													
	Planned			3													
	ER for Nurses/ OJT (# of Days)																
	Actual			8													
	Planned			9													
	OR Nurses																
	Actual																
	Planned																
	OR Competency																
	Actual																
	Planned																
	OR Mastery																
	Actual																
Planned																	
OR Nurses/ OJT (# of Days)																	
Actual		3	0					6		6							
Planned		0	3					0		0							
CSSD Nurses																	
Actual																	
Planned																	
CSSD Competency																	
Actual																	
Planned																	
CSSD Mastery																	
Actual																	
Planned																	
CSSD Nurses/ OJT (# of Days)																	
Actual		3	0					6		6							
Planned		0	3					0		0							

2 - District Health Planning & Management

Minya Governorate

Districts	SMC Members Trained										MMSS Members Trained													
	Planning and Management Training (# trained)		Quality Improvement (# trained)		Data Use Training		# of Health Committee members Oriented		TOT (# trained)		Service Improvement Fund	District Health Plan Developed	Quarterly Review Reports	# of GSMCs Meetings	# of DSMCs Meetings	# of SMCs & HCs Joint Meetings	SMC Members (# trained)		Health Offices (physicians and Clerks) (# trained)		Ob/Gyn Specialists (# trained)		MMSS OUT (# of Days)	
	A	P	A	P	A	P	A	P	A	P							A	P	A	P	A	P	A	P
Menya Governorate	22		22		0	10	12		11		5			12		3	49							80
6 El Edwa District						1											3							12
7 Meghagha District						2											4							12
8 Mattay District						2											5							12
9 Mallawi District						1											4							12

**ANNEX E: SUMMARY OF IMPLEMENTATION
STATUS IN ASSIUT**

Option Period

Status of Implementation

September 16, 2001 - September 15, 2003

Assiut Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Assiut Governorate

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
Gharb Assiut District							
El-Eman El-Gadida							
	CEOC	MOHP/ JSI	Yes				
	NCUR	MOHP/ JSI	Yes				
	CSSD	MOHP/ JSI	Yes				
	LR	MOHP/ JSI	Yes				
	OR	MOHP/ JSI	Yes				
	EP	MOHP/ JSI	Yes				
El-Arabason Urban Health Center		JSI	Yes				
Shark Assiut District							
2.1 Assiut General Hospital							
	CEOC	USAID/JSI	Yes				
	NCUR	USAID/JSI	Yes				
	CSSD	USAID/JSI	Yes				
	LR	USAID/JSI	Yes				
	OR	USAID/JSI	Yes				
	EP	USAID/JSI	Yes				
	Lab						
2.2 El-Waldia Maternity Center		JSI	Yes				
3 Markaz Assiut District							
3.1 Ob/Gyn. Hospital							
	CEOC	USAID/JSI	Yes				
	NCUR	USAID/JSI	Yes				
	CSSD	USAID/JSI	Yes				
	LR	USAID/JSI	Yes				
	OR	USAID/JSI	Yes				
3.2 Naga Sabaa Integrated Hospital		JSI	Yes				
3.3 El Moteaa Integrated Hospital		JSI	yes				

Anchor Facilities	Funding Source	Completed	Not Completed			Comments/ Action Required	
			IFB Issued	Contract Awarded	Expected Date for Completion		
4	El Ghanayem District						
	El Ghanayem District Hospital						
	CEOC	MOHP	Yes				
	NCU	MOHP	Yes			NCU extension done by JSI need a new incubator in washing room	
	CSSD	MOHP/ JSI	Yes				
	OP	MOHP/ JSI	Yes				
	LP						
4.2	Urban Health Center, Maternity	JSI	Yes				
5	El Kouseyah District						
5.1	El Kouseyah District Hospital						
	CEOC	HMHC		Yes	Yes	December	Complete renovation, interim space is used for CEOC and NCU
	NCU	HMHC		Yes	Yes	December	
	CSSD	HMHC		Yes	Yes	December	
	OP	HMHC		Yes	Yes	December	
	ER						
	LP	HMHC		Yes	Yes	December	
5.2	El Kouseyah Maternity	JSI	Yes				
5.3	Beni Korra Women Health Unit	JSI	Yes				
5.4	Fazara Integrated Hospital	JSI					
6	El Fath District						
6.1	El Fath Urban Health Center	MOHP	Yes				
6.2	El Atawila Integrated Hospital	JSI	Yes				
6.3	El Wasta Integrated Hospital	MOHP/JSI	Yes				not handed by the contractor

1 - CEOCs & BEOCs

1.2 - COMMODITIES

Assiut Governorate

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
Shoubra Assiut District					
	El Eman El-Gadida				
		Yes			
	Arabson Dash Health Center	Yes			
Mark Assiut District					
	Assiut General Hospital				
		Yes			
	El Wadwa Maternity Center	Yes			
Markaz Assiut District					
3.1	Ob/Gyn. Hospital				
		Yes			
3.2	Naga Sabaa Integrated Hospital	Yes			
3.3	El Moteaa Integrated Hospital	Yes			

Anchor Facilities		Delivery			Comments/ Action Required	
		Delivered	Partial	Expected Date for Completion		
4	El Ghanyem District					
	4.1	El Ghanyem District Hospital				
		CEOC	Yes			
		NCU	Yes			
		CSSD	Yes			
		OR	Yes		Equipped By JESSICA. JSI provided only supplies	
		LR	Yes			
	4.2 Urban Health Center, Maternity		Yes			
5	El Kouseyah District					
	5.1	El Kouseyah District Hospital				
		CEOC	Yes			
		NCU	Yes			
		CSSD	Yes			
		OR	Yes			
		ER	Yes			
		LR	Yes			
		5.2 El Kouseyah Maternity		Yes		
		5.3 Beni Kerra Women Health Unit		Yes		
	5.4 Fazzan Integrated Hospital		Yes			
6	El Fath District					
	3.1	El Fath Urban Health Center	Yes			
	3.2	El Alawla Integrated Hospital	Yes			
	3.3	El Wasta Integrated Hospital	Yes			

1 - CEOCs & BEOCs
 1.3 - Training
 Assiut Governorate

Legend		Assiut Governorate																
		Assiut Governorate	El Ekhwan El-Gharbi	El Ardousa (Urban Health Center)	Assiut General Hospital	El Wardia (Military Center)	El-Dokki Hospital	High School (Integrated Hospital)	El-Nahya (Integrated Center)	El-Gharbi District Hospital	Lower Health Center, Assiut	El-Karshat District Hospital	El-Khawaga (Mastery)	El-Fah El-Dokki (Health Unit)	El-Fah El-Dokki (Health Center)	El-Nahya (Integrated Hospital)	El-Nahya (Integrated Hospital)	
Number of Physicians Trained	NC Physician Trained on Basic NC	Actual	10		26		32				2		19					
		Planned									1		1					
	NC Physician Trained on Advanced NC	Actual	10		26		32				2		17					
		Planned									1		1					
	NC Competency	Actual	10		26		38				2		17					
		Planned																
	NC Mastery	Actual	1		4		2				1		1					
		Planned																
	NC/ OJT (# of Days)	Actual	45		50		48				44		26					
		Planned																
	Number of Physicians Trained	EOC Physician Service Providers	Actual	10		21	3	20	2		3		12	1		2	1	2
			Planned	0		0	0	0	0		3		4					
(EOC Basic Competency)		Actual	8		10		8			0		0						
		Planned	0		0		0			8		8						
(EOC Mastery)		Actual	1		1		1			0		0						
		Planned	1		9		1			8		8						
EOC/ OJT (# of Days)		Actual	3		3		8			72		27						
		Planned	0		0		0			18		27						

Legend		Number of Physicians Trained														
		Trained														
Number of Physicians Trained	EOC Anesthesia	Actual	5	9	2			1		3						
		Planned	0	0	0			0		1						
	EOC Anesthesia Competency	Actual	3	5	1			1		2						
		Planned	0	0	0			0		0						
	EOC Anesthesia Mastery	Actual	1	2	1			1		1						
		Planned	0	0	0			0		0						
	EOC Anesthesia/OJT (# of Days)	Actual	12	12	12			10		10						
		Planned	0	0	0			2		2						
	Number of Physicians Trained	Emergency Services for Physicians	Actual	8	13						8					
			Planned	5	10						5					
		ER Competency	Actual	11	11						5					
			Planned	4	8						4					
ER Mastery		Actual	5	5						2						
		Planned	3	5						3						
Emergency Services/OJT (# of Days)		Actual	14	17						9						
		Planned	16	16						8						
Laboratory Services for Physicians		Actual	6	13				2		6						
		Planned	0	5				0		0						
Laboratory Competency		Actual	**	9	2			2		**						
		Planned	0	5	0			0		0						
Laboratory Mastery		Actual	**	5	**			**		**						
		Planned	0	3	0			0		0						
Laboratory Services/OJT (# of Days)		Actual	3	16	**			**		3						

* Not included in pilot hospitals of EMS - No OJT, only attended classroom
 ** Not included in pilot hospitals of Lab. Services - No OJT, only attended classroom

Legend		Number of Physicians Trained <input type="checkbox"/>																
		1.1	1.2	2	2.1	3	3.1	3.2	4	4.1	5	5.1	5.2	5.3	6.1	6.2	6.3	
		Armed Governorate	El Gharbi El-Gharbia	El Bahariya Urban Health Center	Armed General Hospital	El Helwan Military Center	Cairo Hospital	Hugh Saban Integrated Hospital	El Manshiya Integrated Hospital	El Shamsiya District Hospital	Urban Health Center, Maternity	El Komouh District Hospital	El Manshiya Maternity	Bent Kham Women Health Unit	Fayoum Integrated Hospital	El Fakh Urban Health Center	El Manshiya Integrated Hospital	El Wadi Integrated Hospital
Number of Nurses Trained	NC Nurses	Actual	15		21					10								
		Planned				15						7						
	NC Competency	Actual	15		21					10								
		Planned				15						5						
	NC Mastery	Actual																
		Planned																
	NC Nurses/OJT (# of Days)	Actual	30		32		27			29								
		Planned										20						
	EOC Nurses	Actual	13		26		16			8		12						
		Planned	0		0		0			1		2						
	EOC Competency	Actual	3		5		3			4		4						
		Planned	0		0		0			0		0						
	EOC Mastery	Actual	2		4		2			4		4						
		Planned	0		0		0			0		0						
	EOC Nurses/ OJT (# of Days)	Actual								36		18						
		Planned								9		18						
	Emergency Services for Nurses	* Not included in pilot hospitals of EMS - No OJT, only attended classroom																
		** Not included in pilot hospitals of Lab Services - No OJT, only attended classroom																
	Actual	10		14						3 (Aug 03)		7						
	Planned	5		10								5						
ER Competency	Actual	8		9								3						
	Planned	4		8								4						
ER Mastery	Actual	5		6								2						
	Planned	3		5								3						
ER for Nurses/ OJT (# of Days)	Actual	15		17								9						

2 - District Health Planning & Management

Assiut Governorate

Districts	GASC	SMC Members Trained												MMSS Members Trained													
		Planning and Management Training (# trained)		Quality Improvement (# trained)		Data Use Training		# of Health Committee members Oriented		TOT (# trained)		Service Improvement Fund	District Health Plan Developed	Quarterly Review Reports	# of GSACs Meetings	# of DSACs Meetings	# of SMCs & HCs Joint Meetings	SMC Members (# trained)		Health Offices (physicians and Clerks) (# trained)		Ob/Gyn Specialists (# trained)		MMSS OUT (# of Days)			
		A	P	A	P	A	P	A	P	A	P							A	P	A	P	A	P	A	P	A	P
Assiut Governorate		22		22		0	10	17		10		11				15		5		25		148		110		131	
1	Gharb Assiut District	11		11			6	13		4		10	2	5			15	5	2		9		2				
2	Shark Assiut District	11		11			8	12		3		8	2	5			15	5	1		7		4				
3	Markaz Assiut District	15		15			14	15		2		5	2	5			15	5	9		25		29		12		
4	El Ghanayem District	9		9		0	6	25	20	1		5	1	1			5	2	1		6		5		3		
5	El Kouseyah District	12		12		0	7	33	30	0		6	1	1			6	2	1		16		21		28		
6	El Fath District	12		12		0	7	20	30	1		5	1	1			6	2	1		8		9		12		

Option Period

Status of Implementation

September 16, 2003 - September 15, 2004

Assiut Governorate

Workbook

1 - CEOCs & BEOCs
 1.1 - RENOVATION
 Assiut Governorate

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
Sohel Salem District							
1.1	Sohel Salem District Hospital	HM/HC	No		No		expected awarding contract by March 2004
		CEOC	No				
		NCU	No				
		CSB	No				
		LI	NA				
		OR	NA				
		ER	NA				
1.2	Sohel Salem MC	JSI	No	No	No		expected awarding contract by January 2004
El Basary District							
2.1	El Basary District Hospital	HM/HC	Yes	Yes	Yes	December	
		CEOC					
		NCU					
		CSB					
		LI					
		OR					
2.2	El Obayrah WHC (El Tadamon)	JSI	No	No	No		expected awarding contract by January 2004
Sohel District							
3.1	Sohel District Hospital	MOHP	Yes				need minor renovation in DR & ICU-January
		CEOC	JSI	No			
		NCU	JSI	No			
		CSB	MOHP	Yes			
		LI	MOHP	Yes			
		OR	MOHP	Yes			
		ER	MOHP	Yes			
3.2	Sohel MCH	JSI	No	No	No	No	
Doyrat District							
4.1	Doyrat District Hospital	HM/HC	No	No	No		expected awarding contract by March 2004
		CEOC	HM/HC	No			
		NCU	HM/HC	No			
		CSB	NA				
		LI	NA				
		OR	HM/HC	No			
		ER	NA				
4.2	Kodiet Mubarak THU	JSI	No				expected awarding contract by January 2004

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
Alamogordo District							
5.1	Alamogordo District Hospital	HM/HC	No	NO	No		expected awarding contract by March 2004
		HM/HC	No				
		HM/HC					
		HM/HC					
5.2	Al Maraha IH	JSI	No				expected awarding contract by January 2004
Marionville District							
6.1	Marionville District Hospital	HM/HC	No	No			expected awarding contract by March 2004
		HM/HC	No				
		HM/HC	No				
			NA				
			NA				
			No				
			NA				
6.2	EI Howard						
6.3	Amb Beni Shaker WHC	JSI	No	No	No	No	expected awarding contract by January 2004
7 Abe Teig District							
7.1	Abe Teig District Hospital	HM/HC		No			expected awarding contract by March 2004
		HM/HC	No				
			NA				
		HM/HC	No				
			NA				
		HM/HC	No				
			NA				
7.2	EI Dowina IH						

1 - CEOCs & BEOCs

1.2 - COMMODITIES

Assiut Governorate

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
1	Sahel Salim District				
1.1	Sahel Salim District Hospital	No	No		
	CEOC				
	NCU2	Yes			
	CSSD				
	LP				
	OR				
	ER				
1.2	Sahel Salim MCH				
2	El Bahary District				
2.1	El Bahary District Hospital				
	CEOC	Yes			
	NCU2	Yes			
	CSSD	Yes			
	LP	Yes			
	OR	Yes			
2.2	El Ohmaniya WHC (El Tadamon)				
3	Sedia District				
3.1	Sedia District Hospital				
	CEOC	Yes			
	NCU2	Yes			
	CSSD				
	LP				
	OR				
	ER				
3.2	Sedia MCH				
4	Dayrout District				
4.1	Dayrout District Hospital	No	No		
	CEOC				
	NCU2	Yes			
	CSSD				

1 - CEOCs & BEOCs
1.3 - Training
Assist Governorate

Legend		Assist Governorate	1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	6.3	7.1	7.2	
Number of Physicians Trained	<input type="checkbox"/>	Assist Governorate	1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	6.3	7.1	7.2	
Number of Nurses Trained	<input type="checkbox"/>	Assist Governorate	1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	6.3	7.1	7.2	
Number of Lead Trainers Trained	<input type="checkbox"/>	Assist Governorate	1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	6.3	7.1	7.2	
HSMC	<input type="checkbox"/>	Assist Governorate	1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	6.3	7.1	7.2	
Number of Physicians Trained	INC Physician Trained on Basic NC	Actual	9	8			3		20					9					
		Planned																	
	INC Physician Trained on Advanced NC	Actual	5	5			4		17					7					
		Planned																	
	INC Competency	Actual	3	4			4		13					5					
		Planned																	
Number of Physicians Trained	INC Mastery	Actual	1	2															
		Planned																	
	NC/ OJT (# of Days)	Actual	10	8			11		11				9						
		Planned	3	3			3		3				3						
	EOC Physician Service Providers	Actual	2	1			3		15				1						
		Planned																	
Number of Physicians Trained	(EOC Basic Competency)	Actual																	
		Planned																	
	(EOC Mastery)	Actual																	
		Planned																	
	EOC/ OJT (# of Days)	Actual																	
		Planned			6		6		6				6						
Number of Physicians Trained	EOC Anesthesia	Actual	10																
		Planned																	
	EOC Anesthesia Competency	Actual																	
		Planned																	
	EOC Anesthesia Mastery	Actual																	
		Planned																	
Number of Physicians Trained	EOC Anesthesia/ OJT (# of Days)	Actual	4	3		2		2		4		3					3		
		Planned	2	2		2		3		2		2					2		

		Number of Physicians																		
Legend	Trained																			
	Number of Nurses																			
Legend	Trained																			
	Number of Lead Trainers Trained																			
		HSMC																		
		Asst Govt	1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	6.3	7.1	7.2		
		Asst Govt	Siddh Vinay Hospital	Savitri Saini MC	Bhavya Dental Hospital	Bhuvanika WPC (E Tadmor)	Siddh Vinay Hospital	Siddh Vinay Hospital	Devi Dental Hospital	Devi Dental Hospital	Kooni Mubarak INJ	Dashite (H)	Asst Govt	Al-Jabbar (H)	Asst Govt					
Number of Physicians Trained	EOC (Infection control)	Actual																		
		Planned																		
	Infection control Team	Actual			1		1		1				5		5					2
		Planned			0		0		0				0		0					0
	IC Competency	Actual	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		Planned	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	IC Mastery	Actual	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		Planned	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	IC/OUT (# of Days)	Actual	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		Planned	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Private sector (physicians)	Actual			1		1		1				5		5					2
		Planned			0		0		0				0		0					0
Private sector (pharmacists)	Actual	164																		
	Planned	0																		
Number of Nurses Trained	NC Nurses	Actual	7	9			8		12											
		Planned																		
	NC Competency	Actual	4	6			5		7					4						
		Planned																		
	NC Mastery	Actual																		
		Planned																		
	NC Nurses/OUT (# of Days)	Actual	12	11			10		9					9						
		Planned	4	4			4		5					4						
	EOC Nurses	Actual	5	5					22											
		Planned																		
	EOC Competency	Actual																		
		Planned																		
EOC Mastery	Actual																			
	Planned																			
EOC Nurses/OUT (# of Days)	Actual																			
	Planned			6		6		6					6							

**ANNEX F: SUMMARY OF IMPLEMENTATION
STATUS IN SOHAG**

Option Period

Status of Implementation

September 16, 2001 - March 15, 2004

Sohag Governorate

Workbook

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
4	Tena District						
4.1	Tena District Hospital						
		CEOC		Yes	Yes	Feb. 04	
		NCL	Yes				
		CSSD		Yes	Yes	Feb. 04	
		OR		Yes	Yes	Feb. 04	
		ER					
		LR		Yes	Yes	Feb. 04	
4.2	Tena Urban Health Center		Yes				
4.3	Om Tena Integrated Hospital		Yes				
4.4	El Rayana Integrated Hospital		Yes				
5	El Balyana District						
5.1	El Balyana District Hospital						
		CEOC		Yes	Yes	Feb. 04	
		NCL		Yes	Yes	Feb. 04	
		CSSD		Yes	Yes	Feb. 04	
		OR	Yes				
		ER					
		LR		Yes	Yes	Feb. 04	
5.2	Al Sheikh Basma Women Health Unit		Yes				
5.3	Al Sheikh Marzouk Integrated Health Unit		Yes				
6	Dar El-Salam District						
6.1	Dar El-Salam District Hospital						
		CEOC		Yes	Yes	Dec. 03	
		NCL		Yes	Yes	Dec. 03	
		CSSD		Yes	Yes	Dec. 03	
		OR		Yes	Yes	Dec. 03	
		LR		Yes	Yes	Dec. 03	
6.2	El Naghamoosh Rural Health Unit		Yes				

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
	Genina District						
	Genina District Hospital	CEOC	HM/HC	Yes	Yes	Feb. 04	
		NCU	HM/HC	Yes	Yes	Feb. 04	
		CSSD	HM/HC	Yes	Yes	Feb. 04	
		OR	HM/HC	Yes	Yes	Feb. 04	
		LR	HM/HC	Yes	Yes	Feb. 04	
			JSI	Yes			
	El Gherazat Integrated Hospital		JSI	Yes			
	Genina District						
	Genina District Hospital	CEOC	JSI	Yes			
		NCU	JSI	Yes			
		CSSD	JSI	Yes			
		OR	JSI	Yes			
		LR	JSI	Yes			
	El Gherazat Integrated Hospital		JSI	Yes			
	Marouja District						
	Marouja District Hospital	CEOC	JSI	Yes			
		NCU	JSI	Yes			
		CSSD	MOHP	Yes			
		OR	MOHP	Yes			
		LR	JSI	Yes			
9.2	Shandawee Integrated Hospital		JSI	Yes			
9.3	El Gherazat Integrated Health Unit		JSI	Yes			

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required	
				IFB Issued	Contract Awarded	Expected Date for Completion		
Alhamein District								
10.1	Alhamein District Hospital	CEOC		HM/HC	Yes	Yes	Feb. 04	
		NCU		HM/HC	Yes	Yes	Feb. 04	
		CSSD		HM/HC	Yes	Yes	Feb. 04	
		OR		HM/HC	Yes	Yes	Feb. 04	
		LR		HM/HC	Yes	Yes	Feb. 04	
10.2	Nada Integrated Hospital		JSI	Yes				
10.3	El Keda Integrated Hospital		JSI	Yes				
El-Mounshaa District								
11.1	El-Mounshaa District Hospital	CEOC	JSI	Yes				
		NCU	JSI	Yes				
		CSSD	JSI	Yes				
		OR	JSI	Yes				
		LR	JSI	Yes				
11.2	El-Mounshaa Maternity Center		JSI	Yes				
11.3	El Zok El Sharada Integrated Hospital		JSI	Yes				
11.4	Awlad El Sheikh Woman Health Unit		JSI	Yes				
11.5	Awlad Hamza Integrated Hospital		JSI	Yes				

1 - CEOCs & BEOCs

1.2 - COMMODITIES

Sohag Governorate

Anchor Facilities	Delivery			Comments/ Action Required
	Delivered	Partial	Expected Date for Completion	
2.1.1 Shoubra El-Khayma District				
2.1.1.1 Shoubra El-Khayma General Hospital				
	CEOC	Yes		
	NCU	Yes		
	CSSD	Yes		
	LR	Yes		
	OR	Yes		
	ER	Yes		
	Lab	Yes		
2.1.2 Shoubra El-Khayma Integrated Health Unit		Yes		
2.1.3 Shoubra El-Khayma Integrated Health Unit		Yes		
2.2.1 Bahariya District				
2.2.1.1 Bahariya District Hospital				
	CEOC	Yes		
	NCU	No	No	will be delivered by March 2004
	CSSD	Yes		
	OR	Yes		Equipped By JESSICA JSI provided only supplies
	ER	Yes		
	LR	Yes		
2.2.2 Bahariya Maternity Center		Yes		
2.2.3 Bahariya Integrated Health Unit		Yes		
2.2.4 El Sawamaa Integrated Hospital		Yes		
3.1 Gerga District				
3.1.1 Gerga District Hospital				
	CEOC	No	No	Interim Commodities supplied until completion of Renovations
	NCU	Yes		
	CSSD	No	No	Pending Completion of Renovations
	OR	No	No	Pending Completion of Renovations

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
4	Tema District				
	4.1 Tema District Hospital				
					CEOC
		No	No		Interim Commodities supplied until completion of Renovations
		No	No		to be delivered soon
		No	No		NCL
		No	No		Pending Completion of Renovations
		No	No		CSSD
		No	No		Pending Completion of Renovations
		No	No		OR
		No	No		Pending Completion of Renovations
		No	No		ER
		No	No		Pending Completion of Renovations
		Yes			LF
		Yes			
	4.2 Tema Urban Health Center	Yes			
	4.3 Om Dooma Integrated Hospital	Yes			
	4.4 El Rayayna Integrated Hospital	Yes			
5	El Balyana District				
	5.1 El Balyana District Hospital				
					CEOC
		No	No		Interim Commodities supplied until completion of Renovations
		No	No		Pending Completion of Renovations
		Yes			NCL
		Yes			CSSD
		Yes			OR
		Yes			ER
		Yes			LF
		Yes			
	5.2 Al Sheikh Baraka Women Health Unit	Yes			
	5.3 Al Sheikh Marzouk Integrated Health Unit	Yes			
6	Dar El-Salam District				
	6.1 Dar El-Salam District Hospital				
					CEOC
		No	No		Interim Commodities supplied until completion of Renovations
		Yes			NCL
		No	No		Pending Completion of Renovations
		No	No		CSSD
		No	No		Pending Completion of Renovations
		No	No		OR
		No	No		Pending Completion of Renovations
		No	No		LF
		No	No		Pending Completion of Renovations
	6.2 El Naghameesh Rural Health Unit	Yes			

Anchor Facilities			Delivery			
			Delivered	Partial	Expected Date for Completion	Comments/ Action Required
7.1	Saqqa District					
	Saqqa District Hospital					
		CEOC	No	No		Interim Commodities supplied until completion of Renovations
		NCL	Yes			
		CSSD	No	No		Pending Completion of Renovations
		OR	No	No		Pending Completion of Renovations
		LP	No	No		Pending Completion of Renovations
	Saqqa Maternity		Yes			
	El Galweya Integrated Hospital		Yes			
8.1	Gebelna District					
	Gebelna District Hospital					
		CEOC	Yes			
		NCL	Yes			
		CSSD	Yes			
		OR	Yes			
	LP	Yes				
8.2	Enebis Integrated Hospital		Yes			
9	Maragha District					
9.1	Maragha District Hospital					
		CEOC	Yes			
		NCL	Yes			
		CSSD	Yes			
		OR	Yes			
	LP	Yes				
9.2	Shandaweel Integrated Hospital		Yes			
9.3	El Gherazat Integrated Health Unit		Yes			

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
	Al Mansan District				
	Al Mansan District Hospital				
		CEOC	No	No	Interim Commodities supplied until completion of Renovations
		NCL	Yes		
		CSSD	No	No	Pending Completion of Renovations
		OR	No	No	Pending Completion of Renovations
		LP	No	No	Pending Completion of Renovations
	El Zok Integrated Hospital		Yes		
	El Zok Integrated Hospital		Yes		
	El Mounshaa District				
	El Mounshaa District Hospital				
		CEOC	Yes		
		NCU	No	No	<u>will be delivered by March 2004</u>
		CSSD	Yes		
		OR	Yes		
		LP	Yes		
11.2	El Mounshaa Maternity Center		Yes		
11.3	El Zok El Sharfa Integrated Hospital		Yes		
11.4	Awlad El Sheikh Women Health Unit		Yes		
11.5	Awlad Hamza Integrated Hospital		Yes		

Number of Physicians Trained

Number of Nurses Trained

Number of Lead Trainers Trained

HSMC

Setting/Component	1.1	1.2	1.3	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	5.1	5.2	6.1	6.2	7.1	7.2	7.3	8.1	8.2	8.3	9.1	9.2	9.3	10	10.2	10.3	11	11.2	11.3	11.4	11.5
	El Shorouk	El Shorouk II	El Shorouk III	El Shorouk IV	El Shorouk V	El Shorouk VI	El Shorouk VII	El Shorouk VIII	El Shorouk IX	El Shorouk X	El Shorouk XI	El Shorouk XII	El Shorouk XIII	El Shorouk XIV	El Shorouk XV	El Shorouk XVI	El Shorouk XVII	El Shorouk XVIII	El Shorouk XIX	El Shorouk XX	El Shorouk XXI	El Shorouk XXII	El Shorouk XXIII	El Shorouk XXIV	El Shorouk XXV	El Shorouk XXVI	El Shorouk XXVII	El Shorouk XXVIII	El Shorouk XXIX	El Shorouk XXX	El Shorouk XXXI	El Shorouk XXXII	El Shorouk XXXIII	El Shorouk XXXIV

Number of Physicians Trained	Blood Bank Services for Physicians																																																																			
	Actual	Planned																																																																		
Blood Bank Competency	Actual	0																																		1			1			1			1			1			1			1			1			1			1			1		
	Planned	0																																		0			0			0			0			0			0			0			0			0			0			0		
Blood Bank Mastery	Actual	2																																		0			2			0			1			0			0			0			0			1			0			0		
	Planned	0																																		0			0			0			0			0			0			0			0			1			0			0		
Blood Bank/ OJT (# of Days)	Actual	12																																		6			8			6			6			4			4			4			6			6			6			6		
	Planned	0																																		0			0			0			0			0			0			0			0			6			0			0		
EOC (Infection control)	Actual																																			17			19			10			10			1			2			6			6			2			4			0		
	Planned																																			0			3			5			0			0			0			0			1			5			0			0		
Infection control Team	Actual	4																																		4			4			0			0			0			0			0			0			0			0			0		
	Planned																																			0			0			0			0			0			0			0			0			0			0			0		
IC Competency	Actual																																																																			
	Planned																																																																			
IC Mastery	Actual																																																																			
	Planned																																																																			
IC/OJT (# of Days)	Actual																																			9			9			7			1			0			0			7			7			0			0			0		
	Planned	2																																		4			2			4			4			2			2			4			3			2			4			4		
Private sector (physicians)	Actual																																			17			19			10			10			1			2			6			6			2			4			0		
	Planned																																			0			3			5			0			0			0			1			6			0			0			0		
Private sector (pharmacists)	Actual	135																																																																		
	Planned	0																																																																		

2 - District Health Planning & Management

Sohag Governorate

Districts	ASG	SMC Members Trained										MMSS Members Trained													
		Planning and Management Training (# trained)		Quality Improvement (# trained)		Data Use Training		# of Health Committee members Oriented		TOT (# trained)		Service Improvement Fund	District Health Plan Developed	Quarterly Review Reports	# of GSMCs Meetings	# of DSMCs Meetings	# of SMCs & HCs Joint Meetings	SMC Members (# trained)		Health Offices (physicians and Clerks) (# trained)		Ob/Gyn Specialists (# trained)		MMSS OJT (# of Days)	
		A	P	A	P	A	P	A	P	A	P							A	P	A	P	A	P	A	P
Sohag Governorate		17		17		10	11		11		8			11		4	26		132		78		132		
1 Sohag District		15		15			20		5		10	2	4		11	4	10		27		25		6		
2 Tahta District		14		14		5	22		6		8	2	4		11	4	2		12		13		9		
3 Gerga District		12		12		5	21		4		6	2	4		11	4	2		8		10		22		
4 Tema District		12		12		5	18		0		4	1	1		9	2	2		0		10		8		
5 El Balyana District		9		9		5	23		0		0	1	1		7	2	1		0		1		8		
6 Dar El-Salam District		9		9		5	16		0		0	1	1		7	2	2		7		1		8		
7 Saqolta District		9		9		5	24		0		0	1	1		5	2	1		27		2		20		
8 Geheina District		8		8		5	14		0		0	1	1		9	2	1		10		3		8		
9 Maragha District		9		9		5	20		0		2	1	1		5	2	2		11		3		16		
10 Akhmeim District		9		9		5	25		0		8	1	1		9	2	2		13		4		11		
11 El-Mounshaa District		12		12		5	22		0		0	1	1		8	2	1		17		6		18		

**ANNEX G: SUMMARY OF IMPLEMENTATION
STATUS IN GIZA**

Option Period

Status of Implementation

September 15, 2003 - December 15, 2004

Giza Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Giza Governorate

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
El Bahari El Baharya District							
El Bahari El Baharya District Hospital							follow up with MOHP to get the date of completion
	CEOC	MOHP	NO				
	CSSD	MOHP	NA				
	OR	MOHP	NA				
	Lab	MOHP	NA				
		MOHP	NA				
North Giza District							
El Fehr General Hospital							
	CEOC	HMHC	NO				
	MOHP	MOHP	NO				
	CSSD	MOHP	NA				
	OR	MOHP	NA				
	LR	MOHP	NA				
	ER	HMHC	NA				expecting awarding the contract by February 2004
El Bahari El Baharya District							
3.1 El Bahari District Hospital							
	CEOC	HMHC	No				
	CSSD	MOHP	NA				
	OR	HMHC	No				
	LR	HMHC	No				
3.2	Sool H. Group	JSI	No				expecting awarding the contract by February 2004
3.3	El Qababel IH	MOHP					new building under contract

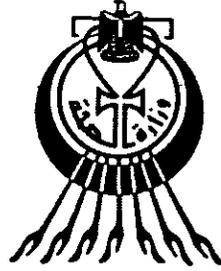
Anchor Facilities		Funding Source	Completed	Not Completed			Comments/Action Required
				RF Issued	Contract Awarded	Expected Date for Completion	
1	El Saifi District						
	El Saifi District Hospital	CEOC	JSI	No			
		CEOC		NA			CEOC & OR: as interim spaces by JSI
		OR	JSI	No			
		LF		NA			
1.2	Abo Fagan WHU						expecting awarding the contract by February 2004
							expecting awarding the contract by February 2004
							expecting awarding the contract by February 2004
							expecting awarding the contract by February 2004
2	El Badarahain District						
	El Badarahain District Hospital	CEOC	HMHC	No			
		CEOC	HMHC	No			
		OR	HMHC	No			
		LF	HMHC	No			
5.2	Badarahain Maternity		JSI	No			expecting awarding the contract by February 2004
5.3	Minshat Dohahour PHU		JSI				expecting awarding the contract by February 2004
6.3	Abo Fagan WHU		JSI				expecting awarding the contract by February 2004
3	El Ayat District						
	El Ayat District Hospital	CEOC	HMHC	No			
		CEOC	MOHP	NA			not handed over yet (similar to Jessica inside ER)
		OR	HMHC				
		LF	HMHC				
6.2	Nasria IHU		JSI				expecting awarding the contract by February 2004
6.3	Matania IHC		JSI				expecting awarding the contract by February 2004
6.4	Bamashit UHC		JSI				expecting awarding the contract by February 2004

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
7.0 Quesada District							
7.1	Quesada General Hospital	CEOC	HMHC	No			
		MOH	HMHC				
		CSD	MOHP	Yes			
		OP	MOHP	Yes			
		LF	HMHC				
7.1 Quesada District							
8.0 El Mesquite District							
8.1	El Mesquite District Hospital	CEOC	HMHC	No			
		NCE	HMHC	No			
		CSD	MOHP	NA			old and functioning -Ground Floor
		OP	MOHP	NA			old and functioning
		LF	HMHC	No			
8.2	MOH Center (Maturity)						
9.0 Ocasim District							
9.1	Ocasim District Hospital	CEOC	MOHP				
		MOH	MOHP				
		CSD	MOHP				
		OP	MOHP				
		LF	MOHP				
9.2	El Molokayo IH						
9.3	Nagua IH						
9.4	Sagua IH						
9.5	Kandau IH						
9.6	Bangui IH						
10.0 El Warrak District							
10.1	Gezeral Mohamed HU		JSI	No			expecting awarding the contract by February 2004
10.2	Bahuel IH		JSI				

Anchor Facilities	Funding Source	Completed	Not Completed			Comments/ Action Required
			FB Issued	Contract Awarded	Estimated Date for Completion	
Alameda County Jail	JSI	No				
Alameda County Jail	JSI	No				
Alameda County Jail						
Alameda County Jail						
Alameda County Jail	JSI	Yes				
Alameda County Jail	JSI	Yes				

Anchor Facilities		Delivery			
		Delivered	Partial	Expected Date for Completion	Comments/ Action Required
4	El Saff District				
4.1	El Saff District Hospital				
4.2	Arab Abu Saad PHU				
4.3	El Hay PHU				
4.4	El Saff Maternity				
5	El Badarahain District				
5.1	El Badarahain District Hospital				
5.2	Badarahain Maternity				
5.3	Marwan Dalghour PHU				
5.4	Abu Fagan PHU				
6	El Ayat District				
6.1	El Ayat District Hospital				
6.2	Nawab PHU				
6.3	Matarah PHU				
6.4	Damrah PHU				
7	Imbaba District				
7.1	Imbaba General Hospital				
7.2	MCH Center in Imbaba				

**ATTACHMENT A: AN OUTLINE OF A REGIONAL
CONFERENCE ON MMSS**



**Five Regional Conferences
to Present the
The Results of the National Maternal Mortality
Surveillance System 2002
and
Develop Governorate Plans to Further Reduce
Maternal Mortality**

Minya Governorate
Luxor Governorate
Dakahlia Governorate
Alexandria Governorate
Cairo Governorate

Minya Governorate Regional Conference

The Minya conference will include participants from:

- Fayoum
- Beni Seuf
- Minya
- Assiut

Luxor Governorate Regional Conference

The Luxor conference will include participants from:

- Qena
- Aswan
- Sohag
- Luxor

Dakahlia Governorate Regional Conference

The Dakhalia conference will include participants from:

- Dakahlia
- Sharkia
- Monofia
- Damiette

Alexandria Governorate Regional Conference

The Alexandria Conference will include participants from:

- Behira
- Kafr ElSheikh
- Marsa Matrouh
- Garbia
- Alexandria

Cairo Governorate Regional Conference

The Cairo Conference will include participants from:

- Cairo
- Giza
- Kalobia

Draft Agenda for the Governorate Regional Conferences

DAY 1

SESSION 1 **10:00-11:30**

9:00-10:00

Key Findings of The National Maternal Mortality Study 2000, and the National Maternal Mortality Surveillance Results, 2002.

An overview and comparison of the NMMS results for the 4 Governorates that are covered in this region.

Dr. Esmat Mansour,

Undersecretary, Integrated Health Care, MOHP and the Healthy Mother/Healthy Child Executive Director

10:00-10:30

Break

SESSION 2 **10:30-3:00**

10:30-03:00

Working Groups

- Review the results of the National Maternal Mortality Surveillance System (MMSS) 2002 for each Governorate to identify the avoidable causes and regional corrective actions.
- Develop a plan of action to reduce the Maternal Mortality Ratio (MMR) by the year 2007 for each Governorate and meet the national objective.

3:00-3:30

Lunch Break

DAY 2

Session 1 10:00-11:30

10:00-11:00

Opening Ceremony
Welcome Speech
Undersecretary , Governorate

Ministry of Health and Population Strategy and Plan to Further Reduce Maternal Mortality by the year 2007
Dr. Esmat Mansour
Undersecretary, Integrated Health Care, MOHP and the Healthy Mother/Healthy Child Executive Director

USAID's Role in supporting the MOHP in Reducing Maternal Mortality
Dr. Nahed Matta
Healthy Mother/Healthy Child HM/HC Team Leader, USAID.

Governor speech

11:00-11:30

Break

Session 2 12:00-3:30

11:30-12:00

Key Findings of the NMMS Surveillance System Nationally
Dr. Esmat Mansour
Undersecretary, Integrated Health Care, MOHP and the Healthy Mother/Healthy Child Executive Director

12:00-2:00

Presentations of the Governorate Plans for Reduction of Maternal Mortality

12:00-12:30

Plan to Reduce Maternal Mortality in Governorate 1
MOHP Undersecretary for Governorate 1

12:30-12:45

Discussion

12:45-1:00

Plan to Reduce Maternal Mortality in Governorate 2
MOHP Undersecretary for Governorate 2

1:00-1:15

Discussion

1:15-1:30

Plan to Reduce Maternal Mortality in Governorate 3
MOHP Undersecretary for Governorate 3

1:30-1:45

Discussion

1:45-2:00

Plan to Reduce Maternal Mortality in Governorate 4
MOHP Undersecretary for Governorate 4

2:00-2:15

Discussion

2:15-2:30

General Discussion and Closing
Moderated by Dr. Esmat Mansour

2:30-3:30

Lunch Break

**ATTACHMENT B: MOHP/ USAID/JSI MONTHLY
COORDINATION MEETING MINUTES**

DECEMBER 3, 2003

**MOHP/USAID/JSI Monthly Coordination Meeting
December 3, 2003**

Date:
December 3, 2003

Venue:
HM/HC Project Office

Time
13:30-15:00

Attendees:

Dr. Esmat Mansour	Undersecretary Integrated Health Care, HM/HC
Dr. Kahled Nasr	Executive Director, MOHP
Dr. Reginald Gipson	Deputy Executive Director, HM/HC, MOHP
Mr. Sobhi Moharram	Chief of Party, JSI
	Deputy Chief of Party, JSI

Purpose of the meeting:

- To review the preparation for the Regional Conference on MMSS results 2002 for Upper Egypt to be held in Minya.
- To review the functioning of MMSS and discuss how to strengthen and consolidate the system to reach all maternal deaths and provide timely and accurate data.

Conclusion and action points:

- A meeting to be held to discuss the discrepancies in births and deaths figures between CAPMAS, NICHIP and HM/HC to build a sound system for estimating MMR per governorate.
- Request the service of a consultant to assess the MMSS and propose recommendations for consolidation of improvement.
- Regarding the Regional Conference on the results of MMSS in North / Upper Egypt it was decided to be held on February 9-10, 2004.

ATTACHMENT C: TAHSEEN/JSI COORDINATION

MEETING MINUTES

DECEMBER 02, 2003

TAHSEEN and JSI Coordination Meeting
to Integrate FP/ MCH in Mallawi and Mattay Districts
Minya Governorate

Date:

Tuesday, December 2, 2003

Location:

TAHSEEN Project

Agenda

10:00 – 10:30 AM	District Profile for Mattay and Mallawi
10:30 – 11:00 AM	Planning & Management Manual Outline
11:00 – 11:30 AM	JSI Planned activities for the next quarter
11:30 – 12:00 PM	List of the selected BEOCs (cooperation in renovation)

List of Participants:

TAHSEEN

1. Dr. Ton van der Velden, Quality Improvement Specialist
2. Dr. Ingy Khorshid, Quality Specialist
3. Dr. Hossam Hamad, Planning & Implementation Specialist
4. Dr. Mawaheb El Mowelhy, NGO Specialist
5. Dr. Walid El Torgoman, Resident Consultant of Implementation

JSI

1. Mr. Sobhi Moharram, Deputy Chief of Party
2. Mr. Said El Dib, Health Management & Community Health Coordinator
3. Dr. George Sanad, Health Management Specialist
4. Mr. Khaled Abdel Fattah, Senior System Analyst
5. Ms. Dalia Hassan, Health Management Assistant

Highlights of Discussion and Action Points:

1. Districts Profile

JSI's Team prepared and shared the district profiles for Mallawi and Mattay. JSI team presented the criteria which was used to select the BEOCs and gave an overview on their physical status. The team mentioned that the BEOCs' selection was guided by the WHO Model, i.e. there should be at least one comprehensive obstetric care unit for every 500,000 people in addition to another 4 primary health care units.

Also, the team mentioned their priorities in selecting any of the BEOCs, which are the utilization rate, physical structure of the unit, transportation feasibility in addition to the presence of at least one general practitioner and a nurse to be trained on midwifery services.

It, also, was mentioned that it is preferable to select an Integrated Hospital or a maternity center before moving to the alternative choice which is the Rural Health Unit.

JSI team also provided TAHSEEN with a list of the selected BEOC's in Mallawi and Mattay.

It is agreed to provide TAHSEEN with the BEOCs' blue prints, the name of the contractor, and price quotation so that TAHSEEN could use the same contractor with the same prices. This will ensure the same quality, save time and efforts of bidding and supervision over the constructions. Also, the team suggested to hold a meeting between JSI and TAHSEEN's architects responsible for work implementation in Mallawi and Mattay for this purpose.

2. District Health Planning Process

2.1. Planning and Monitoring Indicators

Concerning the Family Planning indicators to be incorporated in District Profile developed by JSI, and be the basis for the planning process. TAHSEEN's Team promised to send the final copy after consulting the MOHP/ FP Central Department. The final approved copy of indicators is expected to be submitted by the end of this week.

2.2. Planning and Management Manual Outline

JSI Management Specialist started by introducing TAHSEEN's team to the orientation workshop and promised to send them the agenda. He also suggested to invite FP representatives to attend this workshop and give TAHSEEN a session to introduce FP to the participants from the DSMCs and the elected HCs members.

JSI Management Specialist gave a quick overview of the planning and management trainings concerning participants, agenda and topics discussed during the 3 day workshops. He also, showed how the agenda follows the planning and management manual developed by JSI, mentioned that workshop ends up with development of draft district HM/HC Plan.

JSI and TAHSEEN suggested to add one or two days to the JSI planning and management workshops to introduce FP terminology, concepts and indicators in addition to the procedures on how to develop the FP plan. By this the participants will have enough time to understand the FP concepts and get the full picture.

JSI Health Management & Community Health Coordinator presented how each district prepares its own plan in accordance with the national plan. He also, added that by April 2004, JSI should have all the 75 district plans including Mallawi and Mattay finalized in order to send them to the HM/HC Executive Director to be included in the HM/HC plan.

As for TAHSEEN, Dr. Ton needs to consult with Dr. Atef from the FP sector to incorporate the FP plan into the MCH district health plan.

2.3. Data Use Workshop

The JSI System Analyst introduced TAHSEEN's team to the objectives of the data use workshop and how it helps participants to interpret and analyze data and use it while formulating their plan. He also mentioned that he has already finished training to Mallawi and Mattay health districts teams.

3. NGOs in Minya Governorate

It was agreed that TAHSEEN's team will contact JSI Community Mobilization and NGOs specialists to get more information concerning the NGOs and community plans and activities in Mallawi and Mattay.

4. Quarterly Work Plan and Agenda (December 2003 – February 2004)

JSI provided TAHSEEN with the quarterly work plan and agenda for the planning and management and Quality Workshops that will be conducted in Mallawi and Matti during January and February 2004. Due time constraint, JSI will not be able to change set schedule.

4.1 Planning & Management

Activity	District	From	To
Orientation of 2 district DHCs and DSMCs	Mallawi & Mattay	January 05, 2004	
Training Workshop for DSMCs' members on Planning & Management	Mallawi & Mattay	Jan. 12, 2004	Jan. 14, 2004
Training Workshop for DSMCs' members on Planning & Management	Mallawi & Mattay	Feb. 09, 2004	Feb. 11, 2004

4.2 Continuous Quality Improvement

Activity	District	From	To
Training Workshop for DSMCs' members on Continuous Quality Improvement	Mallawi & Mattay	Jan. 20, 2004	Jan. 22, 2004
Training Workshop for DSMCs' members on Continuous Quality Improvement	Mallawi & Mattay	Feb. 16, 2004	Feb. 18, 2004

4.3 Community

Activity	District	From	To
One Community Needs Assessment Workshop (CNA)	Mattay	Dec. 07, 2003	Dec. 11, 2003
One Community Needs Assessment Workshop (CNA)	Mallawi	Dec. 14, 2003	Dec. 18, 2003
One Community Action Plan Development Workshop	Mattay	Dec. 16, 2003	
One Community Action Plan Development Workshop	Mallawi	Dec. 24, 2003	
Two Community Needs Assessment Workshop (CNA)	Mallawi	Jan. 11, 2004	Jan. 15, 2004
Two Community Needs Assessment Workshop (CNA)	Mallawi	Jan. 25, 2004	Jan. 29, 2004
One Community Needs Assessment Workshop (CNA)	Mallawi	Feb. 08, 2004	Feb. 12, 2004

5. Clinical Training

A meeting will be scheduled to further discuss this issue.

**ATTACHMENT D: WORLD EDUCATION / EGYPT
WOMEN'S INTEGRATED HEALTH AND LITERACY
ACTIVITY MEETING MINUTES**

SEPTEMBER 29, 2003

**World Education / Egypt
Women's Integrated Health and Literacy Activity**

Summary Meeting Notes

Time / Location:

At the request of the USAID-Egypt Health office, World Education hosted a meeting, on September 29, 2003 (3:00-4:00 p.m.), attended by representatives from three USAID-Egypt funded health activities.

Participants:

Meeting participants included:

Bill Potter	World Education Egypt
Reggie Gipson	JSI
Sobhi Moharram	JSI
Khaled Sayed	JSI
Ron Hess	Johns Hopkins
Madiha Said	Catalyst

Purpose:

The purpose of the meeting was to discuss coordination of the respective organizations' interest in collaborating with World Education's on the Ford-funded Women's Integrated Health and Literacy Activity.

Outcomes:

A summary of the main points discussed include:

- Ron Hess and Madiha Said each expressed interest in their respective USAID-funded health project's collaborating with World Education on up-coming integrated health and literacy materials development activities in Minya. Ron and Madiha both spoke of the anticipated benefits of inserting project related target health topics into the new integrated health and literacy lessons to be developed by World Education.
- World Education invited the Tasseen Catalyst and Family Health projects to join JSI in participating in World Education's Women's Integrated Health and Literacy Activity. Bill Potter explained that this is a Ford-funded activity operating under the auspices of a Memorandum of Cooperation signed in October 2002 by GALAE, MOHP, JSI, USAID, Ford Foundation and World Education.
- Bill explained that JSI, in close coordination with the Ministry of Health and Population has, since May 2000, been serving as the health technical advisor to World Education during the development and field testing of integrated and literacy materials. Bill Potter emphasized that the addition of two new health education partners (i.e. Tasseen and Johns Hopkins), to play a similar role needs to be well coordinated.

To ensure smooth coordination among the different USAID health projects on this activity, each organization agreed to appoint a representative to participate with World Education on the materials development activity process in Minya. This is to make sure that each organization has a) a common understanding of the materials development process and b) the opportunity to share in the development of the 10 new health and literacy lessons aimed to include target health messages important to achieving health education objectives particular to each organization.

- Sobhi Moharram assured Bill that Dr. Nahed Matta, USAID Health Program Officer, would be contacting Dr. Maha El-Adaway, Ford Foundation Reproductive Health Program Officer, to express USAID's interest in the process and eventual outcomes of the Women's Integrated Health and Literacy Activity, and to ask for Ford's approval to widen the scope of the activity to allow additional USAID health projects the benefit of adding particular health topics as part of the 10 new lessons.
- Bill clarified that Ford funding for this activity ends in June 2004 with an expected output of 10 draft lessons. Additional funding support will therefore be needed to finalize and implement the 10 lessons.
- JSI, Tasseen and Johns Hopkins agreed that each respective health project, will have benefited from the materials development phase, and therefore might be in a position to provide the resources needed for the implementation phase: large scale literacy teacher and supervisor training, field monitoring, and follow-up, consistent with the successful approach used by World Education during implementation of the original five lessons previously developed with JSI.
- The meeting concluded with an invitation by Bill for each organization to delegate a representative attend the Program Overview and Materials Development Orientation Meeting in Minya on October 1, 2003.

**ATTACHMENT E: WORLD EDUCATION / EGYPT
EXPANDED INTEGRATED HEALTH
AND LITERACY ACTIVITY**

PROGRESS REPORT -OCTOBER 2003

World Education / Egypt
Expanded Integrated Health and Literacy Activity

Progress Report -October 2003
Project Overview and Materials Development Orientation in Minya

INTRODUCTION AND OVERVIEW

In January 2003, World Education began implementation of the Ford-funded **Expanded Women's Integrated Health and Literacy Activity**, under the auspices of a Memorandum of Cooperation signed in September 2002 between GALAE, the Ministry of Health and Population, World Education, JSI, USAID, and the Ford Foundation.

As part of the Activity, World Education will work with project partners to build on the curriculum development work conducted during the pilot phase¹, to develop ten (10) additional integrated health and literacy lessons. In consultation with GALAE, JSI, and the Ford Foundation, World Education has selected the Minya Governorate (Malawi district), as the location to develop and test the new lessons during the period: October 2003 – June 2004.

PROGRAM OVERVIEW AND ORIENTATION IN MINYA

1. Meeting with the Minya Governor

World Education Egypt Country Director, Mr. Bill Potter, JSI Deputy Chief of Party, Sobhi Moharram, and the Central GALAE Activity Coordinator, General Mohamed Said, met with the Minya Governor at his office on October 1, 2003. The purpose of the meeting was for World Education and GALAE to introduce the Women's Integrated Health and Literacy Activity to the Governor and to seek approval for program implementation in Minya.

The Governor explained that all development work in the Minya governorate is planned and implemented using a process of teamwork and information sharing among the main governmental offices. The Governor had invited the Under Secretaries of Education and Health, the GALAE chief, and the Minya Governorate MIS chief to share in the program orientation discussion.

The meeting was very favorable and concluded with the Governor providing the following outcomes:

- approval and support for World Education and its partners to implement the women's integrated literacy activity in Minya.
- agreement with the selection of Malawi as the activity's pilot district in Minya.

¹ 5 integrated women's reproductive health and literacy lessons and a facilitator's guide were developed, tested and expanded to reach over 500 teachers and over 10,000 learners during the Activity's pilot phase: 2000 – 2002.

- encouragement for the MoE Undersecretary and the Governorate MIS chief to collaborate with the MOHP Undersecretary and GALAE on implementation of the Minya pilot phase. The meeting was televised in Minya, which greatly assisted to publicize the women's integrated health and literacy activity throughout the Minya governorate.

2. Minya Stakeholder Program Overview and Orientation Meeting

The World Education Egypt Country Director, Mr. Bill Potter, assisted by WEE Program and Training Assistant, Ms. Amal Aziz, facilitated a one-day Program Overview and Orientation Meeting at the Cleopatra Hotel in Minya Governorate on October 1, 2003.

Participants

Each of the main activity stakeholder groups was represented as follows:

Stakeholder	Number of Participants
Officials from Central GALAE & Minya Branch	5
Officials from MOHP	4
Officials from Minya Governorate Women's Affairs Dept.	2
Director of HM/HC Information Unit	1
Save the Children	1
John Snow Inc.	4
World Education/ Egypt	3
TOTAL	20

Please see the annex for a complete list of participants.

Objectives:

The objectives of the orientation meeting were:

1. to provide activity stakeholders with an overview of the Integrated Health and Literacy
2. to develop a shared understanding of the materials development activity to be implemented in Minya (i.e. to develop, pilot, and refine sample curricula that integrate women's health into literacy skills development);
3. to develop an activity outline for start-up and implementation in Minya; and
4. to solicit stakeholder input concerning the start-up process.

Program Overview and Orientation Meeting Agenda:

The following agenda was used for the one-day meeting.

- | | |
|--|-------------------------|
| ▪ Opening | 11:00 a.m. – 11:30 a.m. |
| ▪ Program Overview Presentation (Break for Prayer) | 11:30 a.m. – 12:30 p.m. |
| ▪ Action Plan Discussion | 12:30 p.m. – 1:30 p.m. |
| ▪ Wrap-up Discussion and Conclusion | 1:30 p.m. – 2:00 p.m. |

Opening Ceremony

The meeting opened with a series of speeches to introduce the purpose and context of the meeting and provide an overview of the overall activity. Welcoming and introductory remarks were made by the following people:

<u>Name</u>	<u>Affiliation</u>
Mr. Sobhi Moharram	JSI Deputy Director
Mr. Bill Potter	World Education/Egypt Country Director
Gen. Mohamed Said	GALAE Educational Services General Dept. DG
Dr. Kamel Raouf	MOHP Director General - Minya
Dr. Mohammed Badir	MOHP Deputy Director - Minya
Dr. Aymna Hassan	HM/HC Information Unit Director

Program Overview

Following the introductory speeches, World Education Egypt Program and Training Assistant, Ms. Amal Aziz, gave a PowerPoint presentation that outlined the goal, focus and approach of World Education's integrated literacy materials development process. The presentation also highlighted pilot phase achievements, with illustrative testimonials from participating literacy teachers and learners.

Open Air Discussion

Following the power point presentation, World Education distributed an activity start-up outline. Mr. Sobhi Moharram, JSI Deputy Chief of Party, facilitated a discussion about the start-up steps aimed at ensuring a common understanding and agreement among the participants about the proposed activities.

The following is a summary of the agreed upon start-up action plan.

- 1. Governorate Level Orientation Meeting**
The purpose of the governorate level orientation meeting is to orient stakeholders with the program's objectives and ensure their input during project start-up.
- 2. Field Visits to Literacy Centers and Health Clinics**
The field visits will provide an important opportunity to dialogue with women literacy learners in health centers, to identify what they consider to be the most important and relevant health messages to include in new integrated literacy lessons.
- 3. Orientation and Needs Assessment Workshop**
This workshop will draw on the specialized backgrounds and experiences of various project stakeholders to further discuss and analyze the health topics previously identified by women during the field visits and to select a final list of priority topics. This workshop will include literacy learners, teachers, supervisors, curriculum specialists, doctors, health outreach workers, and officials from the Ministry of Health and Population and GALAE.

4. **Field Assessment of Health Knowledge of Literacy Learners**
The purpose of the field test will be to: a) verify that the selected health topics are in fact important and are of interest to the target population; and b) to determine the literacy curricula and materials appropriate for the literacy levels of the female students.
5. **Materials Development Workshop**
Upon final selection of the health topics, a Materials Development Workshop will be attended by the same participant group from the Needs Assessment Workshop. A main objective of this workshop will be to clarify the list of target health messages, from each of the main health topics, to be included in the lessons.
6. **Materials Development: Preparation of Draft Health and Literacy Lessons with Illustrations and Technical Review**
World Education materials development experts will work with artists and graphic designers to lay out a set draft health and literacy lessons – stemming from the Materials Development Workshop.
7. **Teacher Orientation Workshop**
Once the draft lessons are complete, World Education will facilitate a Teacher Orientation Workshop to prepare the literacy teachers and their supervisors to field-test (teach) the lessons.
8. **Field Testing of Draft Materials**
The draft lessons will be field-tested in pilot literacy classes in Malawi district. A team of literacy and health specialists will field monitor this pilot teaching phase.
9. **Material Revision Workshop**
Following the field-testing, the draft lessons will be revised based on feedback - observations and lessons learned - from the field-test.
10. **Final Materials Production**
World Education will revise the lessons and materials as necessary before final production.

Wrap-Up Discussion

The Minya orientation meeting finished with a wrap up discussion in which participants raised the following main points.

- Participants expressed appreciation for such an activity focused on including general health messages - maternal and child health information in particular - into the literacy acquisition process.
- World Education's participatory and systematic approach was commended.
- The high degree of input and information shared during this meeting indicates strong stakeholder interest in the activity and anticipated high level stakeholder involvement throughout future stages of the program.
- The Minya stakeholders now share a commitment to and have a common understanding of the program's goals, approach and activity outline.
- The meeting achieved its primary objectives.

NEXT STEPS:

Immediately following the month of Ramadan, World Education will coordinate with GALAE, MOHP, and JSI to:

1. conduct field visits to Malawi district health centers and literacy classes to dialogue with women about priority health topics;
2. conduct a materials development workshop aimed at finalizing health content for the new 10 lessons to be developed.

Annex: List of Participants

Name

Affiliation

GALAE

- Gen. Mohammed Said
- Brigadier Gen. Yehya Moustafa
- Brigadier Gen. Hassan El-Shemi
- Medhat Mohamed Aly
- Hanan Ahmed Moussa

GALAE General Educational Services Dept. DG
GALAE Minya Branch Director – Minya
GALAE Minya Branch Public Relations Manager
GALAE Malawy District Director – Minya
GALAE Minya Branch Coordination Officer

HM/HC Project

- Dr. Amyna Hassan Lotfi

HM/HC Information Unit Director – Cairo

MOHP

- Dr. Kamel Raouf
- Dr. Mohammed Bader
- Dr. Afaf Omar Mohammed
- Dr. Hussein Mohammed Zaki
- Dr. Marseil Labib Kamel

MOHP Director General - Minya
MOHP Deputy Director – Minya
MOHP Basic Health Care Dept. – Minya
MOHP Health Education Dept. Director - Minya
MOHP Maternal & Child Health Care Director

Minya Governorate

- Amira Abdel Fatah Mohamed
- Maria Naeim Nasseif

Minya Governorate Women's Affairs Dept. Director
Minya Governorate Women's Affairs Dept. Officer

John Snow Inc.

- Sobhi Moharram
- Khaled El Sayed Mohammed
- Dr. Amged George Habib
- Moustafa Sayed Kamel

JSI Deputy Director – Cairo
JSI Community Development Manager- Cairo
JSI HM/HC Project Manager – Minya
JSI HM/HC Community Development Specialist –
Minya

World Education /Egypt

- Bill Potter
- Amal S. Aziz
- Lindsay Stein

WEE Country Director
WEE Program and Training Assistant
WEE Training Consultant

Save the Children

- Mona Monir Francis

Save The Children's Youth Sector Officer