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MANAGEMENT REVIEW OF
JOHNS HOPKINS PROGRAM FOR
INTERNATIONAL EDUCATION IN
GYNECOLOGY AND OBSTETRICS

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We wish to express our appreciation to the many persons who cooperated with us during the course of this Management Review. A list of those individuals is appended (Appendix A).

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EXECUTIVE SUMMARY

The management review team found that Johns Hopkins Program for International Education in Gynecology and Obstetrics Corporation's (JHPIEGO) handling of subagreements is the primary focus of the corporation's activities. This has produced a sophisticated, labor-intensive process that requires staff to dedicate substantial amounts of time to the development, approval, and monitoring of grantee projects because of the following factors:

- JHPIEGO's overseas training is largely a delegated process.
- Subagreements deal with a sensitive program area requiring detailed reviews of proposed efforts.
- Few of the host country grantees are skilled in proposal writing, and JHPIEGO must often assist in refining proposal language and structure.
- Subagreements are subject to federal procurement regulations through the flow-through principle and must therefore be carefully drafted.
- JHPIEGO does not have unrestricted funds to underwrite AID audit disallowances, and the corporation is therefore meticulous in developing subagreements.

The team found that JHPIEGO's organizational structure is appropriate for this central task and flexible enough to handle changing program emphases and varying conditions within the host countries.

Because of its structural flexibility, JHPIEGO has been able to garner efficiencies, for example, through the recent consolidation of its support units. Further utilization of this improvement is recommended by the team, particularly in the areas of information flow, planning, and travel. In addition, enhanced consultant use is recommended. However, these recommendations are made in the context of an analysis of AID's changing program emphasis and AID's impact on JHPIEGO's management.

Of course, AID greatly assists the accomplishment of JHPIEGO's goals by financing the corporation. However, AID's scheduling of contract awards generates abrupt changes in direction for JHPIEGO's planning and management. In addition, some basic financial monitoring definitions have apparently not been formulated and AID's attempt to utilize per-participant costs as a cost-benefit measure may have limited value. The

team's analysis indicates an approach for resolution of these outstanding issues. Beyond this, there appears to be a need to insure that AID missions or embassies in Africa have at least one person available to participate in JHPIEGO's programming if the corporation's operations there are expected to expand with efficiency.

Some generalizations are also drawn from the management review process implemented for this assignment. Recommendations in this area include improved consultant preparation, some standardization, and a change in focus for this type of assignment.

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ABBREVIATIONS

AID	Agency for International Development
FY	Funding Year
JHPIEGO	Johns Hopkins Program for International Education in Gynecology and Obstetrics Corporation
LDC	Less Developed Country
PMM	Peat, Marwick, Mitchell
RDO	Regional Development Office
TER	Travel Expense Reimbursement

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INTRODUCTION

The purpose of this assignment was to perform a management review of the Johns Hopkins Program for International Education in Gynecology and Obstetrics Corporation (JHPIEGO) and to make recommendations based on that review. The assignment's task order (Appendix B) was expanded into a detailed scope of work (Appendix C) and presented to the two consultants on the first day of the assignment.

After a briefing by Agency for International Development/Population Office (AID) staff, approximately 1 1/2 days (or 3 consultant days) were spent reviewing JHPIEGO material in AID files. Based on that review, the consultants developed an interview guide (Appendix D), which focused on what were considered the salient features of JHPIEGO.

The principal part of the assignment was carried out in the JHPIEGO offices in Baltimore from May 4 to May 13, 1983. A total of 13 consultant days were utilized. Five and one-half of these days were dedicated to orientation interviews scheduled by JHPIEGO for the consultants and a preliminary review of JHPIEGO material. The remaining consultant days were spent in analyzing data, principally through interviews and file reviews. The consultants discussed their tentative findings with three JHPIEGO top staff prior to closing out the field work.

This assignment focused on JHPIEGO's input--its management--rather than on its principal output--education and training programs in the field. The actual effect of these programs and JHPIEGO's relations in-country were assumed to be acceptable to AID, as broadly outlined in the January 19, 1981, observations made by an AID-funded evaluation team* repeated below:

1. JHPIEGO must take the credit for selecting appropriate subgrantees to be overseas project directors. These professionals have uniformly been excellent trainers and project administrators. In addition, they seem to be in sufficiently authoritative positions that they can politically influence initiatives in family planning and reproductive health, particularly in their own locale.

*APHA Assign. #582055: "An Evaluation of the Johns Hopkins Program for International Education in Gynecology and Obstetrics" by Pauru Bhiwandiwala, M.D.; Richard Derman, M.D.; Susan Fischman, Dr. P.H.; and Alfredo Goldsmith, M.D.

2. By virtue of its institutional base and its association with the highly respected Johns Hopkins University, JHPIEGO has been able to initiate programs in countries where, politically, family planning, and particularly voluntary sterilization, are highly suspect. In such countries as Brazil, Somalia, Sudan, Turkey, and Burma, JHPIEGO has established an effective foothold, and has thus been able to conduct programs that complement the activities of other USAID agencies and that often stimulate national governments to conduct follow-up programs.
3. The organization's name and reputation seem to lend it credibility and, as a result, training in voluntary sterilization, which often leads to service programs, particularly in Catholic and Muslim countries, seems to be accepted more readily.
4. The programs in laparoscopy, infertility, and sterilization reversal all enhance the image of JHPIEGO as an academic program, and not as a service delivery agency that is sponsored by the U.S. Government and that emphasizes voluntary sterilization and the distribution of contraceptives.
5. JHPIEGO's decision* to move away from stateside training and toward national and regional training is appropriate and more cost-effective, and it will result in better use of trainees' time. By combining didactic and practical training at a single site, often in a country with similar language and customs, JHPIEGO can more closely simulate actual field conditions for trainees.
6. The "international university to university approach" to training often crosses political barriers, permitting ministers, deans of medical institutions, and heads of departments to become involved in activities. Under other conditions, in some countries such involvement would be considered inappropriate or politically unwise.

*This decision was apparently part of JHPIEGO's original strategy (author's note, June 1983)

FINDINGS AND DISCUSSION

Appropriateness of JHPIEGO's Structure

Finding

The JHPIEGO structure is appropriate for its current scope of work and appears to be sufficiently flexible for adaptation to AID's changing program emphases.

Discussion

JHPIEGO was formed to achieve goals mutual to the Corporation and AID. Its central mission is to:

upgrade the knowledge, skills and technology of obstetricians, gynecologists, and other qualified professionals in the developing world, to make a critical evaluation and advance the diffusion of new methods of promoting reproductive health as they are developed, and to encourage the integration of those methods into the daily practices of medical professionals.*

The principal activities performed to achieve this mission are education and training programs. However, while the mission and program strategy have remained intact since the corporation's inception, the focus and structuring of activities and staffing patterns have changed, and continue to change to facilitate achievement of its mission. The major changes in JHPIEGO's educational approach can be broadly summarized as follows:

Phase I. In Phase I of the educational approach, training was originally structured for implementation primarily through U.S.-based programs, at Johns Hopkins University (JHU), the Washington University, the American University in Beirut, and the University of Pittsburgh, in collaboration with the Western Pennsylvania Hospital. Currently, U.S.-based training is provided only at one site, the Johns Hopkins Education Center. During funding year 1982, approximately 23 subagreements were made in LDC's for regional and national programs.

* Annual Report of the JHPIEGO Corporation, Fiscal Year 1982, pg.3.

Phase II. In Phase II of the educational approach, clinical practice for physicians trained in U.S.-based programs was offered at different institutions overseas. Currently, the technical training and clinical practice is largely part of the same in-country project that implements the didactic instruction.

Phase III. In Phase III of the educational approach, equipment is sent to the trained physician, and a JHPIEGO staff member, consultant, or project staff member assists in installation and provides instruction on care and maintenance. Although this process is currently similar in all major aspects, more volume is being handled in more varied circumstance than in earlier years.

JHPIEGO has made subtle alterations to its educational approach, but it is the larger reorientation, discussed above, which has led to significant changes in its organizational structure. The current organization chart, figure 1, incorporates the most recent changes. A detailed description of the "Basic Structure of the Corporation," a draft section of JHPIEGO's Procedures Manual, is attached to this report (Appendix E). A broad analysis of JHPIEGO's structure follows:

Three Regional Development Offices (RDOs) were added to JHPIEGO's initial structure to handle the overseas-based training programs. These offices are apparently organized around language groupings and workload demand. Thus, the African RDO handles a significant number of activities in Francophone Africa and develops projects in Francophone Caribbean countries; the Asian RDO has assumed the workload in three African Anglophone countries. Of the four staff positions within each RDO, two, the regional officer and the assistant regional officer, are traveling positions. The bulk of RDO activities appear to be concentrated on national and regional program development and implementation. Consultants, many of them JHPIEGO graduates, are primarily utilized for training program monitoring. The travel expense reimbursement (TER) days ratio between JHPIEGO staff and consultants is six to four, with staff averaging about 15 days per trip and consultants about half that much. These averages are perhaps the minimum level for a productive field trip, considering weekends, travel time, and the usual difficulties encountered traveling in LDC's.

The Baltimore Education Center's chief medical officer and training officer are responsible for the U.S.-based training. In addition, they have performed RDO program development work during periods of peak activity or understaffing in the RDO's. These activities are apparently a useful and logical outgrowth of refocusing JHPIEGO's educational and training programs from

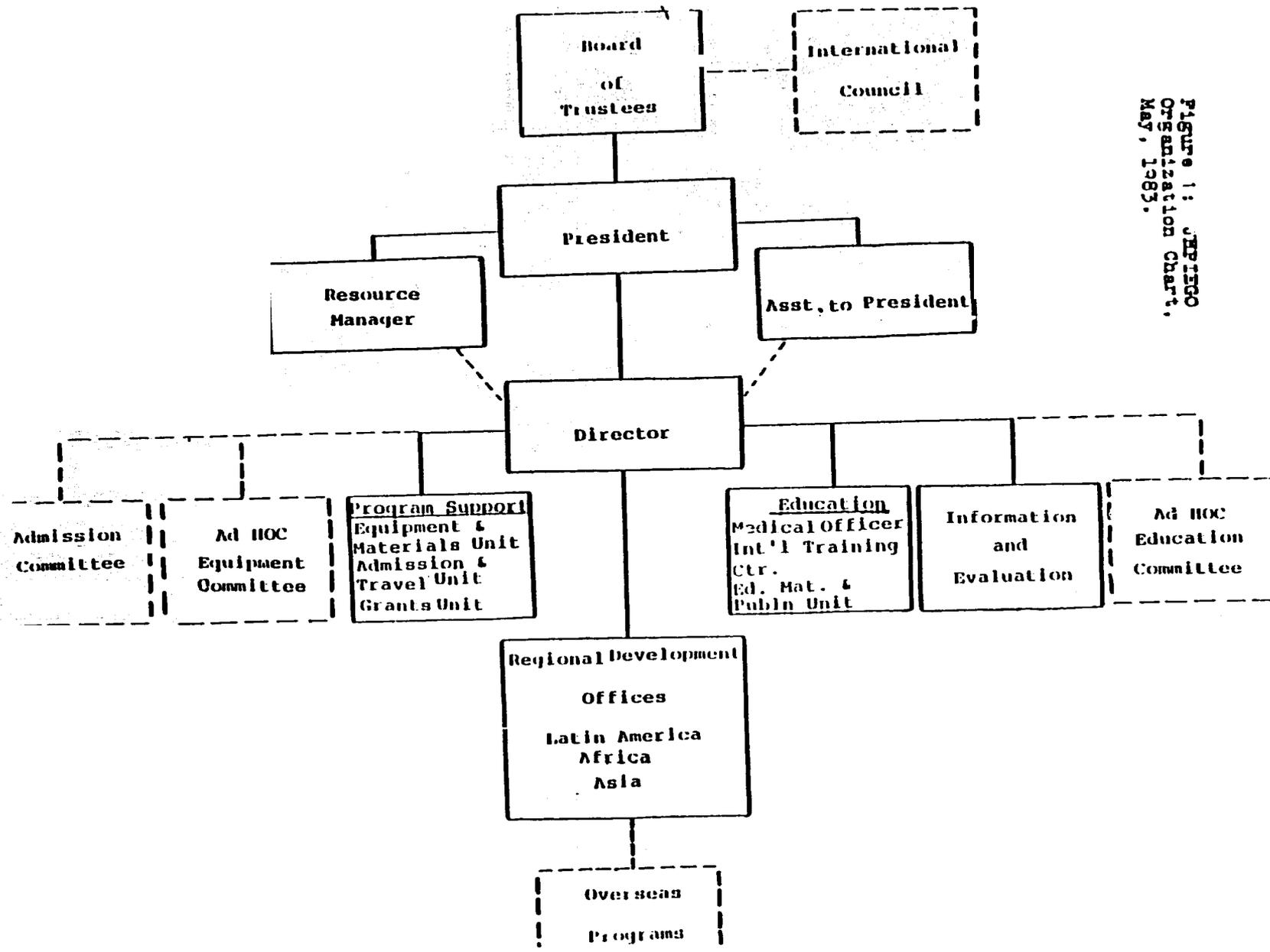


Figure 1: JPPiGO
Organization Chart,
May, 1983.

U.S.-based to overseas locations. Because of JHPIEGO's flexible RDO structure and the Baltimore Center staff's previous field work, AID proposed a 25 percent reduction in U.S.-based training, and increased in-country training will not require additions to the JHPIEGO repertoire or staff at this time.

Training at the Baltimore Center remains key to the JHPIEGO strategy. As noted above, the status of Johns Hopkins is assumed to be a calling card to open doors in countries where they would otherwise remain shut to population family planning programs. Beyond this, training at the Baltimore Center may provide an important element of quality control for JHPIEGO's worldwide program. Individuals who attend the U.S.-based training are overwhelmingly the source of regional and national projects. In effect, each potential project is exposed to a common set of standards. During the 1982 funding year, the U.S.-based training continued to reflect country and regional priorities, with nearly half the countries represented being from Africa.

In relation to the RDO's and the Baltimore Center's direct responsibility for implementing JHPIEGO's principal strategic activities, the staffing of these units appears shorthanded. For example, each of the three RDO units has a core staff of only four persons. However, the small staff numbers are possible primarily due to the centralization of staff and the structure of the corporation's support units.

Centralization of staff was historically necessary because the overwhelming number of JHPIEGO's activities took place in Baltimore. With increased delegation of training responsibilities and the introduction of RDOs, physical decentralization of staff did not occur. In the balance, centralization seems to favor JHPIEGO's programming for several reasons: A short problem-solving time between RDOs and central units; RDO staff availability for multicountry contacts during the Baltimore training; and the availability of JHU benefits, which attracted higher quality staff to JHPIEGO in the first place. The cost of in-country posting is increasingly an important consideration; the use of consultants substitutes to some degree. In the view of the management review team, physical decentralization would seriously disrupt JHPIEGO's operations, particularly in relation to the support units.

NOTE: JHPIEGO's support unit staffs largely provide professional program support rather than the secretarial/clerical work usually considered support functions. Thus, the number of support unit staff cannot be accurately placed on the support side of the usual professional-to-support-staff ratio.

The program support staff is organized into four units. The central organizational role of this staff is to perform the largely routine functions common to all RDOs. Clustering of functions in these units is made possible because of JHPIEGO's centralized operations.

Briefly, the Grants Unit is principally responsible for writing up each project proposal as a contract, insuring gross compliance, and insuring that contract and report data move through the JHPIEGO/AID system in an accurate and timely fashion. The Admissions and Travel Unit primarily regulates travel arrangements for staff, consultants, and training participants and insures that training program admission requirements, procedures, and clearances are accomplished in an efficient and timely manner. The Equipment and Educational Materials Unit is responsible for stocking, shipping, and maintaining equipment, directly or delegated, and stocking, sourcing, and reviewing educational materials.

Prior to JHPIEGO's most recent organizational change, these support units operated separately. Three are now under the supervision of one individual. This reorganization has reduced the number of people responsible for reporting to the director and provides a single contact point on a supervisory level between the units and the RDOs. The fourth unit, the Information and Evaluation Services Unit, also provides support but has not been included under the umbrella supervision because of its larger responsibility for storage, monitoring, and manipulating overall agency data and service on large tasks, such as the annual report.

The Admissions, Equipment and Education Committees are called on an as-needed basis. These are principally assembled from staff. They primarily assess emerging changes or problems in equipment and materials and review training program candidates. The Board of Trustees exercises fiduciary and policy responsibilities as JHPIEGO's governing body and actively participates in the program development process by reviewing project proposals. This latter task is often done by individuals rather than through an assembly. The International Council is selected by the board, largely from JHPIEGO fellows, and provides guidance and assistance on the general directions for JHPIEGO. The role of this council also appears to facilitate advocacy and feedback among the council members, reanimating their sensitivity and responsibility for reproductive health services in their countries. (The number of meetings of this body has been reduced to one every 2 years as a cost saving measure.)

Of the 42 full-time and eight part-time JHPIEGO employee positions, five were vacant at the time of the management review. Part-time positions average 50 percent time within a .20 to .94 range. The core program staff--RDOs, the Baltimore Center, and the four support units--are about 80 percent of JHPIEGO's total staff, of which 60 percent can be considered professional positions. (Within that category, Johns Hopkins distinguishes between professional and faculty employees.) This appears to be a reasonable staffing pattern for the nature of JHPIEGO's work.

It should also be noted that JHPIEGO personnel are Johns Hopkins University employees. Hiring standards, job classifications, and salaries are those of the university. This is perhaps unique to AID/population intermediary agencies. In addition, JHU pays salaries up-front and later bills AID--which represents a cash flow benefit for AID.

The Effectiveness of JHPIEGO's Programming

Findings

JHPIEGO's approach to project development and approval and subagreement monitoring are apparently well organized. Evidence of implementation delays indicate the possibility for fuller utilization of the system's potential.

Discussion

JHPIEGO's project development process has apparently been established in response to its corporate policies, AID regulations, the variety of LDC countries and institutions it deals with, and sound educational programming standards. The process has been broadly outlined by JHPIEGO in a section of its draft Procedures Manual (Appendix F). Briefly, the new project development steps are:

Identification of Potential Project Directors. This stage usually takes place during the didactic courses at the Baltimore Center, when RDOs responsible for programming in the countries most represented in the course are available to work with the participants. Other potential project directors are identified in the field by AID mission representatives, consultants, or JHPIEGO staff.

Field Visit for Project Development. This stage is reported to take place, on the average, about 2 months after the initial contact, when planned visits are made by JHPIEGO staff to the potential director at his institution. Potentially collaborating institutions, such as hospitals, universities, and ministries, are also visited.

JHPIEGO Approval. This stage includes several steps: A reworking of the field document by the RDO; review by the proposal review committee, meeting on a need basis; board approval; and a reworking of the proposal into a contract, which is called the agreement, or subagreement. The time span for completing these steps largely depends on the quality of the field document and the complexity of the proposed project.

AID Program Approval. There are two basic steps at this stage. In the first stage the proposal is sent to the relevant AID mission for approval, through the JHPIEGO project monitor. The second step is AID-Washington approval of the contract. If the contract involves costs of more than \$25,000, this latter step must include AID Contract Office approval.

JHPIEGO and Project Final Approvals. Once AID has approved the contract or subagreement, JHPIEGO gives final approval and sends the document to the project for signature. Advance monies may also be sent to the project at that time if the required financial form is correctly prepared and on file.

The average time from initial contact to receipt of the project proposal at JHPIEGO is reported to be about 2 months. JHPIEGO's internal reworking of the document and approval process evidences a median time of about 2 months for new training programs. Where the AID Contract Office is involved, an average turnaround time for AID approval is about 1.75 months. The total expected time is thus about 6 months.

This labor-intensive subagreement processing is installed at JHPIEGO in order to insure quality, well monitored programs. In effect it initiates a management control system over the implementation of a project. This system cannot directly control performance, but is rather designed to provide timely information to relevant JHPIEGO staff and consultants who are in a position to do something about problems as they emerge. Delays may be encountered throughout the processing, but this is often a symptom of the system's success rather than its failure.

JHPIEGO's proposal document is not considered simply a preliminary draft of the contract or subagreement. In part, the document's role is to maintain the potential project's original design by retaining much of the narrative and bridging expected information gaps resulting from board members' absence from day-to-day operations. The subagreement is administratively focused, for instance, through a consolidation of project deliverables and a per-participant cost budget. Both documents are the basis of JHPIEGO's management system. (An example of a proposal is found in Appendix G; an example of a subagreement in Appendix H.)

NOTE: Family Planning International Assistance (FPIA), another of AID's intermediaries, has apparently established a two-document system and has approximately the same expected time cited above for JHPIEGO.

In addition to providing a basis for management control, the proposal/subagreement documents formally initiate the process of institutionalization. The grantee agency must commit its staff for blocks of time as either project staff or trainees in a new process. This is reportedly agreed on by the implementing agency and JHPIEGO staff during the first stage of project development. However, the project must sign and implement the contract largely on its own, at which time delays appear in many projects. A total of 23 unsigned project documents were outstanding at the time of the management review. In addition, a substantial number of training projects received date-only extension amendments, evidently to allow them to complete activities delayed by a late start. These delays may be allowed because JHPIEGO's project management style may be more that of a collegial institution than a monitor. However, if the problem of delayed implementation is generally caused by the often typical response of institutions to a new process, then JHPIEGO may wish to make greater use of field-based consultants, particularly in Africa. These consultants could be on-call to assist startups and, for example, insure that projects are continued without interruption during project personnel turnover.

At the beginning of the current funding year, a JHPIEGO Project Director's Manual was produced. This is a comprehensive summary of project development and implementation. Its intended use as an operations manual is probably limited, if for no other reason because of its volume. However, it may well be an excellent reference tool for JHPIEGO staff and consultants in the field, in the way the Oxfam Field Director's Handbook is apparently utilized.

More important to the management control process at the stage of project implementation are the reporting forms and the grant management chart (Appendix I). A single training event may require the completion of 12 or more separate forms. Each project usually consists of multiple training events. Although there are time-orientated reports, the single training event triggers JHPIEGO's compliance system. The amount of detail gathered is comparatively enormous for an intermediary, but all of the information required is consistent with data expected in JHPIEGO's specialized training area. In addition, the system is consistent with the goal orientation of its per-trainee reimbursement financing.

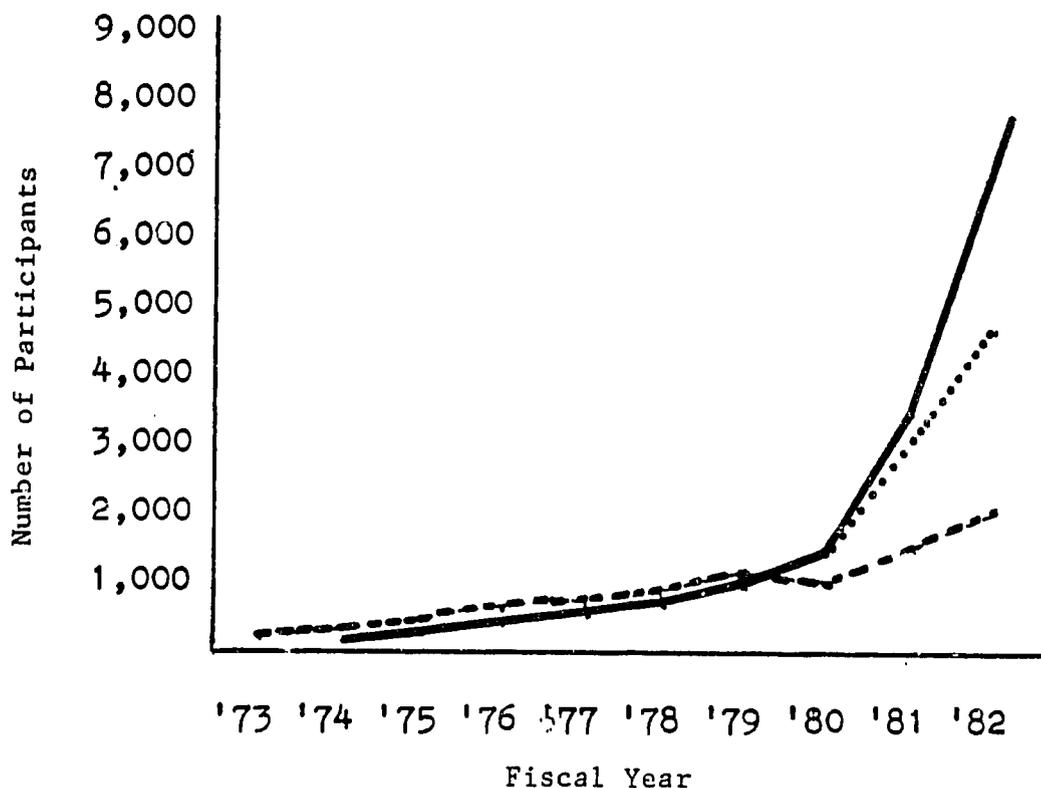
The sharp increase in the number of participants in in-country training programs since 1980 (figure 2), has obviously generated considerably additional volume for the management control system. JHPIEGO's consolidation of its support units, increased use of the JHU computer, and the addition of a second word processor and the recent leasing of a third are in response to this increased volume. There has apparently been little slippage on the quality of project management as a result. However, it should again be noted that only verification in the field can accurately judge the effectiveness of JHPIEGO's compliance system.

Another factor in project implementation and monitoring is the AID mission. Training applicants to the Baltimore Center and regional programs and much of JHPIEGO's document packets for in-country projects appear to be routed through AID missions. Population officers or other appropriate substitute personnel reportedly do not exist in many AID missions or embassies in Africa. This would best be corrected if AID expects to have JHPIEGO substantially increase its operations in that region.

In addition to the JHPIEGO staff and the utilization of its consultant network for monitoring, the corporation has contracted with Peat, Marwick, Mitchel (PMM), an international public accounting firm, to perform field audits of subgrantees. This agreement is a blanket contract against which individual work orders for specific audits are drawn. JHPIEGO's earlier subagreements had line item budgets, which are typically easier to audit than fixed price budgets. Since the newer subagreements are fixed price projects, this may require future subagreement audits to utilize a more sophisticated approach. Auditors will need to look at programmatic data such as the number of participants trained. This and other financial items are discussed in following sections of this report.

Figure 2.

*Cumulative Totals of JHPIEGO Participants by Fiscal Year



- All participants in regional and national training projects
- - - - All participants in US-based courses
- All participants in overseas courses for physicians, nurses and auxiliary health personnel, excluding medical and nursing students (for whom training began in FY'81)

*Source: JHPIEGO Annual Report, FY'82, pg. 20.

Pipeline Funds

Finding

Both AID and JHPIEGO representatives identified pipeline funds as an area that the management review team could usefully clarify. It has apparently been a topic of unresolved discussion for some time.

Discussion

The following definitions of terms are JHPIEGO's understanding of categories related to the issue of pipeline funds:

Outlays. Actual disbursements (checks written by JHPIEGO).

Unliquidated Obligations. Funds still to be disbursed by JHPIEGO, all bona fide obligations. For work under terms of signed subagreements, active purchase orders, and service agreements and for personnel and rent through September 30, 1983.

Pipeline. JHPIEGO's unobligated balance of AID authorized funds represents the funds authorized by AID for JHPIEGO less JHPIEGO's outlays and unliquidated obligations. The pipeline is equivalent to line M as reported on Federal Standard Form 269 (7-76), Financial Status Report.

The term outlays is used on the Financial Status Report which JHPIEGO prepares quarterly for AID's Financial Management Office, with a copy of the JHPIEGO program monitor. Outlays for the cooperative agreement as of March 31, 1983, were \$11,103,849.41 (line 10 G, column G of the Financial Status Report, Appendix J).

Under JHPIEGO's operational definition of unliquidated obligations, these bona fide obligations for which funds are still to be disbursed include the undistributed portion of signed subagreements, active purchase orders, service agreements, and payroll and rent costs. As of March 31, 1983, the amount of unliquidated obligations was \$4,111,533.83. A detail of this amount appears in Appendix K. This unliquidated obligations figure appears in the Quarterly Financial Status Report on line 10 J, column G (Appendix J). It should be noted that JHPIEGO has placed rent and salaries for the 6-month period of April 1 to September 30, 1983, in unliquidated obligations. Also placed in this category are subagreement funds for project contracts signed by JHPIEGO even though the subgrantee may countersign the contract

at a later date. It should be noted that, after finishing its field work, the management team was informed by phone that March 31, 1983, Financial Status Report was the first report where certain anticipated expenses for an extended period were included in unliquidated obligations.

Pipeline funds, operationally defined by JHPIEGO as the unobligated balance of AID authorized funds, totaled \$5,313,015.76 on March 31, 1983. This figure appears in the Quarterly Financial Status Report on line 10 M, column G (Appendix J).

The AID financial Management Office internal report, the Trial Balance of Unliquidated Obligations by Project (Appendix L), shows JHPIEGO's unliquidated balance as \$10,461,233.86, which varies significantly from JHPIEGO's own pipeline funds figure of \$5,313,015.76. Although the variance in these figures was not completely reconciled, several bookkeeping differences were found:

- The Trial Balance includes both the financial activity of the prior JHPIEGO grant, and the existing cooperative agreement. The Financial Status Report provides financial information only on the cooperative agreement. Thus, the unliquidated obligation of \$118,802.90 on the Trial Balance does not appear on the Financial Status Report. This sum is reportedly being held back by JHPIEGO in order to close out certain subagreements which are in the final audit process.
- The Trial Balance reflects no unliquidated obligations, only disbursements, which are equivalent to the category of outlays in AID's Financial Status Report. In effect, the Trial Balance does not acknowledge the \$4,111,533.83 of unliquidated obligations which JHPIEGO reports on the Quarterly Financial Status Report.
- The Trial Balance figures for the cooperative agreement are for a time period that is less than the one covered by the Financial Status Report, which includes figures for the entire cooperative agreement period.

Misunderstandings on the amount of pipeline funds are in part caused by having two sets of bookkeeping records: the Trial Balance and the Financial Status Report. These two would best be integrated for more effective reporting and monitoring.

Detailed information on monies in the pipeline was developed by JHPIEGO. The budget analysis (Appendix M) is based on the \$20.5 million authorized funds. This document ties into AID's Financial Status Report on March 31, 1983, providing for the

cooperative agreement a category-by-category detail of funds authorized, outlays, unliquidated obligations, and funds unobligated. The unobligated funds of \$5,313.015.76 represent JHPIEGO's cooperative agreement pipeline on March 31, 1983, assuming a funding level of \$20,528,399. Details of how JHPIEGO plans to spend these unobligated funds (Appendix N) are summarized in table 1.

NOTE: The program expenditure plan detailed in Appendix N is based on a \$20.5 million funding level. However, it is possible that AID may provide additional FY 1983 monies, and JHPIEGO has developed a contingency expenditure plan based on a funding level of up to \$24.5 million (Appendix M).

Table 1
JHPIEGO's Projected Spending of Unliquidated Obligations on March 31, 1983

Item	Dollars (in thousands)
Central Costs, Exclusive of Payroll	250
Planning and Development	374
Equipment	1,017
Training and Education:	
Participant costs	\$380,000
Field training	71,000
Education mat.	<u>307,000</u>
Subtotal (Appendix N-1)	2,399
Proposals in Process (Subtotal, Appendix N-2, rounded off)	1,500
Additional subagreements (Appendix N-3)	600
Nj-1 Agreement	<u>225</u>
Total (for JHPIEGO projected plan)	4,724
Total in pipeline	<u>5,313</u>
Remainder (in pipeline after program plan, rounded to \$600,000 in Appendix N-3)	<u>589</u>

Figures in the contingency plan are largely similar to those in the \$20.5 million expenditure plan, except for subagreement monies. This indicates that any additional funds that JHPIEGO receives under its current agreement will principally go into subagreements.

Sources or reasons for the seemingly large amount of pipeline and unliquidated obligations funds were examined. JHPIEGO draws down on its AID Federal Reserve Letter of Credit for disbursement of subgrantees on an as-needed basis. The corporation could draw down the entire amount allocated for the subagreement and disburse the monies to the subgrantee immediately upon final approval and signing of the subagreement. However, JHPIEGO exercises good programmatic and fiscal sense by disbursing monies to grantees on an as-needed basis rather than an up-front, lump sum. JHPIEGO's disbursement method of subgrantees is in conformity with recent Treasury circulars affecting AID's Financial Management Office.

In addition, a significant portion of JHPIEGO's unspent funds is attributable to Minilap Kits and Laproscope equipment purchases delayed by AID's as yet incomplete purchase order for these items. Also, an initial pipeline bulge was created in the early period of the cooperative agreement when additional monies were added to the prior grant, resulting in two checkbooks for a period of time -- one for the grant and one for the cooperative agreement. At that time, monies were primarily being spent out of the grant. As noted in the first discussion in this report, approximately 6 months is the expected time for a subagreement to be developed from initial contact to AID approval. Thus, a significant portion of the pipeline represents overseas project proposals which are working their way through the subagreement system.

The management review team made no attempt to validate the JHPIEGO pipeline expenditure plan. Such an analysis was beyond the work scope.

Per-Participant Costs

An internal AID memorandum dated April 29, 1983 (Appendix O) recommended that the management review team examine JHPIEGO's per-participant costs.

Discussion

In response to an earlier AID request, JHPIEGO developed a chart of their per-participant costs (Appendix P) by type of training, location of training, and type of participant. However, caution must be used in accepting this chart as data, for the following reasons:

- U.S.-based training tuition costs represent fees paid to JHU. These costs do not include JHPIEGO's central support expenses, such as salaries of JHPIEGO training personnel.

- U.S.-based training costs do not take into account that project development is taking place while the participant is on location. (This process is described under the first finding of this report.) By meeting with potential project initiators in Baltimore rather than in the field, the number and cost of field trips for project development purposes is reduced.
- The per-participant cost figures are averaged, since there are a number of key variables to be considered, the length of the course, the distance to be traveled by each trainee, and the type of trainee (e.g., practicing physicians or medical students). The effect of these variables on per-participant costs is aptly demonstrated in Jamacia: A weekend, clinical practice training session resulted in a \$91 per-participant cost, while a 4-day didactic training session in the same country cost \$227 per participant.

JHPIEGO's difficulty in developing meaningful cost per-participant data to determine program efficiency is not unique to the corporation. Nonprofit organizations that provide services generally have difficulty in translating their activities into cost-benefit terms. In the private sector, cost-benefits are relatively easy to quantify, where cost-benefits might be arrived at through the following formula:

$$\frac{\text{Cost}}{\text{Benefits}} = \frac{\text{Dollar Inputs (investment)}}{\text{Outputs (profits)}} = \text{Return}$$

Unfortunately, cost-benefit analysis does not lend itself to such ready treatment in nonprofit agencies. In JHPIEGO's case, the dollar inputs vary. For example, in the U.S. training program, JHPIEGO's central support costs are not included in the dollar inputs, while in some of the subagreements central support costs may be factored into the per-participant tuition. However, the dollar inputs for U.S.-based training are not only for the training dimension, but have an overseas project development dimension as well.

The difficulties of quantifying apply to the benefits (denominator) of the fraction as well. While one can use the number of participants as an indicator of benefits, it is difficult to determine the quality or effectiveness of the training. In the case of JHPIEGO, production is not a standard trainee, in a standard training program, for a standard amount of time, at a standard location. It is difficult to articulate per-participation costs in general, and even more difficult to compare those costs to costs per-participant for other AID intermediaries.

In spite of the difficulties in assessing per-participant costs as a measure of program effectiveness, JHPIEGO is monitoring relevant data (Appendix Q). JHPIEGO has used per-participant cost data to help determine if the per-participant charges on subagreement proposal budgets are realistic. However, the use of per-participant cost data by outside organizations appears to have limited value, given the number of cost variables involved.

AID's Financing Schedule

Findings

AID has yet to determine the amount of JHPIEGO's funding after September 30, 1983. AID may make additional funds available to JHPIEGO for fiscal year 1982-83.

Discussion

The pattern of waiting until very late in the award period to inform JHPIEGO of AID's financing package has created some anxiety within JHPIEGO and made it difficult for the corporation to plan its program. This brink-financing also occurred at the end of the prior grant period. The result of this financing pattern appears to be a two stage process in JHPIEGO.

In the first stage, JHPIEGO is anxious about its legal and ethical responsibilities in giving adequate termination notice to employees, keeping in mind that faculty members of the JHPIEGO staff must be given notice well in advance of termination. At the same time, JHPIEGO is concerned about entering into subagreements that go beyond the current award period. While AID may assume that it will fund JHPIEGO beyond the existing award period, JHPIEGO staff, in exercising prudent management, and the Corporation Board, exercising its prudent fiduciary responsibility, may not share in that assumption. As a result, a tacit plan is made for going out of business.

In the second stage, JHPIEGO is informed of AID's financing package, which may include funds for the award period about to end. JHPIEGO thus moves from stage one, a period of conservative program development and management, into stage two, a period of extensive program development and management. During this latter stage, JHPIEGO must plan how to effectively absorb and program the additional funds, the amount of which may not be known until very late in the period.

Fully appreciating many of the constraints which AID faces in trying to approve and inform award recipients of the timing and amount of a financing package, the brink-financing relationship that has developed between AID and JHPIEGO should be studied to determine if an earlier approval and announcement of the financing package can be achieved. Brink-financing by its dominant fundor does not allow for optimum strategic planning by JHPIEGO.

The Management Review Process

Findings

The definition and role of the management review was initially unclear to AID, JHPIEGO, and the management review team. Management reviews are being planned for other AID/population intermediary agencies.

Discussion

AID-financed consultants carry a variety of messages to the different groups involved in their activities. In both AID and JHPIEGO, the team was often identified as auditors or evaluators. If a management review is indeed something other than an audit or evaluation, this should be articulated to more effectively focus the task. A definition or conceptual approach clearly stated also affects such key issues as the degree to which the management review team engages the intermediary; deals with intermediary financial, contractual, or program compliance; and acts as a resource (i.e., providing technical assistance to the intermediary).

It is extremely difficult if not impossible to isolate an intermediary's management system from what the intermediary does programmatically. This has at least two ramifications for a management review team: The team needs background documents to analyze well in advance of the assignment; and the review team should include a person who is familiar with the program area in which the intermediary works. Examples of some of the materials to be reviewed include program evaluations (both internal and external), program reports, selected overseas trip reports (AID and intermediary), the project paper, and any written overall organizational program plan that may have been developed by intermediary staff or board.

An objective, comprehensive management review must consider AID procedures and policies which have a key effect on the intermediary's management system. For instance, the timing and amount of AID's financing package to the intermediary may have a considerable effect on the intermediary's planning system. Also, how the intermediary must relate to the various organizational components of AID--the program monitor, AID's Regional Offices, AID's Contract Office, and AID's in-country missions--impacts on the intermediary's management system, strategic planning, and implementation schedule.

To the extent possible, comparable documents should be utilized as the basis for management reviews of intermediaries. A standard set of documents would allow better preparation of the review team, facilitate data collection in the field, and strengthen quality control across all management reviews. In addition, it would be useful to develop a core scope of work for all management reviews, to which could be added elements that are unique to particular intermediaries. With some modification, the eight-point scope of work for this assignment could be utilized as the basic document.

AID may want to refocus its management reviews. JHPIEGO has received a comprehensive evaluation and an exhaustive audit in the recent past. The management review team learned that the AID Audit Office plans an audit of JHPIEGO during 1984. Other AID intermediaries have apparently had similar experiences with numerous audits and evaluations. Given the limited time and geographical coverage of the JHPIEGO assignment, the consultants attempted to use examination and verification as a working definition for the review. However, compliance systems can be well ordered and produce believable data, but the team may still not be scanning all the correct data. While this does not appear to be the case with JHPIEGO, complete verification can only be made in the field.

In addition, a random cross-section of an organization does not permit much in-depth analysis. During the time of this review, a Baltimore training course was implemented, a key RDO-Africa staff member was in the field, and the organizational workload was peaking. The preferred timing for this kind of assignment would be during a period when the organization could suspend much of its activities and assist the consultants in analyzing its process, leading to better diagnostic formulation which could enhance AID's monitoring approach.

RECOMMENDATIONS

The management review team makes the following recommendations.

Overall Management and Strategy

- That AID recognize that JHPIEGO's staff size and organizational structure is in part caused by AID's emphasis on in-country programs and AID's terms and conditions. Administratively, intensive subagreements are necessarily a result of these factors.
- That the AID restriction on JHPIEGO/Baltimore training for Latin American health personnel be reconsidered. This restriction appears to view the region as one country. It has been noted, however, that Bolivia has not participated in the general expansion of Latin American health systems to include comprehensive reproduction health services. JHPIEGO's traditional approach may be particularly effective to begin the process in such countries.
- That AID recognize that the apparent lack of population officers in several African countries inhibits JHPIEGO's programming, and that several African countries are being serviced by many intermediary agencies. Country strategy meetings with intermediary agencies and AID missions in-country may generate improved programming.

Project Development, Implementation and Monitoring

- That, particularly in view of the proposed increase African training emphasis, JHPIEGO more fully utilize the potential of its current structure by formally assigning the Baltimore chief medical officer and training officer to part-time work in Africa, shift more routine tasks from the African RDO to the support unit, team staff and consultants for project development, and utilize temporary consultants in Africa to reduce the apparent time lag between project approval and project implementation.
- That JHPIEGO continue to enhance the apparent efficiencies gained by grouping its support units by implementing RDO quarterly travel planning,

conveying RDO project report data more rapidly to the Grants and Equipment Units, establishing firm contacts with potential equipment managers during the initial stages of proposal development, and increasing RDO average time in the field per trip.

- That AID recognize that JHPIEGO may require more RDO staff to handle any sharp increase in projects and training programs and still maintain quality programming, particularly in Africa, where AID mission and in-country institutions are less sophisticated in their approach to the population program.
- That AID recognize per-participant reimbursement as a program goal-focused technique rather than a cost-center formula. Program type, quality, length, and number of participants are affected by widely diverging variables from region to region, country to country, institution to institution, and project to project.

Financial Management

- That AID and JHPIEGO agree to mutually acceptable definitions of pipeline funds and unliquidated obligations.
- That AID's Trial Balance Report be integrated with its Financial Status Report to provide AID personnel with a clearer understanding of JHPIEGO's financial status.

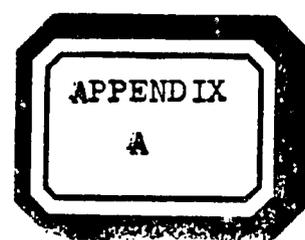
Funding

- That, while appreciating the constraints on AID, brink-financing relationship between AID and JHPIEGO be studied to determine if an earlier approval and announcement of the financing package can be routinely achieved.

The Management Review Process

- That, for either management reviews or verification reviews, AID insure that its operational definitions do not have the effect of isolating the intermediary's management system from what the intermediary does programmatically.

- That future management reviews utilize the second, more complete scope of work developed for this assignment as a basis along with a standard, comparable set of documents from each intermediary.
- That future management reviews insure that at least one team member is familiar with the intermediary's program area.



PRINCIPAL CONTACTS

U.S. AID

A. Wiley	J. Pittenger
J. Speidel	B. Case
S. Sinding	D. Denman
A. Aarnes	J. Shallcross
R. Corno	H. Destler
J. Burdick	

JHPIEGO

T.M. King, President
C. Ellis, Assistant to the President
R.T. Burkman, Director
J. Blouse, Resource Manager
K. Raja, Regional Officer
B. Carlson, Regional Officer
M. Fernan, Assistant Regional Officer
J. Heroux, Assistant Regional Officer
M. Villacres, Regional Office Coordinator
D. Wilson, Regional Office Coordinator
D. McCready, Regional Office Coordinator
R. Castadot, Senior Medical Officer
R. Magarick, Training Officer
J. O'Connell, Program Support Manager
M. Mitchell, Grant Analyst
A. Blouse, Program Support Officer
J. Frazier, Program Coordinator
B. Logan, Travel Coordinator
D. Clapper, Equipment Manager
C. Oh, Assistant Equipment Manager
M. Hirsch, Educational Materials Coordinator
C. Kennon, Records Coordinator
E. Sheppard, Data System Specialist
J. Hardy, Vice-Chairman, JHPIEGO Board of Trustees
R. Zdanis, Trustee, JHPIEGO Board of Trustees

6. Expertise and special skills required:*

- (1) up-to-date knowledge of administration, management, personnel practices and sa
levels. (2) Experience in dealing with Govt-funded programs, and preferably AID-f
programs. (3) Some knowledge of LDC problems and LDC programming constraints.
(4) Some knowledge of training and preferably of health-related training.
(5) Experience as a consultant focusing on administration.

7. Special working conditions or justification for specific consultants:

A.I.D. Management review of JHPIEGO recommended an evaluation of JHPIEGO
operations in Baltimore by management consultant (s).

8. Special requirements for distribution of final report.

None

9. Contact person for additional assignment details: Andrew Wiley

Training Division, Office of POP, 235-9675

*Attach additional information, cables, letters, etc.

Detailed Task Order

April 28, 1983



MEMORANDUM

TO: DISTRIBUTION

FROM: S&I/POP/IT, Andrew T. Wiley *ATW*

SUBJ: Detailed Scope of Work for the APHA Management Consultants
Reviewing JHPIEGO Activities in Baltimore

After a briefing in AID/W, the consultants will spend five to ten days in Baltimore assessing the following general categories of JHPIEGO management.

1. Overall Program Management
2. Management of Subagreements
3. Management of Baltimore training program under J-1 Agreement with Johns Hopkins University
4. Personnel Management
5. Financial Management
6. Equipment and Materials Management
7. Management in relationship to JHU
8. Management in relationship to AID
9. Other

In assessing the various categories of JHPIEGO management, it will be necessary to:

- (a) interview key staff members in each office;
- (b) become familiar with activities in each department and with present procedures and why they have evolved;
- (c) find out how past problems have been handled, and
- (d) ascertain what are present and likely future problems, if any.

In reviewing these categories, it will be useful to determine which significant management constraints, if any, are explicitly or implicitly required by AID, which are required by Johns Hopkins University, and which are required by neither.

In the eight general categories listed, the following points should be considered.

1. Overall Program Management

After acquiring an overview of JHPIEGO's history and present activities, review the following aspects of operations:

- (A) Table of organization and delegation of functions
- (B) Responsibilities by geographic areas
- (C) Program planning and development
- (D) Direction and Supervision
- (E) Foreign language capability
- (F) Program coordination
- (G) Role of data processing and retrieval
- (H) Status of Programs Evaluation
- (I) Internal and Field Communication
- (J) Roles of Advisory Boards and Committees

2. Management of Subagreements

After ascertaining the general scope and number of JHPIEGO subagreements, review the steps involved in:

- (A) Proposal Development
- (B) Refinement and approval of proposals
- (C) Budgeting of subagreements
- (D) Processing of subagreements
- (E) Regular monitoring of subagreements

3. Management of Baltimore Training Center

After obtaining an overview of Baltimore training center activities, review:

- (A) Procedures for recruitment, selection and processing of trainees
- (B) Coordination with regional office staff members in trainee selection and follow up.
- (C) Average cost per trainee by regional origin
- (D) Anticipated changes in total Baltimore trainee costs likely to result from an annual 25% reduction in numbers of Baltimore trainees—with majority of future trainees coming from Africa.

4. Personnel Management

After understanding the general scope of JHPIEGO activities, review the appropriateness of:

- (A) Size and composition of staff
- (B) Salary levels
- (C) Ratio of professional and program staff to clerical staff
- (D) Time-sharing for staff partially funded from non-AID sources.

5. Financial Management

After obtaining an overview of JHPIEGO's budget, review the following areas:

- (A) Status of pipeline, i.e., AID monies obligated to JHPIEGO but not yet actually expended or vouchered for. Ascertain the likelihood of the pipeline increasing or decreasing in the future;
- (B) Adequacy of financial procedures and documentation;
- (C) Appropriateness of subgrant financial monitoring and audits (or plans for audits) of subagreements; and
- (D) Role of non-AID funds in JHPIEGO.

6. Management of Equipment and Materials

After understanding the nature of JHPIEGO-supported medical equipment and educational materials, review:

- (A) Inventory controls on equipment and materials;

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(B) Procedures for documenting equipment maintenance;

(C) Procedures for procurement of equipment and materials; and

(D) Procedures for distribution of equipment and materials.

7. Management implications of JHPIEGO relationship with Johns Hopkins University

review

8. Management implications of JHPIEGO relationship with AID

review

9. Any other pertinent management issues

review

Distribution

S&T/HP, F. Herder
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SER/CM, J. Pittenger
 R. Ware
ASIA/TR/HPN, M. Jordan
NE/HPN/POP, R. Corno
JHPIEGO, R. Burkman

DATA GATHERING FRAMEWORK QUESTIONS

PROJECT DEVELOPMENT PROCESS

- steps or key event schedule; flow chart
- time frame: planned, actual
- key delays
- how has the process evolved
- how will the process be affected by the African emphasis
- how will the emerging staff pattern effect the process (RDO)
- document checklist
- mission relationships

GRANTEE BACKSTOPPING

- monitoring schedule
- list backstop activities
- grantee manual
- staffing Roles: Consultant, JHU
- U.S., Europe/ Regional

STAFF ALLOCATION

- operational categories
- ratio: support to staff
- training office shift to non-US based training
- link/ to jhu personnel system

TRAVEL PLANNING(procedures for travel plans)

AD HOC AND ADMISSION COMMITTEES

- membership/functions/frequency of meetings
- to whom report

BOARD AND INTERNATIONAL COMMITTEE

- activeness
- functional purpose

REPORTING: AID/INTERNAL

- which (eg. trip/annual/financial/statistical)--list
- who does them
- who receives them
- informal reporting

PIPELINE FUNDS

- Actual amount
- what does it represent (AID approved, signed agreements; other contractual relationships eg: JHU)
- source or cause of current arrangements.



THE JHPIEGO CORPORATION

Section I BASIC STRUCTURE OF CORPORATION

Articles of Incorporation

The articles of incorporation, for the JHPIEGO Corporation, were approved, received and recorded by the State Department of Assessments and Records of Maryland on April 19, 1974.

Nature of Corporation and Tax Status

The Corporation is organized exclusively for charitable, scientific, and educational purposes. The Corporation may not be conducted for profit nor may it issue capital stock. It has and may exercise all powers conferred by the general laws of the State of Maryland upon corporations without capital stock; provided, that the powers exercised further the exempt purposes for which the corporation is organized.

The Corporation is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1954. Contributions to JHPIEGO are deductible under Section 107(c)(2) of the Internal Revenue Code of 1954.

Purpose

There is an acute need around the world to improve the quality of life for women and their families through improved reproductive health measures. The JHPIEGO Corporation was established to address this need by advancing and disseminating, internationally, medical knowledge and its application to health problems which relate to the human reproductive systems. JHPIEGO has been established to lead and guide a program of international education to provide physicians and other qualified professionals in developing countries with the knowledge, skills and techniques found effective in the detection, diagnosis, treatment and prevention of the health problems related to such systems. This includes the training of health personnel through fellowships or otherwise, the provision of funds and equipment for such purposes, and establishing and coordinating a network of international centers to teach and equip health personnel, especially obstetrician-gynecologists and other qualified personnel to use improved techniques.

D. Board of Trustees
(Ref: Preamble
and Article I of
By-Laws)

A Board of Trustees is the governing body of the Corporation and has ultimate responsibility for the conduct of the affairs of the Corporation. The Board carries out its business in accordance with the Corporation's Articles of Incorporation and By-Laws. The President of the Johns Hopkins University (JHU) appoints the Trustees. The number of Trustees on the Board may not be less than three (3) nor more than twelve (12). The terms of office may range from three (3) to five (5) years and are renewable.

The Board is required to meet annually, but may convene at such other times as the Board considers appropriate. It has been the practice of the Board to meet formally on a quarterly basis.

The Board reviews and approves programs and policies to be adopted by the Corporation. It determines changes in and approves the administrative structure of the Corporation and its organizations. In addition among the items of business carried out by the Board are the election of officers, appointments of members of the International Council, review and approval of key professional personnel, planning budgets, funding proposals to donor sources, on-going programs, proposed programs, financial reports, and operating budgets.

E. Officers of the
Corporation (Ref:
Article II By-Laws)

The Officers of the Corporation include a Chairman of the Board of Trustees, a Vice-Chairman of the Board of Trustees, the President of the Corporation, the Secretary of the Board of Trustees and the Treasurer of the Corporation.

The Board elects and establishes the tenure of all Officers of the Corporation, except the Chairman and Vice-Chairman of the Board. The Chairman and Vice-Chairman are elected annually.

F. The Chairman
(Ref: Article
III By-Laws)

The Chairman presides at all meetings of the Board; he appoints all committees to the Board and, unless otherwise provided, serves as the Chairman of each committee.

G. Vice-Chairman
(Ref: Article II
B.2 By-Laws)

The Vice-Chairman, in the absence of the Chairman performs the Chairman's duties.

H. The President
(Ref: Article IV
By-Laws)

The President is the Chief Executive Officer of the Corporation, elected by and responsible to the Board of Trustees. As educational and administrative head of the Corporation, he exercises a general superintendency over the affairs of the Corporation and informs the Board of all significant matters. In doing so the President submits to the Secretary of the Board the items to be included in the Agenda for each meeting of the Board of Trustees.

The President has powers on behalf of the Trustees to perform all acts and execute all documents to make effective the actions of the Board, except those specifically limited by By-Laws or subsequent resolutions.

The President may delegate his duties and authorities as appropriate to officers and staff members under his supervision; except, that he may not delegate those duties and authorities vested in him under Article XI of the By-Laws, and those which may be specifically limited to him by subsequent resolutions adopted by the Board of Trustees.

I. The Treasurer
Ref: Article V
By-Laws)

The Treasurer, elected by and responsible to the Board of Trustees, has custody of the funds and securities of the Corporation. He advises the President and the Board of Trustees on matters which concern the financial condition of the Corporation.

J. Secretary
(Ref: Article I
By-Laws)

The Secretary of the Board gives notice to each Trustee of each meeting of the Board; coordinates and publishes the Agenda for each meeting, issues and certifies to the minutes of each Board Meeting, and has custody of the minutes.

K. The Director
of JHPIEGO (Ref:
Article IV Item 13)

The Director of JHPIEGO is appointed by the President, subject to approval of the Board of Trustees. He is directly responsible to the President and serves as the Key Operating Official of the Corporation in charge of the development of the programs of the Corporation, and, for the recommendation and the implementation of the program policies and operations approved by the Board of Trustees. If deemed advisable, the Board by means of a resolution may designate the same person to serve as President and Director combining the Chief Executive Officer role with that of the Key Operating Official.

L. International Council of Experts

An International Council is selected by the Board of Trustees and appointed by the President to provide program guidance and assistance. The membership of the Council includes individuals from the developing world who are recognized for their expertise and/or interest in the fields of reproductive health, public health or medical education. The Council meet periodically with the Board of Trustees and Officers of the Corporation to review program developments and recommend avenues of consideration for JHPIEGO educational efforts.

M. Staff

The JHPIEGO professional and clerical staff, including those with faculty rank, are selected and assigned to JHPIEGO, but are employed by JHU and are JHU employees. (See Section Q below). As JHU employees the University provides health insurances, retirement bonding, disability compensation, travel insurance and other fringe benefits. JHPIEGO's faculty professional, and clerical staff are governed by the appropriate personnel policies and practices of JHU which pertain to their personnel status and appointments; including those which govern the payment of salaries, wages or other stipends and those governing the recording of time, effort, and leave policies. JHPIEGO staff members may include non-U.S. citizens.

N. Consultants

JHPIEGO uses professionals not assigned to the JHPIEGO staff to provide consultant services and technical educational, scientific, medical, administrative and managerial advice and assistance to JHPIEGO and its cooperating institutions, whenever needed and considered appropriate by JHPIEGO.

This category also includes consultants who provide field training at overseas institutions and serve as lecturers in training programs in the United States and overseas and at professional meetings. Consultants may be U.S. or non-U.S. citizens.

The JHPIEGO policies governing the payment of consultant fees or honoraria are set by the JHPIEGO Board of Trustees.

O. Subordinate Agreements

The JHPIEGO Corporation has the authority to enter into subordinate agreements, as it may deem appropriate, with sources in the U.S. and overseas for

the purpose of achieving its work and program objectives.

P. Resource Management

JHPIEGO is responsible for the establishment of budgetary accounts and allotments for its corporate elements and activities; review and control of funds and their allocation; review and approval of all corporate actions committing funds; review and approval of disbursements to cooperating centers and in-country training centers; continuous analysis of commitments and expenditures, and monitoring the inventory of property, equipment and educational materials. JHPIEGO also manages a Federal Reserve Letter of Credit.

The services of an automatic data processing firm are used to reflect all disbursements made from Corporation funds either to JHU as reimbursement for funds expended on JHPIEGO's behalf under a management services agreement (See Section Q) or payments from JHPIEGO to cooperating educational centers in the U.S. and overseas and to other institutions and firms with which JHPIEGO has agreements. Associated records are maintained to control and reflect these transactions.

A Resource Manager, who is a member of the JHPIEGO staff (See Part II), coordinates the financial management of the Corporation with the Treasurer of JHPIEGO.

Q. Administrative Services and Resources of Johns Hopkins University

JHPIEGO, the authorizing entity, by means of a subordinate agreement with the Johns Hopkins University uses certain administrative services and resources of the University in support of its program. These include the provision of personnel and fringe benefits, administrative resources and services, fiscal and management support services, disbursements authorized by JHPIEGO and purchasing services. A description of these resource and services follows:

Personnel

The JHU Personnel Department conducts the following activities for JHPIEGO: recruiting, position classification, maintenance of personnel records, training, counselling, affirmative action, salary and wage classification, control and maintenance of records concerning the following: social security, medical insurance, life insurance, disability insurance, travel insurance, tuition, pension

benefits, unemployment insurance, workmen's compensation and related matters.

Fiscal and Management Support Services

JHU provides computer processing and recordation of all transactions concerning JHPIEGO which reflect the receipt, obligation, and disbursement of funds against the budget allotments authorized by JHPIEGO. These allotments reflect JHPIEGO's direct costs. Monthly printouts are provided for each operating element of JHPIEGO and other budgetary allocations giving a detailed history of disbursement, encumbrances, and unutilized budgetary allotments.

JHU provides payroll functions which include records management, withholding of authorized funds for taxes, social security, pension, insurance; the proration of salary source and expense; and monthly computer printout of data by allotment.

The Accounts Payable section maintains subsidiary ledgers; processes reimbursement vouchers and invoices for payments to vendors; and processes per diem, travel, baggage allowance vouchers, and travel advances. All disbursements are first certified for payment by JHPIEGO.

Purchasing

The Purchasing Department of JHU performs the following functions for JHPIEGO: assists when requested in formulating contractual provisions for procurement; expedites and processes for JHPIEGO Purchase Requests including coordination with the Accounts Payable Section and Comptrollers Office of JHU and complies with JHPIEGO's and referenced Federal regulations concerning bid solicitations, vendor selection, and appraisal, awards, vendor performance, etc.

Other Services Provided

JHU also provides access to the faculty, administrative and research staff of JHU for consultation (with and without compensation) regarding matters pertaining to JHPIEGO's activities, and makes available to JHPIEGO the educational and research expertise of the Johns Hopkins University. Library facilities and meeting rooms are available for JHPIEGO's use.

The General Counsel of JHU, upon the request of JHPIEGO, provides legal counsel and guidance relative to JHPIEGO's programmatic and management activities and is available for assistance in reviewing contractual agreements.

Functions of
the JHPIEGO
Corporation

JHPIEGO has multiple capabilities for management, advocacy, educational leadership and the diffusion of evolving technologies. Listed below are some of its functions.

- 1) Maintains the operational and professional units of the Corporation, including the staff and consultants.
- 2) Maintains headquarters and provides adequate office space and furnishings. Arranges for major administrative elements such as personnel, budget and fiscal systems, grant and contract administration.
- 3) Establishes Program and Administrative Policies and provides grant and financial management.
- 4) Maintains and convenes an International Advisory Council composed of representatives of cooperating overseas institutions and of individuals who have demonstrated international leadership and influence in medical education and/or in health problems related to reproduction.
- 5) Plans and develops programs and program requirements and solicits funds and commits financial support received from donor agencies.
- 6) Mobilizes professional support and involvement in the field of reproductive health among obstetricians and gynecologists and related professionals not only at the international level but also at the national and local levels.
- 7) Makes site visits to LDC's mobilizing national leadership in teaching hospitals, medical schools, universities, professional and scientific societies, social security systems, ministries, etc; develops collaboratively national and regional educational programs and training centers (didactic and clinical) in Reproductive Health; and negotiates agreements for these programs and centers.
- 8) Coordinates in-country efforts with donor

agencies, USAID missions, U.S. Embassy and host government institutions as appropriate.

- 9) Provides technical and financial assistance and support for curriculum and faculty development, course content, teaching aids and educational materials, medical technology, and for the travel and subsistence of trainees.
- 10) Develops program guidelines and procedures for the management, financing, administration, and monitoring of subagreements including the mechanisms for providing the funding support to overseas centers.
- 11) Awards subagreements and administers the subagreement program to participating institutions for the education and training of physicians and other professionals. In this connection, also monitors and evaluates recipient institutions for fiscal and program accountability, and ensures that inputs of personnel and facilities are adequate, appropriately managed and that the quality of the educational effort conforms with agreed to program criteria and the provisions which govern the agreement. Amends agreements to provide for program changes, continuation of programs and the provision of incremental support, when appropriate.
- 12) Enters into an agreement with an independent audit firm(s) to conduct, when appropriate, periodic audits of JHPIEGO supported programs and institutions with which JHPIEGO has agreements with the exception of U.S. educational institutions.
- 13) Continues to provide support for U.S. based intensive short-term post-graduate education courses in Reproductive Health to be conducted in several languages for prominent physicians, health professionals, and other selected providers of health services from developing countries so that these individuals can form cadres capable of initiating change and institutionalizing the teaching of Reproductive Health in national teaching institutions.
- 14) Enters into agreements for (13) above and administers these subordinate agreements.
- 15) Maintains a centralized admissions system for the selection and scheduling of physicians and other health professionals to be U.S. trained co

give priority in selection to country needs, the appropriate institutional diffusion within these countries, and ability of the physician/administrators to serve as agents for change.

- 16) Coordinates activities of Regional Development Officers and Admissions Committee for the scheduling of fellows into training courses, development of curricula, the travel of fellows to U.S. and third country training programs, the installation of equipment, provision of clinical and follow-up field training to meet the objectives and time frames of the various country agreements and targeted programs.
- 17) Develops forms, instruments, and systems to assess qualifications of individuals applying for training and the resources of the in-country institutions, to evaluate skills and performance during training, and provide feed-back on performance during field training.
- 18) Develops follow-up questionnaires and establishes an in-house program evaluation capability to permit on-going evaluation and modification of program activities to maximize their impact and to provide verifiable indicators of the achievement of objectives.
- 19) Translates and prints forms and documents as appropriate into foreign languages.
- 20) Maintains a centralized records and data system on trainees, institutions, clinical evaluations, provision of equipment and in-country programs.
- 21) Reviews technology, and evaluates results of field tests and extends to the network of cooperating physicians and institutions the tested new and improved techniques.
- 22) Develops new educational training models with flexibility to meet individual country needs; develops, reviews and up-dates training curricula content and educational materials for training institutions with translations into foreign languages.
- 23) Supports, provides, and arranges for clinical training at centers for qualifying participants who have received didactic training in JHPIEGO-supported centers in the U.S. and overseas.

- 24) Develops a network of qualified field training consultants; selects consultants and organizes schedules with cooperating institutions for the travel of these consultants to install equipment and provide field training at clinics and at the host institutions of the qualified physicians who have been trained at participating centers.
- 25) Develops documents, forms and other instruments to safeguard the program (transfer of title, agreement, etc.)
- 26) Administers a participants program which includes arranging for and supporting the costs of travel and subsistence for fellows attending training programs in the United States and a third country. (This includes supporting the provision of insurance under the HAC Program of the Agency for International Development).
- 27) Organizes ad hoc Equipment Committees to review technology to be used in the program; develops uniform specifications with obsolete equipment converted and additional training provided. Disseminates information to graduates on technological advances.
- 28) Develops and maintains a logistical equipment capability for procuring, inspecting, storing, warehousing and delivering overseas equipment purchased for recipient institutions, including the provision of spare parts and the training of personnel at overseas facilities in care and maintenance of this equipment. This includes establishing inventory controls, sub-contracts for storage, packing, shipping and export documentation to meet various custom requirements.
- 29) Establishes in-country maintenance centers, when appropriate, to insure that an in-country maintenance and repair system is functioning in countries where JHPIEGO has made significant donations of endoscopic equipment. These centers may service AID funded equipment in the country or region. Support may include the provision of U.S. based and/or overseas training for equipment repair technicians. Also develop overseas seminars and provide consultants for the care and maintenance of equipment.
- 30) May cooperate with cooperating AID funded organizations, if deemed advisable by JHPIEGO, to procure, inspect, warehouse, and deliver or

their behalf on a reimbursable basis equipment and spare replacement parts to institutions and/or clinicians in developing countries designated by the organization.

- 31) Organizes, convenes, conducts, and/or attends international and national meetings, seminars, workshops, symposia, conferences, conventions, observational tours, etc. which will serve to advance the objectives of JHPIEGO.
- 32) Disseminates internationally through a newsletter, papers, other publications, lectures, etc. program information being generated by JHPIEGO.
- 33) Arranges and provides support from time to time for cooperative field trials of drugs, equipment, and other techniques if desired and appropriate.
- 34) Serves on occasion as a catalyst to mobilize resources of other agencies and provides assistance in appropriate in health care planning to establish in-country training facilities and dedicated space.

ection II

THE ORGANIZATION OF STAFFING COMPONENTS

Philosophy of Organization

JHPIEGO is organized to function as a line organization with supporting functional and staff units. The line flows from the President to the Director who is responsible for the development and implementation of JHPIEGO's program. In this plan of operation, Regional Development Officers reporting directly to the Director, assume responsibility for the development and implementation of programs in each region of the world. Functional and staff units provide program and operational support.

The President's oversight functions are carried out by the Office of the President and the Office of Resource Management which work in close harmony on a day to day basis with the Director of JHPIEGO who actively participates in the process.

An organization chart of the current components of JHPIEGO is shown in Table A. This configuration of staffing units may be changed from time to time to meet evolving program and administrative requirements. Major realignments of staffing components are subject to the approval of the Board of Trustees.

Oversight Function of the President

1. The Office of the President

In this office, an Assistant to the President, who reports directly to the President and relates on a day to day basis to the Director is concerned with the overall policy direction and management of the programs and affairs of the Corporation; especially as they pertain to the objectives and requirements of donor sources, of the JHPIEGO Board of Trustees, and State and Federal laws.

Included among the functions of the Office of the President are: program management to assure compliance with donor and corporate policies and objectives; overall program planning and the development of program requirements; establishment of program and administrative policies; development and provision of practices and systems to facilitate, administer, monitor and evaluate programs; solicitation and negotiation of funds and their allocation; authorization of subagreements and the acceptance of awards by the President; preparation and presentation of reports to donor sources, Board of Trustees, Federal and State Agencies and their Congressional and representative bodies, as and when required; program evaluation; overseas site visits; interfacing with officials of JHU and its operating units, donor

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sources, federal, state and foreign officials and other institutions; arranging meetings and agendas for the International Council and the JHPIEGO Board of Trustees.

2. Office of Resource Management

This office is responsible for the fiscal and administrative functions of the Corporation. To ensure the fiscal independence and integrity of corporate fiscal activities, the Resource Manager, who is in charge of this office reports directly to the President, and receives guidance from the Treasurer concerning the financial affairs of the Corporation. In implementing the administrative and fiscal functions, the Resource Manager assures the President and the Treasurer that requirements and procedures on the use of funds stipulated by the corporation and funding agencies are adhered to and that encumbrances do not exceed funds available.

On a day to day basis the Resource Manager works directly with the Office of the President and the Director of JHPIEGO. The functions carried out by this office include the establishment and management of the financial books of the Corporation; establishment of authorized allotments and allocations of funds; the audit and certification for payment of all vouchers; the analysis of spending patterns and the preparation of cost analyses; assistance in the development of corporate budget requirements and budget proposals to donor sources, preparation of fiscal and financial reports and data for the Trustees, officers and staff of JHPIEGO, for funding agencies and for State and Federal Tax services; management of a Federal Reserve Letter of Credit; and negotiations with independent audit firms to conduct audits.

This office works with the management and administrative sources within JHU to implement personnel, procurement, budgetary allocations, disbursements and other requests (as set forth in the JHPIEGO/JHU Management Agreement) to assure that they are carried out in accordance with the requirements of the funding agencies and the Corporation.

A program is carried out for the financial administration of all subordinate agreements to U.S. and overseas training institutions, and any other organizations and firms with which JHPIEGO may have agreements. These responsibilities include assuring that sub-recipients receive agreed to support in a timely fashion and that the sub-recipients are meeting

and reporting in order to receive payment the programmatic, fiscal and payment requirements of the sub-agreements; and that independent audits of sub-agreements are conducted at the appropriate intervals.

Operating

Office of the Director

functions of
the Corporation

The Director of JHPIEGO serves directly under the President and is the Key Operating Official in charge of the development, implementation and direction of the Corporation's programs. He plays a major role in interfacing with donor sources; representing JHPIEGO before governmental, Congressional, medical, scientific and educational institutions, and before the international medical community.

He leads and directs the following organizational components in discharging his responsibilities for mobilizing scientific and educational resources in U.S. and abroad; establishing medical and educational criteria; recommending program goals and strategy, stimulating the development of in-country and educational programs; recommending these programs be approved by the Board; monitoring and evaluating these programs; and causing operational and planning systems and procedures to be developed for the above.

Regional Development Office

The Regional Development Officers are directly responsible to the Director for all activities for their assigned regions. This includes stimulation and development of in-country programs and strategy; development of proposals, the negotiation of agreements; program implementation, provision of technical consultant assistance and monitoring and evaluating the programs. These officers and their staff interface with government officials in the U.S. and overseas; embassies and missions; officials of cooperating in-country institutions; and other programs and international organizations. They coordinate educational and training programs with other on-going or proposed in-country activities. The Regional Development Officers are also responsible for assuring that the faculty and curricula needs are met, that equipment is scheduled to arrive when needed, field training visits are scheduled, maintenance and repair requests met, and donated materials are being utilized. They are responsible for the necessary actions required in their countries. They are assisted by feed-back from consultants, reports,

evaluation questionnaires, and other forms of communication.

Two major organizational components, namely Education and Program Support, provide technical and program support and resources to help the Regional Development Officers carry out their responsibilities.

Education

A Medical Officer, who reports to the Director, serves as the Senior Educational and Medical Official and provides technical advice and guidance to the Director, Regional Development Officers, and to in-country institutions and officials on curricula development, status of technology, quality standards, educational materials, and programs to meet special needs. Evaluation of educational programs and materials is another facet of his role.

In addition, to a Medical Officer, the Education Component includes the functions of the International Training Center and the Educational Materials and Publications Unit.

International Training Center

A Training Officer is in charge of the center and interfaces with the Johns Hopkins Medical School which carries out, under an agreement with JHPIEGO, short-term educational courses for health professionals from the third world who have been selected by JHPIEGO to receive this training. The Training Officer synchronizes the scheduling of training courses and monitors curricula content to respond to overall program strategy and the specifics of in-country requirements. The Training Officer monitors the educational agreement between JHPIEGO and JHU for these training courses and conducts an on-going evaluation of these courses.

The center serves as the focal point for the trainees and coordinates the administrative requirements of the trainees during their attendance at the JHU courses. This center also maintains a library of videotapes, films, and selected books and formats for use by trainees.

The Training Officer plays a key role on the Admissions Committee for the selection of trainees and serves on the Ad Hoc Educational Committee, which recommends educational focus and curricula content. Membership of the Ad Hoc Committee includes the

President, Director, Senior Medical Officer, Training Officer, the Regional Development Officers, JHU Faculty and outside consultants as needed.

Educational Materials and Publications Unit

An editor is in charge of coordinating the input for the development of the requirements and the resources for educational materials and exhibits used in JHPIEGO's programs.

To carry out its functions, this office convenes the Ad Hoc Educational Committee which identifies the needs and the components of the in-country educational packages of materials to be provided by JHPIEGO to institutions and to health professionals in the developing countries. This office provides to the Director for his action the cost analysis and budget projections. Packages may include specific books, booklets, audiovisual aids and teaching models in English and foreign languages. The educational materials used in the program are selected by the Ad Hoc Educational Committee. Meetings are held at least once a year. This office also edits and supervises the publication of materials produced by JHPIEGO in English and foreign languages. The Newsletter and JHPIEGO's Annual Report are prepared by this office.

Program Support Office

The Program Support Manager is directly responsible to the Director for the activities of the support components within JHPIEGO. The support components within JHPIEGO include the Grants Unit, the Equipment Unit, and the Admissions and Travel Unit. In addition, the Program Support Manager provides for the Director support and analyses for other JHPIEGO offices.

Admissions and Travel Unit

The Admissions staff coordinates recruitment activities with the Regional Development Officers and helps develop the recruitment strategy for fellows to attend U.S. training courses to correlate with program and country targets. Recruitment brochures and recruitment correspondence emanate from this unit. This office convenes the meeting of the Admissions Committee; this is central to the coordination process with the Regional Development Officers and the Training Officer to schedule fellows into U.S. and regional training courses; and to see that the fellows

are travelled to U.S. and third country training programs to meet the schedules and time frames of the various country agreements and targeted programs.

The travel unit arranges domestic and foreign travel for staff, consultants, collaborating project directors, and trainees attending U.S. and third country training programs.

The Admissions and Travel Unit perform a variety of other programmatic activities when requested by the Director including the organization of conferences and meetings. In addition it serves as the focal point for the development of all JHPIEGO forms and convenes the meetings of the JHPIEGO Forms Committee.

Equipment and Materials

The unit coordinates the development of specifications for technology to be used in the program and convenes the ad hoc Equipment Committee which recommends the specifications to be used. It develops procurement sources and assists in developing procurement requirements. It acts as focal point for procurement, warehousing, shipment of equipment and educational materials, spare and replacement parts, and for assistance concerning maintenance and repair for JHPIEGO's programs and those of other AID supported programs with JHPIEGO Agreements. This office interfaces with AID, equipment manufacturers, publishers, JHU, and GSA to implement authorized equipment and material needs. In addition, the office provides logistical support; develops procurement requests for equipment, educational materials, and spare parts; obtains necessary documentation for shipment overseas and country approvals; maintains inventory controls and obtains transfer of title forms. This office coordinates warehousing and shipping equipment and spare parts to recipient institutions with a warehousing contractor. Arranges for inspection of equipment and repairs. Arranges for maintenance teams and technician training. Provides technical assistance to Maintenance Centers on logistical control and maintenance. It prepares cost utilization analysis on equipment maintenance. This office also monitors the warehousing contract.

Ad Hoc Equipment Committee

An Ad Hoc Equipment Committee reviews current and new technology, evaluates problems and determines means of solving problems through the introduction of improved equipment and techniques or modified training.

Meetings are held as frequently as necessary but at a minimum of every two years. Recommendations of the Committee form the basis for JHPIEGO's program decisions concerning technology to be used in the programs. Members of the Committee include Project Directors of Overseas Training Centers and Consultants.

Program Review Committee

Program Proposals prepared by the Regional Development Officers and other JHPIEGO officials in collaboration with officials of LDC institutions are reviewed by the Program Review Committee. The Program Review Committee consists of representatives of the Office of the President, Director, Program Support Staff, Resource Management, and the Regional Development Officers.

This committee reviews proposed in-country programs (new programs, amendments, special projects, and close-outs). The purpose of these reviews include but are not limited to applicability for JHPIEGO's goals and objectives; priority for a region or a country; reasonableness of project goals and objectives given the project resources; reasonableness of overall costs to JHPIEGO; and suitability of program design.

On basis of the recommendations of this committee, written proposals are completed for forwarding to the Board of Trustees for its review and approval.

Grants Unit

The grants office is responsible for writing and processing agreements with overseas institutions, for developing procedures relating to these agreements, and for providing to regional development officers support in the monitoring of these agreements. It maintains and distributes to JHPIEGO staff a control sheet on the status (signatures, expiration date, etc) of each agreement and compiles information pertaining to the grantee's compliance with agreement requirements. Other responsibilities of this unit include keeping abreast of the changes required by the Office of the President and the donor agencies in the provisions and language of overseas agreements. The unit is responsible for coordinating with the Office of Resource Management to ascertain that the budget and support sections of agreements are compatible with

JHPIEGO's accounting systems, and that the expenditure and reimbursements reports to be forwarded to the grantee comply with the provisions of the agreement. The grants unit periodically reviews each agreement for submission of required documentation, and apprises Regional Development Officers of documentation received. It reviews all JHPIEGO requests for financial transactions for compliance with each agreement's program, budget, and support sections.

Information and Evaluation Unit

Information and Evaluation Office collects, maintains and analyzes data for program planning, monitoring and evaluation. Through a comprehensive computerized data base, this office maintains program information on trainees, institutions, equipment and demographic information for country profiles. JHPIEGO's central records system is maintained by this office and computer programs are available to facilitate the testing and tabulation of information.

Tabulations and reports, as required, are furnished to the Office of the President, the Director, RDO's, and Resource Management to assist in monitoring, in program planning and decision making. Data are generated to make assessments of program consequences as well as operations. Surveys are designed and international mail surveys conducted. These data and data collected by overseas directors of JHPIEGO regional programs are analyzed and reports of findings are published by this office.

Part III

Authorities and Delegations

A. The President

The Board of Trustees has vested in the President, who serves as Chief Executive Officer for the administration of the business and affairs of the corporation, all the necessary authorities to establish the Corporation's administrative, fiscal and operational policies and procedures and to implement the programs approved by the Board. The President may redelegate these authorities as he sees appropriate to his staff with the exception of those specified in Article XI of the By-laws which read:

"Deeds, checks, notes, mortgages, leases and similar instruments shall be signed and co-signed of behalf of the Corporation by the President and Treasurer of the Corporation and in the absence of either or both of the aforementioned officers by the Chairman and/or Vice Chairman of the Board.

Furthermore, the Board expressly authorizes Dr. J. Richard Gaintner, Trustee, to serve when necessary as an alternative signatory for the aforementioned on any of the above instruments.

Contracts and Grants awarded to the Corporation or received from the Corporation shall be signed on behalf of the Corporation by the President of the Corporation and in his absence by the Chairman, Vice-Chairman, or Treasurer."

B. The Treasurer

The Treasurer has the authorities cited in Article XI of the By-laws quoted above.

C. The Director

The Director in implementing the approved programs will be accountable to the President for adherence to the administrative, fiscal, and operational policies and procedures of the Corporation. The President delegates in writing to the Director the authority to sign the following documents:

- 1) Purchase Requests and Materials and/or services
- 2) Selection of source for placement of procurement for medical equipment, spare parts and educational materials
- 3) Personnel Requisitions, Position Descriptions and Personnel Payroll Form 200
- 4) Time and Attendance Reports and Leave Requests

- 5) Travel Requests and Requests for Travel Advances
- 6) Postage and Miscellaneous Expense Requests
- 7) Authorization to donate and ship medical equipment, spare parts and educational materials
- 8) Requests for consultant services
- 9) Requests for Payments and Advances of funds

The Director may redelegate these authorities in writing except for the following

- 1) Purchase Requests for Medical Equipment and Spare Part and Educational Materials
- 2) Authorizations to donate and ship medical equipment and educational materials
- 3) Selection of source for the placement of procurement for medical equipment and educational materials
- 4) Personnel Requisitions and Payroll Forms 200 on personnel

The authorities listed in items 1 to 9 above are sent to the Resource Manager to approve for implementation.

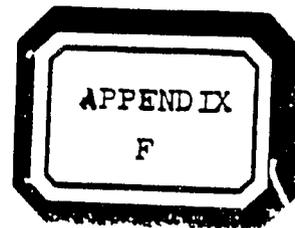
The Resource
Manager

The President delegates to the Resource Manager the authority to approve for implementation duly authorized requests received from the President and the Director. The Resource Manager is also delegated the authority to instruct JHU to make disbursements or to issue Corporate Checks for properly authorized costs incurred by the Corporation. In addition, all position descriptions and revisions thereto will be reviewed by the Resource Manager prior to their submission and/or discussion with personnel representatives.

None of the authorizations delegated to the Resource Manager may be redelegated unless such redelegations of authority have been approved by the President.

By resolution of the Board of Trustees, the Resource Manager may request advances in funds from the Johns Hopkins University in amounts not to exceed a total of \$5,000 in any one calendar year for purposes of establishing a Petty Cash Account. The Resource

Manager shall be the custodian of this bank account and checks against this Petty Cash Account may be signed and co-signed for appropriately authorized purposes by the Resource Manager and the Director of JHPIEGO. The Resource Manager will maintain a record and documentation supporting these transactions and reimburse the Johns Hopkins University for these advances in accordance with its management agreement.



Overseas Sub-agreements

I: Overview

A. Purpose

The major purpose of overseas sub-agreements is to provide a framework for accomplishing JHPIEGO's purposes and functions in less developed countries. The sub-agreement defines the responsibilities of the involved parties, the funds and other resources to be provided by JHPIEGO, and documents the particular terms and conditions under which the Corporation operates.

B. Qualifying Organizations

The basic requirements for overseas organizations to qualify for receipt of JHPIEGO funds or resources through a sub-agreement include:

- a. Location in a less developed country as defined by U.S.A.I.D., or the United Nations, or based on special needs.
- b. Possess sufficient resources and/or have an administrative structure that can facilitate receipt of funds, appropriate accounting of funds or other materials, and dispensing of funds or provided materials to accomplish the sub-agreement's purposes.
- c. If being funded as an educational activity have necessary resources or linkages or be capable of institutionalizing resultant programs once JHPIEGO support is phased out.
- d. Most recipients will operate on a not for profit basis. Examples of such organizations are government ministries, universities, parastatal bodies such as national family planning boards or councils, and local or national reproductive health or family planning organizations. Occasionally, subagreements may be made with for profit organizations if no other reasonable means of achieving JHPIEGO's purposes are available. Such sub-agreements provide support only for actual work and effort on behalf of JHPIEGO. Examples include sub-agreements with engineering or equipment firms to provide surgical equipment maintenance services.

- e. Recipients of U.S. government, United Nations, or private foundation funds must also meet other criteria for funding as defined by the specific funding source involved.

C. Types

The basic types of sub-agreements include:

- a. NCA agreements. These agreements are utilized for support of overseas educational training programs. They provide funds for payment of specific services by an in-country organization. In addition, JHPIEGO may provide directly additional support such as site visitors and consultants, educational materials, and equipment.
- b. NTA agreements. These agreements are utilized for the support of specialized clinical training of health professionals. Examples include clinical practice training of individuals in laparoscopy, minilaparotomy, IUD insertion, anesthesia techniques, and surgical nursing techniques. The agreement primarily provides funds to cover in-country expenses. In addition, JHPIEGO may directly support other costs such as travel of third country professionals.
- c. NMA agreements. These agreements support the preventive maintenance and repair of laparoscopic equipment. In-country funds are provided to support costs such as travel, warehousing, and personnel while JHPIEGO directly provides spare parts to the implementing organization.
- d. NSP agreements. These support special projects usually of a one-time nature, that require minimal in-country administrative support. All support is provided directly by JHPIEGO; formal signed sub-agreements between JHPIEGO and the qualifying organization are usually not utilized.

Part II:

Implementation

A. Proposal Development

Proposals are developed by JHPIEGO staff in close collaboration with in-country recipients or participants in the proposed program. When required funding agencies are advised in advance of proposals in progress or proposals planned. In addition,

in-country or central approval of planned activities will be obtained before beginning. Finally, the development phase is coordinated with other funding agencies, when appropriate, to maximize efforts and avoid duplication.

1. Format. The basic format of the written proposal includes:

Title page
Table of Contents
Summary
Introduction/Background
Goals and Objectives
Content
Candidate Selection
Evaluation
Reporting
Institutional Qualifications and Key Personnel
Implementation
Timetable
Budget
Budget Justification
Attachments

Some modification of this basic format is allowable, particularly if certain items are not applicable to a specific program. The proposal is the basic descriptive document on which the sub-agreement is based; therefore, it contains appropriate detail to allow adequate evaluation of the proposed program by JHPIEGO staff and officials as well as the funding agency.

2. Discussion of Each Element

Title Page. The title page includes the project title, the sponsoring agency (usually JHPIEGO but may be jointly sponsored), and the implementing institution. In addition, it should be dated (for each draft) with the final draft being dated as well with the word "final" being placed adjacent to the date.

Table of Contents. The table of contents list the proposal contents sequentially by page number. It may be omitted, on occasion, for short proposals.

Summary. The proposal summary should be brief and include:

Project Title
Sponsor (usually JHPIEGO)

Recipient or Grantee

Project Director

Duration or Dates (should specify total project length and segment of total-project which current proposal covers; if NSP agreement should specify approximate date and/or duration of the project)

Budget Duration (specify by dates)

Funds Required (specifies new or additional funding required to complete work described in proposal)

The proposal summary also contains a program summary and a budget summary:

1. Program Summary - succinctly outlines major elements of program contained in proposal such as numbers and types of trainees, course types and duration, major items of equipment to be provided, and types and/or costs of educational materials.
2. Budget Summary - this provides a summary of total funds estimated to be expended for both the past (if applicable) and the proposed performance periods, an estimate of carry-over funds, a summation indicating additional funding required, and a brief justification.

Introduction/Background. This section, which may be subdivided into additional sections, summarizes relevant country needs and problems to the proposed program, and may provide descriptive material about past JHPIEGO inputs or inputs of the proposed implementing organization(s). With renewal proposals, background material provided in the original proposal is referred to; only changes or additional information of importance is included in renewal proposals.

In addition, renewal proposals will succinctly summarize past performance and relate it to the original goals and objectives. Charts or tables to summarize objectives are usually utilized; an analysis of the accomplishments and/or deficiencies is included, and the past program is related to the proposed continuing program.

Goals and Objectives. The goals and objectives are the ends towards which effort is being expended. The goals are broader and relate the proposed program in its entirety to the country's needs or problems. In general, the goals are less readily measurable than are the objectives. Renewal proposals indicate changes in goals and/or briefly summarize continuing goals. The objectives state the major measurable accomplishments to be expected at the end of the

proposal time period. Examples include number and types of persons to be trained, numbers and types of courses or meetings, number of major items of equipment or educational sets to be provided and numbers of site or field visits. Since the program accomplishments and efforts are measured against the goals and objectives, this is the most important section of the proposal. Also, the remainder of the proposal is developed against this section's framework; ability of the implementing organization to use its own resources and/or have linkages with other organizations to meet the goals and objectives is critically assessed during the proposal development process.

Content. This section provides detailed information and descriptions about the work to be accomplished in the program. With NCA and NTA proposals, it provides information about course content and length, how resources will be utilized; with NMA proposals, it describes the activities relative to maintenance for the proposed project. The linkages between components such as training site, source of trainees, and trainers are clearly described. Renewal proposals present new items while only summarizing on-going activities.

Candidate Selection. This section describes, for educational programs, the criteria for candidate selection and the method for selection.

Evaluation. This section describes how the proposed program is measured against the goals and objectives. Examples include pre- and post-testing to evaluate short-term cognitive knowledge gains, annual surveys of activities and use of course materials for more long-term evaluation, and in depth evaluation of a program to estimate overall impact.

Reporting. This section highlights the reporting requirements such as forwarding to JHPIEGO of course evaluations, individual and institutional application forms, clinical practice or field visit forms, annual evaluation surveys, as well as interim or annual program reports.

Institutional Qualifications and Key Personnel. This section provides back-up information on the institution(s) included in conducting the program that supports the proposed workscope and timeframe described in the proposal. Key individuals and their qualifications are described.

Implementation. This section defines the responsibilities of the groups involved including

JHPIEGO which will be used to accomplish the program's goals and objectives.

Timetable. The timetable provides an anticipated schedule for achieving the program's workplan during the proposal time period.

Budget. This section defines the major items of in-country support such as personnel, administrative support, travel and subsistence costs and details direct support items such as consultant costs, staff monitoring visits, equipment and educational materials.

Budget Justification This section provides detailed information to support the costs outlined in the budget. JHPIEGO reimburses costs based on customary, local rates operant in the recipient institution's locale. Back-up documentation to support costs such as personnel policy statements are included in the attachment section.

Attachments. These include relevant materials supportive of certain sections in the proposal such as curriculum vitae, personnel statements, or institutional annual reports.

The Project Director's Manual provides additional materials regarding the project development process.

B. Proposal Review and Approval

1. JHPIEGO. The Proposal review process within JHPIEGO includes the following steps:
 - a. Review by RDO and recipient institutions
 - b. Review meetings with revisions, if necessary, with RDO, Resource Management, Director and/or Office of the President, Grants Office and other key staff who comprise the Proposal Review Committee. The Proposal Review Committee evaluates each proposal in terms of in-country objectives and reasonableness of costs.
 - c. Review and approval by the Board of Trustees after submission by the Director or President.
2. Funding Agency. Requisite approvals follow the policy governing funding agencies.

- a. U.S.A.I.D. - Copies of the proposal are forwarded to the Project Monitor who gains AID/W and overseas mission approval. Such approval is required before JHPIEGO can enter into AID-funded sub-agreements with overseas institutions.
- b. Other funding sources - Other funding sources may or may not require formal approval of every proposal. The Director or his designee for a particular grant is responsible for monitoring whether the terms of funding are being met.

C. Agreement Development

- 1. Format. The basic format of JHPIEGO sub-agreements include:

Letter of Agreement
 Section A - Program Description
 Section B - Provision of Support
 Section C - Standard Provisions

- 2. Discussion of each element:

Letter of Agreement. The cover letter is the official letter of agreement between JHPIEGO and the recipient institution. Its usual parts include:

- a. Identification of the parties and indicates the title and/or type of agreement.
- b. Defines the parts of the agreement contained behind the letter.
- c. Defines the agreement time period including effective starting date as well as authorizes amendments.
- d. Defines the dollar amount of initial (if a new agreement) or additional (if an amendment or continuation) in-country funds provided by JHPIEGO to support the work covered by the agreement.
- e. Commits the parties to abide by the terms and conditions in the agreement.
- f. Includes the signatures of the authorized officials of JHPIEGO as well as the recipient

With amendments, the letter details all changes by

line and page number or rewriting of sections and indicates both cumulative as well as additional funds provided in the amendment.

Section A - Program Description. Section A highlights the key points contained in the proposal and includes:

- Purpose of the agreement
- Objectives
- Sites of training or location of facility if a maintenance center
- Project Personnel
- Criteria for trainee selection (if applicable)
- Description of the project
- Evaluation
- Proposed timetable
- Implementation
- Conditions concerning the agreement - identifies responsibilities of parties: for site visits, certification of training, certifying receipt of equipment, voluntary participation requirement, equipment shipping and titling, monitoring and reassignment of equipment, consequences which arise as a result of the project activities, and compliance with Section C - Standard Provisions.
- Reports
- Period of Agreement

Section B - Provision of Support. Section B covers basic administrative details of the agreement and includes:

Administration and bookkeeping conditions including budget allocations, reimbursement, bookkeeping, and financial audit.

In-country support by JHPIEGO specifying amount of reimbursement for each project activity with reference to Section C.

Direct support by JHPIEGO specifying support such as equipment, educational materials, or site visit costs.

Provision of support by the recipient such as space and personnel.

Budget detailing the in-country funds only, but not the direct support costs.

Section C - Standard Provisions. Section C varies depending upon special conditions governing

sub-agreements imposed by the various funding agencies. In any event, this section specifies JHPIEGO's or the funding agency's policies and regulations governing the agreement.

Other. Additional items included with the sub-agreement document package include:

Approved proposal
Attachments such as forms provided by JHPIEGO for reporting

D. Agreement Review and Approval

1. JHPIEGO. The agreement review process within JHPIEGO includes:

a. Review by RDC, Resource Management, Other applicable staff, and Office of President or Director

b. Following approval, if necessary, by the funding agency, the document is reviewed and signed by the President or others as specified in the by-laws of the corporation.

Following signature, 5 copies are forwarded to the overseas institution for signature. Two copies are retained by the institution, while 3 copies are returned to JHIPEGO. On occasion, agreements may be made effective upon signature by JHPIEGO, though in-country signature is still required.

2. Funding Agency. Requisite approval follows the policy of the funding agency.

a. U.S.A.I.D. Copies of the agreement are forwarded to the Office of Grants and Contracts as well as the Project Monitor. Once written approval is received from the Grants Office, JHPIEGO is authorized to execute the agreement and expend AID funds. In exceptional circumstances, JHPIEGO may be authorized on the basis of a verbal approval from the Grants and Contracts Office; however, such verbal approvals are followed up promptly by a written approval. If agreements provide \$25,000 or less (cumulative) of in-country funds, AID approval can be authorized by the Project Monitor.

b. Other Funding Sources Other funding sources may or may not require formal review and

approval of sub-agreements. The Director or his designee for a particular grant is responsible for monitoring whether terms of funding are being met.

E. Sub-Agreement Monitoring

1. Purpose. The purposes of sub-agreement monitoring are: to determine whether the goals and objectives of a project are being achieved, to ensure that the fiscal and programmatic regulations of JHPIEGO and the funding agencies are being followed, and to assist or offer guidance in resolving problems.

2. Types of Monitoring. A number of monitoring approaches are utilized by JHPIEGO:

Review of submitted forms and reports including evaluation reports
Site visits by JHPIEGO staff or consultants
Analysis of sub-agreement status both programmatically and fiscally by JHPIEGO staff

3. Responsibilities for Monitoring. A number of JHPIEGO staff share responsibility for overseas program monitoring. This section will briefly define the responsibilities of each group.

Director. Has overall responsibility for program monitoring. Will delegate major authority to other offices but will resolve disputes.

RDO. Has the major responsibility for monitoring programs in countries of his or her responsibility and recommends payment.

Grants. Assists the RDO in compiling programmatic information such as trainee and report counts. Provides analysis and assists in resolving problems relating to overseas sub-agreements.

Resource Management Office. Assists the RDO in reviewing fiscal information but has responsibility for authorizing payment and for review of fiscal reports.

Equipment and Educational Materials Unit. Assist the RDO in shipping and subsequently monitoring receipt and use of equipment or educational materials.

Information and Evaluation. Assists the RDO by providing reports on analysis of evaluation reports or through comments of trainees or project directors.

Flow of Documentation of In-Country Training

- I. I/C Documentation received in RDO's office and forwarded promptly to Grants.
- II. Upon receipt, Grants
 - A. Records all documentation received on a temporary agreement log
 - B. Reviews documentation for compliance with terms and conditions of the agreement
 - C. Records training on Monthly Agreement Status Reports noting missing or unacceptable documentation for RDO follow-up
 - D. Reviews any payment requests for accuracy and the agreement budget
 - E. Notes items of concern for RDO resolution, i.e., outdated forms, length of training, need for funds, etc.
 - F. Forwards all documents as well as a copy of the temporary agreement log to RDO for review and analysis as appropriate
 - G. Forwards Participant List to IES for trainee count
- III. RDO reviews documentation, requests necessary action as noted below:
 - A. Financial activity (Resource Management)
 1. Requests payment of tuition based on documentation received
 2. Requests an advance of funds as needed based on planned training activity
 - B. Shipping activity (Equipment Unit)
 1. Requests shipment of equipment and/or educational materials as needed for conduct of the workscope
 2. Requests shipments of spare parts to maintenance centers after review and analysis of inventory and maintenance visit reports
 - C. Justification for action when necessary by providing supporting details when appropriate for proration of tuition or other unusual circumstances based on information provided by the Project Director.
- IV. Documentation is returned to Grants for dissemination to appropriate offices as noted below:
 - A. To Resource Manager for action and/or permanent file:
 1. Payment Requests with documentation as required in Section C, Provision No. 5 of each agreement
 2. Financial Activity Transmittal Forms requesting advance of funds or payments
 3. Fiscal documents and annual financial reports

- B. To Equipment Manager to record and file:
 - 1. Transfers of Title
 - 2. Proof of Delivery Forms
 - 3. Voluntary Participation Forms

- C. To IES for logging, coding for computerization and permanent file:
 - 1. Individual and Institutional Registration forms
 - 2. Clinical Practice Evaluation and Field Visit forms
 - 3. Copies of
 - a. All programmatic reports received for each agreement
 - b. Transfers of Titles, Voluntary Participation and Proof of Delivery Forms

- D. To each Agreement Master File Reports for permanent file:
 - 1. Original programmatic reports
 - 2. Documented RDO analyses

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PHILIPPINES ENDOSCOPY TRAINING PROGRAM
THIRD YEAR CONTINUATION PROPOSAL

SUBMITTED

TO

THE JOHNS HOPKINS PROGRAM FOR INTERNATIONAL
EDUCATION IN GYNECOLOGY AND OBSTETRICS

BY

THE MARY JOHNSTON HOSPITAL

MANILA

THE PHILIPPINES

-Final Revision-
May 1981

PROJECT SUMMARY

TITLE OF PROJECT: Philippines Endoscopy Training Program

ORGANIZATION APPLYING: Mary Johnston Hospital, Metro Manila, Philippines

GRANTOR: The JHPIEGO Corporation, Baltimore, Maryland

PROJECT DIRECTOR: Dr. Virgilio Oblepias
Director, Fertility Care Center
Mary Johnston Hospital

PROGRAM DURATION: This proposal is for Year III.

BUDGET DURATION: One year (from June 1, 1981, to May 31, 1982)

AMOUNT: \$287,920

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I. Introduction

The purpose of the project is to train gynecologists in the diagnostic and therapeutic use of the laparoscope. This project was started in May, 1979, and is based on the JHPIEGO philosophy of developing an in-country training program where a cadre of medical personnel have been trained from a country.

II. Need and Background

The demographic data for The Philippines for 1980 is as follows:

Total Population:	48 Million
Annual Growth Rate:	2.4 Annual percentage
Crude Birth Rate:	34 per 1000 population
Crude Death Rate:	10 per 1000 population
Infant Mortality Rate:	80 per 1000 live births
Population under 15:	43 percent of total population
Life Expectancy:	58 years
Years to Double Population:	29 years

Since 1974, endoscopic equipment was donated by JHPIEGO and other agencies to 42 institutions, there were a total of 57 laparoscopes in the country (from JHPIEGO and other AID-funded agencies) but they were not being fully utilized due to: 1. need of repairs, and 2. need to train younger physicians in laparoscopy.

The Mary Johnston Training Program was formulated to fulfill these needs. During the first year, the program plan included the training of 55 Philippine doctors and development of a repair and maintenance center for the donated endoscopic equipment. The agreements for the first-year grant were signed in May, 1979.

III. Program Accomplishment:

Through March 31, 1981, the program completed two years of training. During the first year, the program trained 55 physicians from The Philippines.

During the second year, the program will have trained 56 physicians from The Philippines by June 1, 1981.

In addition during the second year, training for nurses working with the physicians was added to the program. The program completed training of 25 nurses.

The courses consisted of didactic and clinical practice training.

The program also provided clinical practice training to 21 non-Philippine physicians sent by JHPIEGO from Baltimore. These physicians were from Jordan, Nepal, Sri Lanka, Burma, Solomon Island, Malaysia, Papua, New Guinea.

Table I gives details of the two years.

Table II shows the sterilization activity by the staff during the two years

1st YEAR PHYSICIAN COURSES	DATES	NUMBER OF TRAINEES	INSTITUTIONS
1st course	Aug. 20 - Sept. 14 1979	5 (one month) 2 (refresher)	5
2nd	Oct. 1-26, 1979	1 (one month) 2 (refresher)	3
3rd	Nov. 12 - Dec. 7 1979	6 (one month) 3 (refresher)	8
4th	Jan. 7 - Feb. 1 1980	10 (one month) 1 (refresher)	8
5th	Feb. 11 - Mar. 5 1980	6 (one month)	5
6th	Mar 17 - Apr 11 1980	9 (one month)	7
7th	Apr 21 - May 16 1980	3 (one month)	3
8th	May 7-30, 1980	1 (one month) 2 (refresher)	3

Total of one-month trainees = 40
 Total of refresher trainees = 10
 50

Clinical Practice Training - non-Filipino = 9

2nd YEAR

1st course	July 16 - Aug. 7 1980	3 (one month) 1 (refresher)	4
2nd	Sept. 1-23, 1980	2 (one month) 2 (refresher)	4
3rd	Oct. 1-28, 1980	5 (one month)	4
4th	Nov. 3-30, 1980	5 (one month)	5
5th	Jan. 5-31, 1981	8 (one month)	8

NURSE COURSES	DATES	TRAINEES	INSTITUTIONS
1st course	Sept. 1-14, 198	9 - 2 weeks	9
2nd	Oct. 1-14, 198	10 - 2 weeks	10
3rd	Nov. 3-16, 198	3 - 2 weeks	3
4th	Jan. 5-18, 1981	2 - 2 weeks	2
5th	Feb. 2-15, 1981	1 - 2 weeks	1

Clinical Practice Training - non-Filipino = 13

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T A B L E I I

Year	Sterilization	Laparoscopy	Tilamsik Trips	Other F.M.
1st	3,046	2,874	60	162
2nd thru 2/28	not tabulated	2,191	54	not tabulated
TOTAL	not tabulated	5,165	114	not tabulated

The Maintenance Center has been established on the third floor of the building with the necessary renovations being completed. The training was completed in October, 1979, at KLI Company and the two maintenance technicians, Mr. Gilbert Bajar and Mr. Romeo Santos, began work on October 1, 1979.

The progress to date is as follows:

First Year

- 36 laparoscopes needing repair have been taken to the Fertility Care Center. Of these 30 have been fully repaired; 5 were awaiting spare parts needed for repair.
- 4 hospitals have declined to release their laparoscopes.
- 15 more laparoscopes remained to be picked up by the Fertility Care Center for initial maintenance checkups.
- 5 laparoscopes have been returned or reassigned after repair and maintenance to 5 hospitals. The other laparoscopes are in the process of being returned.

Second Year (through February, 1981)

In addition, Project Director Dr. Virgilio Oblepias and his staff visited Nepal at the request of the Population Office of Nepal to train the physicians in the use of the laprocator.

The project has been monitored and evaluated through reports and the following site visitors:

Dr. Derman & Dr. P. Bhivandewala AID Evaluation Team	November, 1980
Mr. Dale Clapper JHPIEGO, Equipment Manager	January, 1981
Dr. K. Rajadhyaksha Regional Development Officer - Asia JHPIEGO	March, 1981

IV. Objectives

The objectives of the program during the third year are:

A. To provide two week didactic and clinical endoscopy refresher training courses in the techniques of diagnostic and therapeutic use of the laparoscope for 40 Philippine physicians, i.e., those who have had previous training in laparoscopy and those experienced in gynecologic surgery with no previous laparoscopic training.

B. To provide 5 three-week courses to train 50 Philippine registered nurses involved in the use of the laparoscope from institutions where this instrument is available, in the maintenance and safekeeping of the laparoscope, as well as proper methods of assisting in surgical contraceptive procedures. They will also receive training in other Family Planning methods, infertility, counseling, administration and management. These nurses will be from institutions who have physicians trained during the first and second year of the program.

C. To provide three-week didactic and clinical training to 10 physicians and 10 nurses from Fiji and other Pacific Island countries. These trainees will be trained along with the Filipino physicians and nurses.

D. To have a one-day evaluation conference of past trainees to be conducted in the second half of the year to evaluate their activity.

V. Site of Training

The training courses will be held at the Fertility Care Center of the Mary Johnston Hospital. The hospital is a self-supporting, registered, non-profit, non-stock, charitable institution and provides a full spectrum of Family Planning services. The Fertility Care Center has adequate space for lectures, clinical training, and maintenance activities as

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verified by Dr. K. Rajadhyaksha, JHPIEGO's Regional Development Office - Asia.

VI. Project Personnel

The project will be directed by Dr. Virgilio R. Oblepias, Director of the Fertility Care Center within the Mary Johnston Hospital, who has been very active in family planning activities and actively involved in the performance of laparoscopic procedures for 6 years. He will be assisted by Dr. R. Infantado, Dr. M. Garcia, Dr. L. Baustista, Dr. M. David, Dr. B. Cabotjee, and other professional and ancillary personnel who have been active during the two years of the project. These physicians have been involved in laparoscopy for three to four years and have performed several thousand procedures. The physicians and other professional staff are experienced in working as a team.

The staff of the Fertility Care Center who will be involved in the successful implementation of this training program is listed under the Budget Justification (p. 21) and will be supported for their training efforts through the tuition funds received from JHPIEGO, as described under the Budget Justification.

VII. Selection of Trainees

The primary criteria will be professional capability and willingness to perform diagnostic and therapeutic laparoscopic procedures.

All physicians will be practicing obstetrics/gynecology and surgeons with experience in general surgery and gynecological surgery.

For the nurse courses, priority will be given to nurses from institutions with laparoscopes that are not being used, as well as those nurses not previously trained in order to assure the availability of laparoscopic services to women who may desire them.

The Regional Trainees from the Pacific Islands will be recruited and selected with concurrence of JHPIEGO.

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VIII. Description of Project

The training program will consist of didactic courses and clinical training in laparoscopy. There will be two types of courses of different durations for physicians and two courses for nurses.

A. Physician Courses

- 1: The two week didactic and clinical endoscopy refresher courses for Philippine physicians with previous training in laparoscopy will consist of lectures and demonstrations covering all aspects of endoscopy including re-evaluation of their home institution endoscopy program. Physicians experienced in gynecologic surgery but who have had no previous training in laparoscopy may also be included in the training program.
2. Regional trainees will attend the courses with Filipino physicians but will have an additional training of one week as they would be new to laparoscopy.
3. Up to six days of clinical practice training for graduates from the JHPIEGO course in the USA (Baltimore) will also be provided upon request from JHPIEGO. This, however, will be governed by a separate agreement.

The number of trainees in each course will vary from 3 to 6, but it is expected that a minimum of 40 Philippine and 10 regional physicians will have received training at the end of this grant period.

Phase I - Curriculum and Hours Assigned to Topics:Curriculum and Hours Assigned for the Physician Two-Week Course

<u>Didactic</u>	<u>Hours</u>
1.1 Orientation to the program	1
1.2 Care and maintenance of instrument (laparoscopy set)	3
1.3 Recent advance in fertility care	2
1.4 Preoperative care, evaluation and workup of patients; postoperative followup	1
1.5 Psychological aspect of sterilization	2
1.6 Counseling in sterilization (pre- & post-operative)	2

1.7	Common difficulties encountered in laparoscopy	2
1.8	Prevention, diagnosis, and management of complications	2
1.9	Other methods of female sterilization	1
1.10	Male sterilization	1
1.11	Re-evaluation of home institutional endoscopy program	2
1.12	Ethical and legal aspects of sterilization and informed consent	2
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Phase II - Clinical Training

A. For regional trainees, the clinical practice training will be as follows:

Assistive - at least five procedures with trainer as surgeon. Further assistive procedures will depend on the trainer's evaluation.

Actual operation - minimum requirements of 10-15 laparoscopic procedures. (Total 15-20 procedures)

One to two outreach trips.

B. For refresher course trainees, the clinical training will be as follows:

Assistive - at last two procedures with the trainer as surgeon.

Further assistive procedures will depend upon trainer's evaluation.

Actual procedures - minimum requirement of 10-13 laparoscopic procedures. (Total 12-15 procedures)

Phase III - Follow-up

The Philippine trainees from the two-week course will have follow-up visits by trainer/consultants. They will

be arranged by the project director and will consist of 1 to 2 days of observation with assistance in installation of equipment.

Regional Trainees

The Regional Trainees will have follow-up visits by JHPIEGO consultants including the Director of the Philippines Program. The cost of these visits will be JHPIEGO Direct cost and will be organized by JHPIEGO. There will be 1 to 2 days of observation with assistance in installation of equipment.

B. Nurse Training Courses:

The five training courses for Philippine nurses from institutions with laparoscopes and who have been assisting in endoscopic procedures will include:

1. Didactic training of 21 hours of lectures and demonstrations dealing with basic reproduction, maintenance and safekeeping of the laparoscope and proper methods of assisting during endoscopic procedures.
2. Clinical training to consist of actual assistance during 10 laparoscopic procedures in the clinic and including at least one outreach trip.

Curriculum for Nurses

The nurses would participate in didactic sessions and clinical practice related to job responsibility in the operating room. The topics will include some or all of the following:

Endoscopy and Minilaparotomy

1. Preview of films: surgical procedures
2. Procedural explanations: patient preparation
3. Informed consent: what, when, and how

4. Equipment:
 - a. Preoperative checks
 - b. Maintenance
 - c. How to get servicing
5. Surgical asepsis:
 - a. Cleaning and sterilization of equipment
 - b. Solutions for cold sterilization
6. Postoperative checks for patients prior to discharge:
discharge instructions
7. Counseling family planning
8. Infertility counseling
9. Administration
10. Management of OR and family planning activities
11. Record keeping

Practicum Activities

1. Preparing for surgical procedure
2. Systematic check of equipment
3. Observation of actual procedures
4. Develop procedure for laparoscopy
 - A. preoperative check
 - B. cleaning and sterilization

In addition, the nurses will assist, at a minimum, in 10 laparoscopies and attend a minimum of one outreach visit. As much as possible, clinical training of physicians and nurses working with them will be scheduled at the same time in order to develop the concept of team responsibility.

C. Evaluation Conference

A one-day evaluation conference for past trainees. Physicians and nurses will be arranged in Manila. The objectives will be to find out from the trainees their progress in laparoscopy, and problems they had with the equipment. It is expected that most of the existing equipment would be converted to falope ring by them and

the physicians performing falope ring applications. The trainees will be encouraged to bring their faulty equipment to the maintenance center.

IX. Evaluation

- A. Evaluation of trainees will consist of a written and a practical exam for trainees upon conclusion of the training course.
- B. After completion of training, the trainees will send to the project director quarterly reports regarding utilization, complications, and equipment problems. The director will compile the reports and send a summary report to JHPIEGO.
- C. In the tenth month, the entire program will be reviewed by the Fertility Care Center and JPHIEGO to determine future needs, possible revisions of curriculum, and need for further equipment.
- D. An annual report will be submitted to JHPIEGO by the project director detailing results of the program, problem encountered, and anticipated future needs.

X. Program Duration

Funding was originally requested for two years. However, the results of the two years show the probable need for an extension for another two years due to the demand for training. The proposal is for the third year up to June 31, 1982.

At the conclusion of JHPIEGO support, the Fertility Care Center will continue to offer services. Training of Philippine doctors will be continued as needed and the project director will be available to act as a consultant whenever necessary.

XI. Approximate Project Timetable

<u>Task</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8</u>	<u>9</u>	<u>10</u>	<u>11</u>	<u>12</u>
A. Recruit and evaluate trainees or collect and redistribute scopes.		X	X									
B. Continue the appointment of staff.		X										
C. Establish course timetable, including outreach visits.												X
D. Invite and select Philippine trainees.		X	X									
E. Hold a two-week course.		X	X		X		X		X			
F. Hold a 3-week course for nurses.			X	X		X		X		X		
G. Make evaluation follow-up visits							X		X		X	X
H. Evaluation meeting with JHPIEGO											X	
I. Submit refunding proposal for Year 3.											X	
J. Report to JHPIEGO.				X			X		X			X
K. Submit Annual Report.												X
L. Evaluation conference with trainees									X			

Implementation Plan

The Mary Johnston Hospital will continue to:

1. Maintain the office of the Project Director, Dr. Virgilio R. Oblepias and appoint program personnel.
2. Handle funds and along with the project director be responsible for receiving, administering, and accounting of the funds.
3. Provide space and support for the activities of the maintenance center.

For the Didactic courses:

The Mary Johnston Hospital through the project director will:

1. Arrange for all didactic training courses for a total of 30

physicians and 50 nurses.

2. Recruit and select the proposed candidates to be trained (criteria for selection are described in the program description) and submit completed individual and institutional application forms to JHPIEGO.

3. Arrange for in-country faculty to participate in the courses.

4. Carry out the evaluation as described in Section IX.

5. Continue the process developed for collecting, recording, and analyzing on a quarterly basis, the number of all voluntary and diagnostic laparoscopic procedures, persons performing them and any problems experienced with the equipment and in turn report this to JHPIEGO.

6. Print and distribute the manual developed in Year One on setting up an endoscopy center to be reviewed by JHPIEGO according to Provision No. 15, Section C, "Standard Provisions for JHPIEGO Agreements with Overseas Institutions."

JHPIEGO will:

1. Provide technical assistance with respect to the brochure, manual, and curricula evaluation and refinement of the course as needed and requested.

2. Procure and ship educational materials as specified under Section B "Provision and Support" of this agreement.

3. Provide laparoscopic equipment if deemed appropriate and/or necessary to meet the objectives of the program.

Clinical Practice Training

The Mary Johnston Hospital through the project director will:

1. Arrange for one week of clinical practice training for each physician who has completed the didactic training and those nominated by JHPIEGO.

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2. Arrange for the clinical training faculty to submit to the project director the standard clinical practice evaluation forms certifying to the competency of the trainees to utilize endoscopic equipment. The project director will send a copy of the evaluation forms to the regional development office at JHPIEGO.

Follow-up Training

The Mary Johnston Hospital through the project director will:

1. Coordinate one- to two-day followup field training visits with the host institution of each qualified physician and arrange for the consultant trainers to provide on-site training. The project director will be responsible for (a) obtaining the institutional voluntary participation forms, retaining a copy for his records and sending the original of these forms to JHPIEGO (b) providing on-site supervision of the performance of additional cases of laparoscopy procedures at each host institution, and (c) submitting to JHPIEGO for their records a copy of the completed field training evaluation forms.

2. Arrange, whenever possible, to send an equipment maintenance technician from the maintenance equipment center to each institution at the time of the field training operations to provide training in equipment maintenance to nurses and other support staff.

Distribution and utilization of equipment

The Mary Johnston Hospital through the project director will distribute the equipment and monitor utilization. The trainee and the institution will be informed that for continued use of the equipment, there should be a minimum of 50 laparoscopies performed during one year after receipt of equipment.

The Mary Johnston Hospital Project Director will submit to JHPIEGO the following reports:

1. Monthly Fiscal Reports
2. Program Reports:—

Form A - Training Participant List: After each didactic course

Form B - Course Evaluation: After each course

Form C - Individual Application: After each physicians' course

Form D - Paramedic Application: After each nurses' course

Form E - Institutional Application: After each course

Form F - Clinical Practice: To be submitted upon completion of clinical practice training for both physicians and nurses.

Form G - Field Visit Report: For each trainee field-visited.

Form H - Quarterly Report: Upon request

Form I - Equipment Report: Upon request

Note: JHPIEGO will provide the printed forms.

3. Annual Report. This report shall be a narrative which describes the work performed during the year (accomplishments and problems encountered); data on the number of physicians trained in Phases I, II, and III; the number of other physicians and professionals trained as a result of those trained in Phase I, II, and III; the number of patients receiving at these institutions endoscopic services (diagnostic and/or therapeutic) as a result of this program and the number of laparoscopes reassigned, if appropriate.

An Annual Fiscal Report will provide an accounting of funds received and expenditures made. It will be submitted within 90 days of the end of the grant period.

BUDGET

The tuition rate will be on a trainee per course basis and will be based on the following components:

In-CountryAdministration

Personnel	\$ 12,185
Supplies	1,500
Telecommunications	2,500
Educational material (local)	567
Staff Travel	2,172
Staff Per Diem	2,060
Trainee Travel (40 physicians & 50 nurses)	10,832
Trainee Maintenance (physicians - 40)	7,000
Trainee Maintenance (nurses - 50)	12,500
Trainee Per Diem (20 Regional trainees: 10 - physician, 10 nurses)	21,780
Training Cost	50,360
Trips	3,961

Training Subtotal\$127,417
+Cost of Living Increase...\$ 1,727

Evaluation Conference 11,730

In-Country Support\$140,874

JHPIEGO Direct Support

110 individual educational packages @ \$50	\$ 5,500
16 laproscopos @ \$4,000 + 28% shipping	64,000
	17,920

Travel:

	ST	\$ 87,420
a) trainee travel: 20 regional trainees @ 2,284 (round trip)		\$ 45,680
b) 1 trip by nursing consultant - one week		2,500
c) 1 trip by consultant for evaluation conference and course - one week		<u>2,500</u>
	ST	\$ 50,680

Follow-up Visits: 3 trips of 7 days each

a) Travel: \$2,284 x 3 =	\$ 6,852	
b) Maintenance: 21 days x \$64.00 =	1,344	
c) Consultation Fee: \$50/per day x 15 days	<u>750</u>	
	ST	8,946

JHPIEGO Direct Total\$147,046

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Budget Summary

In-Country Total.....	\$140,874
JHPIEGO Direct Total.....	\$147,046
OVERALL TOTAL	<u>\$287,920</u>

Details of the Budget

1.	<u>Administrative Expenses</u>		
	-Personnel:		
	a) Project Director (208 max. days)	\$	12,185
	- includes cost of living, 13th month, and housing allow.		
2.	Supplies		1,500
3.	Telecommunications		2,500
	-postage, telex, telephones		
4.	Local Educational Materials		
	a) 1 copy of "Surgical Contraception"		
	to 110 trainees @ P. 20.00		297
	(conversion: P 1,620 ÷ 7.40 =)		
	b) 1 copy of "Surgical Contraception"		
	to 100 observers/visitors @ P. 20.00		270
	(conversion: P. 2000 ÷ 7.40 =)		
5.	Staff Travel: To recruit and follow-up	ST \$	567
	trainees (17 trips)		
	a) Visayas, 3 trips @ \$225 (round trip)		675
	b) Mindanao, 3 trips @ \$225 (round trip)		675
	c) Northern Luzon, 7 trips @ \$40.00 (round trip)		280
	d) Bicol, 2 trips @ \$60 (round trip)		120
	e) Southern Luzon, 2 trips @ \$30.00 (round trip)		60
	f) Local travel for administrative purposes		360
	(\$30.00 x 12 trips)		
	Plus expected increase due to inflation...		362
		ST \$	2,532
6.	Staff Per Diem:		
	a) 17 trips x 5 days @ \$20.00/per day	\$	1,700
7.	Trainee Expenses - 90 Filipinos		
	a) Visayas, \$180 x 27	\$	4,860
	b) Mindaneao, \$180 x 27		4,860
	c) N. Luzon, \$30 x 20		600
	d) S. Luzon, \$28 x 14		392
	e) Bicol \$10 x 2		120
		ST \$	10,832

8. Trainee Maintenance

a) 40 MD trainees in two-week course or 14 days @ \$175/per trainee	\$ 7,000
b) 50 nurses in three-week course or 21 days	12,500
c) 20 regional trainees (10 physicians and 10 nurses) @ \$363/per week x 3	<u>21,780</u>
ST	\$ 41,280

9. Training Cost

a) Staff: Monthly Salaries

	<u>Pesos</u>
1. Surgeon (f/t)	2910
2. Surgeon (f/t)	2910
3. Surgeon (f/t)	2910
4. Surgeon (f/t)	2910
5. Anesthesiologist (retaining fee) *	693
6. Pathologist (p/t) 25% **	693
7. Bookkeeper (p/t) 50% **	550
8. Nurse Administrator	1292
9. Head Nurse	1018
10. Psychologist (f/t)	1223
11. Staff Nurse (f/t)	945
12. Staff Nurse (f/t)	945
13. Social Worker (f/t)	910
14. Secretary (f/t)	762
15. Patient Registration Clerk (f/t)	693
16. Clerk/Typist (f/t)	693
17. Orderly (f/t)	638
18. Orderly (f/t)	555
19. Nurse Aide (f/t)	555
20. Drive/Mechanic/Utility man (f/t)	693
21. Other consulting faculty/honoria to be decided	<u>* 803</u>
	P 25,301/per month
	x 12 mos.
Subtotal	P 303,612

*not eligible for living allowance
 ** eligible for prorated living allowance

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<u>Cost of Living Allowance</u>	<u>Pesos</u>
a) 17 3/4 persons x P 380/per month x 12 months =	80,940
b) 13 month salary for 17 3/4 persons =	23,805
c) mandatory housing plan or 2% of base salary for 17 3/4 persons =	<u>5,713</u>
	ST 110,458
	<u>303,612</u>
	P 414,070

Training Cost Subtotal is Pesos 414,070 or U.S. Dollars: 55,955. (Exchange rate, US \$1 = P 7.4)

Thus, Total Training Cost\$ 55,955
 **Minus 10% Effort\$ 5,595
 Adjusted Cost\$ 50,360

** It is estimated that 10% effort is required for clinical training center activities under a separate agreement with JHPIEGO. Therefore, the adjusted cost (or 90% effort) has been used as the training cost factor for the training described in the proposal. The cost of living (P 60) which is effective from 4/81 is being verified and \$1,727 will be required to cover this expense.

10. Outreach Training Trip to other provinces.
- a) 45 trips (2 trainees each) x P. 533/per trip = P. 23,985 (or) \$3,961
 *Based on estimated round-trip fare @ 18¢ per mile (US Gov't rate)
11. Conference: 100 attendees
Travel - 60/outside Manila; 40/Manila

Conference

Travel:

60 (from outside Manila) x 150 = \$ 9,000

Per Diem:

P 90 x 1 day x 60 = P 5,400

(P 5,400 ÷ 7.40) = \$ 730

Cost of Professional Activities:

\$20.00/per attendee for 100 attendees = \$ 2,000

ST \$ 11,730

+ Cost of living 1,727

TOTAL IN-COUNTRY \$ 140,874

JHPIEGO DIRECT SUPPORT

Educational Material:

a) 110 individual packages x \$50.00/ea. \$ 5,500

Equipment:

a) 16 laproscopos \$ 64,000

b) Plus 28% for shipping/handling 17,920

Follow-up visits: (Regional)

a) 3 trips of 7 days each. Includes travel (\$6,852), Maintenance (\$1,344) and consultation fee (\$750) \$ 8,946

Travel:

a) includes trainee travel, travel of nurse consultant and consultant for evaluation \$ 50,680

JHPIEGO DIRECT TOTAL \$147,046

*Training Cost subtotal (\$137,874) includes increase of \$1,727 when revised cost of living is verified.

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BUDGET JUSTIFICATION

In-Country:

Personnel - Director's salary reflects 10% increase over last year due to inflation.

Supplies - This will cover the office supplies required for the program. The increase from last year's budget is based on actual cost from last year.

Telecommunications - This includes the cost of telephone, postage, telex, and has been increased on the basis of actual costs from last year as well as anticipated expenses for communications regarding regional trainees.

Educational Materials - This has been calculated at the same rate as last year.

Staff Travel and Per Diem - Travel rates reflect a 20% increase due to the inflation; however, per diem rates remain the same as last year. These include trips for recruitment, follow-up and administrative purposes.

Trainee Travel and Per Diem - These costs for Filipino physicians and nurses remain the same as last year. However, the per diem rate for the regional trainees is calculated based on the negotiated maintenance allowance presently in effect for the Philippine Clinical Training center under the TA-14 Agreement (\$363/week). Regional trainee travel costs will be from JHPIEGO Direct Support

Clinical Training Costs - 1) 90% of the salaries mentioned in the budget are through this Agreement. 10% will be paid through the TA-14 Agreement. 2) The addition of the Mandatory Housing Plan and bonus from an extra month of salaries plus P 380/per month for a cost of living allowance is by order of the Philippine Government. 3) There has been an increase of P. 60 to the cost of living allowance since April 1981 thus raising the cost of living allowance to P 440/per month. This is being verified with AID/Manila. However, the amount of \$1,727 has been included in the budget to cover this additional expense when verified. 4) The outreach trips cost has been calculated at the allowable

U.S. Government rate of 18¢ per mile with an average distance of 200 miles. These are made to provincial cities away from Manila.

Conference Costs - This covers travel, per diem, and cost of professional activities. a) Travel: This covers travel costs of 60 participants from outside Manila at an average travelling cost of \$150/round trip. b) Per Diem: This covers expenses for the 60 trainees from outside Manila (\$730) c) Professional Activities have been calculated to \$20.00/per trainee. It includes registration fees and administrative expenses relative to the conference. 100 attendees x \$20 = \$2,000

JHPIEGO Direct

Consultant Cost - This includes travel and per diem for the course(s) and conference

Nursing Consultant's trip - A JHPIEGO nursing consultant will visit one of the courses to supervise activities. This covers the cost of travel and per diem for 7 days at the AID rate of \$64.00/per day.

Regional Trainees - Travel rate for the regional trainees is based on an average trip from Fiji Island to Manila or \$2,284 x 20 = \$24,680

Maintenance Allowance - This is based on \$363/per week for regional trainees and includes an average hotel cost, boarding, local transportation, airport tax fares, and other expenses that are relative. This rate is the same as was negotiated for the foreign trainees sent by JHPIEGO/Baltimore after completion of the course and fall under the TA-14 Agreement. Thus: 20 trainees x 3 weeks x \$363/week = \$21,780

Educational Materials - This covers the cost of individual educational packages for 110 trainees. (\$5,500)

Follow-up visits to regional trainees - Three trips of seven days each. a) Travel - \$2,284 x 3 = \$6,852

b) Maintenance - 21 days @ \$64.00 = \$1,344

c) Consultation Fee @ \$50.00/per day = \$750.00

A consultant from the Philippines will go to the Islands to install the equipment and to supervise the progress of trainees. The nurses will be followed-up at the same time equipment is installed for physicians. Equipment - This item covers the cost of 16 laproscopos (10 for Philippine trainees and 6 for Regional trainees) and a 28% shipping and handling charge. (\$64,000)

Letter of Agreement

PHILIPPINES ENDOSCOPY TRAINING PROGRAM
MARY JOHNSTON HOSPITAL



This Letter of Agreement sets forth the technical and logistical assistance which the JHPIEGO Corporation will provide to the Mary Johnston Hospital in connection with the continuation of the Philippines Endoscopy Training Program to be carried out by the Fertility Care Center. Additionally, JHPIEGO authorizes the utilization of medical equipment previously provided by JHPIEGO to the Mary Johnston Hospital under the CA-15 Agreement for the performance of this Agreement subject to the same inventory and reporting requirements.

The terms and conditions of this Letter of Agreement, which includes Section A-Program Description; Section B-Provisions of Support; and Section C-Standard Provisions For JHPIEGO Agreements With Overseas Institutions constitute an agreement between the JHPIEGO Corporation and the Mary Johnston Hospital without any other guarantees, offers or understandings expressed or implied whatever. All approved revisions of the project will also be made part of this Agreement.

This Letter of Agreement is effective when signed by JHPIEGO and shall retroactively cover work for the period beginning June 1, 1981 through May 31, 1982. The Agreement supersedes in its entirety the Letter of Intent, which has been in effect since June 1, 1981. The support included in this Agreement shall be provided to the recipient retroactively for work performed during the period that the Letter of Intent was in force and shall be subject to the terms and conditions specified in this Agreement. This Agreement may be amended to extend the period and/or scope of work and to provide additional support, if agreed to by the parties to the Agreement and if JHPIEGO has the authority to authorize the support.

Under the terms of this Letter of Agreement, the JHPIEGO Corporation will provide the following support for the program to be carried out by the Fertility Control Center:

1. A grant not to exceed \$140,720 to cover reimbursement for tuition payments as specified in Section B of this Agreement.
2. Medical equipment, educational materials and faculty support as specified in Section B of this Agreement.

The JHPIEGO Corporation will fulfill its obligation under the terms of this Agreement to the extent that the terms and provisions set forth in the Agreement are respected by the other party of this Agreement. If these provisions are acceptable, please have the appropriate officials sign five copies and return three signed copies to the JHPIEGO Corporation. Two signed copies should be retained for your files.

Mr. W. Thomas Barnes
Treasurer of JHPIEGO

Theodore M. King, M.D., Ph.D.,
President of JHPIEGO

Date

Date

Authorized Official
Mary Johnston Hospital

Dr. Virgilio Oblepias, Director
Fertility Care Center

Date

Date

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Program Description

Agreement Between JHPIEGO and the Mary Johnston Hospital, Manila, Philippines

I. Purpose of Agreement:

To continue support of the Philippine endoscopy in-country training program for physicians and nurses from institutions within the Philippines and to incorporate training in techniques of laparoscopy for physicians and nurses from institutions in other islands in the Pacific to expand the availability of laparoscopic services to women and to improve maternal and child health in these countries.

II. Objectives:

This collaborative program between the JHPIEGO Corporation and the Mary Johnston Hospital is:

1. To provide two week didactic and clinical endoscopy refresher training courses in the techniques of diagnostic and therapeutic use of the laparoscope for Philippine physicians who have had previous training in laparoscopy and for Philippine physicians experienced in gynecological surgery with no previous laparoscopic training.
2. To provide three week didactic and clinical endoscopy training courses in the techniques of diagnostic and therapeutic use of the laparoscope to physicians from institutions in Fiji and other islands in the Pacific who have had no previous laparoscopic training.
3. To provide didactic and clinical training in methods of family planning, skills needed to assist physicians providing laparoscopic services and care and maintenance of surgical equipment for nurses from Philippine institutions of physicians trained in laparoscopy and for nurses from institutions in Fiji and other islands in the Pacific also working with physicians trained in this program.
4. To conduct a one day Program Evaluation Conference for Philippine physician and nurse graduates trained in the Fertility Care Center training programs to discuss and evaluate their post training endoscopy activities.

III. Sites of Training:

The didactic and clinical training courses for physicians and nurses will be conducted at the Fertility Care Center of the Mary Johnston Hospital. Trainees will receive a portion of their clinical training during one day Tilamsik trips to communities outside of Manila. The conference will be held in Manila.

IV. Project Personnel:

Dr. Virgilio R. Oblepias, Director of the Fertility Care Center, will continue to serve as Project Director for this program. He will be assisted by other professional and ancillary staff of the hospital who have been involved with the training program during the past two years. JHPIEGO consultants may participate in the program to supplement the training activities.

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V. Criteria for Selection of Trainees:

The Project Director, in collaboration with JHPIEGO, will select physician and nurse participants well in advance of scheduled courses. Criteria will include:

1. Physician trainees must have the professional capability, willingness and capacity to perform diagnostic and therapeutic laparoscopic procedures.
2. All physician trainees must be practicing obstetrician/gynecologists or surgeons experienced in general and gynecological surgery.
3. Nurses who are or will be assisting physicians trained in laparoscopy under this Agreement will be given priority.
4. Priority will be given to physician and nurse trainees from institutions with laparoscopes which are not being used.

VI. Description of the Project:

The in-country training program will be organized through the Fertility Care Center of the Mary Johnston Hospital and will provide didactic and clinical training in laparoscopy to physicians and nurses from institutions in the Philippines and to physicians and nurses from institutions in other islands in the Pacific. There will be two types of courses of different duration for physicians and three week courses for nurses. Whenever possible nurse courses will coincide with clinical training of physicians to develop the concept of team responsibility. A one day Program Evaluation Conference for Philippine physicians and nurses trained in this program will be conducted in the second half of the program year.

A. Endoscopy Refresher Courses

The series of two week didactic and clinical endoscopy refresher courses for an estimated 40 Philippine physicians with previous training in laparoscopy will consist of lectures and demonstrations covering all aspects of endoscopy including a re-evaluation of their home institutional endoscopy program. Philippine physicians experienced in gynecological surgery who have had no previous training in laparoscopy may also be included in the training program. During clinical training, physician trainees will assist with at least five laparoscopic procedures with the consultant trainer as surgeon and perform a minimum of 10 laparoscopic procedures under supervision. Some of these procedures may be performed during the one day Tilamsik trips. Trainees will perform additional cases of laparoscopy during the on-site field training visits to their home institutions.

B. Endoscopy Courses

The three week didactic and clinical endoscopy courses for an estimated 10 physicians from institutions in Fiji and other islands in the Pacific who have had no laparoscopic training will be similar to the curriculum covered in the refresher course. However, during clinical training physicians will assist with a minimum of five laparoscopic procedures with the consultant trainer as surgeon and perform 10 to 15 laparoscopic procedures under supervision. Some of these procedures may be performed during the one day Tilamsik trips. Trainees will perform additional procedures during the on-site field training visits to their home institutions.

C. Nurse Training Courses

The three week nurse training courses for an estimated 50 Philippine nurses and an estimated 10 nurses from institutions in Fiji and other islands in the Pacific will consist of didactic and clinical training which will include lectures and demonstrations concerning topics related to reproductive health covering basic human reproduction, and skills necessary for assisting physicians with laparoscopic procedures and maintenance of laparoscopic equipment. In addition nurse trainees will be required to assist physicians with a minimum of 10 laparoscopic procedures as part of their clinical training in the Fertility Care Center and during at least one Tilamsik trip.

D. Program Evaluation Conference

During the second half of the program year, a one day Program Evaluation Conference will be conducted at a conference facility in Manila for an estimated 100 Philippine physician and nurse graduates of the Fertility Care Center training programs to discuss their progress and any problem encountered with laparoscopic procedures, so that project staff can determine future program needs and necessary curriculum revisions. Trainees will be encouraged to bring with them any faulty equipment for repair at the Maintenance Equipment Center in the Mary Johnston Hospital.

VII. Evaluations:

Each physician and nurse trainee will be evaluated on his didactic and clinical training. The evaluation of the trainee's performance during the didactic sessions will be based on pre and post examinations which will be retained by the Fertility Care Center. Evaluation during clinical practice will be made on the basis of the observation of the trainee's performance by the trainer in charge during his clinical training and certified by the Project Director. Follow-up evaluation of physicians and nurses will be made by consultant trainers during the on-site field training visits. Each physician trainee will be required to submit to the Project Director quarterly reports detailing numbers and types of laparoscopic procedures performed, complications or problems encountered and others trained in the techniques of laparoscopy. JHPIEGO will utilize all various forms of reporting as well as site visits to determine whether program objectives are being met.

VIII. Proposed Timetable:

Month 1

Recruitment and selection of trainees
Course schedule established.

Months 2 thru 12

Conduct the two week Endoscopy Refresher Courses, the three week Endoscopy Courses and the Nurse Training Courses as described.

Conduct the one day Program Evaluation Conference.

Required reports to JHPIEGO.

IX. Implementation Plan:

The JHPIEGO Corporation will provide the technical and logistical assistance specified under Section B-Provisions of Support for the program described.

- A. The Mary Johnston Hospital through the Project Director agrees to:
1. Appoint and supervise project personnel and select in-country consultant trainers for on-site field training visits.
 2. Continue to collaborate with JHPIEGO on program content and methods of trainee evaluation for the training program, review individual and institutional registration forms and select candidates for training.
 3. Arrange for the two week didactic/clinical Endoscopy Refresher Courses, the three week didactic/clinical Endoscopy Courses, and the three week didactic/clinical Nurse Training Courses as described in the Description of the Project. Following completion of training the Project Director will submit to the JHPIEGO Regional Development Officer an Individual Registration Form (Attachment A), an Institutional Registration Form (Attachment B) and a completed Clinical Practice Evaluation Form (Attachments C and/or D) for each physician and nurse trained, certifying to the competency of the physician to utilize laparoscopic equipment and to the nurse's clinical competence. Copies of these forms will be retained for the Mary Johnston Hospital records.
 4. Coordinate up to 2 days on-site field training visits with the host institution of each Philippine physician trainee qualified to perform laparoscopic procedures. Designated consultant trainers will be responsible for (a) providing on-site supervision of the trainee's performance of additional cases of laparoscopy and/or mini-laparotomy at each host institution and (b) submitting to the Project Director for the Mary Johnston Hospital records and for the JHPIEGO Regional Development Officer, a completed Field Training Report form (Attachment E).
 5. Arrange, whenever possible, to send an equipment maintenance technician from the Maintenance Equipment Center to each Philippine institution at the time of the field training to provide training in equipment maintenance to nurses and other support staff.
 6. Designate, in collaboration with JHPIEGO, the eligible institutions, both Philippine and third country, of qualified physicians to receive surgical equipment.
 7. Arrange for the receipt and delivery of equipment provided by JHPIEGO to coincide with the on-site field training at the Philippine institutions of qualified trainees. Prior to issuing the equipment, the Project Director will obtain and have on record a signed copy of the Voluntary Participaton Requirements Form (Attachment F). The Project Director will forward this form to the JHPIEGO Regional Development Officer.
 8. Arrange for physicians trained to submit quarterly reports to the Project Director. Continue procedures for collecting, recording, and analyzing on a quarterly basis, data from all physicians trained, including those trained under the CA-15 Agreement, on the number of all voluntary

all voluntary and diagnostic laparoscopic procedures performed, persons performing them and any problems experienced with equipment and reporting this to JHPIEGO on a quarterly basis.

9. Arrange for the receipt and distribution of educational materials provided by JHPIEGO under this agreement to each physician and nurse trainee upon completion of training.
10. Arrange for the one day Program Evaluation Conference in Manila for an estimated 100 Philippine physician and nurse graduates of the Fertility Care Center training programs.

B. JHPIEGO agrees to:

1. Provide technical assistance with respect to program design, content, evaluation and development and utilization of educational materials.
2. Procure and ship equipment specified under Section B-Provision of Support of this Agreement designated for eligible Philippine institutions of physicians certified as qualified, to the Project Director to be available for the on-site field training dates established by the Project Director.
3. Procure and ship equipment specified under Section B-Provisions of Support of this Agreement directly to each eligible third-country institution of physicians certified as qualified by the Project Director and arrange for the delivery of this equipment to coincide with the on-site field training visits which will be arranged by JHPIEGO in collaboration with the Project Director. JHPIEGO will obtain from each eligible third country institution the Voluntary Participation Requirements Form (Attachment F) and send a copy of this form to the Project Director for his records. JHPIEGO will also forward to the Project Director for his records, copies of the Field Visit Report Form completed by consultant trainers as a result of the field visits to the third-country institutions.
4. Procure and ship educational materials specified in Section B-Provisions of Support of this Agreement to the Project Director who will distribute the individual packages to Philippine and third-country physician and nurse trainees.

X. Conditions Governing this Agreement:

1. JHPIEGO, with the concurrence of the Mary Johnston Hospital reserves the right to perform site visits for programmatic review provided at least 15 days notice is given for the visit.
2. The Mary Johnston Hospital through the Project Director will certify the medical personnel and institutions both Philippine and third-country to use and receive endoscopy equipment contributed by JHPIEGO under this agreement provided that the equipment is to (a) institutions of physicians certified and competent to perform the procedures and a copy of this certification forwarded to JHPIEGO for its records and (b) that the appropriate procedures are established at the Philippine institutions to assure that the surgical procedures are carried out in a voluntary

fashion with informed consent received as required in Standard Provisions For JHPIEGO Agreements With Overseas Institutions. JHPIEGO will obtain the Voluntary Participation forms from the third-country institutions and forward copies of these forms to the Project Director for his records.

3. JHPIEGO will ship all medical equipment for eligible Philippine institutions to the Project Director. The Project Director, immediately upon receipt of equipment from JHPIEGO will acknowledge receipt and condition of equipment by sending the Proof of Delivery form and a properly executed copy of the Transfer of Title signed by the Project Director to the JHPIEGO Regional Development Officer.
4. JHPIEGO will ship all medical equipment directly to each eligible third-country institution and advise them immediately upon receipt of equipment from JHPIEGO, to acknowledge receipt and condition of equipment by sending the Proof of Delivery form and a properly executed copy of the Transfer of Title, signed by the Administrative Director of the institution, to the JHPIEGO Regional Development Officer.
5. Title to equipment provided under this agreement for eligible Philippine institutions will be transferred from JHPIEGO to the Mary Johnston Hospital in accordance with Provision No. 6 under Standard Provisions For JHPIEGO Agreements With Overseas Institutions. The Project Director will maintain a central record by serial number, name of institution to which assigned and individual trained for each item of laparoscopic equipment provided to each recipient institution in the Philippines and inform JHPIEGO of the disposition. Failure to keep JHPIEGO informed on a current basis of disposition of equipment will be considered a breach of this agreement. (This includes those assigned under the CA-15 Agreement).
6. It will be the responsibility of the Mary Johnston Hospital in collaboration with JHPIEGO, to monitor the utilization of the equipment provided under this agreement to eligible Philippine institutions and to advise JHPIEGO of the reassignment of under utilized equipment or equipment not being used for the purposes given to other qualified institutions. For guidance the minimal acceptable utilization of laparoscopic equipment could be defined as an average of at least one case (diagnostic or therapeutic) weekly or 50 cases annually. The necessary training, certification and voluntary participation requirements will be coordinated between the JHPIEGO Regional Development Officer and the Project Director when equipment is reassigned. The equipment will be reassigned, field training visits conducted and the necessary forms submitted to JHPIEGO. The Mary Johnston Hospital equipment records will reflect the name of the institution to which equipment was reassigned and the name of the trained physician. The quarterly reports required under IX. A. 8. will be obtained.
7. The Mary Johnston Hospital also assumes the responsibilities outlined above for all medical equipment previously titled to the Mary Johnston Hospital by JHPIEGO under CA-15 Agreement.

8. JHPIEGO will not be directly responsible for the maintenance or repair of the medical equipment contributed under the CA-15 Agreement or under this Agreement. It will be the responsibility of the Mary Johnston Hospital to assure that the equipment provided by JHPIEGO is properly maintained.
9. JHPIEGO will procure and ship educational materials provided under this Agreement to the Mary Johnston Hospital in accordance with instructions given JHPIEGO by the Project Director prior to the first training course. The Project Director, immediately upon receipt of educational materials, will acknowledge receipt and condition of materials by sending a properly executed Receipt of Delivery form to JHPIEGO. The Project Director will retain records and inform JHPIEGO of the disposition of educational materials.
10. The Mary Johnston Hospital assumes full responsibility for any untoward consequences which might arise as a result of the training activities.
11. The Mary Johnston Hospital will consult with JHPIEGO prior to making any change of personnel in the position of Project Director.
12. The Mary Johnston Hospital will comply with the provisions set forth in Standard Provisions For JHPIEGO Agreements With Overseas Institutions.

XI. Reports:

The Mary Johnston Hospital through the Project Director will submit to JHPIEGO:

1. Copies of individual and institutional registration forms for selected trainees and trainee evaluation forms following each phase of training.
2. Voluntary Participation Requirements Forms and Transfer of Title Forms following installation of equipment in eligible Philippine institutions.
3. A quarterly report on program activities as described in IX. A. 8.
4. Reports required under Section C, Provision No. 5.
5. An annual report which shall be a narrative that describes the work performed during the year (accomplishments and problems encountered) and provides an analysis of data collected; data on the number of physicians and other health personnel trained; the number and kinds of equipment and educational materials received from JHPIEGO and disposition; the institutions equipped and certification that each item of equipment is being utilized to meet the minimum number criteria (see X. 6) and the number of patients receiving at these institutions laparoscopic services (diagnostic and/or therapeutic) as a result of this program. (Section C, Provision No. 21)
6. An annual fiscal report which will provide an accounting of funds received and expenditures made. (Section C, Provision No. 21)
7. Final project and financial reports required under Section C, Provision No. 21.

XII. Period of Agreement:

Action to extend the date of this agreement as shown in the Letter of Agreement is contingent upon the status of JHPIEGO's prime grant and accomplishments under the terms of this agreement.

Provisions of Support

ADMINISTRATION AND BOOKKEEPING CONDITIONS:

1. BUDGET ALLOCATIONS:

JHPIEGO will reimburse the Mary Johnston Hospital for training and field visits at the tuition rates established in this Agreement and for the conference professional activities at the rate established in the Agreement, provided the expenditures do not exceed the total amount projected in the budget for the authorized period. Additional funding is contingent upon the status of the JHPIEGO prime grant and program accomplishments.

2. REIMBURSEMENT:

JHPIEGO requires notification by the Mary Johnston Hospital of their non-interest bearing bank account for deposits and maintenance of the grant funds. Reimbursement will be made to this account by cable transfer or by check upon receipt of the required trainee participation and evaluation forms and the Tuition Payment Request Form signed by the Mary Johnston Hospital Project Director.

All financial reports will be submitted to JHPIEGO in accordance with Provision No. 5 under Standard Provisions For JHPIEGO Agreements With Overseas Institutions. Reimbursement of expenses is contingent upon the timely submission of required reports.

3. BOOKKEEPING:

The recipient should maintain books, records, documents and other evidence of accounting procedures and practices sufficient to reflect properly that any funds provided by JHPIEGO were expended exclusively for the purposes of the grant and in keeping with the approved budget. In addition, the recipient will preserve and make available as part of the grant records, all correspondence between itself and JHPIEGO concerning additional agreements, amendments, and/or deletions relative to grants.

All recipient records must be maintained for a period of three years after the expiration of the grant unless otherwise directed by JHPIEGO. In fulfillment of this provision, JHPIEGO may request that such records be transferred to JHPIEGO for safekeeping.

4. FINANCIAL AUDIT:

Periodic audits of this agreement may be made at the request of JHPIEGO. The audit may be performed by a certified public accountant designated by JHPIEGO, or as otherwise stated in Provision No. 2 under Standard Provisions For JHPIEGO Agreements With Overseas Institutions.

The recipient agrees to assist in every way possible in the conduct of this audit. Documentation will be presented to substantiate the expenditures under this agreement and compliance with the attached Standard Provisions For JHPIEGO Agreements With Overseas Institutions.

IN-COUNTRY SUPPORT BY JHPIEGO:

I. Training and Education:

A. Payment of Tuition for Didactic and Clinical Training for Philippine Physician and Nurse Trainees:

JHPIEGO will assist with the provision of trainee support by reimbursing the Mary Johnston Hospital a tuition rate of \$1,265 for each physician trainee who successfully completes the two week Refresher Course and a tuition rate of \$774 for each nurse trainee who successfully completes the three week Nurse Training Course in accordance with Provision No. 5 under Standard Provisions For JHPIEGO Agreements With Overseas Institutions.

Following the didactic and clinical training course(s) the Project Director will forward a duly executed copy of the appropriate Clinical Practice Evaluation Form for each physician and nurse trained and the Tuition Payment Request Form (Attachment G) to the JHPIEGO Director of Resource Management as specified in Provision No. 5.

B. Payment of Tuition for Didactic and Clinical Training for Fiji and Other Pacific Island Physician and Nurse Trainees:

JHPIEGO will assist with the provision of trainee support by reimbursing the Mary Johnston Hospital a tuition rate of \$2,059 for each physician trainee who successfully completes the three week Endoscopy Training Course and a tuition rate of \$1,493 for each nurse trainee who successfully completes the three week Nurse Training Course in accordance with Provision No. 5 under Standard Provisions For JHPIEGO Agreements With Overseas Institutions. Following the didactic and clinical training course(s) the Project Director will forward a duly executed copy of the appropriate Clinical Practice Evaluation Form for each physician and nurse trained and the Tuition Payment Request Form to the JHPIEGO Director of Resource Management as specified in Provision No. 5.

C. Payment of Tuition for On-Site Field Training of Philippine Physicians:

JHPIEGO will reimburse the Mary Johnston Hospital an on-site field training tuition rate of \$100 for each site visited in accordance with Provision No. 5. Following training the Project Director will forward to the JHPIEGO Director of Resource Management a completed Field Training Report Form (Attachment E) for each physician trained and a Tuition Payment Request Form as specified in Provision No. 5.

D. Payment of Fees for the Program Evaluation Conference:

JHPIEGO will reimburse the Mary Johnston Hospital a fee of \$117 per physician and nurse participant who attends the one day Program Evaluation Conference

in accordance with Provision No. 5. Following the conference the Project Director will forward to the JHPIEGO Director of Resource Management a completed Participant List (Attachment H) certifying that all participants listed were official registrants of the conference and participated in the entire conference.

The conference fees will offset costs for the travel and per diem expenses of participants and other conference related professional activities.

DIRECT SUPPORT BY JHPIEGO:

I. Training and Education:

A. Payment for In-Country Consultants:

JHPIEGO will make arrangements in collaboration with the Project Director and pay consultant fees, travel and per diem expenses for in-country consultant trainers providing on-site field visit training at the eligible institutions of an estimated 10 certified trainees from Fiji and other islands in the Pacific, in accordance with U.S. Government Regulations.

B. Third Country Trainee Travel and Per Diem:

JHPIEGO will make arrangements and pay travel expenses for an estimated 10 physicians and 10 nurses from Fiji and other islands in the Pacific to attend the three week training courses conducted by the Fertility Care Center of the Mary Johnston Hospital in accordance with U.S. Government Regulations.

C. Payment for U.S. Consultant Faculty:

JHPIEGO will pay travel and per diem expenses for a JHPIEGO staff nursing consultant to participate in one of the three week Nurse Training Courses and for a consultant to conduct on-site programmatic review in accordance with U.S. Government Regulations.

D. Educational Materials:

50 Individual Packages for Physicians
60 Individual Packages for Nurses

Fifty individual physician and sixty individual nurse educational packages will be provided for distribution by the Project Director to each physician and nurse trainee upon completion of the didactic and clinical training courses described in Section A of this Agreement.

II. Medical Equipment:

16 Laproscopators

JHPIEGO will provide laproscopators to eligible institutions of certified physicians trained under this Agreement in the Philippines, Fiji and other islands in the Pacific.

PROVISION OF SUPPORT BY THE MARY JOHNSTON HOSPITAL:

The Mary Johnston Hospital agrees to:

1. Provide the necessary lecture rooms, operating room time and space, medicine, consumables and any medical costs related to possible complications.
2. Provide office space, office equipment, accounting and other administrative support as needed.
3. Lend administrative assistance to ensure that all necessary activity reporting, voluntary participation forms, quarterly, annual and fiscal reports are submitted to JHPIEGO in a timely fashion.

The Recipient will submit to the JHPIEGO Director of Resource Management, following the didactic/clinical training course a Tuition Payment Request Form with a Clinical Practice Evaluation Form for each physician and nurse trainee attached. Payment of the tuition rate shall be on the basis that the individual has successfully completed his training. The Recipient shall not be compensated for individuals who have participated partially in the program and have not completed the course requirements unless unusual circumstances occur which the Project Director will bring to the attention of the JHPIEGO Regional Development Officer. The JHPIEGO Regional Development Officer will review the circumstances and if appropriate recommend a prorated tuition payment for the Recipient.

Following completion of on-site training in each Philippine institution, the Recipient will submit to the JHPIEGO Director of Resource Management a Tuition Payment Request Form with a Field Visit Report Form attached, certifying that the tuition for which reimbursement is being sought is for a successfully completed on-site field training visit.

Following the Program Evaluation Conference, the Recipient will submit to the JHPIEGO Director of Resource Management a completed Participant List certifying that the conference fees for which reimbursement is being sought are for participants' attendance for the entire Conference.

The Recipient will instruct JHPIEGO as to the bank or other institution into which JHPIEGO will deposit, in the name of the Recipient, payments and advance funds (Section B, 2. Reimbursement).

- (b) Funds obligated hereunder but not disbursed to the Recipient at the time the Agreement expires or is terminated, shall revert to JHPIEGO, except for funds encumbered by the Recipient by a legally binding transaction applicable to the Agreement. Any funds disbursed to but not expended by the Recipient at the time of expiration or termination of the Agreement shall be refunded to JHPIEGO.
- (c) If, at any time during the life of the Agreement and prior to final settlement of the Agreement, it is determined by JHPIEGO that funds provided under the Agreement have been expended for purposes not in accordance with the terms of the Agreement, the Recipient shall refund such amounts to JHPIEGO.

4. LIMITATIONS OF FUNDS (Not Applicable to NTA Agreements)

The cost to JHPIEGO for the performance of this Agreement will not exceed the estimated cost set forth in the Budget which is a part of this Agreement and the Recipient agrees to perform the work specified in the Program Description and all obligations under this Agreement within the estimated costs for the period of performance covered by the Agreement.

5. PAYMENT - ADVANCE (Modified)

Payment of tuition by JHPIEGO to the Recipient will be paid at the rates specified in Section B, Provisions of Support, In-Country Support by JHPIEGO, I. A, B and C and conference fees will be paid at the rate specified in I. D. JHPIEGO, if it so determines may provide to the Recipient, an advance payment of tuition for the training specified under this agreement.

"STANDARD PROVISIONS FOR JHPIEGO AGREEMENTS
WITH OVERSEAS INSTITUTIONS"

(Fixed Rate or Fixed Fee Reimbursements)

1. ALLOWABLE COSTS AND PAYMENT (Modified)

The Recipient shall be reimbursed at the amount specified in this Agreement or as modified by amendments to this agreement, for each rate or fee category.

2. ACCOUNTING, RECORDS, AND AUDIT

The Recipient shall maintain books, records, documents, and other evidence in accordance with the Recipient's usual accounting procedures to sufficiently substantiate charges to the Agreement. The Recipient shall preserve and make available such records for examination and audit by JHPIEGO and/or AID and the Comptroller General of the United States, or their authorized representatives (a) until the expiration of three years from the date of termination of the program and (b), for such longer period, if any, as is required to complete an audit and to resolve all questions concerning expenditures unless written approval has been obtained from the President of JHPIEGO to dispose of the records. Generally accepted auditing practices are followed in determining that there is proper accounting and use of funds. The Recipient agrees to include the requirements of this clause in any subordinate agreement hereunder.

3. REFUNDS

(a) If use of Agreement funds results in accrual of interest to the Recipient or to any other person to whom Recipient makes such funds available in carrying out the purposes of this Agreement, the Recipient shall refund to JHPIEGO an amount equivalent to the amount of interest accrued.

6. TITLE TO AND USE OF PROPERTY (RECIPIENT TITLE) - Not Applicable to NTA Agreements

Title to all property provided under this Agreement shall vest in the Recipient unless specifically provided for elsewhere in this Agreement, subject to the following conditions:

- (a) The Recipient shall not charge for any depreciation, amortization, or use of any property, title to which remains in the Recipient under this provision under this Agreement.
- (b) The Recipient agrees to use and maintain the property for the purpose of the Agreement.
- (c) With respect to nonexpendable property having an acquisition costs of \$1,000 or more, title to which vests in the Recipient, the Recipient agrees:
 - (1) To report such items to JHPIEGO's Director of Resource Management as they are acquired and to maintain a control system with serial numbers where appropriate which will permit their ready identification and location.
 - (2) To transfer title to any such items to JHPIEGO in accordance with any written request therefore issued at any time within two years after final settlement of this Agreement by President of JHPIEGO.

7. TERMINATION

- (a) For Cause. This Agreement may be terminated for cause at any time, in whole or in part, by the President of JHPIEGO upon written notice to the Recipient, whenever for any reason he/she shall determine that such termination is in the best interest of JHPIEGO.

- (b) For Convenience. This Agreement may be terminated for convenience at any time by either party, in whole or in part, if both parties agree that the continuation of the Agreement would not produce beneficial results commensurate with the further expenditure of funds. Both parties shall agree upon termination conditions, including the effective date and, in the case of partial terminations, the portion to be terminated. The agreement to terminate shall be set forth in a letter from the President of JHPIEGO to the Recipient.
- (c) Termination Procedures. Upon receipt of and in accordance with a termination notice as specified in either paragraph (a) or (b) above, the Recipient shall forthwith take immediate action to minimize all expenditures and obligations financed by this Agreement and shall cancel such unliquidated obligations whenever possible. Except as provided below, no further reimbursement shall be made after the effective date of termination, and the Recipient shall within 30 calendar days after the effective date of such termination repay to JHPIEGO all unexpended portions of funds theretofore paid by JHPIEGO to the Recipient which are not otherwise obligated by a legally binding transaction applicable to the Agreement. Should the funds paid by JHPIEGO to the Recipient prior to the effective date of the termination of this Agreement, be insufficient to cover the Recipient's obligations pursuant to the aforementioned legally binding transaction, the Recipient may submit to JHPIEGO within 60 calendar days after the effective date of such termination a written claim covering such obligations, and subject to the limitations contained in the Agreement, the President of JHPIEGO shall determine the amount or amounts to be paid by JHPIEGO to the Recipient under such claim in accordance with the applicable U.S. Federal cost principles.

8. VOLUNTARY PARTICIPATION

- (a) The Recipient agrees to take any steps necessary to ensure that funds and other means of support made available under this Agreement will not be used to coerce any individual to practice methods of family planning inconsistent with such individual's moral, philosophical, or religious beliefs. Further, the Recipient agrees to conduct its activities in a manner which safeguards the rights, health and welfare of all individuals who take part in the program.
- (b) The Recipient shall insert paragraphs (a) and (b) of this provision in all subgrants, subcontracts, purchase orders, and any other subordinate agreements hereunder.

9. PROHIBITION ON ABORTION-RELATED ACTIVITIES

- (a) No funds or other means of support made available under this Agreement will be used to finance, support, or be attributed to the following activities: (i) Procurement or distribution of equipment intended to be used for the purpose of inducing abortions as a method of family planning; (ii) special fees or incentives to women to coerce or motivate them to have abortions; (iii) payments to persons to perform abortions or to solicit persons to undergo abortions; (iv) information, education, training, or communication programs that seek to promote abortion as a method of family planning.
- (b) The Recipient shall insert paragraphs (a) and (b) of this provision in all subgrants, subcontracts, purchase orders, and any other subordinate agreements hereunder.

10. VOLUNTARY PARTICIPATION REQUIREMENTS FOR STERILIZATION PROGRAMS

- (a) None of the funds or other means of support made available under this Agreement shall be used to pay for the performance of involuntary sterilizations as a method of family planning or to coerce or provide any financial incentive to any person to practice sterilization.
- (b) The Recipient shall insure that any surgical sterilization procedures supported in whole or in part by funds from the Agreement are performed only after the individual has voluntarily presented to himself or herself at the treatment facility and has given his or her informed consent to the sterilization procedure. Informed consent means the voluntary knowing assent from the individual after he or she has been advised of the surgical procedures to be followed, the attendant discomforts and risks, the benefits to be expected, the availability of alternative methods of family planning, the purpose of the operation and its irreversibility, and his or her option to withdraw consent any time prior to the operation. An individual's consent is considered voluntary if it is based upon the exercise of free choice and is not obtained by any special inducement or any element of force, fraud, deceit, duress or other forms of coercion or misrepresentation.
- (c) Further, the Recipient shall document the patient's informed consent by (i) a written consent document in a language the patient understands and speaks, which explains the basic elements of informed consent, as set out above, and which is signed by the individual and by the attending physician or by the authorized assistant of the attending physician; or (ii) when a patient is unable to read adequately a written certification signed by the

attending physician or by the authorized assistant of the attending physician that the basic elements of informed consent above were orally presented to the patient, and that the patient thereafter consented to the performance of the operation. The receipt of the oral explanation shall be acknowledged by the patient's mark on the certification and by the signature or mark of a witness who shall be of the same sex and speak the same language as the patient.

- (d) Copies of informed consent forms and certification documents for each voluntary sterilization (VS) procedure must be retained by the performing Recipient or Subrecipient for a period of three years after the performance of the sterilization procedure.
- (e) The Recipient shall insert paragraphs (a), (b), (c), (d) and (e) of this provision in all subgrants, subcontracts, purchase orders, and other subordinate agreements hereunder involving the performance of any sterilization which will be supported in whole or in part from funds under this Agreement.

11. PUBLICATIONS

(This provision is applicable to any Agreement which produces any book, publication, or other copyrightable materials.)

- (a) If it is the Recipient's intention to identify JHP'EGO's contribution to any publication resulting from this Agreement, the Recipient shall consult with JHPIEGO on the nature of the acknowledgement prior to publication.
- (b) The Recipient shall provide JHPIEGO with two copies of all published works developed under the Agreement. The Recipient shall provide JHPIEGO with lists of other written work produced under the Agreement.

- (c) In the event Agreement funds are used to underwrite the cost of publishing, in lieu of the publisher assuming this cost as is the normal practice, any profits or royalties up to the amount of such cost shall be repaid to JHPIEGO.
- (d) The Recipient is permitted to secure copyright to any publication produced or composed under the Agreement provided, the Recipient agrees to and does hereby grant to JHPIEGO a royalty-free, non-exclusive and irrevocable license throughout the world to use, duplicate, disclose, or dispose of such publications in any manner and for any purpose to permit others to do so.

12. PATENTS

(This provision is applicable to any Agreement which produces patentable items, patent rights, processes, or inventions.)

- (a) Recipient agrees to notify JHPIEGO in writing, of any invention or discovery conceived or first actually reduced to practice in the course of or under this Agreement. JHPIEGO will advise the Recipient of the patent rights to be afforded the Recipient in accordance with the rules and regulations of JHPIEGO's funding source.

13. SUBORDINATE AGREEMENTS

Except as may be specifically provided elsewhere in this Agreement the placement of subordinate agreements (e.g., leases, options, etc.), grants or contracts with other organizations, firms or institutions and the provisions of such subordinate agreements are subject to prior written consent of JHPIEGO's Director of Resource Management if they will be funded hereunder.

14. U.S. OFFICIALS NOT TO BENEFIT

No member of or delegate to the U.S. Congress or resident U.S. Commissioner shall be admitted to any share or part of the support provided by this agreement or to any benefit that may arise therefrom; but this provision shall not be construed to extend to this Agreement if made with a corporation for its general benefit.

15. CONVENANT AGAINST CONTINGENT FEES:

The Recipient warrants that no person or selling agency has been employed or retained to solicit or secure this Agreement upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee except bona fide employees or bona fide established commercial or selling agencies maintained by the Recipient for the purpose of securing business. For breach or violation of this warranty, JHPIEGO shall have the right to cancel this Agreement without liability or, in its discretion, to deduct from the Agreement amount, or otherwise recover, the full amount of each commission, percentage, brokerage, or contingent fee.

16. NONLIABILITY

JHPIEGO does not assume liability with respect to any third party claims for damages arising out of work supported by this Agreement.

17. AMENDMENT

The Agreement may be amended by formal modifications to the basic Agreement document or by means of an exchange of letters between the President of JHPIEGO and the authorized official of the Recipient.

18. THE AGREEMENT (Modified, when appropriate)

The letter to the Recipient signed by the President of JHPIEGO, the Program Description, the Budget and Support Provisions, and the Standard Provisions which have been reviewed and agreed to by the Recipient, constitute the Agreement.

19. NOTICES

Any notice given by any of the parties hereunder, shall be sufficient only if in writing and delivered in person or sent by telegraph, cable, registered or regular mail as follows:

To the President of JHPIEGO at the address specified in the Agreement.

To Recipient - At Recipient address shown in the Agreement, or to such other address as either of such parties shall designate by notice given as herein required. Notices hereunder, shall be effective when delivered in accordance with this provision or on the effective date of the notice, whichever is later.

20. SITE VISITS

JHPIEGO, with the concurrence of Recipient, reserves the right to perform site visits for programmatic reviews.

21. REPORTS (Modified, as appropriate)

The Recipient will provide JHPIEGO with an annual report on the progress of the Program 60 days after the completion of each year of the Agreement to include:

- (1) Descriptive report of the preceding years' operations: Section A. XI., Nos. 5, 6 and 7.

A final descriptive report providing the above information over the life of the project will be required 60 days after the completion of the project.

- (2) A financial report will be submitted annually and at the completion of the project providing an accounting of the expenditures reimbursed by JHPIEGO under this Agreement.

22. PROHIBITION ON EXPERIMENTAL PROCEDURES

Under no circumstances will equipment or monies provided under the terms of this Agreement be used to support any experimentation procedures.

23. ADDITIONAL LIMITATIONS OF SUPPORT

- (a) The support provided in this Agreement may only be used by the Recipient to support the work defined in the Program Description. The support and equipment may not be used for any other purpose and may not be loaned or otherwise made available to any other organization for any purpose except as called for in this Agreement.
- (b) JHPIEGO will not pay duty nor reimburse the Recipient for duty paid on supplies, commodities or equipment sent into the Recipient's country in accordance with this Agreement. It will be the Recipient's responsibility to arrange duty-free entry for such items or pay the duty from other funds.

APPENDIX

I

I. FORMS USED IN COUNTRY AGREEMENTS (NCAs)

<u>Form Name</u>	<u>JHPIEGO Form Number</u>
Fiscal Information Sheet	142
Individual Physician Registration Form	103
Individual Paramedic Registration Form	104
Institutional Registration Form	105
Participant List	101
Didactic Course Evaluation Summary	---
Clinical Practice Evaluation	112
Field Visit Report	107
Voluntary Participation Requirements Form	110
Proof of Delivery Form	122
Transfer of Title	116
Equipment Distribution and Inventory Report	Sample
Program Report Format	*
Annual Participant Survey	---
Payment Request Form	141
II. <u>FORMS USED IN MAINTENANCE AGREEMENTS (NMAs)</u>	
Proof of Delivery Form	122
Fixed Fee Payment Request	140 140 (Modified)
Maintenance Visit Report	135
Inventory Reporting and Reorder Form	125
Record of Maintenance Visits	143
III. <u>FORMS USED IN CLINICAL PRACTICE AGREEMENTS (NTAs)</u>	
Clinical Practice Evaluation	112
Quarterly Financial Statement	138

**JHPIEGO
INDIVIDUAL PHYSICIANS REGISTRATION FORM**

Attachment A
NCA-15

NAME _____
(Surname) (First) (Middle)

2. BIRTHDATE _____ / _____ / _____ CITY AND COUNTRY OF BIRTH _____
COUNTRY OF CITIZENSHIP _____ 3. MALE FEMALE

4. ARE YOU FLUENT IN ANY OTHER LANGUAGE Yes No Specify _____ Slight Good Excellent

5. PREFERRED MAILING ADDRESS _____

_____ 6. ADDRESS WHERE YOU COULD ALWAYS BE CONTACTED

7. NAME OF INSTITUTION YOU REPRESENT _____ PHONE _____
Institution Address _____ Cable/telex _____
Name of Director _____ Your Department _____ Your Position _____

8. MEDICAL SCHOOL EDUCATION
Name of Medical School Attended _____
City _____ Country _____ Degree Awarded _____ Year Degree Awarded _____

9. POSTGRADUATE MEDICAL TRAINING

Name of Hospital or Institution	City/Country	Specialty	Duration	Year of Completion	Degree/Diploma Certificate

10. BEGIN WITH YOUR PRESENT POSITION AND LIST CHRONOLOGICALLY THE POSITIONS YOU HAVE HELD SINCE GRADUATION FROM MEDICAL SCHOOL. EXCLUDE TRAINING YOU LISTED IN QUESTION 9.

Title of Position Held	Institution/University/Hospital	Department	City & Country	From	Year To

11. ARE YOU ON THE TEACHING STAFF OF A MEDICAL SCHOOL Yes No
Name of Institution _____ City _____
Department _____ Position _____ Years on Staff _____

12. PERSONAL CLINICAL EXPERIENCE WITH PROCEDURES

Procedures	No. in last three yrs.
Cesarian Sections	
Abdominal Hysterectomies	
Vaginal Hysterectomies	
IUD Insertions	
Tubal Ligations, Post Partum and Interval	
Laparoscopic Diagnostic Procedures	
Laparoscopic Tubal Sterilization	

13. ESTIMATE PERCENTAGE OF PROFESSIONAL TIME YOU SPEND IN THE FOLLOWING ACTIVITIES

Patient Care		%
Teaching		%
Research		%
Administration		%
Other (Specify)		%
		%
TOTAL		100%

14. ESTIMATE PERCENTAGE OF PROFESSIONAL TIME YOU NOW SPEND IN THE FOLLOWING TYPES OF INSTITUTIONS

Medical School/University/Hospital		%
Social Security Hospital		%
Government Hospital (except any listed above)		%
Other Non Profit Hospital		%
Private Maternity Home/Center		%

Other Hospital Operated for Profit		%
Health Center/Clinic Outside Hospital		%
Private Practice outside Hospital		%
Other (specify)		%
		%
TOTAL		100%

The undersigned agrees to comply with the Voluntary Participation Requirements as set forth on the reverse of this form.
SIGNATURE OF APPLICANT _____ DATE _____
NAME OF SUPERVISOR OR DEPARTMENT CHAIRMAN _____ TITLE _____
SIGNATURE _____ DATE _____

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**JHPIEGO
INSTITUTIONAL REGISTRATION FORM**

Attachment
NCA-15

1. NAME OF APPLICANT _____

2. NAME OF INSTITUTION _____

MAILING ADDRESS _____

CITY _____ STATE _____

COUNTRY _____ CABLE/TELEX ADDRESS _____ YOUR DEPARTMENT _____

3. INSTITUTIONAL OFFICIALS: DIRECTOR OF INSTITUTION _____ HEAD OF YOUR DEPARTMENT _____

4. INFORMATION ABOUT YOUR INSTITUTION (check one) GENERAL HOSPITAL MATERNITY HOSPITAL HEALTH CENTER
 MATERNITY CENTER OR HOME CLINIC OUTSIDE HOSPITAL OTHER SPECIFY _____

5. OWNERSHIP OF INSTITUTION (check as many as apply) UNIVERSITY STATE OR PROVINCIAL GOVT MUNICIPAL GOVT
 RELIGIOUS ORGANIZATION OTHER NON-PROFIT CENTRAL GOVT PRIVATELY OPERATED FOR PROFIT
 SOCIAL SECURITY OTHER SPECIFY _____

6. SIZE OF POPULATION SERVED BY INSTITUTION: _____

7. DOES THIS INSTITUTION PROVIDE SUPERVISED CLINICAL TRAINING IN GYNECOLOGY AND OBSTETRICS? Yes No
FOR WHOM IS THIS MEDICAL TRAINING PROVIDED: MEDICAL STUDENTS MEDICAL SCHOOL GRADUATES
OTHER SPECIFY _____

8. NUMBER OF INPATIENT ADMISSIONS PER YEAR: OBSTETRICS _____ GYNECOLOGY _____ OTHER _____ TOTAL _____

9. NUMBER OF OUTPATIENTS PER YEAR: OBSTETRICS _____ GYNECOLOGY _____ OTHER _____ TOTAL _____

10. ESTIMATED NUMBER OF GYNECOLOGICAL CONDITIONS TREATED AT INSTITUTION ANNUALLY	11. ESTIMATED NUMBER OF GYNECOLOGICAL SURGICAL PROCEDURES PERFORMED AT INSTITUTION ANNUALLY
FIBROID TUMORS _____	ABDOMINAL HYSTERECTOMY _____
INFERTILITY _____	CAESARIAN SECTIONS _____
MISCARRIAGES, INCOMPLETE _____	PELVIC FLOOR REPAIRS _____
PELVIC INFLAMMATORY DISEASE _____	TUBAL LIGATIONS _____
SEXUALLY TRANSMITTED DISEASES _____	Abdominal _____
OTHER SPECIFY _____	Laparoscopic _____
	OTHER: SPECIFY _____

12. NUMBER OF PHYSICIANS OR SURGEONS ON THE STAFF OF THIS INSTITUTION: FULL TIME _____ PART TIME _____ TOTAL _____

13. NUMBER OF OBSTETRICIANS/GYNECOLOGISTS ON THE STAFF OF THIS INSTITUTION: FULL TIME _____ PART TIME _____ TOTAL _____

14. NUMBER OF HOSPITAL BEDS IN INSTITUTION: OBSTETRICS _____ GYNECOLOGY _____ OTHER _____ TOTAL _____

15. NUMBER OF OPERATING ROOMS AVAILABLE FOR: OBSTETRICS _____ GYNECOLOGY _____ OTHER _____

NUMBER OF DAYS PER WEEK: OBSTETRICS _____ GYNECOLOGY _____ OTHER _____

16. TYPE OF ANESTHESIA USED IN GYNECOLOGICAL PROCEDURES _____

17. ARE THE FOLLOWING CLINIC SERVICES PROVIDED AT THIS INSTITUTION? (Check as many as apply). IF YES, ESTIMATE NUMBER OF PATIENT VISITS PER YEAR FOR EACH.

GENERAL MEDICINE _____ FT. VISITS/YEAR MATERNAL/CHILD HEALTH _____ FT. VISITS/YEAR

FAMILY PLANNING (OUTPT) _____ FT. VISITS/YEAR FAMILY PLANNING CLINIC OUTSIDE PRINCIPAL INSTITUTION _____ FT. VISITS/YEAR

18. ELECTRIC UTILITIES AVAILABLE IN OPERATING ROOM.
CURRENT: ALTERNATING DIRECT VOLTAGE 110 220 CYCLES 60 50

19. EQUIPMENT PRESENTLY AVAILABLE AT INSTITUTION				IS EQUIPMENT IN WORKING CONDITION? YES/NO
TYPE OF EQUIPMENT	NO. OF UNITS	SERIAL NUMBER	SOURCE	
LAPAROSCOPY CAUTERY				
LAPAROSCOPY BAND				
LAPAROSCOPY CAUTERY/BAND				
MINI-LAP KIT				
MINI-LAP BAND APPLICATOR				
OTHER SPECIFY				

THE UNDERSIGNED AGREES TO COMPLY WITH THE VOLUNTARY PARTICIPATION REQUIREMENTS AS SET FORTH ON THE REVERSE OF THIS FORM

THE AFORESAID INSTITUTION ACCEPTS THE ABOVE RESPONSIBILITIES AND HEREBY AUTHORIZES _____ (Name of Institution) TO ACCEPT ON ITS BEHALF ANY EQUIPMENT REFERRED TO ABOVE WHICH MAY BE GIVEN TO THE INDIVIDUAL FOR USE BY THE INSTITUTION

NAME OF INSTITUTION _____
OFFICIAL AUTHORIZED TO SIGN FOR INSTITUTION _____

DATE _____

NAME _____
TITLE _____

SIGNATURE OF AUTHORIZED OFFICIAL _____



CLINICAL PRACTICE EVALUATION

PLEASE COMPLETE A FORM FOR EACH TRAINEE IMMEDIATELY FOLLOWING
THE CONCLUSION OF THE CLINICAL TRAINING AND FORWARD TO:

JHPIEGO
Hampton House
624 North Broadway
Baltimore, Md. 21205
U.S.A.

FROM _____ CLINICAL PRACTICE CENTER _____ DATES ATTENDED FROM _____ TO _____
NAME OF TRAINEE _____ NUMBER OF TRAINING DAYS _____

II. NUMBER OF CLINICAL PROCEDURES PERFORMED

LAPAROSCOPY: DIAGNOSTIC _____ IUD INSERTIONS _____ VASECTOMIES _____
LAPAROSCOPY: BAND _____ MINI-LAPAROTOMY _____ POSTPARTUM STERILIZATIONS _____
OTHER: (Specify) _____

III. DETAILED EVALUATION

BASED ON YOUR OBSERVATION OF THE TRAINEE IN CLINICAL PRACTICE, RATE HIS TECHNICAL COMPETENCE AND JUDGEMENT.

CIRCLE ONE (Low) 1 2 3 4 5 (High)

EXPLANATION FOR RATING _____

IV. IN YOUR OPINION, IS THE TRAINEE COMPETENT TO PERFORM MINI-LAPAROTOMY LAPAROSCOPIC PROCEDURES WITHOUT SUPERVISION

YES COMMENTS _____
 NO COMMENTS _____
IF NO, YOUR RECOMMENDATION _____

V. WOULD YOU RECOMMEND THAT THE TRAINEE'S INSTITUTION BE PROVIDED WITH LAPAROSCOPIC EQUIPMENT

YES
 YES, BUT WITH RESERVATIONS (Explain) _____
 NO, (Explain) _____

VI. I HEREBY CERTIFY THAT TRAINING HAS BEEN COMPLETED IN ACCORDANCE WITH AGREEMENT NUMBER _____
PLEASE FORWARD APPLICABLE TUITION PAYMENT.

TECHNICAL CONSULTANT - DATE _____ AUTHORIZED CLINICAL CENTER OFFICIAL - DATE _____

JHPIEGO OFFICE USE ONLY

REVIEWED BY _____ (RDO) AGREEMENT NUMBER _____

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**JHPIEGO
FIELD VISIT REPORT FORM**

Attachment E
NCA-15

1. PLEASE COMPLETE FORM FOR EACH INSTITUTION VISITED AND FORWARD TO JHPIEGO.

NAME AND ADDRESS OF INSTITUTION VISITED

NAME _____ ADDRESS _____
 CITY _____ STATE/PROVINCE _____
 COUNTRY _____ DATE OF VISIT _____

2. INSTITUTIONAL OFFICIALS NAME OF DIRECTOR: _____ NAME OF DEPARTMENT HEAD: _____

3. PROCEDURES PERFORMED

PHYSICIAN NAME POSITION			PHYSICIAN NAME POSITION:			PHYSICIAN NAME POSITION:		
PROCEDURE	NO.	COMPLICATIONS	PROCEDURE	NO.	COMPLICATIONS	PROCEDURE	NO.	COMPLICATIONS
LAPAROSCOPY DIAGNOSTIC			LAPAROSCOPY DIAGNOSTIC			LAPAROSCOPY DIAGNOSTIC		
LAPAROSCOPY BAND			LAPAROSCOPY BAND			LAPAROSCOPY BAND		
MINI LAPAROTOMY			MINI LAPAROTOMY			MINI-LAPAROTOMY		
OTHER (Specify)			OTHER (Specify)			OTHER (Specify)		

EVALUATION OF PERFORMANCE: BASED ON YOUR OBSERVATION, RATE THE PHYSICIANS TECHNICAL COMPETENCE AND JUDGEMENT

RATING (Low) 1 2 3 4 5 (High)	RATING (Low) 1 2 3 4 5 (High)	RATING (Low) 1 2 3 4 5 (High)
EXPLANATION _____	EXPLANATION _____	EXPLANATION _____

4. EQUIPMENT SUPPLIED - RECORD TYPE, NUMBER OF UNITS, AND SERIAL NUMBER. NOTE ANY TECHNICAL PROBLEMS ENCOUNTERED, AND REMEDIAL ACTION TAKEN OR REQUIRED.

TYPE OF SYSTEM	SERIAL NUMBER	TECHNICAL PROBLEMS
LAPROSCOPIC		
LAPAROSCOPE, BAND		
LAPAROSCOPE, BILATERAL		
MINI LAP APPLICATOR		
OTHER SPECIFY		

5. ADDITIONAL COMMENTS _____

6. CONSULTANT INFORMATION NAME _____ PREFERRED ADDRESS _____ DATE _____



Voluntary Participation Requirements

I. Voluntary Participation

_____ agrees to take any steps necessary to
Name of Institution
ensure that any support (including training and equipment) received from the JHPIEGO Corporation will not be used to coerce any individual to practice methods of family planning inconsistent with such individual's moral, philosophical, or religious beliefs. Further, the recipient agrees to conduct its activities in a manner which safeguards the rights, health and welfare of all individuals who take part in the program.

II. Voluntary Participation Requirements for Sterilization Programs

No support (including training and equipment) made available by the JHPIEGO Corporation shall be used for the performance of involuntary sterilization as a method of family planning or to coerce or provide any financial incentive to any person to practice sterilization.

_____ will ensure that any surgical sterilization
Name of Institution
procedures supported in whole or in part by support (including training and equipment) received from the JHPIEGO Corporation are performed only after the individual has voluntarily presented himself or herself at the treatment facility and has given his or her consent to the sterilization procedure. Informed consent means the voluntary, knowing assent from the individual after he or she has been advised of the surgical procedures to be followed, the attendant discomforts and risks, the benefits to be expected, the availability of alternative methods of family planning, the purpose of the operation and its irreversibility, and his or her option to withdraw consent anytime prior to the operation. An individual's consent is considered voluntary and it is based upon the exercise of free choice and is not obtained by any special inducement or any element of force, fraud, deceit, duress or other forms of coercion or misrepresentation.

Further, _____ shall document the patient's
Name of Institution
informed consent by (1) a written consent document in a language the patient understands and speaks, which explains the basic elements of informed consent, as set out above, and which is signed by the individual and by the attending physician or by the authorized assistant of the attending physician; or (2) when a patient is unable to read adequately a written certification by the attending physician, that the basic elements of informed consent above were orally presented to the patient, and that the patient thereafter consented to the performance of the operation. The receipt of the oral explanation shall be acknowledged by the patient's mark on the certification and by the signature or mark of a witness who shall be of the same sex and speak the same language as the patient.

Copies of informed consent forms and certification documents for each voluntary sterilization (VS) procedure must be retained by _____ for a period of
Name of Institution
three years after performance of the sterilization procedures.

_____ shall require that all subrecipients agree to
Name of Institution
adhere to the requirements stated above.

Authorized Official _____

Date _____

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JHPIEGO/Philippine
Tuition Payment Request

Participant Name	Training Dates	TUITION				
		Philippine Physician @ \$1,265	Regional Physician @ \$2,059	Philippine Nurse @ \$774	Regional Nurse @ \$1,493	Field Training @ \$105 per site
SUBTOTALS						
TOTAL TUITION						

The participants listed above attended on the dates specified in accordance with the program described in the Agreement and the Project Director hereby certifies below that these individuals have successfully completed the requirements for which payment is requested.

Amount of Funds Advanced by JHPIEGO \$ _____
 Tuition rates charged to date include the above \$ _____
 Balance of Advance Funds \$ _____

Certified by: _____ Date _____
 Project Director

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Grant Management Chart for NCA-15 Agreement through Amendment No. 1

This chart provides detail regarding the documentation for each phase of training and all programmatic reporting requirements of this Agreement, including the date each item is due at JHPIEGO. Following the chart is a sample of each form with instructions on completion and suggestions as to utilization of the information contained thereon.

Agreement Period: 6/1/81 - 3/31/83

<u>1. Workscope</u>	<u>Timetable</u>	<u>Required Documentation</u>	<u>Due at JHPIEGO</u>
A. Physician 1. Endoscopy - didactic/clinical for Philippine Physicians (2 weeks)	Monthly throughout agreement period	1. Individual Physician Registration Form for each participant 2. Institutional Registration Form for each institution represented 3. Clinical Practice Evaluation Form for each participant 4. Payment Request Form	Items 1, 2, 3 and 4 immediately upon completion of each course
2. Endoscopy - didactic/clinical for Regional physicians (3 weeks)	One-two courses during the year	1. Clinical Practice Evaluation for each participant 2. Payment Request Form	Immediately upon completion of a course
3. Field Training (1-2 days)	Following course completion throughout the agreement period	1. Field Visit Report for each site visited 2. Payment Request Form	Monthly, or as appropriate
4. Endoscopy Refresher - (5 days) on-site clinical for previously trained Philippine physicians	June 1982	1. Field Visit Report 2. Payment Request Form	July 1982
B. Nurse/Midwife 1. Didactic/clinical for Philippine and Regional nurse/midwives (3 weeks)	Two courses during the year	1. Individual Paramedic Registration Form for each participant 2. Institutional Registration Form for each institution represented or cross reference physician from same institution 3. Clinical Practice Evaluation Form for each participant 4. Payment Request Form	Items 1, 2, 3 and 4 immediately after completion of each course
C. Evaluation Conference (1 day)	December 1981	1. Participant List 2. Payment Request Form	January 1982

(continued on page 2)

Best Available Document

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II. Other Reporting Requirements

- A. Fiscal Information Sheet
- B. Proof of Delivery for Equipment and/or Educational Materials
- C. Transfer of Title
- D. Voluntary Participation Requirements Form for each institution certified eligible to receive equipment
- E. Annual Participant Survey
- F. Record of the distribution of equipment by serial number/institution and educational materials
- G. Program activity report as described in Section A, IX. 8
- H. Annual narrative report as described in Section A, XI. 5
- I. Annual fiscal report as described in Section A, XI. 6
- J. Final project and financial report

Due at JHPIEGO

- A. Prior to initial financial transaction
- B. Immediately upon receipt of shipments
- C. Immediately upon receipt of equipment
- D. Prior to installation of equipment
- E. As outlined in the guidelines for conducting the survey
- F. On a current basis, i.e. every 6 months
- G. September 1981 and every 3 months thereafter
- H. August 1982 and every 12 months thereafter
- I. Same as H, above
- J. 60 days after expiration of the agreement

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FINANCIAL STATUS REPORT

(Follow instructions on the back)

1. FEDERAL AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH REPORT IS SUBMITTED
Agency for International Development

2. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER
DSPE CA-0083

OMB Approved No. 80-RO180

PAGE 1 OF 1 PAGES

RECIPIENT ORGANIZATION (Name and complete address, including ZIP code)
JHPIEGO Corporation
550 North Broadway
Baltimore, Maryland 21205

4. EMPLOYER IDENTIFICATION NUMBER
23,742,444

5. RECIPIENT ACCOUNT NUMBER OR IDENTIFYING NUMBER
1010-02

6. FINAL REPORT
 YES NO

7. BASIS
 CASH ACCRUAL

8. PROJECT/GRANT PERIOD (See instructions)
FROM (Month, day, year) September 1, 1980
TO (Month, day, year) September 30, 1983

9. PERIOD COVERED BY THIS REPORT
FROM (Month, day, year) January 1, 1983
TO (Month, day, year) March 31, 1983

STATUS OF FUNDS

PROGRAMS/FUNCTIONS/ACTIVITIES ▶	(a) Central Cost	(b) Plng/Development	(c) Equipment	(d) Trng/Education	(e)	(f)	TOTAL (g)
Net outlays previously reported	\$ 3,420,959.66	\$ 630,254.98	\$ 396,290.07	\$ 5,238,563.31	\$	\$	\$ 9,686,068.02
Total outlays this report period	408,842.89	36,868.60	50,836.02	921,233.88			1,417,781.39
Less: Program income credits							
Net outlays this report period (Line b minus line c)	408,842.89	36,868.60	50,836.02	921,233.88			1,417,781.39
Net outlays to date (Lines a plus line d)	3,829,802.55	667,123.58	447,126.09	6,159,797.19			11,103,849.41
Less: Non-Federal share of outlays							
Total Federal share of outlays (Line e minus line f)	3,829,802.55	667,123.58	447,126.09	6,159,797.19			11,103,849.41
Total unliquidated obligations	847,707.77	87,256.07	623,522.01	2,553,047.98			4,111,533.83
Less: Non-Federal share of unliquidated obligations shown on line h							
Federal share of unliquidated obligations	847,707.77	87,256.07	623,522.01	2,553,047.98			4,111,533.83
Total Federal share of outlays and unliquidated obligations	4,677,510.32	754,379.65	1,070,648.10	8,712,845.17			15,215,383.24
Total cumulative amount of Federal funds authorized	5,156,565.00	1,146,868.00	2,087,966.00	12,137,000.00			20,528,399.00
Unobligated balance of Federal funds	479,054.68	392,488.35	1,017,317.90	3,424,154.83			5,313,015.76

12. TYPE OF RATE (Place "X" in appropriate box) PROVISIONAL PREDETERMINED FINAL FIXED

12. b. RATE 14%

12. c. BASE 641,354.58

12. d. TOTAL AMOUNT 89,789.63

12. e. FEDERAL SHARE 89,789.63

13. CERTIFICATION
I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL
John G. Blouse

TYPED OR PRINTED NAME AND TITLE
John G. Blouse, Director
Resource Management

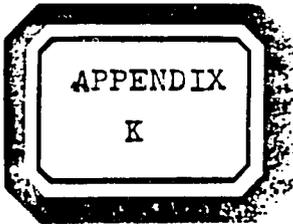
DATE REPORT SUBMITTED

TELEPHONE (Area code, number and extension)
(301) 955-8650

REMARKS: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.

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Detailed Schedule of Unliquidated Obligations for
the Quarter Ending 3/31/83
from Financial Status Report Line 10.k

I. Central Costs

A. Outstanding Purchase Orders

\$ 651,631.08

re: Salaries, Fringe Benefits, Supplies, etc.

w/idc

B. Expenses incurred on 3/83 statement not incorporated
in the Corporate Quarter 3/83

131,653.09

C. Contractual Obligations not shown on the JHM statements

re: Lease agreement w/idc 8,071.88 x 7 months @ 1470

64,413.60

Total

\$ 847,707.77

II. Planning and Development

A. All outstanding purchase orders

—

B. Contractual Obligations not shown on the JHU statement

re: Peat, Marwick, Mitchell Rate Schedule #1

50,000.00

(balance of obligations)

C. Expenses incurred on the 3/83 statement not incorporated
in the corporate quarter 3/83

37,356.07

Total

\$ 87,356.07

III. Equipment

A. Outstanding Purchase Orders

550,343.90

B. Expenses incurred on the 3/83 statement not incorporated
in the corporate quarter 3/83

23,348.11

C. Brethren Service Center agreement from the corporate
quarter ending 3/83

49,930.00

Total

\$ 623,522.01

IV. Training and Education

- A. NJ-1 balance of obligations from March '83 run
- B. Expense incurred on the 3/83 statement not incorporated
in the corporate quarter 3/83
re: participant cost, field training & educational
materials
- C. Outstanding purchase order for educational matls
- D. Overseas Agreements signed
re: NCA, NMA, NTA, Direct Support and Special Projects
- Total

2,660,555

137,439.15

78,835.83

2,080,718

\$2,553,047.98

GRAND TOTAL OF OUTSTANDING OBLIGATIONS

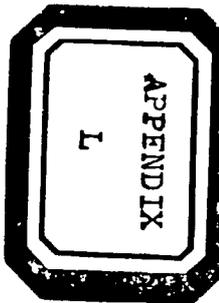
\$4,111,533.83

TRIAL BALANCE OF UNLIQUIDATED OBLIGATIONS BY PROJECT

AS OF MARCH 31, 1983

PROJECT SYMBOL = 932-0604-00

DBLIG. NO.	OBJ. CL.	COST CODE	OBLIGATION DESCRIPTION	OBLIGATIONS	DISBURSEMENTS	UNLIQUIDATED BALANCE	ALLOTMENT SYMBOL	PI	CONTRACT NUMBER
3606403-4190	0009	JHPIEGO CORP LC 302 G		118,604.50	198.40-	118,802.90	04436099008133	01	PHA -1064
3611133-4190	0009	JHPIEGO CORP LC 302 G		4,444,723.67	2,102,292.69	2,342,430.98	14436099008133	01	DSPE-0083
3621034-4190	0009	JHPIEGO CORP LC 302 G		5,500,000.00		5,500,000.00	24436099008133	01	DSPE-0083
3631073-4190	0009	JHPIEGO CORP LC 302 G		2,500,000.00		2,500,000.00	34436099008131	01	DSPE-0083
PROJECT TOTAL				12,563,328.17	2,102,094.29	10,461,233.88			



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9 May 1983

MEMORANDUM:

TO: R.T. Burkman, M.D.
Charlotte Ellis

FROM: John Blouse *J Blouse*

SUBJ: BUDGET ANALYSIS

The enclosed budget and expense report will be helpful in developing pipeline analysis.

JHPIEGO is presently authorized at \$20,528,399 as of a funding amendment processed in December 1982.

Central Costs should spend less than the budgeted amount by September 30, 1983.

Planning and Development should also spend less than the budget amount.

Equipment has been maintained at the budgeted level. It should be pointed out however, that the Equipment Unit has requested \$2,000,000 for equipment purchases prior to September 30, 1983 for FY 83/84 programs, only \$845,513 is available in the procurement line. The educational materials projection for FY 83/84 has already been factored in and no further adjustment is needed.

Training and Education is a major budget category and needs to be addressed in two major groupings. Participant Costs, Field Training and Educational Materials are adjusted on the attached budget reports for activity to be performed before September 30, 1983, including Purchase Orders for FY 83/84. Educational Materials.

The other major group includes all overseas and U.S. training agreements (NCA, NTA, NMA, NSP, NJ-1) for both in-country and direct support funds, there is an obvious shortfall in this budget line.

In summary, we anticipate a budget shortfall of \$1,796,868 on the attached budget and expense report and an additional \$1,154,000 shortfall in equipment purchases if FY 83/84 material is to be obligated prior to September 30, 1983.

A total budget of \$24,500,000 continues to be needed if all programs planned are obligated and anticipated expenses are reasonably accurate.

JGB:SCF:as

Attachments: As stated

PIPELINE SUMMARY as of 3-31-83
Budget 20,523,399

	Budget	Total Outlays 9-1-80/3-31-83	Unliquidated Oblig- ations as of 3-31-83	Anticipated Expenses_& Obligation 4-1 to 9-30-83	Expense Total	Budget Variance
Central Cost	\$5,156,565	\$3,829,803	\$847,708	\$249,824	\$4,927,334	\$ 229,231
Planning & Development	1,146,868	667,125	87,256	374,422	1,128,803	18,065
Equipment Costs	2,087,966	447,125	623,522	1,017,319	2,087,966	
Training & Education	12,137,000	6,159,797	2,553,048	5,468,319	14,181,164	(2,044,164)
TOTALS	\$20,528,399	\$11,103,850	\$4,111,534	\$7,109,884	\$22,325,277	(1,796,868)

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Central Costs - Revised Budget - \$5,156,565

	Budget	Total Outlays 9-1-80 to 3-31-83	Unliquidated Obligations as of 3-31-83	Anticipated Expense & Obligations 4-1 to 9-30-83	Expense Total	Budget Variance
Salaries	\$2,886,302	\$2,192,116	\$530,947	\$48,658	\$2,771,721	\$114,581
Fringe Benefits	567,960	420,441	105,924	10,705	537,070	30,890
Supplies	133,650	97,679	13,349	(6 x \$5,100) = 30,600	141,628	(7,978)
Travel	20,034	13,675	(2,838)	(6 x \$700) = 4,200	15,037	4,997
Office Equipment	23,844	7,443	7,230	9,171	23,844	
Telecommunications	407,945	280,340	15,389	(7 x \$10,500) = 71,500	367,229	40,716
Space Costs	303,065	214,760	60,714	9,210	284,684	18,381
Contracts/Services	180,819	133,536	12,891	35,100	181,527	(708)
Indirect Cost 14%	632,946	469,813	104,101	30,680	604,594	28,352
TOTAL	\$5,156,565	\$3,829,803	\$847,707	\$249,824 (Note)	\$4,927,334	\$229,231

Anticipated Expense:

- 1) Salaries: \$15,658 Pay increase not encumbered
 20,000 J. O'Connell not encumbered
 7,000 vacant secretary (Lat.Am.)
 6,000 vacant secretary (Grants)
\$48,658
- 2) F.B. 22% \$10,705 22% of Above
- 3) Office Equipment: (1) Xerox 820 \$3,650
 Accessories 521
 (2) IBM Typewriter 1,700
 (2) File Cabinets 1,000
 (2) Dictation Mch)
 (2) Portable Dictation) 1,800
 Units)
 (1) Slide Projector 500
\$9,171
- 4) Space - \$6,760 Feb. Rent in 550 Bldg
 2,450 Utilities - 7 months

- 5) Contract Service
- . 2 temp coders \$8,640
 - . 8 week temp secy. 2,160
 - . Computer time 6,000
(special study)
 - . Reg. Computer time 4,500
 - . Publication Costs
\$500 x 7 months 3,500
 - . Outside service
(Messengers, Movers,
\$900 x 7 6,300
 - . Rental of Equipment 4,000
- \$35,100

P & D Costs - Revised Budget \$1,146,868

	Budget	Total Outlays 9-1-80 to 3-31-83	Unliquidated Obligations as of 3-31-83	Anticipated Expense & Obligations 4-1 to 9-30-83	Expense Total	Budget Variance
Consultant Fees	\$ 30,570	\$ 27,270		\$ 8,400	\$ 35,670	(5,100)
Travel	581,379	439,330	\$15,564	99,000	553,894	27,485
Conference Costs	32,217	25,067	269	6,000	31,336	881
Audit	245,000	5,000	64,500	185,500	255,000	(10,000)
Publications	116,858	88,530	2,348	23,400	114,278	2,580
Indirect Costs	140,844	81,928	4,575	52,122	138,625	2,219
TOTAL	\$1,146,868	\$667,125	\$87,256	\$374,422	\$1,128,803	\$18,065

Anticipated Expense:

1) Consultant:

2 consultants monthly
7 days each
\$100 per day
from 4-1-83 to 9-30-83
2 x 7 x \$100 x 6 months = \$8,400

2) \$16,500 monthly average
with no conferences planned
\$16,500 x 6 months = \$99,000

3) \$1,000 monthly average for
trainees in U.S. Courses
4 courses x \$1,000 = \$4,000
Special meetings -
2 meetings x \$1,000 = 2,000
\$6,000

4) \$185,500 will be obligated
from NP-3 Agreement Rate
Schedule #2 (PMM & Co. Audits)

5) Publication Activity for
4-1-83 to 9-30-83:

. Newsletter:

January 83 \$2,600
July 83 2,600

. Brochures
. Forms
. Annual Report \$1,000
. Translation
. Exhibit
. Special Report

Since all of the above are on an ongoing
basis, a cost average is still appropriate
\$3,900 x 6 months = \$23,400

6) Indirect includes \$7,000 not included in
previous period for PMM & Co. fees of
\$50,000

Equipment Costs - Revised Budget \$3,562,329 *

* This budget has not been implemented at the planned funding level pending additional funds added to the Cooperative Agreement. The budget authorized and in place as of 3-31-83 is based on \$20,528,399 total budget. The equipment budget is: \$2,087,966

	Budget	Total Outlays 9-1-80 to 3-31-83	Unliquidated Obligations as of 3-31-83	Anticipated Expense & Obligations 4-1 to 9-30-83	Expense Total	Budget Variance
Procurement	\$1,675,328	\$219,326	\$560,656	\$855,513	\$1,665,495	9,833
Repairs	40,344	15,344		25,000	40,344	
Freight	197,304	103,962	6,717	72,443	183,122	14,182
Warehousing	141,720	91,790	55,209	20,721	167,720	(26,000)
Indirect Cost	33,270	16,703	940	13,642	31,285	1,985
	\$2,087,966	\$447,125	\$623,522	\$1,017,319	\$2,087,966	- 0 -

Anticipated Expense:

Procurement:

\$40,000 to be ordered by 9-30-83 for 82/83 programs

\$45,513 to be ordered by 9-30-83 for 83/84 programs

\$85,513

Repairs:

\$25,000 to be repaired by 9-30-83

Freight: Equipment Unit estimates

\$1,342,357 inventory to be shipped. Freight at a cost of \$72,443.

Warehousing:

Additional funds for 83/84 are estimated at \$26,000. The contract will be amended during 82/83. Adequate funds already in contract through 82/83 except for early 83/84 shipments.

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Training and Education - Revised Budget - \$12,137,000

	Budget	Total Outlays 9-1-80/3-31-83	Unliquidated Oblig- ations as of 3-31-83	Anticipated Expenses & Obligations 4-1 to 9-30-83	Expense Total	Budget Variance
Participant Costs	\$2,520,560	\$1,872,284	\$ 89,530	\$ 387,156	\$2,341,970	\$ 178,590
Field Training	273,947	214,919	899	71,197	287,015	(13,068)
Educational Matls	970,300	376,923	116,391	307,433	800,747	169,553
Agreements: (NCA, NTA, NMA, NSP NJ-1 Direct/In- Country)	8,372,193	3,695,671	2,346,228	4,709,533	10,751,432	(2,379,239)
	\$12,137,000	\$6,159,797	\$2,553,048	\$5,468,319	\$14,181,164	(\$2,044,164)

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Participant Cost

	Budget	Total Outlays 9-1-80 to 3-31-83	Unliquidated Obligations as of 3-31-83	Anticipated Expense & Obligations 4-1 to 9-30-83	Expense Total	Budget Variance
Insurance	\$ 22,110	\$ 14,700	\$ 625	\$ 2,250	\$ 17,575	\$ 4,535
Foreign Travel	1,923,586	1,423,704	67,770	300,000	1,791,474	132,112
Stipend	265,322	203,950	10,140	31,220	245,310	20,012
Indirect Cost	309,542	229,930	10,995	46,686	287,611	21,931
	\$2,520,560	\$1,872,284	\$89,530	\$380,156	\$2,341,970	\$178,590

Anticipated Expenses 4-1-83/9-30-83

Insurance

90 participants are anticipating training
 90 participants @ \$25 each = \$2,250

Foreign Travel

\$300,000 = 90 trainees attending U.S. courses from 4-1-83 to 9-30-83 (5 courses)
 costs include airfare to and from Phase I and Phase II training sites,
 trainee subsistence, and miscellaneous trainee expenses related to
 travel. Costs have been calculated on a per-region basis - see attached
 details

Stipend - 90 participants x \$20/per day (substance) x 91 training days = \$31,220

NOTE: An administrator's course/Spanish with approximately 25 participants have been cancelled.

Participant Costs

Foreign Travel

Cost Factors:

Africa: Airfare is estimated at \$2,300 with a high of \$2,800 and a low of \$1,800

Miscellaneous Expenses (Travel)

To and from the course is estimated at \$300 each participant

Asia: Airfare is estimated at \$2,100 with a high of \$2,600 and a low of \$1,600

Miscellaneous Expenses (Travel)

To and from the course is estimated at \$220 each

Latin America: Airfare is estimated at \$1,200 with a high of \$1,800 and a low of \$600

Miscellaneous Expenses (Travel)

To and from the course is estimated at \$150 each

Microsurgery

6 Africans: Airfare - 6 participants at \$2,300 \$13,800

Lodging - 6 participants x \$42 per day x 14 days (length of course) 3,528

Miscellaneous Expenses:

6 participants at \$300 each 1,800

SUB TOTAL MICROSURGERY \$19,128

Std. Course

16 Africans, 2 Latin Americans, 6 Asians

Airfare - 16 Africans at \$2,300 each 36,800
- 2 Latin Americans at \$1,200 each 2,400
- 6 Asians at \$2,100 each 12,600
\$51,800

Lodging - total number of participants 24 x \$42 per day x 14 days (length of course) 14,112

Miscellaneous Expenses:

- 16 Africans at \$300 each 4,800
- 2 Latin Americans at \$150 each 300
- 6 Asians at \$220 each 1,320

\$6,420

SUB TOTAL STD COURSE \$72,332

<u>Academic Skills</u>		6 Africans, 5 Asians = 11 participants	
	<u>Airfare</u>	- 6 Africans at \$2,300 each	\$13,800
		- 5 Asians at \$2,100 each	<u>10,500</u>
			\$24,300
	<u>Lodging</u>	- total number of participants (11) 11 x 28 days (length of course) x \$42 per day	12,936
	<u>Miscellaneous Expenses</u>		
		- 5 Africans at \$300 each	1,800
		- 5 Asians at \$220 each	<u>1,100</u>
			\$2,900
		<u>SUB TOTAL ACADEMIC SKILLS</u>	\$40,136
<u>Administrators Course</u>			
		23 Africans	
	<u>Airfare</u>	- 23 Africans at \$2,300 each	\$52,900
	<u>Lodging</u>	- total number of participants (23) 23 x \$42 per day x 21 days (length of course)	20,286
	<u>Miscellaneous Expenses</u>		
		23 Africans x \$300 each	<u>6,900</u>
		<u>SUB TOTAL ADMINISTRATORS COURSE</u>	\$80,086
<u>Management Infertile Course</u>			
		19 Africans, 1 Latin America, 5 Asians	
	<u>Airfare</u>	- 19 Africans at \$2,300 each	\$43,700
		- 1 Latin American \$1,200	1,200
		- 5 Asians x \$2,100 each	<u>10,500</u>
			\$55,400
	<u>Lodging</u>	- total number of participants (25) 25 x \$42/per day x 14 days (length of course)	\$14,700
	<u>Miscellaneous Expenses</u>		
		19 Africans x \$300 each	\$5,700
		1 Latin American x \$150 each	150
		5 Asians x \$220 each	<u>1,100</u>
			\$6,950
		<u>SUB TOTAL MANAGEMENT INFERTILE COURSE</u>	\$77,050
		<u>GRAND TOTAL</u>	<u>\$288,732</u>

Field Visit

	Budget	Total Outlays 9-1-80 to 3-31-83	Unliquidated Obligations as of 3-31-83	Anticipated Expense & Obligations 4-1 to 9-30-83	Expense Total	Budget Variance
Consultant Fee	\$64,882	\$50,326		\$13,750	\$64,076	\$806
Travel	175,422	138,199	\$789	48,703	187,691	(12,269)
Indirect Cost	33,643	26,394	110	8,744	35,248	(1,605)
	\$273,947	\$214,919	\$899	\$71,197	\$287,015	(13,068)

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Field Visit - Analysis of Anticipated Expenses 4-1-83/9-30-83

Countries Scheduled and/or Anticipated by 9-30-83		Duration of Visit	Type of Consultant	Per Diem	Per Diem Total	Airfare Cost	Audit Expense	Consultant Fee	TOTAL
Tanzania	2	2 weeks	Reg.	\$106	\$1,272	\$2,100	\$800	\$1,200	\$5,372
Cameroon	3	2 weeks	Reg.	91	1,092	2,100	800	1,200	5,192
Uruguay	1	1 week	Reg.	69	483	800	300	500	2,083
Argentina	3	2 weeks	Reg.	78	936	800	300	1,200	3,236
Peru	2	2 weeks	Reg.	75	900	800	300	1,200	3,200
Ecuador	2	2 weeks	Reg.	70	840	600	300	1,200	2,940
Mexico	2	2 weeks	Natl.	80	960	300	150	600	2,010
Madagascar	1	1 week	Reg.	81	567	800	800	500	2,667
Comoros Island	1	1 week	Reg.	60	420	800	400	500	2,120
Mauritius	1	1 week	Reg.	73	511	800	200	500	2,011
Nigeria	2	1 week	Natl.	159	1,113	1,500	800	250	3,663
Guinea Bissau	1	1 week	Reg.	84	588	1,600	400	500	3,088
Gambia	1	1 week	Reg.	62	434	1,800	400	500	3,134
Zaire	5	4 weeks	Reg.	142	3,976	3,500	1,200	2,200	10,876
SUB TOTAL					\$14,092	\$18,300	\$7,150	\$12,050	\$51,592
Sudan	2	1 week	Reg.	115	805	2,400	800	500	4,505
S. Pacific Islands	2	2 weeks	Reg.	88	1,056	3,100	1,000	1,200	6,356
SUB TOTAL					\$1,861	\$5,500	\$1,800	\$1,700	\$10,861
TOTAL					\$15,953	\$23,800	\$8,950	\$13,750	\$62,453

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SUMMARY: T&E SCHEDULE OF OBLIGATIONS

<u>Agreement</u>	<u>Obligations 9/1/80-3/31/83</u>	<u>Equipment and Educ. Mat. 3/31/83</u>	<u>Projected Obligations Through 9/30/83</u>	<u>Equipment and Educ. Mat. 9/30/83</u>	<u>Total (Excluding Equip.) and Educ. Mat.</u>
NCA-In-country	3,835,076		3,450,361		7,285,437
NCA-Direct	726,571	2,516,649	656,390	1,388,505	1,382,961
NMA-In-country	196,089		154,723		350,812
NMA-Direct	14,410	446,237	13,500	220,891	27,910
NTA	332,000		- 0 -		332,000
NSP	130,041	101,050	209,289	195,322	339,330
NJ-1	<u>808,965</u>		<u>225,270</u>		<u>1,034,235</u>
Sub-total	6,043,152	3,063,936	4,709,533	1,804,718	10,752,685
	<u>Expenditures 9/1/80-3/31/83</u>				
Participant Costs	1,872,283		648,277		2,520,560
Field Training	214,919		59,028		273,947
Educ. Materials	<u>376,922</u>		<u>593,378</u>		<u>970,300</u>
Sub-total	2,464,124		1,300,683		3,764,807
GRAND-TOTAL	<u>8,507,276</u>		<u>6,010,216</u>		<u>14,517,492</u>

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SCHEDULE OF AGREEMENT OBLIGATIONS

<u>Agreement</u>	<u>Obligations Through 3/31/83 In-Country</u>	<u>Obligations Through 3/31/83 Direct</u>	<u>Total Obligations Through 3/31/83</u>	<u>Equipment and Educ. Mat. Through 3/31/83</u>	<u>Agreement Expirations</u>	<u>Projected Obligations Through 9/30/83 In-Country</u>	<u>Projected Obligations Through 9/30/83 Direct</u>	<u>Total Obligations Projected Through 9/30/83</u>	<u>Equipment and Educ. Mat. Through 9/30/83</u>	<u>Agreement Expirations</u>
Africa										
NCA-10 Kenya	113,380	71,330	184,710	30,602	5/31/83	148,000	6,300	154,300	43,215	5/31/84
NCA-11 Nigeria	45,640	- 0 -	45,640	45,700	9/30/83	20,000	- 0 -	20,000		9/30/84
NCA-21 Sudan	81,120	6,605	87,725	22,869	11/30/83					
NCA-29 Somalia	136,155	11,489	147,644	35,873	2/28/84					
NCA-33 Zaire	30,519	4,475	34,994	5,760	12/31/82					
NCA-36 Uganda	7,460	2,294	9,754	3,240	9/30/83	45,000	5,000	50,000	9,725	9/30/84
NCA-37 Tanzania	99,280	12,936	112,216	30,993	9/30/83	110,000	4,000	114,000	30,993	9/30/84
NCA-41 Zimbabwe	52,320	2,900	55,220	6,760	9/30/83	72,000	3,000	75,000	10,500	9/30/84
NCA-47 Sierra Leone						60,080	6,602	66,682	9,510	6/30/84
NCA-48 Nigeria (Ahmadu Bello)						93,960	8,662	102,622	11,152	6/30/84
Nigeria (Benin)						95,000	5,000	100,000	15,168	9/30/84
Nigeria (Lagos)						95,000	5,000	100,000	15,168	9/30/84
Nigeria (Ifi)						95,000	5,000	100,000	10,526	9/30/84
Nigeria (Nigeria)						95,000	5,000	100,000	15,168	9/30/84
Malawi						45,000	5,000	50,000	11,026	9/30/84
Zaire						95,000	5,000	100,000	6,736	9/30/84
Zaire						145,000	5,000	150,000	11,500	9/30/84
Liberia						55,000	5,000	60,000	27,000	9/30/84
Cameroon						90,000	5,000	95,000	35,175	9/30/84

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Educational Materials - Revised Budget - \$970,300

	Budget	Total Outlays 9-1-80 to 3-31-83	Unliquidated Obligations as of 3-31-83	Anticipated Expense & Obligations 4-1 to 9-30-83	Expense Total	Budget Variance
Training Center	\$ 76,603	\$ 26,857	\$ 2,303		\$ 29,160	\$ 47,443
Freight	170,228	58,304	9,624	\$ 29,031	96,959	73,269
Supplies	604,309	245,473	90,170	244,212	579,855	24,454
Indirect Cost	119,160	46,289	14,294	34,190	94,773	24,387
	\$970,300	\$376,923	\$116,391	\$307,433	\$800,747	\$169,553

Anticipated Expenses:

Total projected expenses = \$307,433 between 4-1-83/9-30-83

Base - Educational Materials

\$244,212 Total procurement dollars prior to 9-30-83
consisting of U.S. Base Training, as well
as overseas training for FY 83/84 programs

Freight

\$29,031 Based on Equipment Unit projections (see
attached report)

Indirect Cost

14% (JHU rate) of total projected base))

14%

SCHEDULE OF AGREEMENT OBLIGATIONS

<u>Agreement</u>	<u>Obligations Through 3/31/83 In-Country</u>	<u>Obligations Through 3/31/83 Direct</u>	<u>Total Obligations Through 3/31/83</u>	<u>Equipment and Educ. Mat. Through 3/31/83</u>	<u>Agreement Expirations</u>	<u>Projected Obligations Through 9/30/83 In-Country</u>	<u>Projected Obligations Through 9/30/83 Direct</u>	<u>Total Obligations Projected Through 9/30/83</u>	<u>Equipment and Educ. Mat. Through 9/30/83</u>	<u>Agreement Expirations</u>
<u>Africa (Cont'd)</u>										
Senegal						45,000	5,000	50,000	6,800	9/30/84
Rwanda						45,000	5,000	50,000	7,000	9/30/84
Congo						45,000	5,000	50,000	8,200	9/30/84
Central African Rep.						55,000	5,000	60,000	10,500	9/30/84
Mauritania						35,000	5,000	40,000	7,600	9/30/84
Gambia						50,000	5,000	55,000	10,200	9/30/84
Benin						45,000	5,000	50,000	7,600	9/30/84
Gabon						45,000	5,000	50,000	8,200	9/30/84
Madagascar						45,000	5,000	50,000	25,250	9/30/84
Togo						45,000	5,000	50,000	8,760	9/30/84
Burundi						45,000	5,000	50,000	8,760	9/30/84
Kenya (Mombasa)						45,000	5,000	50,000	10,000	9/30/84
Sub-total Africa NCA's	565,874	112,029	677,903	181,797		1,904,040	138,564	2,042,604	381,432	
NMA-10 Nigeria	31,626		31,626	31,367	6/30/83	13,000	2,000	15,000	5,000	3/31/84
NMA-13 Ghana	10,903	2,528	13,431	11,931	9/30/83	8,000	2,000	10,000	5,000	9/30/84
Zaire						13,000	2,000	15,000	25,000	9/30/84
Sub-total Africa NMA's	42,529	2,528	45,057	43,298		34,000	6,000	40,000	35,000	
GRAND TOTAL										
AFRICA	<u>608,403</u>	<u>114,557</u>	<u>722,960</u>	<u>225,095</u>		<u>1,938,040</u>	<u>144,564</u>	<u>2,082,604</u>	<u>416,432</u>	

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SCHEDULE OF AGREEMENT OBLIGATIONS

<u>Agreement</u>	<u>Obligations Through 3/31/83 In-Country</u>	<u>Obligations Through 3/31/83 Direct</u>	<u>Total Obligations Through 3/31/83</u>	<u>Equipment and Educ. Mat. Through 3/31/83</u>	<u>Agreement Expirations</u>	<u>Projected Obligations Through 9/30/83 In-Country</u>	<u>Projected Obligations Through 9/30/83 Direct</u>	<u>Total Obligations Projected Through 9/30/83</u>	<u>Equipment and Educ. Mat. Through 9/30/83</u>	<u>Agreement Expirations</u>
<u>Latin America</u>										
NCA-8 Mexico	172,900	3,640	176,540	60,699	4/30/83	90,076	1,670	91,746	44,701	4/30/84
NCA-23 Brazil (CPAIMC)	331,178	1,952	333,130	232,300	12/31/81					
NCA-28 Santa Maria, Brazil	74,870	-	74,870	2,240	9/30/83	40,000		40,000	2,000	9/30/84
NCA-30 Colombia	* 275,168	* 3,094	* 260,262	93,355	3/31/84					
NCA-31 Brazil (CEPECS)	* 82,725	* 1,939	* 84,664	9,816	12/31/83					
NCA-35 Brazil (CPAIMC)	* 672,451	* 15,720	* 688,171	519,691	12/31/83					
NCA-38 Mexico	99,625	1,840	101,465	35,400	11/30/82					
NCA-39 Jamaica	53,650	1,310	54,960	36,523	2/28/84					
NCA-40 Brazil	34,950		34,950	5,169	8/31/83	40,000		40,000	2,500	8/31/84
NCA-42 Guatemala	14,651	904	15,555	8,704	7/31/83	17,000	1,000	18,000	2,000	7/31/84
NCA-43 Panama						49,608	2,420	52,028	7,396	12/31/83
Haiti						73,000	2,000	75,000	15,200	9/30/84
Mexico (Minilap)						73,000	2,000	75,000	3,000	9/30/84
Mexico (Microsurgery)						10,000		10,000	10,000	9/30/84
Bolivian (REHEP)						37,000	3,000	40,000	9,000	9/30/84

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SCHEDULE OF AGREEMENT OBLIGATION

<u>Agreement</u>	<u>Obligations Through 3/31/83 In-Country</u>	<u>Obligations Through 3/31/83 Direct</u>	<u>Total Obligations Through 3/31/83</u>	<u>Equipment and Educ. Mat. Through 3/31/83</u>	<u>Agreement Expirations</u>	<u>Projected Obligations Through 9/30/83 In-Country</u>	<u>Projected Obligations Through 9/30/83 Direct</u>	<u>Total Obligations Projected Through 9/30/83</u>	<u>Equipment and Educ. Mat. Through 9/30/83</u>	<u>Agreement Expirations</u>
Latin America (Cont'd)										
Costa Rica						37,000	3,000	40,000	9,000	9/30/84
Honduras (REHEP)						37,000	3,000	40,000	9,000	9/30/84
Peru (REHEP)						45,000	5,000	50,000	9,000	9/30/84
Brazil (REHEP)						37,000	3,000	40,000	9,000	9/30/84
Ecuador (REHEP)						37,000	3,000	40,000	14,364	9/30/84
Paraguay (REHEP)						37,000	3,000	40,000	3,000	9/30/84
Sub-total										
Latin America NCA's	1,794,168	30,399	1,824,567	1,003,897		659,684	32,090	691,774	149,161	
NMA-2 Colombia		1,658	1,658	180,454	9/30/83					
NMA-14 Brazil (CPAIME)	115,152		115,152	92,407	9/30/83	70,931		70,931	55,962	9/30/84
Haiti (Ram Center)						10,000		10,000	25,000	9/30/84
Costa Rica						5,000		5,000	16,000	9/30/84
Ecuador						10,000		10,000		9/30/84
NMA-1 Peru						10,000		10,000		9/30/84
Sub-total										
Latin America NMA's	115,152	1,658	116,810	272,861		105,931	- 0 -	105,931	146,962	
GRAND-TOTAL										
LATIN AMERICA	<u>1,909,320</u>	<u>32,057</u>	<u>1,941,377</u>	<u>1,276,758</u>		<u>765,615</u>	<u>32,090</u>	<u>797,705</u>	<u>296,123</u>	

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SCHEDULE OF AGREEMENT OBLIGATIONS

<u>Agreement</u>	<u>Obligations Through 3/31/83 In-Country</u>	<u>Obligations Through 3/31/83 Direct</u>	<u>Total Obligations Through 3/31/83</u>	<u>Equipment and Educ. Mat. Through 3/31/83</u>	<u>Agreement Expirations</u>	<u>Projected Obligations Through 9/30/83 In-Country</u>	<u>Projected Obligations Through 9/30/83 Direct</u>	<u>Total Obligations Projected Through 9/30/83</u>	<u>Equipment and Educ. Mat. Through 9/30/83</u>	<u>Agreement Expirations</u>
<u>Asia</u>										
NCA-13 Thailand	18,500	3,025	21,525	6,000	4/30/83					
NCA-15 Philippines	244,130	111,530	355,660	136,920	5/31/83	25,000	125,000	150,000	45,640	5/31/84
NCA-25 Malaysia	* 58,265	* 12,867	* 71,132	95,820	9/30/83					
NCA-27 Indonesia	92,316	9,259	101,605	1,000	7/31/83					
NCA-32 Thailand	5,010	3,805	8,815	10,800	1/30/82					
NCA-34 Philippines	6,700		6,700	5,328	6/30/83	6,800		6,800	5,500	6/30/84
Indonesia (Microsurgery)						8,000	2,000	10,000	10,800	9/30/84
Thailand Refresher						42,180	3,046	45,226	215,000	8/31/84
Fiji (REHEP)						12,000	3,000	15,000	10,000	9/30/84
New Guinea (Papua) REHEP						12,000	3,000	15,000	7,000	9/30/84
Pakistan						90,000	5,000	95,000	40,000	9/30/84
Bangladesh						45,000	5,000	50,000		9/30/84
Sub-total Asia NCA's	<u>424,921</u>	<u>140,516</u>	<u>565,437</u>	<u>255,868</u>		<u>240,980</u>	<u>146,046</u>	<u>387,026</u>	<u>333,940</u>	
NMA-4 Philippines	16,256		16,256	30,000	3/31/83	9,792		9,792	23,000	3/31/84
NMA-11 Thailand		6,033	6,033	41,207	9/30/83		7,500	7,500	15,929	9/30/84
Sub-total Asia NMA's	<u>16,256</u>	<u>6,033</u>	<u>22,289</u>	<u>71,207</u>		<u>9,792</u>	<u>7,500</u>	<u>17,292</u>	<u>38,929</u>	
GRAND TOTAL ASIA	<u><u>441,177</u></u>	<u><u>146,549</u></u>	<u><u>587,726</u></u>	<u><u>327,075</u></u>		<u><u>250,772</u></u>	<u><u>153,546</u></u>	<u><u>404,318</u></u>	<u><u>372,869</u></u>	

SCHEDULE OF AGREEMENT OBLIGATIONS

<u>Agreement</u>	<u>Obligations Through 3/31/83 In-Country</u>	<u>Obligations Through 3/31/83 Direct</u>	<u>Total Obligations Through 3/31/83</u>	<u>Equipment and Educ. Mat. Through 3/31/83</u>	<u>Agreement Expirations</u>	<u>Projected Obligations Through 9/30/83 In-Country</u>	<u>Projected Obligations Through 9/30/83 Direct</u>	<u>Total Obligations Projected Through 9/30/83</u>	<u>Equipment and Educ. Mat. Through 9/30/83</u>	<u>Agreement Expirations</u>
<u>Near East</u>										
NCA-6 Tunisia	357,745	223,827	581,572	192,797	12/31/83	200,000	150,000	350,000	65,620	12/31/84
NCA-18 Alex. Egypt	172,993	29,776	202,769	158,300	9/30/82					
NCA-20 Morocco		72,008	72,008	105,842	9/30/83		100,000	100,000	22,915	9/30/84
NCA-22 Turkey	113,897	14,000	127,897	132,210	5/31/83	80,657	4,690	85,347	85,428	5/31/84
NCA-24 Cairo, Egypt	108,048	24,864	132,912	104,500	9/30/82					
NCA-45 Alex. Egypt	188,370	55,304	243,674	238,394	9/30/83	200,000	50,000	250,000	200,000	9/30/84
NCA-46 Cairo, Egypt	109,060	23,848	132,908	143,044	9/30/83	125,000	25,000	150,000	140,000	9/30/84
Egypt (Assuit)						20,000	5,000	25,000		9/30/84
Egypt (Ain Shams)						20,000	5,000	25,000	10,000	9/30/84
Sub-total										
Near East NCA's	1,050,113	443,627	1,493,740	1,075,087		645,657	339,690	985,347	523,972	
NMA-8 Sudan	2,532		2,532	15,000	6/30/83	5,000		5,000		6/30/84
NMA-12 Turkey	6,220	2,016	8,236	33,371	12/31/83					
NMA-16 Tunisia	13,400	2,175	15,575	10,500	3/31/84					
Sub-total										
Near East NMA's	22,152	4,191	26,343	58,871		5,000		5,000		
GRAND TOTAL										
NEAR EAST	<u>1,072,265</u>	<u>447,818</u>	<u>1,520,083</u>	<u>1,133,958</u>		<u>650,657</u>	<u>339,690</u>	<u>990,347</u>	<u>523,972</u>	

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NEW SPECIAL PROJECTS

<u>Agreement</u>	<u>Obligations Through 3/31/83</u>	<u>Equipment and Educ. Mat. 3/31/83</u>	<u>Projected Obligations Through 9/30/83</u>	<u>Equipment and Educ. Mat. 9/30/83</u>
Chile	10,343	9,751		
Burma	2,899	- 0 -		
Mexico	17,522	- 0 -	10,720	
Burma	10,549	46,198	25,000	50,000
Sri Lanka	21,566	27,586	25,000	29,000
Chile	16,098	14,490		
Africa	51,064	3,025		
India			15,000	10,800
India (Maint. Wkshp)			10,000	5,000
Colombia			78,724	78,752
Mexico			10,720	21,770
Jamaica			34,125	
NSP Sub-total	<u>130,041</u>	<u>101,050</u>	<u>209,289</u>	<u>195,322</u>

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JHPIEGO CONTROL BUDGETS

<u>Categories</u>	<u>Expenditures 9/1/80-3/31/83</u>	<u>Projected Obligations Through 9/30/83</u>	<u>Total</u>
Participant Costs	1,872,283	648,277	2,520,560
Field Training	214,919	59,028	273,947
Educational Materials	<u>376,922</u>	<u>593,378</u>	<u>970,300</u>
Sub-total	2,464,124	1,300,683	3,764,807

<u>Categories</u>	<u>Obligation 5/1/81-3/31/83</u>	<u>Projected Obligations Through 9/30/83</u>	<u>Total</u>
NJ-1	808,965	225,270	1,034,235
GRAND-TOTAL	<u>3,273,089</u>	<u>1,525,953</u>	<u>4,799,042</u>

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Financial Status Report
as of 3/31/83
Based on \$20.5 million authorized funds

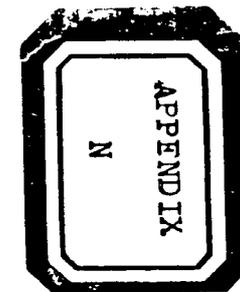
Category	Funds Authorized 9/1/80-9/30/83	Outlays through 3/31/83	Unliquidated Obligations of 3/31/83	Total Outlays and Obligations 3/31/83	Funds Unobligated
Central Costs	\$ 5,156,565.00	\$3,829,802.55	\$ 847,707.77	\$4,677,510.32	\$ 479,054.68
Planning/Devel.	\$ 1,146,868.00	\$ 667,123.58	\$ 87,256.07	\$ 754,379.65	\$ 392,488.35
Equipment	\$ 2,087,966.00	\$ 447,126.09	\$ 623,522.01	\$1,070,648.10	\$1,017,317.90
Training and Education	\$12,137,000.00	\$6,159,797.19	\$2,553,047.98	\$8,712,845.17	\$3,424,154.83
Totals	\$20,528,399.00	\$11,103,849.41	\$4,111,533.83	\$15,215,383.24	\$5,313,015.76

Total Amount of funds authorized to date from AID - 20.5 million
 Expenditures (Outlays and Unliquidated Obligations) - 15.2 million as of 3/31/83
 Funds Unobligated as of 3/31/83 - 5.3 million (Note 2.5 million was not authorized
 by AID until 12/17/82)

Analysis of Needs 4/1/83 thru 9/30/83 (in thousands)

Central Costs	\$ 250
Planning/Dev	\$ 374
Equipment	\$1,017
Participant Costs	\$ 380
Field Training	\$ 71
Educational Matl's	\$ 307 -
Total	\$2,399 - (Exclusive of Subagreements to be Obligated by 9/30/83)

Funds (in thousands) unobligated as of 3/31/83 - \$5,313
 Costs through 9/30/83 (exclusive of new
 commitments for subagreement) - \$2,399
 (Funds available before committing funds
 for subagreements) \$2,914



Proposals In Process

		<u>In-Country</u>	<u>Direct</u>	
NCA-34	Philippines	7,672	2,350	
NMA-8	Sudan	2,040	2,735	
NCA-40	Fortaleza	34,950	3,000	
NCA-15	Philippines	110,640	38,708	
NCA-	Sri Lanka	25,000	-0-	
NCA-	Cameroon	90,000	5,000	
NCA-	Zaire	145,000	5,000	
NCA-	Benin City, Nigeria	95,000	5,000	
NCA-44	Thailand	42,180	3,046	
NCA-	Egypt (Deans Conference)	13,000	2,000	
NCA-	Thailand (microsurgery)	8,000	2,000	
	Cameroon (Paramedical)	26,780	8,347	
NCA-42	Guatemala	17,000	1,000	
NMA-	Peru	25,000	-0-	
NCA-	Honduras	37,000	3,000	
NCA-	Costa Rica	37,000	3,000	
NMA-14	Brazil	70,931	-0-	
NSP	Jamaica (Satellite)	34,125	-0-	
NCA	Brazil (Recife)	45,000	5,000	
NCA-28	Santa Maria	40,000	-0-	
	Sub total	<u>906,318</u>	<u>89,186</u>	995,504
 <u>Agreements At AID</u>				
NCA-10	Kenya	148,000	6,300	
NCA-22	Turkey	80,657	4,690	
NCA-8	Mexico	90,076	1,670	
NCA-48	Nigeria	93,960	8,662	
NCA-47	Sierre Leone	60,080	6,602	
	Sub total	<u>472,773</u>	<u>27,924</u>	500,697
	Grand total	1,379,091	117,110	<u>1,496,201</u>

Subagreements
Programmed for Obligation
by 9/30/83

Obligations projected in T & E Schedule	(in thousands) \$4,709
<hr/>	
Of the above amount we plan to commit the following funds between June - August 1983 (in thousands)	
Subagreements and Proposals in AID/W & JHPIEGO Should be signed by June 30, 1983	\$1,500
Subagreements which will result from current overseas trips and will probably be signed by August 1983	
Nigeria - \$400 (4 sites)	
Brazil (Santa Maria)	
Peru (Maintenance Center; REHEP; Management) \$200	\$ 600
NJ-1 Agreement in August 1983	\$ 225
	<u>\$2,325</u>

This leaves us only \$600 for the balance of the programs and no funds for back-up support past September 1983

TO: S&T/POP, Andrew Wiley

DATE: April 29, 1983

FROM: S&T/PO, Harriett Dest *HPD*

SUBJECT: Management Review for JHPIEGO

APPENDIX

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Thank you for the information on the rescheduling of the JHPIEGO Management Review Team. As I discussed with you and Anne Aarnes, I think it would be very useful if the team would also look at two additional management concerns which crop up in every review of JHPIEGO. These are:

• Pipeline: The attached FM record shows a cumulative total of \$10.461 million in unliquidated obligations for JHPIEGO as of March 31, 1983. This is at the same time that JHPIEGO was stating a critical need for additional AID funds to carry on project activities. Since the Office of Population is very concerned about available resources to support current project initiatives, it is important to know whether the present pattern of funding for JHPIEGO with the corporation setting aside considerable resources for future country activities is appropriate and in AID's best interest. Other AID contractors enter into country agreements and procurement activities but they do not appear to develop such large pipelines (almost two years of funding). Thus it is important to know whether what we see is a bookkeeping problem (i.e. JHPIEGO's reporting of obligations and expenditures or FM's recording of expenditures is at fault or creates a misleading picture) or a management problem (JHPIEGO is reserving too high a proportion of funds.).

• Costs: JHPIEGO is frequently criticized for having very high per participant costs yet it is difficult to get information on the actual costs. Comparative data on the actual costs of training participants: in the U.S., in regional workshops; and in country courses, would appear very useful. Perhaps, the team could develop a system for capturing and a format for recording the actual costs of the two major project outputs: trained personnel and specially-equipped clinics.

I hope to be able to attend Monday's meeting. I will be out of the office at the CSM meeting most of the rest of the week. If Messrs. Fisker and Munch wanted more information on either of these concerns and were unable to reach me, Ken Milow can be contacted.

cc: S&T/POP, S. Sindig
B. Case
A. Aarnes

S&T/PO K. Milow
F. Campbell

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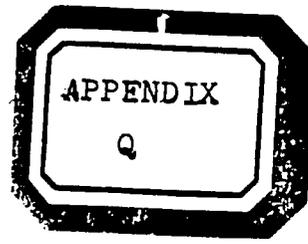
Comparison of Tuition Rates and Travel Costs for U.S., Regional, and In-Country National Training as of 12-31-82:

Physician Training	Didactic Course Tuition	Clinical Practice Tuition	Travel and Per Diem	TOTAL
<u>U.S.</u> - Johns Hopkins	\$1,335	900	\$3,500	\$5,735
<u>Asia</u> - Philippine National	1,161	included	included	1,161
- Philippine Regional	1,909	included	2,000	3,909
<u>Africa</u> - Kenya National	1,596	included	included	1,956
- Kenya Regional	N/A	N/A	N/A	
<u>N.East</u> - Tunisia National	1,177	included	included	1,177
- Tunisia Regional	2,227	included	1,600	3,827
- Egypt National	1,754	included	included	1,754
- Egypt Regional	1,829	included	1,800	3,629
<u>Lat.Am.</u> - Brazil National	1,210	855	included	2,065
- Brazil Regional	N/A	N/A	N/A	
<u>Nurse Training</u>				
<u>U.S.</u>	N/A	N/A	N/A	
<u>Asia</u> - Philippine National	763	included	included	763
- Philippine Regional	1,436	included	2,000	3,436
<u>N.East</u> - Tunisia National	843	included	included	843
- Tunisia Regional	1,893	included	1,600	3,493
<u>Cent.Am.</u> - Brazil National	1,165	included	included	1,165

Summary of Tuition Rates and Travel Costs for U.S. Regional and
In-Country (National) Training

	<u>U.S.</u>	<u>Regional</u>	<u>National</u>
Physician Training (Didactic and Clinical)	\$5,735	\$3,788	\$1,622
Nurse Training (Didactic and Clinical)	N/A	\$3,465	\$ 924

The regional and national rates are average costs of programs from each region with comparable training programs.



March 18, 1983

MEMORANDUM:

TO: Ronald T. Burkman, M.D.
FROM: Grants Office *MC*
SUBJECT: Tuition Comparison Charts

Based on current tuition rates for FY'83 we have worked up comparison charts for the various categories of trainees. These charts will be updated quarterly or as needed and should be useful to you at the proposal review stage of new programming.

If you have any additional needs which could be incorporated, please advise.

MTM:tfl

Attachments (3)

cc: Ms. Charlotte Ellis ✓
Mr. John Blouse

PHYSICIAN

AGREE. NO.	COUNTRY	FY 1983 TUITION	LA FIBROSCOPY	FAM. PLANNING	ANESTHESIA	COURSE LENGTH	DIDACTIC	CLINICAL	DID/CLIN	REHEP	OTHER
NCA-6	TUNISIA	\$1085	X			3WK	X	X			
		\$2030	X			3WK	1WK	2WK			REGIONAL
		\$606			X	1WK			X		
		\$421			X	1WK			X		REGIONAL
		\$636		X		2WK	1WK	1WK			
↓	↓	\$1266		X		2WK	1WK	1WK			REGIONAL
NCA-15	PHILIPPINES	\$1161	X			5WK	X	X			
		\$1909	X			3WK	X	X			REGIONAL
↓	↓	\$1436	X			1WK			X		ON-SITE REFRESHER
NCA-25	MALAYSIA	\$265	X			5day			X		
NCA-27	INDONESIA	\$876		X		2WK			X		
NCA-29	SOMALIA	\$845		X		3WK	X	X			
NCA-30	COLOMBIA	\$915	X			6day			X		
NCA-10	KENYA	\$1735	X			2WK	X	X			
↓	↓	\$1920		X		2WK	X	X			
NCA-47	SIERRA LEONE	\$1738	X			3WK	X	X			
NCA-48	NIGERIA	\$1566		X		2WK	X	X			MIDWIVES COM HEALTH PRIMARY CARE MED. OF
NCA-45	EGYPT	\$1754	X			3WK	X	X			
↓	↓	\$1829	X			3WK	X	X			REGIONAL
NCA-46	EGYPT	\$1241	X			2WK	X				(SEE CLIN.)
		\$1206	X			2WK	X				REGIONAL (SEE CLIN.)
		\$851	X			1WK		X			(SEE DID C)
		\$776	X			1WK		X			REGIONAL (SEE DID C)
NCA-35	BRAZIL	\$1234	X			5DAY	X				(SEE CLIN. COST)
		RIC \$855 OTHER \$960	X			6DAY		X			(SEE DID. COST)
↓	↓	\$1384	⊕			6DAY			X		⊕/L
NCA-39	JAMAICA	\$94		X		WEEK END	X				(SEE CLIN. COST) 162
		\$177				11 DAY					(SEE DID. COST) 117

PHYSICIAN

AGREE. NO.	COUNTRY	FY1983 TUITION	LAPROSCOPY	FAM. PLANNING	ANESTHESIA	COURSE LENGTH	DIDACTIC	CLINICAL	DID/CLIN	REHEP	OTHER
PA-6	TUNISIA	\$1085	X			3WK	1WK X	2WK X			
		\$2030	X			3WK	1WK X	2WK X			REGIONAL
		\$606			X	1WK			X		
		\$921			X	1WK			X		REGIONAL
		\$636		X		2WK	1WK X	1WK X			
↓	↓	\$1266		X		2WK	1WK X	1WK X			REGIONAL
CA-15	PHILIPPINES	\$1161	X			2WK	X	X			
↓	↓	\$1909	X			3WK	X	X			REGIONAL
↓	↓	\$1436	X			1WK			X		ON-SITE REFRESHER
PA-25	MALAYSIA	\$265	X			5day	X				(SEE CLIN COST)
PA-25	↓	\$660	X			5day		X			(SEE DID COST)
PA-27	INDONESIA	\$876		X		2WK			X		
PA-29	SOMALIA	\$845		X		3WK	X	X			
PA-30	COLOMBIA	\$915	X			6day			X		
PA-10	KENYA	\$1735	X			2WK	X	X			
↓	↓	\$1920		X		2WK	X	X			
PA-47	SIERRA LEONE	\$1738	X			3WK	X	X			
PA-48	NIGERIA	\$1566		X		2WK	X	X			MIDWIVES, COMM HEALTH OFF PRIMARY CARE MED. OFFICE
PA-45	EGYPT	\$1754	X			3WK	X	X			
↓	↓	\$1829	X			3WK	X	X			REGIONAL
PA-46	EGYPT	\$1241	X			2WK	X				(SEE CLIN. COST)
↓	↓	\$1206	X			2WK	X				REGIONAL (SEE CLIN. COST)
↓	↓	\$851	X			1WK		X			(SEE DID COST)
↓	↓	\$776	X			1WK		X			REGIONAL (SEE DID COST)
PA-35	BRAZIL	\$1234	X			5DAY	X				(SEE CLIN. COST)
↓	↓	RIO \$855 OTHER \$960	X			6DAY		X			(SEE DID COST)
↓	↓	\$1384	⊗			6DAY			X		⊗M/L
PA-39	JAMAICA	\$94		X		WEEK END	X				(SEE CLIN. COST)
		\$1777				1WK					(SEE CLIN. COST)

PARAMEDIC

AGREEI NO.	COUNTRY	FY1983 TUITION	LAPAROSCOPY	FAM. PLANNING	ANESTHESIA	COURSE LENGTH	DIDACTIC	CLINICAL	DID/CLIN	REHEP	OTHER
A-6	TUNISIA	\$ 867	X			3wk	1wk X	2wk X			
		\$ 1812	X			3wk	1wk X	3wk X			REGIONAL
		\$ 834			X	2wk	1wk X	1wk X			
		\$ 1464			X	2wk	1wk X	1wk X			REGIONAL
		\$ 844		X		3wk	1wk X	2wk X			
↓	↓	\$ 1789		X		3wk	1wk X	2wk X			REGIONAL
A-15	PHILIPPINES	\$ 963	X			3wk	X	X			
↓	↓	\$ 921	X			3wk	X	X			REGIONAL
A-25	MALAYSIA	\$ 265	X			5day	X				(SEE CLIN COST)
↓	↓	\$ 660	X			5day		X			(SEE DID. COST)
A-30	COLOMBIA	\$ 585	X			6day			X		
A-10	KENYA	\$ 1870		X		2wk	X	X			
A-47	SIERRA LEONE	\$ 1331	X			3wk	X	X			
↓	↓	\$ 390		X		5day			X		
A-45	EGYPT	\$ 498	X			1wk			X		
↓	↓	\$ 573	X			1wk			X		REGIONAL
↓	↓	\$ 921		X		10 day			X		IUD
↓	↓	\$ 996		X		10 day			X		IUD REGIONAL
A-46	EGYPT	\$ 668	X			1wk			X		
↓	↓	\$ 633	X			1wk			X		REGIONAL
A-35	BRAZIL	\$ 1234	X		X	5day week END			X		NURSE AND ANESTH.
A-39	JAMAICA	\$ 55		X		5day	X				(SEE CLIN. COST)
		\$ 138	X			5day		X			(SEE DID. COST)