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Sub-project Progress Report:  
TECHNICAL ASSISTANCE TO THE  
MCH/FP GENERAL DIRECTORATE IN TURKEY  
October 1995 - January 1997

Family Planning Management Development (FPMD)  
Project Number: 936-3055  
Agreement Number: CCP-A-00-95-00000-02

Office of Population, USAID

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February 1997

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## **I. Summary**

Since 1991, the Family Planning Management Development (FPMD) Project of Management Sciences for Health (MSH) has been working with the Maternal Child Health/Family Planning (MCH/FP) General Directorate of the Turkish Ministry of Health (MOH) to strengthen management information systems and structures in order to improve service access and quality at the level of the service delivery point. Since the start of FPMD II (October 1995), the sub-project has focused on shifting from pilot demonstration activities in a limited number of provinces to an expansion and institutionalization of management information systems (MIS) and skills at the central and provincial levels.

Between October 1995 and January 1997 good progress was made against the majority of technical assistance objectives. Important indications of results include:

- The presence of a local coordinator has significantly increased the effectiveness and efficiency of FPMD technical assistance. A greater number of activities have been accomplished in a shorter period of time, as compared to prior years of FPMD assistance, and opportunities for providing and reinforcing technical assistance and skills building have been enhanced.
- The development of standardized training curricula in Turkish on Contraceptive Logistics Management and Distribution, and on Using Data for Decision-Making will facilitate future initial or refresher training by the MCH/FP General Directorate and/or Provincial Directorates.
- The MCH/FP General Directorate's Logistics/MIS (LMIS) team is fully capable of replicating training on Contraceptive Logistics Management and Distribution without technical assistance from FPMD.

During the balance of 1997, the sub-project should devote more significant attention to training and TA for provincial managers in the use of data for decision-making. The sub-project strategy should increasingly focus on skills building for provincial-level managers in using the FP service statistics and commodities data routinely collected and reported to identify and address service delivery and quality of care issues at Health Centers and MCH/FP Centers. To encourage the use of data for strengthened management, the MCH/FP General Directorate should institute an annual feedback protocol on reports received from Provincial Health Directorates.

Further recommendations are offered in this report, based on this assessment of progress to date, and a detailed activity plan for calendar year 1997 is provided in Appendix I.

## **II. Introduction**

Between 1991 and 1995 the Family Planning Management Development (FPMD) Project of Management Sciences for Health (MSH) and the Centers for Disease Control and Prevention (CDC) collaborated on a joint project to assist the Maternal Child Health/Family Planning (MCH/FP) General Directorate of the Ministry of Health (MOH) to develop and test a family planning service statistics and contraceptive logistics information system. The goal of this sub-project was to help the MCH/FP General Directorate in more rational decision making that would

lead to more cost efficient utilization of resources and improvement of the quality of service delivery. The specific objectives were to ensure that by the end of the sub-project, the MCH/FP General Directorate had:

- ▶ appropriate contraceptive logistics procedures tested in some provinces and ready for implementation in others;
- ▶ functioning service statistics and logistics information systems providing information necessary to support the planning, monitoring, and supervision functions of the MCH/FP General Directorate at both the provincial and national levels; and
- ▶ a central Logistics/Management Information Systems (LMIS) Technical Team trained and ready to plan the dissemination of these systems to other provinces and support the provincial staff in their efforts to implement and use these management tools.

The sub-project was implemented in five test provinces -- Ankara, Aydin, Izmir, Kirikkale, and Manisa -- during the period 1993-95.

In October 1995, Management Sciences for Health was awarded FPMDII. As it was for FPMD, FPMDII's mandate is, by providing technical assistance, to promote institutional development and strengthen the management capabilities of public- and private-sector family planning organizations to enhance the quality, coverage and sustainability of their services. FPMDII's technical assistance to the MCH/FP General Directorate over the period 1995-99 is building on the aforementioned logistics and management information systems development by improving use of information in the five pilot provinces and at the MCH/FP General Directorate, and by expanding the use of these systems to new provinces. The availability of accurate information on use of family planning services and storage and distribution of commodities will assist provincial-level health offices and the MCH/FP General Directorate to make timely, rational decisions regarding quality of care, including access to services, training needs, and the procurement and provision of modern contraceptives to service delivery sites.

These expected outcomes are consistent with the USAID country strategy for population assistance to Turkey prepared in 1994. The strategic objectives of USAID assistance to the Turkish family planning program are:

1. To increase the availability and effective use of quality family planning and reproductive health services.
2. To improve Turkey's self-reliance in family planning and reproductive health by enhancing the public and private sector ability to meet consumer demand for these services independent of USAID support.

Within this strategic context, USAID has identified expected program outcomes and indicators for a policy strategy to strengthen the Government's management capacity, including objectives related to strengthening the Government's contraceptive self-reliance and ability to forecast contraceptive requirements independently. In addition, the MOH has developed a National Strategic Plan for Family Planning/Reproductive Health (FP/RH). Discussions in the Working Group on Management and Infrastructure, organized in connection with the Strategic Plan's

development, have identified needs related to management development in the public sector, including the need to:

- strengthen provincial and Ministry based managers' management skills by the year 2000;
- ensure continuous and effective data collection, monitoring and evaluation from all public and private health care institutions offering FP/RH services to ensure high quality, continuous service provision; and
- include a feedback mechanism for data collection, and train managers in the use of information.

FPMD's technical assistance to the MCH/FP General Directorate is responsive to the National Strategic Plan as well as to the National Implementation Plan currently under development.

### **III. Background**

The goal of FPMD's current sub-project is to assist the MCH/FP General Directorate to move from the "growth" stage of management development to the "consolidation" stage, where more staff at the central and provincial levels have strengthened management and technical capabilities, as well as the necessary systems and structures to make informed decisions, and to operate and support local level FP/RH activities more effectively. As a result of international and local technical assistance provided by FPMD, a capacity at the central level to train and provide technical assistance to provincial staff will continue to be strengthened.

In mid-1996, FPMD finalized a four-year Management Development Plan (MDP) with the MCH/FP General Directorate. (*Management Development Plan, Technical Assistance to the MCH/FP General Directorate in Turkey*, October 1995-September 1999, June 1996.) The Plan has three objectives, which are:

Objective 1. To improve the use of information by the MCH/FP General Directorate and by provinces participating in this sub-project for managing the Government's family planning/reproductive health program.

Objective 2. To improve monitoring of family planning/reproductive health activities at the central and provincial levels.

Objective 3. To expand sub-project activities to 5-7 new provinces per year.

The purpose of this Progress Report is to document the activities conducted to date, the results and, where possible, the impact of FPMD technical assistance. Recommendations for the balance of fiscal year 1997 and beyond are also offered, based on this assessment of progress, changes in local conditions, and current/projected funding considerations since the time the MDP was developed.

### **IV. Objectives, Activities, and Indication of Impact/Results**

**Objective 1.** *To improve the use of information by the MCH/FP General Directorate and by provinces participating in this sub-project for managing the Government's family*

*planning/reproductive health program.*

## **Activities**

- FPMD identified and employed a local consultant to support the LMIS team in the implementation of the MDP. Dr. Ersin Topcuoğlu was hired in April 1996 as a part-time local consultant to provide technical assistance to MCH/FP General Directorate staff in the implementation of the 1996 work plan. In October 1996 his consultant letter was renewed and extended through September 1997. In addition to technical assistance work, Dr. Topcuoğlu represents FPMD at meetings organized by CAs and USAID/Ankara, and participates in MCH/FP General Directorate activities related to MIS (e.g., the Working Group on Contraceptive Logistics Systems for the National Implementation Plan).
- Technical assistance to improve the capacity of MCH/FP General Directorate staff to standardize data processing of services statistics and commodities management data and to introduce more flexible software is ongoing. Dr. Topcuoğlu provided informal training to the LMIS team in EPI Info software in July 1996, specifically in data entry and editing. However, plans to introduce EPI Info as an alternative and more flexible software for inputting and processing data have been repeatedly postponed due to rescheduling by the MCH/FP General Directorate of formal training for the LMIS team. The training will be rescheduled sometime in 1997 once additional LMIS team members, to replace the two which recently left the MOH, have been named and are in place.
- In September 1996, Dr. Topcuoğlu, FPMD/MSH technical staff (Dr. Robert Timmons and Margaret Watt), and the LMIS team re-reviewed prior agreements concerning the outline and content of a planned MIS manual to be developed by FPMD. Largely influenced by the results of the situation analysis exercise in new provinces (see below), the focus and purpose of MIS-related materials changed. In lieu of a manual, FPMD agreed to and did develop two training curricula in October 1996. One curriculum was designed specifically for a regional workshop for new provinces focusing on the “Top Up” commodities management system. In addition, the curriculum provides an overview on using stock data for decision making. The second curriculum addresses the issue of provincial managers using data for decision making. FPMD provided guidance to Dr. Topcuoğlu and the LMIS team on how the curricula could be adapted to prepare user’s guides for distribution to participating provinces as a reference material. The curricula, which include detailed trainer’s notes, and supporting reference materials were translated into Turkish. The training curricula are entitled: “Contraceptive Logistics Management and Distribution”, and “Using Data for Decision-Making”.

## **Indication of Impact/Results**

- The presence of a local coordinator has greatly increased the effectiveness and efficiency of FPMD technical assistance, contributing to the development of MCH/FP General Directorate staff’s ability to use information in planning and managing services. The model of using a local

TA resource rather than an exclusive reliance on international TA based outside of Turkey is more appropriate and has permitted a greater number of activities to be accomplished in a shorter period of time. In addition to facilitating implementation of the workplan, opportunities for provision of technical assistance to the LMIS team and reinforcement of learnings have increased necessarily due to FPMD's, and specifically Dr. Topcuoğlu's, frequent contact and involvement with the LMIS team. Moreover, Dr. Topcuoğlu's active participation in quarterly CA meetings, including two presentations on FPMD activities with the MOH and a field visit by CA and USAID/Ankara representatives to Kirikkale, one of the original pilot provinces participating in the sub-project, has expanded FPMD's presence and participation within the CA community in Turkey, increasing the CA-community's knowledge and understanding of FPMD activities with the MOH as well as opportunities for collaboration.

- The curriculum on Contraceptive Logistics Management and Distribution was successfully used for training new provinces joining the sub-project this year. (See below for additional information on this training workshop.) Following the training, the LMIS team made minor modifications to the curriculum based on their experience during the workshop in anticipation of replicating the training in the fall 1997 for additional new provinces to be identified in February/March 1997. The LMIS team is fully capable of replicating this training without technical assistance from FPMD.

**Objective 2.** *To improve monitoring of family planning/reproductive health activities at the central and provincial levels.*

### **Activities**

- The MCH/FP General Directorate named a fourth member to the LMIS team, Dr. Gulcin Hacioğlu, in late 1995. Unfortunately, in December 1996 the team lost two members, Dr. Gulcin Hacioğlu and Dr. Ufuk Gurol, due to their departure from the MOH. The LMIS team currently consists of Dr. Ahmet Afşar and Dr. Burcu Açıkalın. A third, new member, is expected to be identified by the MCH/FP General Directorate shortly.
- The LMIS team is providing feedback to the participating provinces on provincial service statistics reporting and commodities management, however, only during field visits to participating provinces.
- A planned activity -- to integrate the Social Insurance Organization, FP NGOs, and other institutions delivering health care into sub-project activities -- has been dropped from the workplan/MDP at the request of the U.S. Embassy.

### **Indication of Impact/Results**

- Monitoring of provincial level activities, in those provinces participating in this sub-project, has improved in that central level staff travel more frequently to the field. However, their travel is wholly dependent on FPMD funding. And no protocol or standard for providing feedback on reports submitted to the MCH/FP General Directorate has as yet been developed, nor is feedback provided by Provincial Health Directorates to Health and MCH/FP Centers in the participating provinces. Dr. Topcuoğlu will work with the MCH/FP General Directorate over the coming months to develop and model an annual written feedback protocol to the Provincial Health Directorates. Appropriate indicators (e.g., adequacy/accuracy of service statistics and commodities reports, changes in method mix over time) will be determined in consultation with the MCH/FP General Directorate. This protocol will be in place and functional as of September 1997. In addition, a module for a similar feedback protocol for the Provincial Health Directorates to Health and MCH/FP Centers will be developed for inclusion in the Using Data for Decision-Making curriculum for training of provincial managers from 12 provinces, planned for late 1997 or early 1998.
- As noted above, the designation of MCH/FP General Directorate staff to the LMIS team allows them and FPMD TA providers to focus attention on the issue of MIS, although this attention is not consistently sustained due to the demands of the staff's other work.

**Objective 3.** *To expand sub-project activities to 5-7 new provinces per year.*

### **Activities**

- Seven new provinces were identified by the MCH/FP General Directorate: Konya, Adana, Icel, Erzurum, Trabzon, Kocaeli, and Tekirdag, covering 12.7% of the total Turkish population.
- To assess the management information capabilities and systems in the new provinces, situation analysis tools for collection of baseline data were developed, field-tested, refined, and implemented in all seven new provinces and two of the original five pilot provinces by the LMIS team with assistance from Dr. Topcuoğlu. The tools consist of two main questionnaires for collecting data from 1) Provincial Health Directorates and 2) Health Centers and MCH/FP Centers. Data were collected in the following categories: provision of FP services and availability of personnel; managers and service providers' knowledge of national FP goals; current status of service statistics data collection and reliability of data, reporting, use of data and feedback/supervision; and logistics management and availability of FP commodities. In summary, findings indicate that while service statistics information systems are generally functional, systems for logistics management are wholly non-existent, resulting in serious problems with stock-outs and improper distribution of commodities. A detailed report on the situation analysis exercise has been drafted and is expected to be finalized (in Turkish and English) by the LMIS team in collaboration with Dr. Topcuoğlu by the end of March. The report will include recommendations for action by the MCH/FP General Directorate, FPMD and other USAID-funded CAs to address the findings of the exercise.
- Two regional workshops, one each for the original five provinces and the seven new provinces, were conducted in November 1996. The curriculum prepared by FPMD/MSH and Dr. Topcuoğlu, entitled "Contraceptive Logistics Management and Distribution" was used during the

November 25-29 workshop for new provinces. The curriculum was largely based on the situation analysis findings, especially as regards the need for training of provincial managers in commodities management. The trainer's and user's guides developed by FPMD were used. The MCH/FP General Directorate undertook a formal evaluation of the curriculum in early January and made modifications to the training plan based on the experience during the November workshop. The Turkish version of the curriculum has been finalized.

The workshop for "old" provinces (November 18-20) was limited to 1 ½ days due to the non-availability of provincial staff for a longer period of time. The workshop content was confined to a review of progress in implementation of service statistics and commodities management systems. Little time was able to be devoted to advanced skills building in using data for decision-making. The curriculum developed by FPMD for this workshop ("Using Data for Decision-Making") was not used in full as this training course was designed for a 3-day duration and provincial managers were only available for 2 days.

- An activity planned in the MDP -- to train warehouse managers in the procedures and protocols of commodities management using a simple computer application developed by the LMIS team, with some technical input from FPMD -- has been put on hold for the moment. FPMD and the LMIS team are coordinating with the World Bank-funded MOH MIS project concerning this objective, and will re-assess this activity in spring 1997 in light of World Bank project activities in this area. FPMD TA may not be needed since the World Bank project will possibly address the information management needs of warehouse managers.

### **Indication of Impact/Results**

- The two training curricula will facilitate future initial or refresher training in commodities management and using data for decision making by the MCH/FP General Directorate and/or Provincial Directorates. As noted above, MCH/FP General Directorate staff are fully capable of conducting future training in commodities management without FPMD technical assistance. Since the Using Data for Decision Making curriculum has not been implemented in full, FPMD TA will be required to more fully orient the trainers to the materials and training approaches, as well as to develop a new module on the proposed feedback protocol.
- The installation of the commodities management information system at the provincial level is having an impact on the availability of commodities. For example, during their presentations at the November workshop, as a result of training they received in 1994-95, the original five pilot provinces reported no stock outs. Therefore, the installation and effective use of this system by the provinces is benefitting access to FP services as well as quality of care.
- Based on the positive results of the two workshops, the MCH/FP General Directorate has requested FPMD technical and financial assistance to organize workshops for central level MOH managers and provincial level managers on the topic of using data for decision-making. The U.S. Embassy has requested that such additional workshops be on hold for the moment due to concerns about potential funding cuts for the Turkey program in the next fiscal year.

## V. Conclusions and Recommendations

In general, good progress has been made against all objectives of the MDP and most of the activities planned during fiscal year 1996 and to date in fiscal year 1997 have been carried out. During a technical assignment by Alison Ellis of FPMD/Boston in January/February 1997, a detailed workplan for calendar year 1997 was prepared and approved by the MCH/FP General Directorate (see Appendix I). While the workplan is quite ambitious, in that a number of important and intensive activities are planned which will necessarily require significant time, attention and involvement of MCH/FP General Directorate staff, the activities proposed are priorities for the General Directorate and the LMIS team have the necessary skills required to implement the workplan. In specific:

- The LMIS team is capable of organizing and leading the training workshop on Contraceptive Logistics Management and Distribution for new provinces to be identified in February/March 1997, independent of FPMD TA.
- The LMIS team fully understands the concept of and rationale for the situation analysis. Following the revision to the data collection tool and conduct of the second round of the exercise for new provinces, the team will be capable of conducting situation analyses without FPMD TA.

On the basis of this assessment of progress to date and discussions with the MCH/FP General Directorate, the following recommendations are offered:

1. The MCH/FP General Directorate should enlarge the LMIS team by naming one or two additional technical staff. The involvement of a greater number of technical staff will contribute to the broadening of knowledge at the central level and to the institutionalization of knowledge and systems in the event of further staff turn-over. Moreover, a larger pool of staff involved in the sub-project will facilitate accomplishment of planned activities, and more likely on schedule, in view of the many demands on MCH/FP General Directorate staff time.
2. At the same time, the LMIS team in collaboration with Dr. Topcuoğlu, should identify staff at the provincial level who can serve as technical resources (trainers) during planned workshops in the fall of 1997, to supplement the LMIS team, as well as to serve as sources of TA for neighboring provinces. In this way, as the number of provinces covered by the sub-project continues to expand, the burden on the LMIS team and the cost associated with follow-up TA to participating provinces will be diminished.
3. The incorporation of 7 to 10 new provinces annually necessarily increases the cost of the sub-project and at a time when the USAID population program in Turkey is sustaining budget cuts. Apart from the salaries of the LMIS team, the sub-project is wholly dependent on FPMD funding for workshop costs, and travel and per diem associated with workshops, baseline data collection, and follow-up TA to participating provinces. In view of the fact that USAID/Ankara is actively in transition for phase-out, the MCH/FP General Directorate should initiate planning and any other

necessary internal arrangements to secure sufficient funding for workshop and travel costs once FPMD support ends.

4. In addition to the identification and incorporation of 9-10 new provinces during 1997, the sub-project should devote more significant attention to training and TA for the provinces in the use of data for decision-making. Orientations for central level MOH staff and a workshop for provincial staff from the current 12 provinces, using the "Using Data for Decision Making" curriculum developed by FPMD, should be scheduled as soon as budget levels for next year are known by FPMD. The strategy should increasingly focus on skills building for provincial-level managers in using the FP service statistics data routinely collected and reported to identify and address service delivery and quality of care issues at Health Centers and MCH/FP Centers.

5. To encourage the use of data for strengthened management, the MCH/FP General Directorate should institute an annual feedback protocol as mentioned above.

**APPENDIX I**

**1997 ACTIVITY PLAN**