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**NEPAL CHILD SURVIVAL AND FAMILY PLANNING PROJECT**

**SEMI-ANNUAL REPORT**  
**May 1, 1992 - October 31, 1992**

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*Contract Number : 367-0157-C-00-0250-00*  
*Project Number : 367-0157-3-00067*

*Contractor : John Snow Incorporated*

*AID Project Office : Office of Health and Family Planning  
USAID/Kathmandu*

*Date : December, 1992*

### ***Semi-Annual Report***

*In response to contract reporting requirements JSI is submitting the enclosed report on contract activities covering the period May 1992 October 1992. To streamline the semiannual report, this report has minimal narrative. Performance status is given on an activity workchart, (Attachment A) prepared for the period covered and based on the contract's scope of work according to the project's progress prior to the beginning of this reported period.*

*In addition an administrative report (attachment B) is included. This report covers expenditures by contract budget category, personnel employed under the contract, foreign nationals trained under the contract, and days of field travel.*

*To supplement the report and to meet contract requirements, field reports completed during the period covered are included following the attachments. Finally, current needs and future planned objectives are covered in the work activities chart based on a time phased implementation plan (Attachment C). This attachment will be sent after USAID finalizes with JSI future planned objectives. As USAID does not plan to do this until after this report's due date, we are unable to submit this section at this time.*

**SEMI ANNUAL WORKPLAN AND ACCOMPLISHMENTS  
MAY 1992 TO OCTOBER 1992**

**Objective and Activity**

**I. Provide Program Support:**

**A. Technical Assistance to Improve FP Services**

1. Assist FP/MCH to implement expansion of IUD to new service sites.

There are currently 51 certified sites in 42 districts. (There were 52 but one Kathmandu site was closed). There are also a few NGO and Health Post sites with trained staff inserting IUDs. Before new sites can be opened, the sites must be chosen, the staff trained and the site certified. This year's workplan provides for IUD TOT for 15 persons and basic IUD training for 50 trainees (including 10 in CRHD workplan. During the low training output of the last 2 years, many certified sites have lost trained staff, and are inserting few or no IUDs. This year's training will concentrate on these existing sites plus adding Bardia district. The TOT this year will prepare the way for next years basic training to expand to 9 other new districts. Eight pelvic models are being procured for use in the training sites. The JPIEGO IUD training curriculum was provided at the Contraceptive Update in August by the Thai doctors to FP/MCH division for use with the models.

Mackenzie has been working with Dr. J. Bhattarai of the training section FP/MCH to select the sites for training this year, and to prepare a 5 year plan for IUD expansion. This plan is expected to be submitted to Dr. K.R. Pandey for approval by December. A draft revision of the form for IUD site certification has been prepared but not yet used.

2. Facilitate New Era operational research of IUD through HP's.

New Era included Mackenzie and Dr. T. Vaidya of NFCC on the study planning team for technical advice. Mackenzie accompanied the New Era/ CRHD team to Bhaktapur on a HP selection visit. After site visits the 3 HP's selected were: Dadhikot in Bhaktapur, Khaireni in Chitawan and Satbaria in Parsa. Each have two ANMs who appear suitably placed. All six ANMs took the 5 week basic IUD course put on by CRHD staff. Mackenzie gave two short talks to the trainees at New Era. Mackenzie also was asked to give oral exams after the 1 month practical which was at Bir Hospital and Chhetrapati clinic. All 6 had adequate experience and were certified Sept. 25. In October New Era orientated the HP staff including VHW to the program. Mackenzie and Vaidya prepared the list of needed equipment and

supplies. NFCC is procuring the instruments. Once these are provided services will begin. Evaluation will be completed by May 1993.

3. Facilitate AVSC/NFCC to implement post partum program and private physicians program.

Mackenzie is on the Coordination Committee which has met monthly at NFCC. Mackenzie accompanied Dr. John Naponick of AVSC on a site visit to maternity hospital in early October. The post partum program at Maternity hospital is starting expanded minilap services in November 1992. The new O.T. is ready and equipped. The two private rooms are in use. The staff training took place in September and October.

There have been 24 doctors from private clinics and nursing homes join the private physicians program. Mackenzie has accompanied NFCC staff on several of the site visits. Two thirds of these visits are complete. Mackenzie gave a lecture on temporary methods on September 4 at the training course put on for the private doctors by NFCC. IUD's have been provided and IUD services are beginning. Charges for contraceptives have been extensively discussed. UNFPA will provide Norplant at the subsidized rate of 300 Rs. NFCC will order and supply the minor equipment requested.

4. Assist Institutionalizing districts to provide all methods year round

Assisted institutionalizing districts through visits to the districts and central level planning support to provide all methods year round.

5. Detailed study of family planning and MCH acceptance patterns in Lalitpur district

This study which Mackenzie had proposed has been dropped due to other priorities. Comparable data is emerging from the MCH strengthening district studies.

6. Assist FP/MCH Division to develop plan to meet national goals over next 5 years.

Mackenzie had hoped to be invited to participate in this, but it has been largely completed by FP/MCH Division with assistance from UNFPA.

7. Assist with NFCC assessment team visits to 11 INST. districts

This was a major effort with visits to 6 Western Districts in May and 4 eastern districts in June. The final assessment in Kathmandu was also completed in June. Mackenzie, Radha Friedman, USAID architect B.N. Pradhan, and Dr. T. Vaidya visited all 11 districts. Dr. K.R. Pandey accompanied the team to the west, and Dr. Chataut (ERHD) and Matt Friedman (USAID) to the east. The report was completed with help of Radha Friedman and sent to AVSC.

NFCC is planning to provide the needed equipment by December 1992. The renovations will be completed after the season, except in Makawanpur which will start soon. The other district O.T.'s will have minor refurbishing via AVSC/NFCC as soon as possible.

8. Refine discussion paper on policy options for Institutionalization

The 4th draft was completed in May, and was distributed to selected persons. It contributed to the discussion of the problems at FP/MCH and Population Division. No further revisions are planned, but certain sections may be reworked if they become topical again.

9. Assist equipment provision for 4 new OTs

This was not needed as all the equipment had already been purchased and was in storage at NFCC. Bhaktapur has been supplied and the other 3 will follow soon. There have been some complaints about the equipment which are being investigated.

10. Facilitate USAID assisted strengthening of the FP Logistic system

Mackenzie accompanied Matt Friedman on some of his store room visits, and has visited storerooms on site visits since. Matt has prepared some recommendations, and a plan for logistics assistance is to be developed by USAID. JSI awaits this plan to see what involvement we will have. Logistic problems persist. HP storekeeper training for the other 71 districts was requested by FP/MCH but not yet agreed to by USAID. Storekeeper staff morale needs to be addressed as well.

**B. Strengthen Child Survival Services**

1. MCH Strengthening Program in CR

a. Activities in 4 initial districts

i) Assist in revision of current registers, supervision forms and realistic assessment of equipment and furniture needs.

Participated in discussions with CR DPHO staff about revisions needed in registers, supervision forms and in review of equipment and furniture needs.

ii) Assist in preparation of materials needed for monitoring and evaluation visits actual field work as needed, and followup analysis of data collected and report preparation.

Assisted in preparation of forms for monitoring and evaluation data collection in the field. Participated in one M/E field trip to Bara. Working closely with CR MCH-SP staff to analyze the data collected and prepare reports. Only one report completed in this workplan

period. But all data collection is completed. During field work the CR staff developed more of a team approach themselves and extended the "team" to include appropriate DPHO staff in the collection of data. It was recognized that critical analysis by HP and DPHO staff of the meaning of figures they submit is limited. The CR staff have planned to return to the districts and HPs to give meaningful feedback on the data and to work with District and HP staff to develop "workplans" (plans of action) to improve selected MCH services over the coming year.

iii) Assist in procurement of needed items.

Icems not yet procured.

iv) Participate in at least 2 field supervision visits to followup program.

Participated in 2 regular supervision visits to MCH-SP districts (Dhading and Rautahat) with CR staff and three shorter visits to Dhading, Makawanpur and Bara related to orientation for JSI's Field Officer, FO opening and the USAID Evaluation Team visit.

b. Activities in 2 New Districts

i) Assist in preparation for conducting and reporting of baseline data collection (includes assessment of equipment and furniture needs, probably requires one field visit to each district with CR Staff), ii) Facilitate/assist procurement of needed items, and iii) Assist in organizing and carrying out orientation workshops cum refresher trainings.

The final selection of the 2 new districts has not been completed therefore these activities have not started in this period.

iv) Encourage/facilitate team approach to management of these activities.

The team approach by CR staff to this MCH-SP activity has been strengthened during this 6 months. It is also extending to include appropriate DPHO staff in following up and supporting MCH activities within the districts between CR visits.

## 2. MCH Program in non-strengthening districts

- a. Assess potential for input into PHD-FP/MCH programs in coordination with FP advisor, FP/MCH staff and CRHD MCH-SP coordinator. b. Discuss options for data collection on MCH services in non-strengthening district.

No specific activities were conducted in non-MCH strengthening districts.

- c. Assist MCH Division to develop a Safe Motherhood Program.

Mackenzie helped revise the first draft of the Safe Motherhood Policy being developed by Dr. Vijaya Manandhar and participated in the first meeting of the Safe Motherhood Task Force. The revised draft is being sent through the various levels of MCH and eventually to NPC. Major technical assistance is from WHO.

## 3. CDD Program

- a. Followup CDD intensive supervision in 5 initial districts.

- i) Field supervision visit to at least 1 district.

Visited one of the initial districts where CDD intensive supervision and monitoring program is ongoing.

- ii) Review data for progress and problems.

Data was reviewed and discussed with CDD section staff and the contractor.

- iii) Encourage followup and coordination from CDD staff/PHD and CRHD staff to DPHO staff/PHD and CRHD staff to DPHO staff and HPS.

Encouraged CDD section/PHD staff and CRHD/CDD staff to become more active in support of this program. To-date they have only been more verbally supportive but none have visited the districts with the contractor except during the activity described below in b(i).

- iv) Prepare summary of findings plus recommendations for initial 5 districts.

Prepared a summary of findings in the initial 5 districts and discussed results with CDD section/PHD and CRHD staff as well as JSI, USAID, UNICEF and other interested colleagues.

b. *Expansion of CDD intensive supervision activities in 3 new districts*

i) *Participate in New Initiative Meeting (Bharatpur)*

*Participated in all stages of planning and attended the New Initiative Meeting in Bharatpur.*

ii) *Field supervision visits to at least 2 of the 3 new districts.*

*Have not yet made field supervision visits to the new districts.*

c. *Followup CDD activities CR*

i) *Assist CR CDD supervisor in supervision program*

*Discussed need for CDD supervision by CRHD staff, but apart from field visits related to MCI-SP these visits have not occurred.*

4. *ARI Program*

a. *Chitawan/CHV intervention*

i) *Encourage/renew interest in followup visit to Chitawan with CDD/ARI Section Chief or # 2 man*

*Encouraged renewed interest in followup to the CHV/ARI intervention in Chitawan and participated in meeting between CDD/ARI section staff, DPHO staff in Chitawan.*

ii) *Directly address issue of problems with medicine resupply to CHVs and if possible find workable solution with DPHO (Chitawan) and CDD section staff*

*Discussed problems of drug resupply with CDD/ARI section and DPHO/Chitawan and latter expressed willingness to try cost recovery scheme to try to sustain the program.*

iii) *Reassess interest and assist where appropriate in preparation of handbook with guidelines for ARI policy (like CDD/DPHO manual perhaps)*

*Participated in discussions between CDD/ARI section and UNICEF staff for development of appropriate simple manuals for use by VHWs and CHVs in following up this intervention.*

b. *Dang ARI Project*

*i) Assist in plans for expansion in Dang to include family planning interventions, ii) At least one field visit ideally to assist/participate in FP training (coordinate with PM), and iii) Discuss possible expansion of project to other Red Cross districts.*

*No followup visits to the project during this workplan period. Local disruptions in the management and support to the project in Dang are being followed up by NRCS staff. After these are resolved future directions and evaluation will be discussed.*

5. *Vitamin A*

a. *Assist in post workshop followup to actually get proposed program moving*

*Participated in numerous meetings to assist in development of an implementation strategy to move the policy into a national plan of action. Encouraged maintenance of good communication among all involved parties, HMG ministries, projects, NGOs and donors.*

I. *Provide Program Support:*

C. *Involve Women in Health Through CHV Program*

1. *Literacy Program*

a. *Manage/monitor WE subcontract*

*Held regular meetings with CR/WE. Read reports. Reviewed with WE/CR staff program's progress. Visited activities in the field and reviewed progress with field staff.*

b. *Participate on CHV literacy task force and through task force organize TA and policy input into project; also review and approve materials*

*Meet regularly with Task Force; Reviewed all prepared Nepali materials and provided considerable input to their revision. Reviewed 1st phase testing at literacy sites. Reviewed/commented on evaluation.*

c. *Assist CR to prepare final version of budget and supplemental workplan for literacy program. Coordinate this plan with on-going World Ed. plan*

*Completed budget for supplemental workplan to provide logistic support.*

- d. *Work with CR, PHD/CHV section staff to finalize literacy program as part of overall CHV strategy so that support for the CHV literacy program can be part of Redbook and HMG may recruit donor funding*

*Discussed this with PHD/CHV section and was advised to wait until activity closer to completion.*

- e. *Organize/encourage field trips to review program and to introduce program in action for PHD Chief, CHV/PHD Section Chief, Add. Secretary & Planning Division Chief.*

*Organized PHD, Chief's visit to visit literacy site and CHV/PHD section Chief's visit. Will organize for others once classes begin again in December.*

- f. *Liaise with UNICEF re their support for literacy component for CHVs*

*Met and discussed program with UNICEF consultant and with UNICEF Central Region Field Officer. UNICEF continues to indicate interest in funding the expansion of the activity. Once CHV section situated after reorganization, will work with CHV section to promote UNICEF's funding.*

- g. *Visit and participate in organizing replication of phase 1 as well as initiation of phase 2*

*Met in August with CR/WE to plan initiation of phase 2 and replication of phase 1. Participated in District Team meeting to incorporate past years lessons into this year's program and to schedule this year's trainings and classes.*

## *2. Periodic assessment*

- a. *Participate in 1-3 assessments for 2048/49*

*Participated in Sindhuli/Mahottari assessments.*

- b. *Assist in preparation of assessment report for 2048/49 program*

*Met and assisted in organization of report. Worked with consultant to streamline report. Report to be completed next quarter.*

- c. *Plan with CR staff program assessments for 2049/50 program*

*Selected new districts: Ramechhap, Nuwakot, Kavre and Dhanusha.*

### **3. Pop Council Study**

- a. Give input to draft report, if asked

*Reviewed report and requested opportunity for input. Will meet with Justice in Nov visit.*

- b. Discuss and plan with HMG CHV staff the followup to the report recommendations

*Delayed until January.*

### **4. Signboard and badges**

- a. Supervise/monitor procurement and work with CR to organize delivery

*In process. All already delivered. But CR slow in arranging delivery.*

- b. Monitor delivery of signboard and badges during routine field visits

*Only valley districts have received delivery. Field Office to monitor in Terai.*

### **5. Radio Program**

- a. Work with CR and subcontractor to prepare SOW for Radio program on CHVs with subcontractor

*Held meetings with potential technical consultants who will draft script Nov. - Dec.*

### **6. CHVs exchange visits**

- a. On routine field trip, note exemplary CHV activities worthy of exchange visit

*Have identified in Chitawan and will work with Makawanpur DPHO to identify others.*

### **7. Refresher Training**

- a. Assist CR/CHV to identify materials helpful in refresher training

*Difficult to find supply.*

### **8. Reports Registers Printing/Distribution**

a. *Monitor printing activity*

*CR is doing this in small units to avoid lengthy bidding process 9,000 copies thus far completed.*

II. *Improve management of services*

A. *Training activities*

1. *Family Planning*

a. *Assist in organizing Contraceptive Update for doctors and nurses August 1992*

*Mackenzie spent considerable time problem solving on this event which was successfully held with assistance of Dr. John Gill of Population Council (Bangkok) at the end of August. Three Thai resource people spoke as planned, and attendance was good. Quality of presentations was good. Most speakers submitted written papers which were collected by Dr. J. Bhattarai for FP/MCH Division.*

b. *Assist FP/MCH Division to develop clinical training facilities for minilap, IUD and Norplant*

*Both UNFPA and USAID wish to encourage a more integrated approach to clinical training, but Mackenzie has not seen any detailed plans.*

*Although numerous discussions have been held, no new training sites for minilap have been agreed to. FPAN remains the only current trainer. FPAN staff were certified for training by NFCC after an AVSC visit: NFCC plans to do minilap refresher training in some districts. New alternatives under discussion include Chhetrapati clinic, through MOH or NFCC, and IOM through Dr. C.P. Maskey, professor of surgery who has shown interest. The 3 new O.T.s at Teaching Hospital provided with JICA assistance have overcome the facility constraint. The top two staff of Ob/Gyn there were dismissed so now there is a staff constraint. The proposal to work through the department of Community Medicine remains problematic.*

*IUD training sites will be revived in Eastern and Western regions this year after the TOT training planned for December.*

*For Norplant the one training site at Lalitpur has been closed during the new construction, and no alternatives were used. Mackenzie has not learned if new sites are planned. The 36 teams to be trained through UNFPA and the 18 private doctors requesting Norplant training will be accommodated with difficulty through one facility, especially if it is also to be used for VSC.*

c. *Facilitate training for DPHOs in Public Health*

*No activities during this period. No further news from MOH due to reorganization and uncertainty of fate of development staff.*

d. *Assist CRHD with Evaluation of FP training for HP staff.*

*Postponed until CRHD staff have opportunity to participate.*

2. *Participant training*

a. *Prepare update and analysis of status of participant training program and recommend action to increase our capability to provide high quality participant training opportunities which support the project's implementation.*

*Completed in May, submitted and discussed with HFP/USAID.*

b. *Followup actions agreed to on (a) above*

*Two trainings completed. Plans for malaria training for 20 MOH staff is in progress and the training of two others was organized but candidates failed English exam.*

c. *Specifically look for appropriate training within the SEA Region for CDD,ARI,FP, private sector involvement in preventive health care and assist in candidate identification*

*Prepared draft letter to MOH under Ursula's signature reopportunities. Rai tracks opportunities.*

3. *CDD Training*

a. *Followed up progress in refresher training program for CDD/CR districts.*

*Followed up with CRHD/CDD staff. All 7 districts in CR completed planned Dist and HP level refresher training in 2048/49 with 98% of district level and 95% of HP level staff attending.*

*One training was planned for 1st trimester of 2049/50 but has not yet occurred. Planned for November 92.*

b. *CRHD Training  
(See innovative activities)*

**B. Assist in Planning and Evaluation Process****1. Monitor 2049/50 workplans**

- a. Note from program implementation problems and field staff comments better ways to plan in future

Early disbursement has been very positive.

- b. Hold quarterly planning meeting for review/planning

Held JSI staff quarterly meeting August/November

**2. Project Mid-term Evaluation**

- a. Assist AID in preparing briefing materials

Gave input to MOH's master effort.

- b. Brief evaluators on project activities

Prepared materials; attended meetings to discuss project and their questions.

- c. Accompany evaluators to see program in the field

JSI advisors accompanied team.

- d. Respond/plan with AID changes per evaluation/recommendations results.

Scheduled for November.

**C. Encourage and Assist NGO Involvement in Project Program Expansion****1. Red Cross**

- a. Review potential of Red Cross/Dang project expansion and make recommendations.

No followup on expansion of Red Cross activities.

**D. Liaise with health Related Agencies for Coordination****1. FP Assistance:**

- a. UNFPA

Frequent liaison with UNFPA as they develop next plan.

b. JICA

*No contacts.*

c. FPAN

*Visited operating theatre to observe minilap and vasectomy.*

d. NGOs

*Discussed possible NGO coordination meetings; decided to await FPAN action on this.*

e. World Bank

*No contacts during the period.*

2. CHV Program:

a. UNICEF, b. UNFPA, c. World Education, d. World Bank and e. Save UK

*Have only participated in informal discussions. Await new AID staff guidance on meetings with a,b, and d.*

3. CDD Program:

a. UNICEF

*Liaison going on with UNICEF staff regarding CDD.*

b. WHO and c. SCF

*No specific liaison with WHO or SCF except for acquiring CDD health education materials prepared by the latter.*

4. Vit A:

a. NGOs, b. HMG, c. Donors, and d. Projects

*Liaison is ongoing as all groups work towards the completion of the national implementation strategy.*

5. MCH strengthening/planning:

a. Health Development Project/Surkhet, b. JICA, and c. SCF

*Meeting with JICA reps re their primary health care project in Bhaktapur. Received some materials related to MCH from JICA.*

**6. Overall Regional Strategy:**

*Have only participated in informal discussions. Await new AID staff guidance on these meetings.*

**E. Finalize Private Sector Assessment**

**1. Report Review**

- a. *Discuss findings and implications for JSI with Moore, USAID*

*Have held initial discussions with AID and evaluators.*

- b. *Draft short discussion paper on JSI's potential role and discuss with Moore, AID, project evaluators*

*Will proceed with this after additional data collected.*

**2. Assist AID to involve HMG in private planning**

- a. *Hold discussions with Dr. Sunity Acharya, Dr. Bal Gopal Vaidya, Dr. YMS Pradhan,*

*Have discussed strategy with Dr. YMS Pradhan and sent copies of report to others. Have advised Dr. Sunity of status of study.*

- b. *Identify key HMG counterparts who will be AID/JSI contact*

*On hold until decision made as to what we'll do.*

- c. *Identify potential participant training opportunities for key HMG private sector policy makers*

*Completed in letter to MOH.*

**F. Enhance JSI TA to Field with Establishment of Field Office**

**1. Select Field Officer**

- a. *Prepare job description, compensation formula, application procedures, deadline and list of people to contact for FO recommendations*

*Completed.*

- b. *Contact people who will recommend candidates*

*Completed.*

- c. *Receive/review applications and interview lead candidates*

*Completed - Penny/Paul/Rai assisted.*

- d. *Discuss top candidates with Dr. Prakash Aryal, Dr. K.R. Pandey, Dr. Sabitri Pahari and Dr. YMS Pradhan and rank top 3 candidates*

*Discussed with Pandey/Aryal not others until after hired.*

- e. *Negotiate agreement with candidate and make appointment*

*Completed.*

- f. *Prepare FO admin/personnel guidelines*

*Completed and distributed.*

- g. *Visit Makawanpur to identify office and potential support staff*

*Completed.*

- h. *Setup office, Select short list of candidates for support staff.*

*Rai/Campbell completed.*

- i. *Interview short list support staff and hire staff; arrange for vehicle*

*Completed.*

- j. *Orientate field officer in program matters and introduce him to key HMG staff*

*FO worked in JSI/Nepal with Resource and Admin staff for an initial 6 week period. During that time, joint meeting with MOH colleagues were held to assure their involvement in FO work.*

- k. *Open field office*

*A one day opening was organized for CR staff and DPHOs in coverage area. USAID bilateral program and DPHOs and Field Office activities were reviewed.*

- l. *Provide financial management*

*During the period financial management provided to Field Office*

- m. *Provide admin supervision*

*Admin Officer, Finance Officer and COP regularly meet and review work.*

n. *Provide program supervision*

*Coordinate with JSI team and MCH counterparts.*

*In September Mackenzie went with FO to three districts to field test the checklist, and revised the FP program and FO also worked in the field together on CDD and MCH issues.*

G. *Working with PHD, FP/MCH, CR and NGOs identify and design appropriate test of alternative methods for service delivery or strategies to improve current program*

1. *CRHD*

- a. *If requested by CR chief, assist in planning special "Designing the Future" curriculum for CR staff*

*After discussing option with Dr. Aryal on several occasions, he advised he did not wish to try this option.*

- b. *Working with CR staff/USAID finance staff plan, organize and conduct training of district level finance staff in USAID fiscal procedure and related HMG procedures*

*MASS/USAID managed.*

2 *CR districts*

- a. *Supervise with CR staff/USAID finance staff plan, organize and conduct training of district level finance staff in USAID fiscal procedure and related HMG procedures*

*DPHO from Rasuwa never finalized his proposal.*

- b. *Investigate option for innovative activity to look at use of MCHWS in one CR district.*

*No followup as few MCHWs in place. Still to be investigated in future.*

- c. *Followup with CR/CHV section chief and Dhading DPHO CHV literacy proposal and finalize if appropriate (includes 1 field supervision visit).*

*Never could get DPHO's cooperation. He is busy with GTZ.*

- d. *Supervise along with CR staff Chitawan billboard project.*

*This simple innovative activity was implemented on schedule and within budget by DPHO, and final evaluative report will be requested for December.*

- e. Assist along with CR staff Makawanpur Management Team Building Project.

Campbell attended meeting and conducted conflict resolution strengths section. JSI funded CR staff person to also provide sessions and TA to workshop.

### 3. FP/MCH:

- a. Design and implement VSC complications in hospital VSC center settings

The idea to have a comparative study to the camp study was not pursued due to the transfer of the study coordinator out of FP/MCH division. The final report on the original VSC camp followup study is still not in for the same reason, but preliminary tables were produced and report writing is still being completed.

### 4. General support to innovative activities

- a. Assist in budget prep and manage financial operation of innovative activities

Finance Officer and COP reviewed each planned activity and gave budget input.

## III. Implement project procurement and manage project properties

### A. Manage JSI buildings

- 1. Supervise properties maintenance, smooth operation and rental payments.

Minor maintenance of the leased houses were carried out. Timely rental payments were made to the landlords.

### 2. Maintain and operate properties

- a. Conduct routine check of each property arrange/supervise repair work

Spot check of property takes place from time to time. A thorough check against the master inventory will be carried out once in January. Arrange and support repair work as and when required.

- b. Purchase kerosene/Gas

As and when required.

- c. Purchase cleaning material and supervise cleaning of office

This has been done as and when required.

d. *Supervise/arrange payment of utilities*

*All bills relating to utilities have been thoroughly checked during the period of the report before payments have been made.*

B. *Manage/Monitor Procurement of Project Commodities*

1. *Respond to HMG/AID procurement requests per regulation*

*All requests from HMG/AID have been responded below:*

2. *Complete action for pending requests*

a. *Laparoscopic spare parts*

*Procurement action of Laparoscopes/spare parts completed and commodities handed over to FP/MCH on October 19, 1992.*

b. *MCD protective clothing*

*Procurement action of protective clothing completed and handed over to MCH on August 21, 1992.*

c. *Spray pumps and spare parts*

*Commodities are expected to arrive in Nepal by Mid December 1992. Documents related to the exemption certificate have now been dispatched to Birgunj customs.*

d. *CHV signboards/badges*

*7624 signboard/badges to be delivered to CR by early November 1992. Final lot of signboard/badges will be handed over to CRHD in second week of December 1992.*

e. *Pelvic models*

*Commodity expected to arrive at Tribhuvan International Airport on November 21, 1992. This will be cleared from the customs on Dec 08, 92 and handed over to Ministry of Health by Dec 10, 92.*

f. *Slide set series*

*Slide set series of training material on sandfly set will be procured and handed over to MCD on December 1, 1992.*

**g. Supplies for Passive Case Detection**

Supplies for passive case detection volunteers, Malaria control division. Purchase order of PCD supplies has been issued. The supplies will be delivered to MCD by January 15, 93.

**h. Computer parts for FP/MCH**

Procured locally and repair/maintenance work completed in October 1992.

**3. Assist in prep., review and approve procurement subcontracts**

COP and Boston Backstop (BBS) have reviewed all steps of sub-contracting.

**4. Commodity Return**

**a. Return of non expendable properties to AID**

List of properties in custody of the contractor has been prepared and submitted to AID as per the contract.

**5. Commodity Program Review**

**a. Work with BBS on commodity procedures, prepare checklist**

COP met several times with commodity officer and BBS and approved final checklist. COP then guided CO in its use. CO prepared draft checklist and BBS and CO reviewed each item against regulations.

**b. Update manual to reflect BBS'input**

To be completed by end of December 1992.

**IV. Enhance Project Administration**

**A. Supervise and evaluate per personnel policies:**

**1. Admin staff/guards**

**a. Conduct performance reviews**

In hand.

**2. Program staff and administrator**

**a. Conduct performance reviews**

Conduct prior to hiring anniversary.

**B. Assure staff communication through meetings, retreats and informal exchanges**

**1. Coordinate and give support to visiting head office staff**

Coordinated and gave support to Sherri Garretson, Head Office Staff when she visited.

**2. Arrange bimonthly admin staff meeting**

Staff meetings are held bimonthly to up-date administrative aspects of JSI activities.

**3. Hold program staff quarterly 1/2 day retreat**

Quarterly retreats held and reports prepared and revised.

**C. Coordinate preparation of quarterly report for JSI and semi annual report to USAID and preparation of office workplans**

Workplans finalized last semi-annual and quarterly report prepared. Current semi-annual plan scheduled.

**D. Maintain official files for contract, personnel, consultants, subcontracts**

Field office personnel files are maintained. Subcontracts files for the procurement are held by Kumar Thapa, Commodity Officer.

**1. Review/update JSI consultant packets**

JSI consultant packets being up-dated.

**E. Manage finances**

**1. Oversee and approve all expenditures**

COP signs checks daily, reviews vouchers and budget each month. AO reviews Field Office expenditures monthly.

**2. Obtain bids and check bills**

Bids were collected by Kumar Thapa per AID regulations and bill thoroughly checked by Rai.

**3. Maintain time sheets**

Monthly time sheets are checked and filed for future disposal.

**4. Manage salary charts and salary distribution**

Revised salary charts are prepared. Monthly salary distributed at the end of every month for Kathmandu office and mid month for Field Office.

**5. Recheck bills and prepare checks, maintain financial records, prepare financial reports, maintain/secure petty cash**

Finance Office double checked bills for the payment. Financial reports were prepared monthly and submitted to AID. Petty cash maintained as per AID rules.

**6. Enter expenditures in computer against annual budget**

Completed each month.

**7. Work with Sherri on new procedures for financial management**

Closely worked with Sherri to adopt new procedures. No problem encountered.

**F. Assist and guide preparation of subcontracts and assure preparation/reporting meets AID standards**

COP and AO conduct routine review.

**1. Communicate and assist supervision of work of American based sub-contractors**

COP coordinated with Private Sector consultants to finalize report prepared in last reporting period.

**G. Transportation**

**1. Vehicles**

**a. Supervise and manage records of transportation and taxi use.**

AO maintained these records.

**b. Organize vehicle use**

Secretary completed on a daily basis.

**c. Oversee maintenance of all vehicle**

AO assured servicing and repair works were carried out in a timely manner.

d. *Followup new vehicle order*

*The vehicle arrived in Birgunj and awaits clearance. Due to the new policy of HMGN the customs clearance process was longer and more complicated than in the past.*

e. *Rent vehicle to substitute for FO vehicle*

*AO rented vehicle for 1 1/2 month period.*

f. *Request replacement motorcycle*

*Not completed yet. To be ordered in the next reporting period.*

2. *Air Travel*

a. *Organize plane tickets*

*FO bought tickets when required by JSI/Nepal members.*

H. *Library Resources*

1. *Order new items*

*Completed with the help of Sushil.*

2. *Supervise loan process*

*Library materials are loaned to Government colleagues and other NGOs.*

3. *Maintain up-to-date acquisition list*

*Secretary published in June 1992 library materials list and distributed this to HMG and NGO colleagues.*

4. *Organize storage of materials*

*Secretary organized NON JSI Publications but articles have been catalogued. To be completed within the next reporting time.*

I. *Support to expatriate Staff*

1. *Assure visa and trekking permits and other required Licenses etc are up-to-date*

*Nepalese visas, vehicle registration books, driving licenses are up-dated. Indian visa is also up-dated as per expatriates' travel needs. Trekking permits are not given in advance. This has to be requested on a as and when required basis.*

**J. Manage Participant Training**

- 1. Obtain course details from regional centers and liaise with other agencies to set more details on short course in the region**

AO completed this task.

- 2. Arrange courses and facilitate participants attendance**

AO published and distributed course details to AID/Nepal and to certain govt colleagues.

- 3. Prepare monthly list of training courses identified (to be organized by months)**

AO prepared completed list upto July 1992. After that the list has not been completed because no additional course information were received.

- 4. Work with MOH's Training Division and JSI colleagues to match training opportunities with candidates**

Nominations were received far too late not only to meet the AID requirements but also to complete the lengthy documentation.

- 5. Handle arrangements for participant's application, travel, finance and follow-up reporting**

Completed for those who have participated in the training program.

*NEPAL CHILD SURVIVAL AND FAMILY PLANNING PROJECT*

*SEMI-ANNUAL FINANCIAL AND ADMINISTRATIVE REPORT  
MAY, 1992 TO OCTOBER, 1992*

*Prepared by: Mr. Dick B. Rai and Babu Ram Maharjan*

*Contract Number : 367-0157-C-00-0250-00  
Project Number : 367-0157-3-00067*

*Contractor : JOHN SNOW INCORPORATED*

*Aid Project Office: Office of Health and Family Planning  
USAID/Kathmandu*

*Date : December 7, 1992*

ADMINISTRATIVE REPORT  
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I. Itemized Budget  
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CATEGORY =====	BUDGETED AS OF DEC '92	EXPENDITURES AS OF OCT., 1992	BUDGET BALANCE
=====			
SALARIES	\$312,669.00	\$310,026.81	\$2,642.19
OVERHEAD	\$203,303.00	\$190,984.87	\$12,318.13
CONSULTANTS	\$32,434.00	\$29,800.39	\$2,633.61
TRAVEL & TRANSPORTATION	\$90,681.00	\$55,722.08	\$34,958.92
ALLOWANCES	\$153,435.00	\$109,931.72	\$43,503.28
EQUIPMENT/MATERIALS SUP	\$22,239.00	\$22,321.67	(\$82.67)
COMMODITIES	\$662,500.00	\$164,733.40	\$497,766.60
OTHER DIRECT COST	\$50,493.00	\$54,650.03	(\$4,157.03)
PARTICIPANT TRAINING	\$99,528.00	\$8,199.76	\$91,328.24
SUBCONTRACTS	\$549,218.00	\$293,572.76	\$255,645.24
=====			
TOTAL ESTIMATED COST	\$2,176,500.00	\$1,239,943.49	\$936,556.51
FIXED FEE	\$58,022.00	\$33,937.46	\$24,084.54
=====			
TOTAL ESTIMATED PLUS FIXED FEE	\$2,234,522.00	\$1,273,880.95	\$960,641.05
=====			

II. JSI Nepal consists of the following members as of October 31, 1992:

A. JSI/Nepal - Kathmandu  
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	Chief of Party	Ms. Wilda Campbell
	MCH Specialist	Dr. Penny Dawson
	Family Planning Resource Person	Dr. Paul MacKenzie
FSN -9	Office Administrator	Mr. Dick B. Rai
FSN -8	Procurement/Property Officer	Mr. Kumar Thapa
FSN -7	Budget/Fis. Assistant	Mr. Babu R. Maharjan
FSN -6	Secretary/Admin. Asst.	Mr. Sushil Karki
FSN -3	Driver	Mr. Laxman K.C.
FSN -3	Driver	Mr. Madan Lama
FSN -2	Peon/Day Guard	Mr. Ram K. Maharjan

B. JSI/N - FIELD OFFICE, Hetauda  
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Field Officer	Mr. Dev D. Karki
Secretary/Recpt/Admn. Asst	Mr. Navin Shrestha
Driver	Mr. Ram C. Baniya
Peon	Mr. Bhesh K. Devkota

III. To-date JSI Nepal has arranged training for the following personnel in the following courses.

IN-COUNTRY TRAINING COURSE

Name	Title	Course Attended	Period of Training	Place of Training
Dr. Sheak Asfaq	Chief, Drug Administrator	Promotional Drug Use Course	Mar 2-13, 1992	Kathmandu
Mrs. Dhana D. Bhandari	Chief, Nursing Section, CRHD	Designing the Future Workshop	Apr 21-23, 1992	Kathmandu
Mr. Jyoti Shrestha	DPHO, Makwanpur	--- do --	-- do --	

INTERNATIONAL THIRD COUNTRY/TRAINING COURSES

Dr. Vijaya L. Gurubacharya	Chief, Prevention and Control of AIDS	VIII International Conference on AIDS/III STD World Conference	Jul 19-24, 1992	Amsterdam
Mr. Kishore Nepal	Journalist	Asia Pacific Population Conference	Aug 19-27, 1992	Indonesia

CHART - I: CONSULTANT PERSON MONTHS

	YEAR - I		YEAR - II		YEAR - III		YEAR - IV		YEAR - V	
	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS
	LOCAL CONSULTANTS	9.146	5	7.511	9					
US/3RD COUNTRY CONSULTANTS	1.433	0.182	2.409	N/A						

CHART - II: BIPATRIATE ADVISOR/BBSOURCE PERSON

	YEAR - I		YEAR - II		YEAR - III		YEAR - IV		YEAR - V	
	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS
	LONG-TERM ADVISOR	12.799	15.95	18	18					

CHART - III: NO. OF PROGRAM STAFF AND CONSULTANTS FIELD DAYS

	YEAR - I		YEAR - II		YEAR - III		YEAR - IV		YEAR - V	
	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS	1-6 MOS	7-12 MOS
	LOCAL/EXPATRIATE	77	75.25	201	126.75					