



*Progress*

Projet de Gestion Régionale  
des Services de Santé

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C/O Ministère de la Santé, km 4,5 route de Casablanca,  
Rabat, Maroc.  
Tél : (212)37298423/31 Fax : (212)37690664

# Quarterly Performance Report

October 1 to December 31, 2001

Report No. Q-2

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## Acronyms

COP	Chief of Party
DHSA	Direction des Hôpitaux et des Soins Ambulatoires
DP	Direction de la Population
EOC	Emergency Obstetrical Care
FP	Family Planning
IFCS	Institut de Formation aux Carrières de Santé
IMCI	Integrated Management of Child Illnesses
JSI	John Snow Inc.
MCH	Maternal and Child Health
MOH	Ministry Of Health
NGO	Non-Governmental Organization
<i>Progress</i>	Project for Regional Management of Health Services/ <i>PROjet de Gestion</i> <i>REgional des Services de Santé</i>
QA	Quality Assurance
SEIS	Service des Etudes et d'Information Sanitaire
SMD	Souss-Massa-Draâ
SMIPF	Santé Maternelle et Infantile/Planification Familiale
SPO7	Special Objective 7
TT	Tanger-Tetouan
URC	University Research Corporation
USAID	United States Agency for International Development
WHO	World Health Organization

# QUARTERLY PERFORMANCE REPORT

Contractor: John Snow, Inc.      Reporting Period: October 1 to December 31, 2000

Contract No.: HRN-I-00-98-00032

Report No.: Q-2

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## I. Introducing *Progress*

*Progress* (Project for Regional Management of Health Services), a new, three-year activity, is a major component of USAID's final phase of assistance to Moroccan reproductive and child health programs, under a Special Objective, "Key interventions promote sustainability of population, health and nutrition programs."

*Progress* will support effective local management of primary health care, in two regions of Morocco, Souss-Massa-Draâ (SMD) and Tanger-Tétouan (TT). *Progress* is based on the premise that local management will contribute to more efficient use of resources, improve access to key reproductive and child health services in remote areas, and increase sustainability of program efforts. Building on a long history of USAID successes with the Ministry of Health (MOH), *Progress* will help develop a model in these regions that the MOH can expand nationwide. To ensure that the model and approaches can be generalized, *Progress* will facilitate the reorganization of the MOH to support deconcentration of authority and decision-making, and will ensure continuous dissemination and exchange of information and experiences among the different regions and entities.

Effective technical approaches in reproductive and child health that USAID has already piloted in Morocco will be introduced as part of locally appropriate, sustainable programs. The project activities will build on the impressive past gains of the Morocco health and population program and will work in synergy with other USAID projects (e.g., water and education).

This second quarterly report describes the activities implemented in the context of starting up *Progress* by the JSI team in close collaboration with the Ministry of Health (MOH) and USAID/Rabat from October to December 2000. It is based on the interim workplan for 2000, which was developed at the early phase of this period. This report presents the implementation successes and constraints. It also summarizes planned activities for the upcoming quarter, January-March 2001.

## II. Technical activities

### A. *Planning*

Major activities planned for the period were to ensure the planning process for project activities in 2001. This first annual action plan needs to be prepared through a participatory process, where all parties at each levels are involved. In that respect, *Progress* planned to accomplish the following activities:

- Four regional technicians travel to an international training workshop.
- Regional strategic planning in each region.
- Prepare the 2001 action plan.
- Present the draft action plan to the counterparts.
- Media coverage of national vaccination days.

Each project region identified and selected 2 persons who participated in the regional training workshop held in Dakar from October 9-27, 2000. The Inezgane province chief ambulatory services physician and the Agadir statistician represented the region Souss-Massa-Drâa. The Chefchaouen province chief ambulatory services physician and the Tétouan statistician represented the region Tanger-Tétouan. Each regional team prepared and submitted a trip report as requested by procedures. The four persons constitute the core of regional information management teams established in both regions to strengthen effective use of data for decision-making. This travel improved the technical capacity of regional teams, and also proved to be a motivating force for the participants.

Regional strategic planning workshops were organized in both regions during the quarter. A wide range of participants from the region were present in these two to three-day workshops. An external moderator ensured the use of a participatory planning methodology and facilitated each workshop. The workshop helped to produce a regional vision for the public health sector for a three-year time span.

The regional strategic plans helped to identify regional activities for the *Progress* 2001 action plan. Each region set priority activities for 2001, given the strategic framework elaborated. The first draft of the action plan also included central level activities. This version was distributed on December 18<sup>th</sup>, 2000 for review and comment.

Central and regional level presentations were scheduled for early January 2001 for a final review before presentation to the MOH board of directors.

*Progress* funded, upon the request of MOH, travel for ten journalists from the national media during five days. The media representatives traveled to both regions to cover the national immunization days.

For the next quarter the following activities are scheduled:

- Central level decentralization working group meeting to review the work plan.
- Finalizing the work plan.
- Presentation of the workplan to the MOH board of directors.

**B. Sub-Result 1 – Effective roles, responsibilities, and capacities identified, defined, and developed among the different management levels of the MOH.**

Major activities planned for the first sub-result were to initiate dialogue and build capacity to support deconcentration and decentralization. In that respect, *Progress* planned to accomplish the following activities for a prompt start up of the project activities:

- Funding a regionalization seminar.
- Organizing a round table on international project working in decentralized health management in Morocco.
- Sending two persons for the excellence conference.
- Describe the application of QA methods in the day to day management of the services by the regional teams.
- Identify the opportunities to apply QA methods in response to the health needs of the population and according to the priority objectives of the Project.

JSI team worked closely with DHSA to prepare the MOH seminar on regionalization, which is an essential step in the deconcentration endeavors initiated by the Ministry since 1996. The local cost of the workshop was funded by *Progress*, while WHO provided the facilitator. Central level directorates and regional coordinators participated in this workshop. The goal was to agree upon a regional health management system within the framework of ongoing decentralization policy. Participants were asked reflect on past workshops about the topic and the current policy environment. They proposed two regional management models that respond to the efficiency, equity and quality challenges of current health programs.

The results of this workshop will guide the decentralization activities planned by *Progress*. Indeed, the project deems necessary an exploration of decentralizing the health system from a more operational aspect. In that respect, the 2001 project work plan includes a study tour, technical assistance, and holding a round table with the participation of main actors.

Workshops and meetings were organized in both regions to identify quality assurance strategies and activities appropriate to the regional settings. As a result, staff of the Tanger-Tétouan region elected to pursue the GIQua approach they are successfully implementing. Under the leadership of the Tétouan provincial team, the GIQua approach will be scaled up to the entire region, starting with the province Chefchaouen.

The region of SMD decided to test a new approach, the collaborative model, presented by the QA consultant. The advantage of this model is to address the same clinical issue, by enhancing service provider responsibility, hence covering a greater number of sites, as opposed to the GIQua approach.

Both QA strategies will have their respective action plans listed in the project annual workplan.

**C. Sub-Result 2 – Innovative models to improve accessibility, use, quality, and efficiency of services developed and tested by local teams**

Major activities planned for the second sub-result were to implement technical activities that will set the stage for a smooth start up. In that respect, *Progress* planned to accomplish the following activities:

- Finalize and send medical equipment lists to Boston EOC.
- Identify training sites for EOC.
- Assess training needs for EOC.

Several meetings, including an EOC monitoring workshop led by the MOH, were necessary to engage the regional teams in needs assessment for EOC. To date, both regional teams agreed on the distribution of the funds allocated to the activity by site (basic or comprehensive health sites) and type of expenditure (equipment or renovation). The lists of equipment were prepared through a participatory process, reviewed, approved by central level MOH officials and USAID, and sent to Boston during November.

A workshop was organized to plan EOC training on December 18-19, 2000 in Rabat. The objectives of the workshop were to (a) identify training sites for EOC, (b) assess training needs for EOC, (c) agree upon a training strategy, which includes institutional partnership among MOH and medical schools, (d) develop quality assurance tools for the training, and (e) strengthen the EOC information system. The workshop report was produced by JSI.

An earlier assessment was done in the IFCS of Agadir. The local JSI team, IFCS manager, and the regional coordinator prepared the final proposal. In the region of Tanger-Tétouan, the situation is complicated, since the IFCS located in Tétouan does not have enough space allotted to host trainees.

The qualitative study on injectables was finalized with a joint team of central and regional level technicians. The final report was prepared during a team meeting organized in Agadir on November 27-30, 2000. The team was composed of 6 regional technicians and one central level resource person. The team prepared a draft report and a draft presentation. The regional team is expected to print and disseminate the report, as well as present the main results.

**D. Support Activity**

*Progress* is also a mechanism for USAID/Rabat to support activities that will consolidate impressive past gains of the Moroccan health and population program. The support activities are implemented on an ad hoc basis, upon the request of MOH, central level, and the approval of USAID.

During the past quarter, *Progress* funded the local costs of a three-week epidemiological course organized by the Directorate of Epidemiology. The workshop was held from October 30 to November 17, 2000, in Mehdia, and was hosted by CDC and the French national surveillance institute staff.

### III. Administration

#### A. *Project Planning*

The project brochure, in three languages, is in its final stage and is being proof-read and printed. The brochure is expected to be printed and distributed during the first quarter of 2001.

#### B. *Personnel*

The recruitment of an administrative/accounting specialist and driver/clerk for the Agadir office was done.

On 24 November 2000, an all staff meeting was organized in Rabat to make an internal mid-quarter assessment.

#### C. *Finance*

Total estimated cost:	\$7,596,369
Expenses during second quarter:	\$ 321,092
Cumulative expenses:	\$ 359,288
Balance:	\$7,555,081

#### D. *Procurement*

The EOC medical equipment procurement list and plan will be prepared and committed by December 2000, in partnership with JSI/Boston

#### E. *Training/Travel*

During the past quarter, *Progress* funded the local costs of a three-week epidemiological course organized by the Directorate of Epidemiology. The workshop was held from October 30 to November 17, 2000, in Mehdia, and was hosted by CDC and the French national surveillance institute staff. A total of 24 MoH technical staff participated to the workshop.

A total of four regional technicians in health information system, two from each region, participated to a training workshop to enhance their skills in health information management. This international workshop organized by Measure project was held in Dakar on October 9-28 2000.

**APPENDICES**

Appendix 1: *Progres* Consultant List

*Progress* CONSULTANTS LIST  
SEPTEMBER - DECEMBER 2000

Consultant Name and Organization	ETA	ETD	Purpose of the visit	Activity	Funding Source	Coordinator Key	Report Submitted
Youssef Belabdia Independent	September (20 days)	November	To assist the JSI team in the setting up of communication networks between the three JSI offices	AR2.	JSI	1. Tyane 2. Fasla/Bakkali 3. Wright 4. Cakir	In progress
Rachid Bezad Independent	September (2 days per week)	December	To develop an intervening plan for the EOC and FP activities at the SMD and TT regions and reinforce regional team capacities for the setting up of the EOC and FP activities at the SMD and TT regions	EOC Activities	JSI	1. Tyane/Zerrari 2. Fasla/Bakkali 3. Wright 4. Cakir	Yes
Brahim Hafidi Independent	10/16/00 (6 days)	10/30/00	To facilitate and animate the strategic planning workshop in order to draw the maximum of ideas and recommendations from participants	AP4	JSI	1. Tyane 2. Fasla 3. Wright 4. Cakir/Laasri	In progress
Bruno Bouchet, URC	11/06/2000	11/17/00	To work to find the best way to integrate Quality Assurance with a regional level	QA Activities	JSI/URC	1. Tyane/Jrondi 2. Fasla/Bakkali 3. Wright/Bakkali 4. Cakir/El Omari	Yes

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Contract No.: HRN-1-00-98-00032

1. MOH (centre)
2. MOH (region)
3. USAID
4. JSI

Appendix 2: *Progres* In-Country Training List  
October-December 2000

**USAID/Morocco  
Participant Training Data (In-Country)**

Fiscal year: 2000

Training for Strategic/Special Objective: SPO7

**Training Program Component**

Training Program	Activity	Field of Training	Status <sup>1</sup>	Start Date	End Date
Epidemiological Cours	Support	Mehdia	Completed	10/30/2000	11/18/2000

**Group Information**

Training Type <sup>2</sup>	Group <sup>3</sup>	Male	Female	Training Provider <sup>4</sup>
Workshop	24	20	4	CDC/Institut de Veille/MOH

**Funding Component**

Category	Source Type				Total
	USAID/JSI	Host Gov.	Private	Other	
Instruction	2000				2000
Trainee	10000				10000
Travel					
Other	2700				2700

<sup>1</sup> Planned, Cancelled, Terminated, Completed, or Active.

<sup>2</sup> Conference, Doctoral Degree, English Language Training, Masters Degree, Observational Study Tour, Seminar, Short Course, other.

<sup>3</sup> Provide number of trainees.

<sup>4</sup> Provide the name of the training provider if any, e.g. AED, JSI, Pittsburg State University etc.

Appendix 3: *Progress* Invitational Travel  
and Participant Training List

**"Invitational Travel/Participant Training" List  
OCTOBER - DECEMBER 2000**

Participant Name	M/F	Province	Depart. Date	Return Date	Purpose of Visit	Destination	Category	Activity	Financed by
Dr Mohamed Bohsfha	M	Chefchaouen	10/9/2000	10/28/2000	To participate to the Workshop on Monitoring and Evaluation of Health Programs	Dakar Senegal	Study Tour	1.1.	JSI/MOH
M. Lahcen Ameer	M	Tétouan	10/9/2000	10/28/2000	To participate to the Workshop on Monitoring and Evaluation of Health Programs	Dakar Senegal	Study Tour	1.1.	JSI/MOH
Dr Mostapha Kirami	M	Inezgane Aït Melloul	10/9/2000	10/28/2000	To participate to the Workshop on Monitoring and Evaluation of Health Programs	Dakar Senegal	Study Tour	1.1.	JSI/MOH
Mr Boudriga Mohamed	M	Agadir Ida Outanane	10/9/2000	10/28/2000	To participate to the Workshop on Monitoring and Evaluation of Health Programs	Dakar Senegal	Study Tour	1.1.	JSI/MOH

Program