

**MILESTONE COMPLETION REPORT****CONTRACT NUMBER : 263-C-00-99-00017-00**

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**Task Number :** 8

**Task Description :** *Public Sector, RCT, and CSI Facilities Operating with Greater Cost-Effectiveness and Efficiency and Utilizing Cost Recovery and Cost Containment Mechanisms toward Increased Financial Self-sufficiency*

**Milestone No.:** 8.4

**Milestone Description:** **Business plan to increase training volume in RCT developed**

**Source of Verification:** **RCT records**

**Planned End Date:** **January 31, 2000**

**Status :** Completed

**Comments:** An analysis of RCT revenues and cost for fiscal years 1998/9 and 1999/2000 has been completed. A financial estimate of fiscal year 2000/1 has been produced, and projections for fiscal years 2001/2 and 2002/3 have been developed. The analysis was presented to RCT's Executive Director and discussions held with her and senior RCT staff to prepare the business goals, strategies, and objectives described in this plan. The plan covers the period 2001-2003.

**Subcontractors:**

# RCT

**The Regional Center for Training  
in  
Family Planning and Reproductive Health**

**Ain Shams University**

## **BUSINESS PLAN**

**2001-2003**

**The Regional Center for Training in Family Planning and Reproductive Health**

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# RCT BUSINESS PLAN

## I. STATEMENT OF PURPOSE

### 1. Organization Vision

- ♦ RCT will be the leading Training Center of Excellence in women's health, reproductive health and family planning in Egypt and the region
- ♦ RCT will be a self-sufficient, sustainable center providing high quality training services and related technical assistance and research
- ♦ RCT will participate effectively in the Egyptian National Population Program through the continual improvement of knowledge, skills and practices of service providers

### 2. Customer Scope

RCT caters to the following broad market segments:

- ♦ Geographic: Egypt, Middle East/Arab Region
- ♦ Sector: Health
- ♦ Organizations: Ministries of Health, other government ministries, non-government organizations, private sector health organizations, donors
- ♦ Individuals: Clinicians, paramedics, social workers, educators, managers, supervisors

### 3. Distinctive Competencies

RCT has the reputation as the leading provider in Egypt of training and technical assistance in the following areas:

- ♦ Clinical training: IUD Insertion, NORPLANT insertion and removal, provision of other contraceptive technology, infertility, early detection of gynecological diseases, hormone replacement therapy
- ♦ Counselor training
- ♦ Training of trainers
- ♦ Clinical supervision training
- ♦ Management of training

### 4. Key Stakeholders

Many stakeholders are actively involved in the development of RCT's future, including:

- ♦ Government of Egypt
- ♦ Ain Shams University Faculty of Medicine
- ♦ Organizational clients: Ministry of Health and Population (MOHP) - Systems Development Project (SDP), Health Insurance Organization (HIO), Teaching Hospitals Organization (THO); Clinical Services Improvement Project (CSI)
- ♦ United States Agency for International Development (USAID)
- ♦ Individuals trained
- ♦ RCT staff

### 5. Business Challenges

RCT is facing a critical period in its history. Since its inception in 1988, RCT has enjoyed a substantial, regular, and predictable business and income from one donor under the series of USAID-funded population projects. However, at the end of the current project, Pop IV, in June 2002 this funding will fundamentally change as USAID has announced that it will scale back the financial

support it provides to RCT. RCT will then be required to survive as a business, securing its work in a competitive environment. The business goals, strategy and objectives described below reflect the challenges that RCT faces in order to survive.

## **6. Business Goals 2001 - 2003**

- A. Retain current planned levels of USAID work over the next three years and beyond.
- B. Generate significant new work in addition to currently planned USAID work in order to cover cost
- C. Retain and develop market credibility in order to both retain current USAID work and generate significant other work. RCT's continued and strengthened affiliation with Ain Shams University Faculty of Medicine probably provides the best opportunity to achieve this aim. The Special Unit status probably provides the best mechanism for this continued and strengthened affiliation.
- D. Use RCT's current staffing capacity more effectively to build the RCT business. Two areas of activity need attention immediately: marketing and business generation, and quality assurance of training services.

## **7. Business Strategies**

- A. Agree on a level of USAID-financed work with USAID that will support RCT's future over the next five years and agree an appropriate pricing structure
- B. Establish a comprehensive and assertive marketing campaign to secure new business. The first element should be a comprehensive market survey to gain an in-depth understanding of the current and potential Middle East market. In particular, the survey should enable RCT to achieve the following objectives:
  - ♦ Define its market (i.e., reproductive health, or a broader health mandate)
  - ♦ Specify products and services it can offer
  - ♦ Identify specific customers and the types and quantities of services they will buy
  - ♦ Determine the marketing mix for each service and customer (i.e., the price at which to sell, the place or location at which to provide, the promotion required, the people who should be involved, the physical evidence that should accompany the service)Following the survey, speedily implement the actions suggested and assertively pursue the sales opportunities identified

- C. Define and secure RCT's organizational identity within Ain Shams University Faculty of Medicine by making RCT a Special Unit. The terms and conditions of its charter should enable RCT to retain its right to recruit staff from outside the Ain Shams University faculty, and should enable RCT to develop its own business strategy. The charter should also define the financial contribution from RCT to Ain Shams University and the services that RCT will receive from Ain Shams University. The arrangement should allow RCT to draw on the Ain Shams strengths in marketing, faculty, and facilities. An RCT Board of Directors should be formed that brings cutting-edge skills in medicine, marketing and business, financial management, organizational development, and legal issues. The board should take an active role in RCT's management and help to expand RCT's business and make RCT sustainable.
- D. Reorient the roles and responsibilities of RCT staff to the business challenges RCT faces. In particular, establish and develop marketing and quality assurance functions. The marketing function will have staff responsible for managing marketing and developing an organization marketing infrastructure. In addition, professional staff will actively market RCT and generate

business. The quality assurance function will have staff responsible for managing quality and ensuring that a system of continuous, quality improvement is being practiced. The aim of the quality assurance program will be to ensure that all RCT services reflect the latest international quality standards for clinical practice, management and training.

## **8. Business Objectives**

### **A. Customers**

- a) Retain existing organizational customers, especially MOHP - SDP, HIO, THO, and CSI through continued USAID funding at the planned rate of reducing by 10% the number of participants funded each year
- b) Maintain existing level of business each year with USAID DT2 project and the World Bank
- c) Secure business with other USAID-funded health projects in Egypt, especially the Healthy Mother Healthy Child Project
- d) Strengthen client base among all international donors in Egypt that are supporting the health sector by securing regular annual business. Focus especially on the UNFPA, European Union, DANIDA, the Dutch Development Agency, and the UK Department for International Development
- e) Increase regular business with Egyptian NGOs, especially the Red Crescent
- f) Increase regular business for Egyptian private practitioners through the medical syndicate
- g) Secure business with other Government of Egypt organizations, especially the health sections of the military and police agencies and the Ministry of Education
- h) Secure regular annual business with international agencies that have been RCT clients in the past, including International Planned Parenthood Federation (IPPF), World Health Organization (WHO), Population Council, and Management Sciences for Health (MSH)
- i) Broaden customer scope to the Middle East, Arab World region to establish RCT as a recognized regional training center. Secure regular annual business with the established donors in other regional countries, especially USAID in Jordan and West Bank and Gaza, The World Bank, UNFPA, the EU and individual bilateral donors. Establish work with country IPPF-affiliated organizations. Receive 25% of total revenue from regional work during FY 2002-2003
- j) Establish formalized alliances with international partner organizations that are recognized as leaders in the training field - such as Johns Hopkins for medical and IEC training, Management Sciences for Health for management training - in order for RCT to be a regional base for their services
- k) Establish RCT as a recognized center for providing South to South training and technical assistance

### **B. Innovation**

- a) Provide training and technical assistance in latest contraceptive technology for service providers to suit strategies being pursued by client organizations. Continually update current family planning training to reflect latest contraceptive technology and practice
- b) Provide training and technical assistance in new health technologies related to reproductive health, women's health and other allied areas. In particular, continue to strengthen and expand RCT's portfolio of women's health services which currently cover early detection of gynecological malignancies, infertility, and hormone replacement therapy (HRT)
- c) Provide training and technical assistance in the management and supervision of quality reproductive health, women's health, and related services
- d) Provide quality, state-of-the-art adult learning training methods in all training services
- e) Provide distance learning services incorporating the use of the Internet and other computer-aided instruction techniques

- f) Develop reputation for advocacy in reproductive health, women's health, training and related areas
- g) Promote South to South support services

#### C. Resources

- a) Maintain USAID Egyptian population program funding at the existing planned level based on a 10% reduction in participants funded each year
- b) Increase income from non-USAID Egyptian population program funding from the estimated LE.1,295,000 in FY 2000-2001 to at least LE.1,894,000 in FY 2001-2002, and to at least LE 2,460,000 in FY 2002-2003
- c) Secure 25% of all business revenues from non-Egyptian regional work by FY 2002-2003
- d) Establish overhead rate of 40% which can be included in prices to all clients to cover extra costs of RCT's contribution to Ain Shams University Faculty of Medicine
- e) Define and secure RCT's organizational identity within Ain Shams University Faculty of Medicine by making RCT a Special Unit. The terms and conditions of its charter should define the financial contribution from RCT to Ain Shams University and the services that RCT will receive from Ain Shams University. The arrangement should allow RCT to draw on the Ain Shams strengths in marketing, faculty, and facilities. It should also enable RCT to retain its right to recruit staff from outside the Ain Shams University faculty, and should enable RCT to develop its own business strategy
- f) Establish an RCT Board of Directors that brings cutting-edge skills in medicine, marketing and business, financial management, organizational development, and legal issues. Ensure the board meets at least every three months and takes an active role in RCT's management to help RCT expand business and be sustainable.
- g) Expand and strengthen RCT's roster of consultants to cover clinical, management and training expertise
- h) Strengthen consultants training expertise to make them leaders in the design and delivery of adult education methods
- i) Consolidate the strength of RCT's clinic as center of excellence in reproductive and women's health service provision, so that RCT can demonstrate and model service excellence in their training
- j) Strengthen training materials and resources in clinical subjects, management and training of trainers to enable RCT to provide the latest training technology in all their training services
- k) Form collaborative partnerships with international health training organizations to provide access to latest technologies, broaden consultant roster, strengthen marketing and enhance national and region credibility

#### D. Productivity

- a) Redefine RCT staffing roles and responsibilities to incorporate marketing, business generation, efficient resource management, and quality assurance objectives. Ensure all staff are trained to effectively execute their responsibilities
- b) Establish a marketing function and an organization marketing infrastructure that will have staff responsible for developing, managing and implementing the RCT marketing strategy. The marketing infrastructure should include contact database, capability statements, brochure and marketing literature, consultant CVs, proposal formats, website, and marketing procedures and checklists
- c) Establish a quality assurance function and quality assurance infrastructure that will have staff responsible for developing, managing and implementing a system of continuous quality improvement

- d) Establish electronic budgeting and financial management systems to help in financial planning, cost control and financial reporting. Ensure that the financial management systems allow revenues and cost to be collected and analyzed for each market segment and product type
- e) Strengthen human resource management systems to cover personnel policy and procedures, human resource data, performance management and training
- f) Strengthen communication and decision-making processes to involve and empower stakeholders in securing future business and building organizational capacity
- g) Strengthen and standardize systems for managing consultants to cover service contracts, performance standards, and payment of fees and expenses
- h) Install up-to-date computer technology consisting of networked computers with appropriate software for all staff. Ensure all staff have the knowledge and skills to use the technology

## **II. THE RCT BUSINESS**

### **1. Legal Structure**

The Regional Center for Training in Family Planning and Reproductive Health (RCT) is currently a component of the USAID-funded Pop IV Project. However, RCT is currently discussing with The Faculty of Medicine at Ain Shams University to be a Special Unit of the University. This arrangement will provide formal affiliation with the University, which will enable RCT to continue to operate from its base in the university and capitalize on the reputation and marketing power of Ain Shams in return for a contribution to the university from its revenues. However, the Special Unit status will allow RCT to pursue business development with some degree of autonomy from the University's bureaucracy. A board of directors will be formed comprising of a broad cross-section of representatives, which can build RCT into a sustainable business. Board members will come from the University, Ministry of Health and Population, NGOs, donors, and the private sector and will be joined by professional representatives covering medicine, law, finance, marketing and business.

### **2. History and Achievements of RCT**

#### **A. History of RCT**

RCT's current mission is "to reduce the population growth rate and improve women's health, reproductive health and family planning provision in Egypt and the region through high quality training services and related technical assistance and research".

RCT was established in 1988 as a joint venture between the Ain Shams University, Faculty of Medicine, Obstetrics and Gynecology Department and the USAID-funded John Hopkins Program for International Education in Reproductive Health (JHPIEGO). Its initial role was to train trainers working in the governorates who would then train family planning and reproductive health service providers. This training used standardized curricula, quality training materials and clinical training sites. The training aimed to accelerate the process of equipping service providers with the appropriate knowledge, skills and attitudes to provide quality family planning and reproductive health services. In 1990 the United States Agency for International Development (USAID) began providing direct financial support for RCT training and funding technical assistance; USAID continues to perform this role to the present day. In 1993 the new Ministry of Population assumed leadership of RCT and in 1995 this role was transferred to the National Population Council. In 1999, with the beginning of the Pop IV Project, oversight for RCT was again transferred to the Ministry of Health and Population. Since its inception, RCT has been based in Cairo at the Ain Shams University, Faculty of Medicine, Obstetrics and Gynecology Department.

RCT continues to play a pivotal role in training staff for the Egyptian population program. RCT trains physicians, nurses, social workers, managers and pharmacists working in reproductive health and related fields for the government and NGO sectors. Indeed, most trained reproductive health service providers in Egypt have received their training at RCT.

RCT has conducted training courses in collaboration with the Egyptian Red Crescent Organization and the Egyptian Family Planning Association. It has also conducted courses in collaboration with international organizations such as the European Union (EU), International Planned Parenthood Federation (IPPF), Management Science for Health (MSH), and the World Health Organization (WHO).

All of RCT's training, available in both Arabic and English, is competency-based and utilizes effective adult education methods. RCT has the capability to tailor courses to meet the needs of a specific organization and can develop curricula for specific subjects in the field of family planning and reproductive health.

RCT has a staff roster of highly qualified and experienced trainers and master trainers, including physicians and nurse trainers. Training management and administrative staff support these trainers.

Ain Shams University's outpatient clinic provides RCT with a unique laboratory and opportunity for practical training. This clinic serves about 1,400 family planning clients a month, and provides opportunities to practice newly learned skills as an important component of most RCT courses.

## B. Achievements of RCT

### a) Training

Over the past 10 years, it has conducted over 280 training courses and trained more than 3,900 graduates from the Ministry of Health and Population (MOHP), Health Insurance Organization (HIO), Teaching Hospital Organization (THO), Clinical Services Improvement Project (CSI), and Egyptian Junior Medical Doctors Association (EJMDA) at the RCT center in Cairo. In addition, RCT developed and established Satellite Training Centers (STCs) in 15 governorates in Egypt. This program was implemented to decentralize activities, standardize the quality of conducting training courses and provide high quality service delivery in family planning clinics. The STC program graduated 3,407 physicians and 2,875 nurses as family planning service providers during the 1988 – 1993 period achieving 130% of its target number.

**TABLE 1. RCT TRAINING COURSES: AUGUST 1, 1989 - OCTOBER 14, 1999**

Course Title	Number of Courses Held	Number of Graduates
<b>Courses at RCT's Training Center in Ain Shams University Maternity Hospital</b>		
TOT for Nurses	14	153
TOT for Physicians	31	437
Advanced TOT	8	84
Information, Education and Communication	3	49
Nurse Service Providers	3	50
Physician Service Providers	64	825
Reproductive Health for Physicians	14	201
Reproductive Health for Social Workers	1	11
Ob/Gyn Technical Supervision	55	623
Multipurpose Clinic Supervision and Support	33	566
Management of Health Teams	24	456
Infertility for Physicians	16	238
Early Detection of Gynecological Malignancies for Physicians	6	101
Logistics for Pharmacists	7	107
Management for Pharmacist	2	28
<b>Total</b>	<b>281</b>	<b>3,929</b>
<b>At the RCT's Satellite Training Centers</b>		
Physician Service Providers		3,407
Nurse Service Providers		2,875
<b>Total</b>		<b>6,282</b>
<b>Overall Total</b>		<b>10,211</b>

**TABLE 2. RCT TRAINING COURSES: AUGUST 1, 1996 - JULY 31, 1999**

Course Title	Course Duration	Clients	Number of Courses Held	Number of Graduates
<b>Courses at RCT's Training Center in Ain Shams University Maternity Hospital</b>				
TOT for Physicians	4 weeks	HIO, MOHP	8	114
Information, Education and Communication	2 weeks	THO	1	14
Nurse Service Providers	1 week	HIO	5	85
Physician Service Providers	2 weeks	CSI, HIO, MOHP	45	559
Reproductive Health for Physicians	1 week	CSI, HIO	14	200
Ob/Gyn Technical Supervision	2 weeks	MOHP	34	434
Multipurpose Clinic Supervision and Support	1 week	CSI, HIO	30	532
Management of Health Teams	2 weeks	CSI, HIO	22	488
Infertility for Physicians	1 week	CSI, HIO, THO	16	238
Early Detection of Gynecological Malignancies for Physicians	1 week	CSI, HIO, THO	6	101
Logistics for Pharmacists	1 week	EPTC	4	59
<b>Total</b>			<b>185</b>	<b>2,824</b>

**b) Clinical Services**

RCT has conducted competency based, hands-on clinical training for 2,465 participants from all categories of clinicians working in family planning and reproductive health programs. This large number of participants trained was possible due to the high client volume in RCT clinics, which was estimated at over 64,000 clients served from 1988 to 1998.

**c) NORPLANT® Program in EGYPT**

RCT has played an important role in the implementation of the NORPLANT® program in Egypt. RCT was represented by its Executive Director on the NORPLANT® Steering Committee that enabled RCT to participate in national strategy and policy making decisions. Moreover, RCT has provided the NORPLANT® curriculum and coordinated the national NORPLANT® training program provided in five universities (Ain Shams, El-Azhar, Mansoura, Alexandria, and Assiut).

**d) Training Packages**

RCT has developed and distributed three kinds of training packages to client organizations:

- ♦ Institutional Training Package (ITP) – A complete training kit developed for training institutions to conduct RCT core family planning training courses. The ITP contains slides, text, reference and audiovisual materials, and notes.
- ♦ Physician Trainer Package (PTP) – Designed to meet the needs of training physicians in family planning. It is complemented by the ITP and the NTP and can be used in a variety of training settings.
- ♦ Nurse Trainer Package (NTP) – Designed to meet the needs for training nurses in the Egyptian family planning program. It is complemented by the ITP and the PTP as well as by specific course materials.

e) National Family Planning Guidelines

RCT, in collaboration with the Ministry of Health and Population, produced the English version of the National Family Planning Guidelines for Physicians and the Arabic version of the National Family Planning Guidelines for Nurses.

f) Workshops and Conferences

RCT has conducted 36 workshops and 4 conferences in the following areas:

- ♦ Training needs assessment
- ♦ Technical assistance support
- ♦ Contraceptive technology update conference
- ♦ Annual RCT graduate conference
- ♦ Satellite training
- ♦ Norplant
- ♦ Team Building
- ♦ Participatory training skills
- ♦ Marketing

g) Field Visits to RCT Graduates

RCT has emphasized the impact of its training courses by providing on-the-job training for its graduates. RCT staff has conducted more than 600 follow-up visits to evaluate and upgrade the capabilities of RCT graduates. Through these activities, RCT is able to assess organizational human resource development needs.

h) Technical Assistance

RCT has played a key role in providing technical assistance support for USAID funded projects working in family planning and reproductive health. RCT's technical assistance unit formed a consultant roster, which consist of consultants with skills in many technical and administrative areas. Below are some of the examples of the technical assistance provided by RCT:

- ♦ Built management information systems for the Ministry of Health and Population
- ♦ Supported Information, Education and Communication (IEC) activities and developed management systems for the Teaching Hospitals Organization (THO)
- ♦ Developed IEC capabilities of social workers in the Health Insurance Organization (HIO)
- ♦ Designed curricula and trained trainers for the Coptic Church in El-Menia governorate.
- ♦ Supported government family planning and reproductive health organizations in technical and clinical areas at governorate level through RCT 's 15 satellites training centers

i) Conducting Research

RCT has conducted operation research to improve training quality in district areas. The research examined the most cost-effective method of providing follow-up and on-the-job training for graduates of RCT's STC. RCT has used the research results to structure the follow-up and on-the-job training provided by RCT staff.

j) Resource Center:

RCT maintains a small professional library, which includes a range of national and international books, journals, videotapes, and other reference materials. All the materials are available for use by

RCT staff and for RCT course participants. RCT has Internet access to upgrade its management information system and a home page to announce RCT activities.

k) RCT Newsletter (Scope)

From 1990 – 1994, RCT produced as annual newsletter SCOPE with articles on current and new practice in reproductive health service delivery and training, and the latest RCT activities.

### 3. Current Training Courses

**TABLE 3: POP IV COURSES JULY 1, 1999 - JUNE 30, 2000**

Course	Duration	SDP	CSI	THO	HIO	Trainees	Courses	Total Weeks
Ob/Gyn Tech supervisors	2 Weeks				15	15	1	2
Phys Service Providers	2 Weeks	150	100			250	16	32
TOT for Physicians	4 Weeks	90			5	95	6	24
Infertility	1 Week	60	40	64	50	214	14	14
Early Detection of Malignancies	1 Week	60	40	64	45	209	14	14
Reproductive Health for Phys	1 Week				50	50	3	3
FP clinic Management	2 Weeks	30	33	10	30	103	6	12
Lab. Tech	2 Weeks		30		30	60	4	8
Multipurpose	1 Week		90		60	150	10	10
RTIs in FP clinic	1 Week		40			40	3	3
NORPLANT for Physicians	1 Week	137		32	20	189	38	38
NORPLANT for Nurses	1 Week	100		64		164	16	16
HRT	1 Week	30	40			70	5	5
Counseling for Infertile Couples	1 Week	75				75	5	5
Reproductive Health Adolescents	1 Week	30				30	2	2
PPIUDs	1 Week			64	20	84	5	5
IEC	1 Week		100			100	6	6
Refresher course for Service Provider in FP clinic	1 Week							
<b>TOTAL</b>		<b>762</b>	<b>513</b>	<b>298</b>	<b>325</b>	<b>1,898</b>	<b>154</b>	<b>199</b>

The planned work the FY 2000-2001 in Table 4 shows a similar composition.

**TABLE 4: POP IV COURSES JULY 1, 2000 - JUNE 30, 2001**

Course	Duration	SDP	CSI	THO	HIO	Trainees	Courses	Total Weeks
Ob/Gyn Technical Supervisors	2 Weeks			15	15	30		4
Physician Service Providers	2 Weeks	75	75	15	15	180	12	24
TOT for Physicians	4 Weeks	60	10			70	5	20
Infertility	1 Week	60	45	15	15	135	9	9
Early Detection of Malignancies	1 Week	60	45	15	15	135	9	9
Reproductive Health for Physicians	1 Week			15	15	30	2	2
FP Clinic Management	2 Weeks		30	15	15	60	4	8
Lab. Technicians	2 Weeks	60		30	15	105	7	14
Multipurpose	1 Week							
RTIs for Physicians	1 Week	60	45	15	15	135	9	9
NORPLANT for Physicians	1 Week	200	15	27	45	287	57	57
NORPLANT for Nurses	1 Week	150	45	27	45	287	57	57
NORPLANT Refresher (Removal)	1 Week	200				200	40	40
HRT for Physicians	1 Week	60	45	15	15	135	9	9
Counseling for Infertile Couples	1 Week	45			15	60	4	4
Reproductive Health for Adolescents	1 Week	60			15	75	5	5
PPIUDs	1 Week			20	64	84	5	5
IEC	1 Week							
Refresher course for Service Provider in FP clinic	1 Week							
Management of Training	2 Weeks	15				15	1	2
Advanced Laboratory Technology	1 Week		30			30	2	2
Multiscope	1 Week		120	30	45	195	13	13
High Risk Pregnancy & Antenatal Care	1 Week	45	45		15	105	7	7
<b>TOTAL</b>		<b>600</b>	<b>490</b>	<b>225</b>	<b>180</b>	<b>1,495</b>	<b>100</b>	<b>141</b>

**TABLE 5: WEEKS OF TRAINING BY COURSE**

Course	Number of Trainees			Number of Weeks		
	1998 - 1999	1999- 2000	2000- 2001	1998 - 1999	1999- 2000	2000- 2001
Ob/Gyn Technical Supervisors	135	15	30	18	2	4
Physician Service Providers	205	250	180	36	32	24
TOT for Physicians	40	95	70	12	24	20
Infertility	11	214	135	11	14	9
Early Detection of Malignancies	132	209	135	9	14	9
Reproductive Health for Physicians	50	50	30	3	3	2
FP Clinic Management	100	103	60	12	12	8
Lab. Technicians	50	60	105	6	8	14
Multipurpose	210	150	195	14	10	13
RTIs for Physicians	132	40	135	9	3	9
NORPLANT for Physicians		189	287		38	57
NORPLANT for Nurses		164	287		16	57
NORPLANT Refresher (Removal)		70	200		5	40
HRT for Physicians	100	75	135	7	5	9
Counseling for Infertile Couples		30	60		2	4
Reproductive Health for Adolescents		84	75		5	5
PPIUDs	32	100	84	2	6	5
IEC						
Refresher course for Service Provider in FP clinic						
Management of Training			15			2
Advanced Laboratory Technology			30			2
High Risk Pregnancy & Antenatal Care	50		105	3		7
Pre & Post Natal Care	190			12		
Financial Management	50			6		
Management Information Systems	15			1		
Marketing Skills	100			14		
<b>TOTAL</b>	<b>1,602</b>	<b>1,475</b>	<b>1,579</b>	<b>175</b>	<b>140</b>	<b>146</b>

RCT courses are developed by RCT staff and associate consultants who are all leading professionals in their fields. Many hold professorial positions at Egypt's leading universities. Training materials and resources are prepared to form standard participant course binders and standard training aids used on all courses. These include the following:

- ♦ Lectures, discussions, and talks
- ♦ Visual aids in the form of overheads, slides, and videos
- ♦ Exercises, case studies, and roles plays
- ♦ Demonstrations and clinical practice protocols
- ♦ Site visits
- ♦ Participant evaluations provide data on which course are improved and/or new courses added.

Ain Shams University's outpatient clinic provides RCT with a unique laboratory and opportunity for practical training. This clinic serves about 1,400 family planning clients a month, and provides opportunities for participants to practice newly learned skills under the supervision of the clinical teachers. This includes counseling clients and providing contraceptive devices such as IUD's.

An important RCT service is training of trainers (TOT) courses. This training helps client organizations build their internal capacity to provide training for their staff. As a result, the MOHP, NGOs and independent training consultants now have the knowledge and skills to deliver successful training on their own.

To provide organizational flexibility to meet the varied demands of RCT clients, RCT reduced their in-house training staff and instead resourced their services through partnership with external consultants and universities. As a result, course's in RCT's Ain Shams University center use many teaching staff from Ain Shams University's Faculty of Medicine and some and independent consultants. RCT's NORPLANT courses are delivered in partnership with five universities: Ain Shams, El-Azhar, Mansoura, Alexandria, and Assiut. RCT developed the curriculum and trained faculty from these universities to provide the training at the partner universities' site. Now RCT coordinates the national NORPLANT training and oversees the technical quality of the courses.

Courses provided for non-USAID clients are sometimes held in RCT's training center or at outside locations, such as hotels.

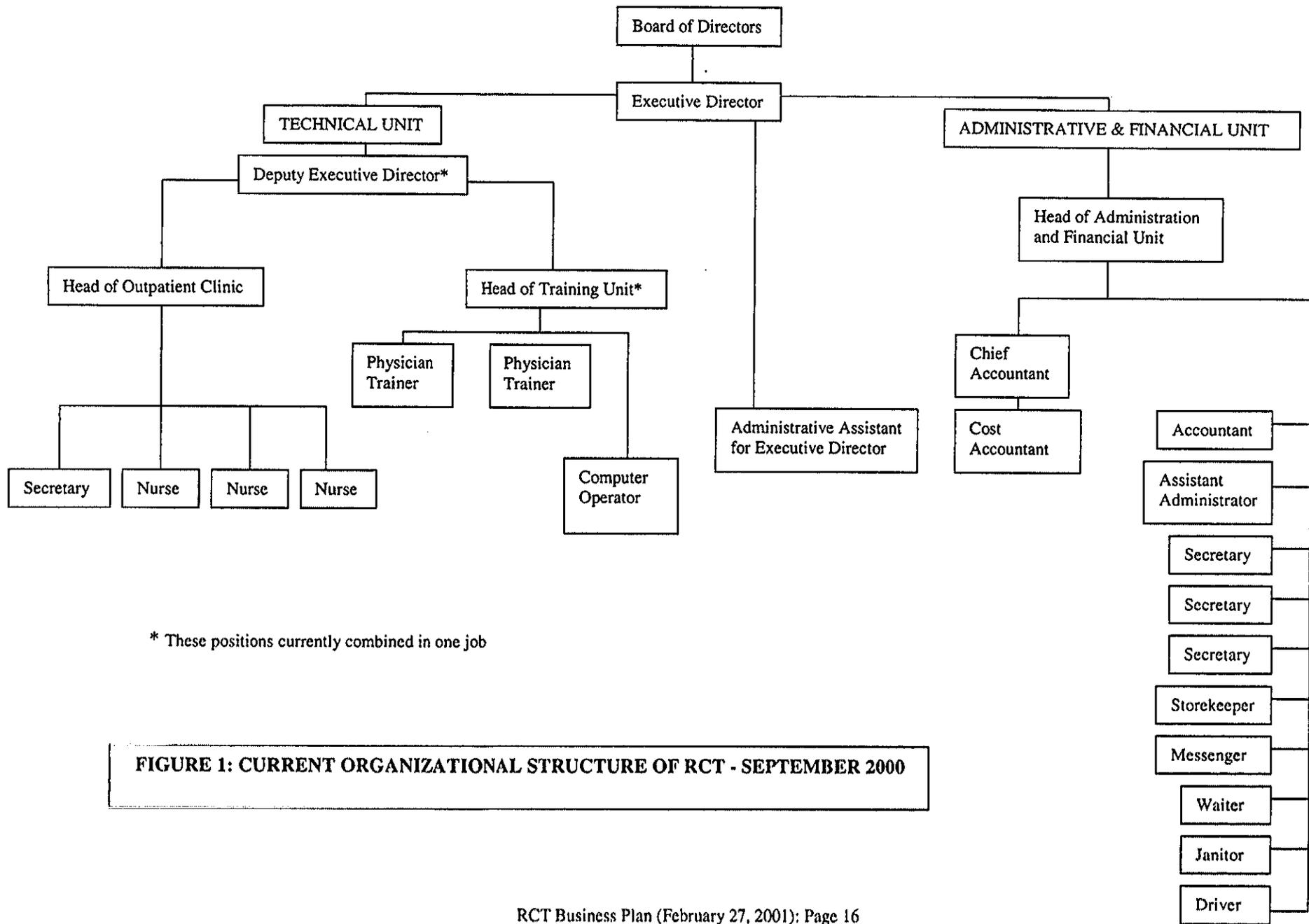
#### **4. Management**

RCT is currently a component of the USAID-funded Pop IV Project. RCT's managerial activities are coordinated by RCT's Executive Director, Dr. Safa El Baz. There is no active board and RCT's relationship with Ain Shams University needs to be formalized. To this end, RCT's Executive Director is pursuing plans to incorporate RCT as a Special Unit of the University. The following activities form part of this process:

- ♦ Agree on terms with Ain Shams University to make RCT a Special Unit of the University
- ♦ Formalize RCT constitution in order to define roles and responsibilities of the Board of Directors and to provide the Board with a mandate to direct
- ♦ Establish a functioning Board of Directors that meets frequently. A board has not met for over four years
- ♦ Increase meeting frequency of Board of Directors. Initially, the Board should meet at least every three months
- ♦ Formally appoint new Chairperson of Board of Directors and induct into role
- ♦ Include important strategic posts in organizational structure, especially for marketing, quality management, and business development

#### **5. Personnel**

RCT currently has a staff of 24 people, three of which are physicians dedicated to training, three physicians as RCT senior management, three nurses for the outpatient clinic, and the rest in support roles. Figure 1 shows the organizational chart.



**FIGURE 1: CURRENT ORGANIZATIONAL STRUCTURE OF RCT - SEPTEMBER 2000**

## 6. Current Financial Position and Future Projections

RCT's current business is concentrated on serving the needs of the partners of the USAID-funded Pop IV project. Indeed, RCT's primary mission is currently to serve the Pop IV project. During financial year 1999-2000, 80.5% of business revenue was derived from the Pop IV. Project. The remaining 19.5% was spread between the following clients: UNFPA, WHO, MSH, IPPF, EU, World Bank, and the Red Crescent. A detailed breakdown is shown in the Section V: Historical Market Share of Business. FY 1999-2000 was the most successful for the past five years in generating non-USAID population funding. The proportions for the four previous years were as follows:

FY 1998-1999 2%

FY 1997-1998 2%

FY 1996-1997 17%

FY 1995-1996 3.5%

The increase in non-USAID population work will hold for FY 2000-2001. Current estimates show an expected 30% share of revenues from non-USAID Pop IV through work with the USAID Development Training 2 project and the World Bank, with over 20% already confirmed. However, despite this increase, RCT will have to generate even more income from non-USAID clients in the next two years to break even. This need is a result of two factors: the anticipated contribution that RCT will have to pay to Ain Shams University when it becomes a Special Unit; and the planned declining business from the USAID population program. Given the most optimistic planned levels of USAID population work, we estimate that non-USAID population income will need to increase from the estimated LE.1,295,000 in FY 2000-2001 to LE.1,894,000 in FY 2001-2002, and to LE.2,460,000 in FY 2002-2003. This projection assumes that USAID will reduce the number of participants it funds by 10% for the last year of Pop IV and for the first year of the successor project. It also assumes that USAID will increase the cost of each participant funded to take into account RCT's extra indirect (or fixed) costs, which will rise from 26%-40% when it becomes a Special Unit of Ain Shams University. The detailed financial analysis covering the period FY 1998-1999 to FY 2002-2003 is shown in Section IV: Financial Analysis. This analysis shows the actual revenue and costs in FY 1998-1999 and FY 1999-2000, the estimated revenues and cost in FY 2000-2001, and the projected revenues and costs in FY 2001-2002 and FY 2002-2003.

### **III. MARKETING**

#### **1 Synopsis of current market position**

Section V shows the current and historical market share of RCT business. The concentration of nearly all RCT's current business with one client, the USAID population program, is an organizational viability concern for RCT. The scale and terms of USAID funds beyond the current Pop IV project are unclear, although the most optimistic scenario for RCT is that USAID will continue to fund training at RCT but at a reduced rate. Current USAID support is being reduced by 10% each year based on the number of participants trained. This optimistic scenario has been used to calculate market share and funding levels in this plan for the last year of Pop IV (FY 2001-2002) and the first year after Pop IV ends (FY 2002-2003).

RCT needs to implement a comprehensive and assertive marketing campaign to secure new business. The first element should be a comprehensive market survey to gain an in depth understanding of the current and potential Middle East market. In particular, the survey should enable RCT to achieve the following objectives:

- ♦ Define its market (i.e., reproductive health, or a broader health mandate)
- ♦ Specify products and services it can offer
- ♦ Identify specific customers and the types and quantities of services they will buy
- ♦ Determine the marketing mix for each service and customer (i.e., the price at which to sell, the place or location at which to provide, the promotion required, the people who should be involved, the physical evidence that should accompany the service)
- ♦ Following the survey, speedily implement the actions suggested and assertively pursue the sales opportunities identified

The other elements of the marketing strategy are shown in Section VI: Business and Organizational Development Implementation Schedule. A detailed description of the three-year marketing strategy and initial marketing activities is shown in the Marketing Plan supplement to this report.

#### IV. FINANCIAL ANALYSIS

- Table 1: Summary of RCT's Financial Position 1998-2003  
(Historical analysis of RCT's revenues and cost 1998-2000, current performance, and projected performance 2001-2003)
- Table 2: 1999/2000 Total Revenue and Total Costs by Activity by Source of Fund
- Table 2/1: 1999/2000 Total Cost of Activities (USAID Pop IV and Non-USAID Pop IV)
- Table 2/2: 1999/2000 RCT Non-USAID Pop IV Activities
- Table 2/3: RCT/USAID Pop IV Activities Total Revenue and Total Cost (1999/2000)
- Table 2/3/1: RCT/USAID Pop IV Activities - Training (1999/2000)
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- Table 3: Direct and Indirect Salary Distributed on Activities (1999/2000)
- Table 3/1: RCT Staff Direct and Indirect Salaries (1999/2000)
- Table 3/1/1: RCT Staff Direct and Indirect Salaries (2000/2001)
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- Table 3/2: Detailed Follow-up Visits' Cost (1999/2000)
- Table 3/2/1: Detailed Follow-up Visits' Cost (2000/2001)
- Table 3/3: 1999/2000 Actual Training Weeks Compared to Total Number of Available Weeks  
During the Year
- Table 4: RCT Marketing Budget (2000/2001 - 2002/2003)

Table : 1  
 RCT Fixed and Variable Costs 1998/1999 -1999/2000,  
 and Projections 2000/2001- 2002/2003

	1998/1999	1999/2000	2000/2001	2001/2002	2002/2003	Comments
<b>Fixed Costs:</b>						
I/1 Salaries + Benefits (paid by RCT)	628,884	728,873	801,760	881,935	970,130	10% annual increase
I/2 Salaries (out-patient clinic staff paid by Univ) **	51,244	56,368	62,005	68,205	75,025	Source: estimated of contribution to RCT by Ain-Shams Univ. (10% annual increase)
I/3 Rent (office space) **	266,200	292,820	322,102	354,312	389,740	
I/4 Rent (Clinic space + equipment) **	207,709	228,479	251,327	276,460	304,110	
I/5 Utilities (electricity + water) **	19,844	21,828	24,011	26,420	29,055	
I/6 P.T.T.	24,645	19,225	19,500	19,500	19,500	
I/7 Marketing Expenses	34,292	0	62,500	251,500	75,000	Table 4
I/8 Vehicles (insurance + maintenance)			12,000	12,000	12,000	
I/9 Professional Legal (10,000) + Accounting Expenses (10,000)	27,000	20,000	20,000	20,000	20,000	
I/10 Product Development/Research and development						
I/11 Management systems development						
I/12 Board of directors' costs (attendance fees)	8,000					
I/13 Maintenance & insurance	40,555	49,720	54,692	60,160	66,170	10% annual increase
I/14 Bank Charges @ LE 120/month	1,440	1,440	1,440	1,440	1,440	
I/15 Othres (including staff development, Admin exp)	25,184	19,033	20,000	20,000	20,000	
I/16 Miscellaneous Costs **	30,250	33,275	36,603	40,260	44,290	Source: estimated of contribution to RCT by Ain-Shams Univ. (10% annual increase)
I/17 Annual Depreciation	187,793	187,793	187,793	187,790	187,790	Will be increased by depreciation of new items; PCs, and othres
	<b>Fixed Costs total</b>	<b>1,653,040</b>	<b>1,668,854</b>	<b>1,876,732</b>	<b>2,219,982</b>	<b>2,214,250</b>
<b>II Variable Costs:</b>						
II/1 Consultants fees for courses (guest speaker)	138,600	220,350	293,635	294,071	290,600	
II/2 Trainees materials (supplies & instructional material)	166,855	118,241	227,116	225,727	224,440	
II/3 Training venue rent that is not included in fixed costs						
II/4 Trainees' perdiem & Lodging * (including transportation: training)	1,473,825	1,226,244	1,248,209	1,142,990	1,140,420	
II/5 Staff perdiem & Lodging + transportation costs (follow-up)	22,282	47,734	52,850	52,850	52,850	Through 99/00 only 80% of total planned visits are achieved (114 visits/ 144 visits) with total rev. from USAID = 57% of total budget
II/6 Staff perdiem & Lodging	6,000					
II/7 Trainees' transportation & travel costs *	80,125	24,216	45,016	45,060	45,000	
II/8 Coffee Break	153,150	59,024	83,696	82,950	82,300	
II/9 Printing costs	90,000	0	0	0	0	
II/10 Clinical Supplies	62,900	18,545	10,844	11,000	11,000	
II/11 Translation	18,000	0	0	0	0	
II/12 Miscellaneous Costs	45,000	0	0	0	0	
II/13 Supplies disposables paid by Ain-Shams Univ (minus revenue to hosp)	72,600	79,860	87,850	97,000	105,500	Source: estimated of contribution to RCT by Ain-Shams Univ. (10% annual increase)
II/14 Variable costs (training other than USAID) ****	88,847	262,966	262,966	835,040	1,113,322	
II/15 Variable costs (training MSH/IIIE/USAID)	0	171,819	572,063	0	0	
II/16 Contribution to Ain Shams Univ ( as phase in by 5% of Revenue) **	0	0	0	0	277,878	
	<b>Variable Costs total</b>	<b>2,418,194</b>	<b>2,228,799</b>	<b>2,884,245</b>	<b>2,786,688</b>	<b>3,343,310</b>
	<b>Totals Cost</b>	<b>3,971,224</b>	<b>3,887,653</b>	<b>4,769,978</b>	<b>5,006,670</b>	<b>5,557,560</b>
<b>Revenue</b>						
USAID/Pop IV Activities ***		3,278,309	3,045,191	3,112,870	3,097,560	
Training Activities: MSH/IIIE/USAID		273,918	774,498	0	0	
Training Activities: other than USAID ****		520,525	520,525	1,893,600	2,460,000	
	<b>Totals Revenue</b>	<b>4,072,752</b>	<b>4,340,212</b>	<b>5,006,670</b>	<b>5,557,560</b>	
	<b>Profit/ Loss</b>	<b>185,099</b>	<b>-419,788</b>	<b>0</b>	<b>0</b>	

\* II/4 is including transportation & travel cost of training, II/7 is including transportation & travel costs for other than training activities

\*\* is estimated contribution to Ain-Shams Univiralty (fixed cost which represents around 15% of total revenue collected, and variables as % of total revenue collected)

\*\*\* Increase the Indirect Cost % of Training/Norplant/Workshops per participant from 26% to 40%

\*\*\*\* Other than PopIV activities (increasing cost and revenues for 2001/2002 & 2002/2003) to reach the break-even point

Table : 2  
 1999/2000 Total Revenue and Total Costs by Activity by Source of Fund

<b>I) Revenue</b>							
USAID	2,405,630	273,940	550,400	48,339	3,278,309	80.49%	
USAID/IE-MSH	273,918				273,918	6.73%	
Non-USAID	<u>465,478</u>	<u>55,047</u>			<u>520,525</u>	<u>12.78%</u>	
<b>Totals</b>	<b>3,145,026</b>	<b>328,987</b>	<b>550,400</b>	<b>48,339</b>	<b>4,072,752</b>	<b>100%</b>	
%	77.2%	8.1%	13.5%	1.2%	100%		
<b>Salaries ( 728,873)</b>							
Direct: (289,288) = 79% of direct time	240,724	23,220	0	25,344	289,288	40%	
Direct: not direct to serve the client =21%	75,555	0	0	0	75,555	10%	
Indirect: (364,030) (distributed according to revenue	<u>281,108</u>	<u>29,405</u>	<u>49,196</u>	<u>4,321</u>	<u>364,030</u>	<u>50%</u>	
<b>Sub-Total</b>	<b>597,387</b>	<b>52,625</b>	<b>49,196</b>	<b>29,665</b>	<b>728,873</b>	<b>100%</b>	
%	82%	7%	7%	4%	100%		



**Table: 2/2**  
**RCT/ Non-USAID Pop IV Activities**  
**(1999/2000)**

Expenses	Training/Others		Training/IIIE/MSH		WorkShops		Others	
	Direct	Indirect	Direct	Indirect	Direct	Indirect		
Jul-99	0.00	0.00			0.00	0.00		
Aug-99	0.00	0.00			0.00	0.00		
Sep-99	5,781.25	0.40			0.00	0.00		
Oct-99	4,985.00				0.00	0.00		
Nov-99		0.40			0.00	0.00		
Dec-99	2,000.00				0.00	0.00		
Jan-00	28,755.00	738.90			0.00	0.00		
Feb-00	78,750.80		4,940.00		0.00	0.00		
Mar-00	27,515.00		20,067.50		0.00	0.00		
Apr-00	12,940.00	1,100.00	49,041.50		0.00	0.00		
May-00	68,524.35				0.00	0.00		
Jun-00	33,715.00	943.00	97,570.00		0.00	0.00		
<b>Total</b>	<b>262,966.40</b>	<b>2,782.70</b>	<b>171,619.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>		

Revenues	Training/Others		Training/IIIE/MSH		WorkShops		Others	
	LE	US\$	LE	US\$	LE	US\$	LE	US\$
Jul-99		2,400.00			46,590.00		120.00	
Aug-99					1,537.00			
Sep-99	46,800.00				750.00			
Oct-99	23,400.00							
Nov-99	440.00				6,170.00			
Dec-99		1,190.00						
Jan-00	53,955.00							
Feb-00	104,313.00							
Mar-00	26,768.00							
Apr-00	28,680.00							
May-00	131,242.00							
Jun-00	37,680.00			80,564.00				
<b>Total</b>	<b>453,278.00</b>	<b>3,590.00</b>	<b>0.00</b>	<b>80,564.00</b>	<b>55,047.00</b>	<b>0.00</b>	<b>120.00</b>	<b>0.00</b>



**Table : 2/3/1**  
**RCT/USAID Pop IV Activities - Training**  
**(1999/2000)**

Training Course	Training week (99/00)	Number of			Folders	Stationery	Training Supplies	Perdiem	Coffee break	Out-speakers	Total		
		In	Out	Total							Exp	Revenue	Diff
<b>Multiscope</b>	<b>10</b>	<b>9</b>	<b>148</b>	<b>157</b>	<b>6,700.00</b>	<b>1,889.00</b>	<b>0.00</b>	<b>97,505.00</b>	<b>5,950.75</b>	<b>3,440.00</b>	<b>115,484.75</b>	<b>255,545.00</b>	<b>140,060.25</b>
<b>Service Providers</b>	<b>20</b>	<b>3</b>	<b>137</b>	<b>140</b>	<b>15,847.25</b>	<b>3,778.00</b>	<b>390.00</b>	<b>186,405.00</b>	<b>10,501.80</b>	<b>12,800.00</b>	<b>229,722.05</b>	<b>499,400.00</b>	<b>269,677.95</b>
<b>Early detection</b>	<b>12</b>	<b>52</b>	<b>108</b>	<b>160</b>	<b>10,353.50</b>	<b>2,266.80</b>	<b>0.00</b>	<b>76,935.00</b>	<b>6,636.50</b>	<b>14,700.00</b>	<b>110,891.80</b>	<b>236,800.00</b>	<b>125,908.20</b>
<b>TOT -Phy</b>	<b>16</b>	<b>5</b>	<b>52</b>	<b>57</b>	<b>8,337.50</b>	<b>4,012.30</b>	<b>390.00</b>	<b>145,130.00</b>	<b>7,549.50</b>	<b>5,200.00</b>	<b>170,619.30</b>	<b>391,540.00</b>	<b>220,920.70</b>
<b>Infertility</b>	<b>13</b>	<b>42</b>	<b>133</b>	<b>175</b>	<b>7,007.40</b>	<b>2,455.70</b>	<b>772.25</b>	<b>92,208.50</b>	<b>6,622.80</b>	<b>14,600.00</b>	<b>123,666.65</b>	<b>273,875.00</b>	<b>150,208.35</b>
<b>Infertile couples - Counseling</b>	<b>5</b>	<b>7</b>	<b>52</b>	<b>59</b>	<b>3,404.58</b>	<b>944.50</b>	<b>0.00</b>	<b>34,160.00</b>	<b>2,431.55</b>	<b>6,100.00</b>	<b>47,040.63</b>	<b>100,300.00</b>	<b>53,259.37</b>
<b>Lab Tech.</b>	<b>8</b>	<b>16</b>	<b>44</b>	<b>60</b>	<b>2,740.00</b>	<b>1,511.50</b>	<b>0.00</b>	<b>67,675.00</b>	<b>4,837.90</b>	<b>18,050.00</b>	<b>94,814.40</b>	<b>193,820.00</b>	<b>99,005.60</b>
<b>Ob/Gyn Specialist</b>	<b>2</b>	<b>4</b>	<b>14</b>	<b>18</b>	<b>2,248.25</b>	<b>377.80</b>	<b>1,110.00</b>	<b>19,815.00</b>	<b>1,347.10</b>	<b>1,000.00</b>	<b>25,898.15</b>	<b>56,980.00</b>	<b>31,081.85</b>
<b>Management</b>	<b>10</b>	<b>18</b>	<b>43</b>	<b>61</b>	<b>8,714.85</b>	<b>188.90</b>	<b>1,420.00</b>	<b>61,560.00</b>	<b>7,514.14</b>	<b>3,800.00</b>	<b>83,197.89</b>	<b>169,970.00</b>	<b>86,772.11</b>
<b>RTI's</b>	<b>3</b>	<b>5</b>	<b>32</b>	<b>37</b>	<b>2,895.00</b>	<b>586.70</b>	<b>2,600.00</b>	<b>21,425.00</b>	<b>1,458.10</b>	<b>1,800.00</b>	<b>30,744.80</b>	<b>61,785.00</b>	<b>31,040.20</b>
<b>HRT</b>	<b>5</b>	<b>5</b>	<b>60</b>	<b>65</b>	<b>3,730.50</b>	<b>941.50</b>	<b>6,400.00</b>	<b>38,685.00</b>	<b>2,613.40</b>	<b>6,200.00</b>	<b>58,570.40</b>	<b>112,325.00</b>	<b>53,754.60</b>
<b>RH</b>	<b>3</b>	<b>4</b>	<b>30</b>	<b>34</b>	<b>3,676.75</b>	<b>566.70</b>	<b>0.00</b>	<b>19,620.00</b>	<b>1,560.90</b>	<b>3,300.00</b>	<b>28,724.35</b>	<b>53,290.00</b>	<b>24,565.65</b>
<b>Total</b>	<b>107</b>	<b>170</b>	<b>853</b>	<b>1023</b>	<b>75,655.58</b>	<b>19,499.40</b>	<b>13,082.25</b>	<b>861,123.50</b>	<b>59,024.44</b>	<b>90,990.00</b>	<b>1,119,375.17</b>	<b>2,405,630.00</b>	<b>1,286,254.83</b>
											<b>236,107.00</b>		
											<b>173,473.00</b>		
											<b>1,528,955.17</b>		

**Table : 2/3/1/1**  
**RCT Training Courses**  
**USAID Approved Price for Courses Conducted at RCT**  
**(Didactic only Clinical and Didactic Courses)**

	<u>Didactic</u>		<u>Clinical &amp; Didactic</u>	
	<u>Inside</u>	<u>Outside</u>	<u>Inside</u>	<u>Outside</u>
Training materials & supplies	120	120	120	120
Clinical supplies	0	0	50	50
Perdiem (LE 25 X 6 days)	150	150	150	150
Coffee breaks ( LE 10 X 6 days)	60	60	60	60
Trainers's fees (LE 60 X 42 heures/ 14 participants) & (LE 100 X 7 heures /14 participants)	180	180	230	230
Other variable cost	30	30	30	30
Indirect costs	145	145	165	165
Lodging and meals (LE 120 X 7 days)		840		840
Transportation		50		50
Indirect costs		110		110
<b>Total</b>	<b>685</b>	<b>1685</b>	<b>805</b>	<b>1805</b>

Table : 2/3/2

RCT/USAID Pop IV Activities - NORPLANT Training  
(1999/2000)

University	Physicians											Nurses										
	Period/ week	# of courses	Number of Trainees			Folders	Paid to Univ	Perdlem	Total Exp	Revenue	Diff	Period/ week	# of courses	Number of Trainees			Folders	Paid to Univ	Perdlem	Total Exp	Revenue	Diff
			In	Out	Total									In	Out	Total						
In Shams	1	10	18	37	55	6,698.75	55,465.00	0.00	62,163.75	83,995.00	21,831.25	1	5	21	31	52	2,993.00	41,435.00	0.00	44,428.00	58,685.00	14,257
Azhar	1	4	3	18	21	2,228.75	23,135.00	0.00	25,363.75	34,530.00	9,166.25	1	5	5	43	48	2,969.00	42,900.00	0.00	45,869.00	63,305.00	17,436
Iansoura	1	9	3	42	45	5,622.50	49,725.00	1,380.00	56,727.50	76,170.00	19,442.50	1	3	2	27	29	1,722.00	26,650.00	495.00	28,867.00	38,895.00	10,028
Assiut	1	7	0	33	33	4,098.75	37,455.00	1,620.00	43,173.75	57,255.00	14,081.25	1	5	2	35	37	2,519.00	34,250.00	1,380.00	38,149.00	49,975.00	11,826
Alex	1	8	25	21	46	5,528.25	40,960.00	2,190.00	48,878.25	64,740.00	16,081.75	1	2	12	10	22	0.00	15,500.00	660.00	16,160.00	22,850.00	6,690
<b>Total</b>		<b>38</b>	<b>49</b>	<b>151</b>	<b>200</b>	<b>24,177.00</b>	<b>206,740.00</b>	<b>5,190.00</b>	<b>236,107.00</b>	<b>316,690.00</b>	<b>80,583.00</b>		<b>20</b>	<b>42</b>	<b>148</b>	<b>188</b>	<b>10,203.00</b>	<b>160,735.00</b>	<b>2,535.00</b>	<b>173,473.00</b>	<b>233,710.00</b>	<b>60,237</b>

**Table : 2/3/2/1**  
**RCT Norplant Training**  
**USAID Approved Price for Norplant Course Conducted at Universities**  
**(Clinical Didactic)**  
**(2000/2001)**

	<u>Physicians</u>		<u>Nurses</u>		<u>Refresher Course</u>	
	<u>Inside</u>	<u>Outside</u>	<u>Inside</u>	<u>Outside</u>	<u>Inside</u>	<u>Outside</u>
<b>Norplant</b>						
Training materials	190	190	90	90	190	190
Training supplies			20	20		
Clinical supplies	35	35	50	50	35	35
Perdiem (LE 25 X 6 days)	150	150	150	150	150	150
Coffee breaks ( LE 10 X 6 days)	60	60	60	60	60	60
Trainers's fees (LE 55 X 40 heures/ 6 participants)	440	440	220	220	440	440
Indirect costs	225	225	160	160	225	225
Lodging and meals (LE 75 X 6 days)		450		450		450
Transportation		50		50		50
Indirect costs		135		135		135
<b>Total</b>	<b>1,100</b>	<b>1,735</b>	<b>750</b>	<b>1,385</b>	<b>1,100</b>	<b>1,735</b>

Table : 2/3/3

1999/2000 RCT/USAID Pop IV Activities - Workshops

Accomodations	Stationery	Transportation	Travel	Bags	Total Exp	Revenue	Diff
52,875.50	1,269.50	4,600.00	19,346.00	2,550.00			
40,932.00	2,975.00	270.00		420.00			
6,910.00				2,800.00			
31,928.33							
40,624.00							
173,269.83	4,244.50	4,870.00	19,346.00	5,770.00	207,500.33	273,940.00	66,439.67
<b>4 conferences:</b>		<b>From</b>	<b>To</b>				
Annual Conference 98/99		July 15, 1999	July 17, 1999				
New graduted Conference		Oct 21, 1999	Oct 22, 1999				
Training requirments		May 03, 2000	May 05, 2000				
Annual Conference 99/2000		June 21, 2000	June 22, 2000				

**Table : 3**  
**Direct and Indirect Salary Distributed on Activities**  
**(1999/2000)**

<b>Direct Salaries for FY 99-2000</b>				
	<b>Total Salaries</b>	<b>%</b>	<b>Distribution</b>	
Training USAID		55%	202,208	107 training weeks
Training IIE		1%	2,656	2 training weeks
Training Others		10%	35,860	27 training weeks
Workshops		6%	23,220	[ It is estimated that 4 trainers spend 1/2 month planning & conducting a workshop, salaries of 4 trainers/month = approx LE11,610 (10,555 *10%) /2 =LE5,805 *4 workshops = 23,220]
Follow-Up visits		7%	25,344	[ It is estimated that 68% (78/114) of the follow-up visits will require 2-days of a trainer's time (78X2=156, 36X1=36) (192/114=1.68 days) (1.68X114XLE132/day=LE25,344)]
Sub-total		79%	289,288	<b>Note: Total direct staff is LE 364,030, total Non-Training direct staff = 48,564 (23,220 + 25,344). Total Training direct staff = 316,279 (240,724 + 75,555). Total training staff = 316,279 * 137/180 = 240,724</b>
Not used Direct Time		21%	75,555	
	364,843		364,843	
General & admin	364,030	100%	364,030	
	728,873		728,873	

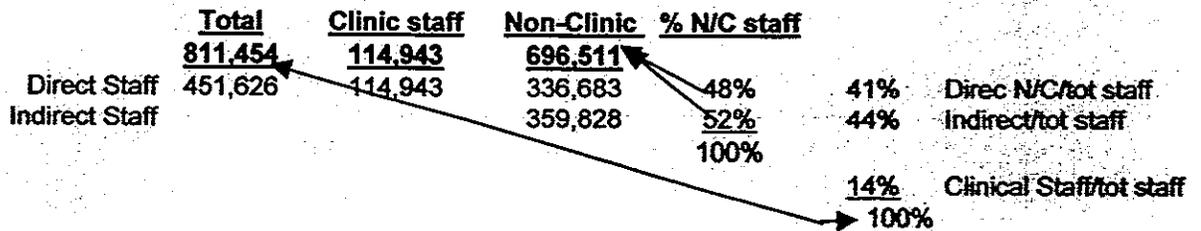
**RCT Staff Direct and Indirect Salary  
(1999/2000)**

<b>RCT Salaries</b>						
<b>Position</b>	<b>Monthly salary</b>	<b>Annual salary</b>	<b>Direct Staff</b>		<b>Indirect Staff</b>	
			<b>%</b>	<b>LE</b>	<b>%</b>	<b>LE</b>
1 Exec. dir	4,917.00	63,921.00	20%	12,784.20	80%	51,136.80
2 Dep. Exec dir	4,130.00	53,690.00	75%	40,267.50	25%	13,422.50
3 Head of Admin & Fin	3,674.00	47,762.00	25%	11,940.50	75%	35,821.50
4 Head of out-patient clinic	2,700.00	35,100.00	100%	35,100.00		
5 Phy. Trainer	1,500.00	14,625.00	100%	14,625.00		
6 Phy. Trainer	1,500.00	13,125.00	100%	13,125.00		
8 Phy. Trainer - open	2,500.00	30,000.00	100%	30,000.00		
9 Nurse Trainer	2,505.00	10,020.00	100%	10,020.00		
10 Nurse Trainer	2,400.00	21,000.00	100%	21,000.00		
11 Computer Operator	1,584.00	20,592.00	90%	18,532.80	10%	2,059.20
12 Chief accountant	2,505.00	32,565.00			100%	32,565.00
13 Cost accountant	2,299.00	29,887.00			100%	29,887.00
14 Accountant	1,843.00	23,959.00			100%	23,959.00
15 Admin assist	2,090.00	27,170.00			100%	27,170.00
16 Store keeper	1,350.00	17,550.00			100%	17,550.00
17 Exec. Secretary	1,898.00	24,674.00			100%	24,674.00
18 Secretary	1,843.00	23,959.00	100%	23,959.00	0%	0.00
19 Secretary	1,350.00	17,550.00	50%	8,775.00	50%	8,775.00
20 Secretary	1,656.00	21,528.00	25%	5,382.00	75%	16,146.00
21 Janitor	440.00	5,720.00	75%	4,290.00	25%	1,430.00
22 Janitor	473.00	6,149.00	75%	4,611.75	25%	1,537.25
23 Janitor	450.00	5,850.00	75%	4,387.50	25%	1,462.50
24 Driver	600.00	7,800.00	10%	780.00	90%	7,020.00
25 Outpatient clin. Sup.	2,650.00	34,450.00	100%	34,450.00		0.00
26 Outpatient clin. Phy (8)	4,000.00	52,000.00	100%	52,000.00		0.00
27 Outpatient clin. Nurse	347.00	4,511.00	100%	4,511.00		0.00
28 Outpatient clin. Nurse	347.00	4,511.00	100%	4,511.00		0.00
29 Outpatient clin. Nurse	347.00	4,511.00	100%	4,511.00		0.00
30 Clinic Secretary	347.00	4,511.00	100%	4,511.00		0.00
31 Marketing Specialist - open	2,500.00	30,000.00		0.00	100%	30,000.00
<b>Totals</b>	<b>56,745.00</b>	<b>688,690.00</b>		<b>364,074.25</b>		<b>324,615.75</b>

	<b>Total</b>	<b>Clinic staff</b>	<b>Non-Clinic</b>	<b>% N/C staff</b>	
Direct Staff	<u>688,690</u>	<u>104,494</u>	<u>584,196</u>	45%	39% Direc N/C/tot staff
Indirect Staff	364,074	104,494	259,580	55%	47% Indirect/tot staff
			324,616	100%	14% Clinical Staff/tot staff
					100%

**RCT Salaries: 2000/2001**

Position	Monthly salary	Annual salary	Direct Staff		Indirect Staff	
			%	LE	%	LE
1 Exec. dir	4,917.00	70,313.10	20%	14,062.62	80%	56,250.48
2 Dep. Exec dir	4,130.00	59,059.00	75%	44,294.25	25%	14,764.75
3 Head of Admin & Fin	3,674.00	52,538.20	25%	13,134.55	75%	39,403.65
4 Head of out-patient clinic	2,700.00	38,610.00	100%	38,610.00		
5 Phy. Trainer	1,500.00	21,450.00	100%	21,450.00		
6 Phy. Trainer	1,500.00	21,450.00	100%	21,450.00		
8 Phy. Trainer - open	2,500.00	35,750.00	100%	35,750.00		
9 Nurse Trainer	2,505.00	35,821.50	100%	35,821.50		
10 Nurse Trainer	2,400.00	34,320.00	100%	34,320.00		
11 Computer Operator	1,584.00	22,651.20	90%	20,386.08	10%	2,265.12
12 Chief accountant	2,505.00	35,821.50			100%	35,821.50
13 Cost accountant	2,299.00	32,875.70			100%	32,875.70
14 Accountant	1,843.00	26,354.90			100%	26,354.90
15 Admin assist	2,090.00	29,887.00			100%	29,887.00
16 Store keeper	1,350.00	19,305.00			100%	19,305.00
17 Exec. Secretary	1,898.00	27,141.40			100%	27,141.40
18 Secretary	1,843.00	26,354.90	100%	26,354.90	0%	0.00
19 Secretary	1,350.00	19,305.00	50%	9,652.50	50%	9,652.50
20 Secretary	1,656.00	23,680.80	25%	5,920.20	75%	17,760.60
21 Janitor	440.00	6,292.00	75%	4,719.00	25%	1,573.00
22 Janitor	473.00	6,763.90	75%	5,072.93	25%	1,690.98
23 Janitor	450.00	6,435.00	75%	4,826.25	25%	1,608.75
24 Driver	600.00	8,580.00	10%	858.00	90%	7,722.00
25 Outpatient clin. Sup.	2,650.00	37,895.00	100%	37,895.00		0.00
26 Outpatient clin. Phy (8)	4,000.00	57,200.00	100%	57,200.00		0.00
27 Outpatient clin. Nurse	347.00	4,962.10	100%	4,962.10		0.00
28 Outpatient clin. Nurse	347.00	4,962.10	100%	4,962.10		0.00
29 Outpatient clin. Nurse	347.00	4,962.10	100%	4,962.10		0.00
30 Clinic Secretary	347.00	4,962.10	100%	4,962.10		0.00
31 Marketing Specialist - open	2,500.00	35,750.00		0.00	100%	35,750.00
<b>Totals</b>	<b>56,745.00</b>	<b>811,453.50</b>		<b>451,626.18</b>		<b>359,827.33</b>



**RCT Salaries: 2001/2002**

Position	Monthly		Direct Staff		Indirect Staff	
	salary	Annual salary	%	LE	%	LE
1 Exec. dir	5,407.70	77,330.11	20%	15,466.02	80%	61,864.09
2 Dep. Exec dir	4,543.00	64,964.90	75%	48,723.68	25%	16,241.22
3 Head of Admin & Fin	4,041.40	57,792.02	25%	14,448.01	75%	43,344.01
4 Head of out-patient clinic	2,970.00	42,471.00	100%	42,471.00		
5 Phy. Trainer	1,650.00	23,595.00	100%	23,595.00		
6 Phy. Trainer	1,650.00	23,595.00	100%	23,595.00		
8 Phy. Trainer - open	2,750.00	39,325.00	100%	39,325.00		
9 Nurse Trainer	2,755.50	39,403.65	100%	39,403.65		
10 Nurse Trainer	2,640.00	37,752.00	100%	37,752.00		
11 Computer Operator	1,742.40	24,916.32	90%	22,424.69	10%	2,491.63
12 Chief accountant	2,755.50	39,403.65			100%	39,403.65
13 Cost accountant	2,528.90	36,163.27			100%	36,163.27
14 Accountant	2,027.30	28,990.39			100%	28,990.39
15 Admin assist	2,299.00	32,875.70			100%	32,875.70
16 Store keeper	1,485.00	21,235.50			100%	21,235.50
17 Exec. Secretary	2,087.80	29,855.54			100%	29,855.54
18 Secretary	2,027.30	28,990.39	100%	28,990.39	0%	0.00
19 Secretary	1,485.00	21,235.50	50%	10,617.75	50%	10,617.75
20 Secretary	1,821.60	26,048.88	25%	6,512.22	75%	19,536.66
21 Janitor	484.00	6,921.20	75%	5,190.90	25%	1,730.30
22 Janitor	520.30	7,440.29	75%	5,580.22	25%	1,860.07
23 Janitor	495.00	7,078.50	75%	5,308.88	25%	1,769.62
24 Driver	660.00	9,438.00	10%	943.80	90%	8,494.20
25 Outpatient clin. Sup.	2,915.00	41,684.50	100%	41,684.50		0.00
26 Outpatient clin. Phy (8)	4,400.00	62,920.00	100%	62,920.00		0.00
27 Outpatient clin. Nurse	381.70	5,458.31	100%	5,458.31		0.00
28 Outpatient clin. Nurse	381.70	5,458.31	100%	5,458.31		0.00
29 Outpatient clin. Nurse	381.70	5,458.31	100%	5,458.31		0.00
30 Clinic Secretary	381.70	5,458.31	100%	5,458.31		0.00
31 Marketing Specialist - open	2,750.00	39,325.00		0.00	100%	39,325.00
<b>Totals</b>	<b>62,418.50</b>	<b>892,584.55</b>		<b>496,785.93</b>		<b>395,798.62</b>

	<u>Total</u>	<u>Clinic staff</u>	<u>Non-Clinic</u>	<u>% N/C staff</u>	
Direct Staff	496,786	126,438	370,348	48%	41% Direc N/C/tot staff
Indirect Staff			395,799	52%	44% Indirect/tot staff
				100%	
					14% Clinical Staff/tot staff
					100%

Table: 3/1/3

**RCT Salaries: 2002/2003**

Position	Monthly		Direct Staff		Indirect Staff	
	salary	Annual salary	%	LE	%	LE
1 Exec. dir	5,948.47	85,063.12	20%	17,012.62	80%	68,050.5
2 Dep. Exec dir	4,997.30	71,461.39	75%	53,596.04	25%	17,865.3
3 Head of Admin & Fin	4,445.54	63,571.22	25%	15,892.81	75%	47,678.4
4 Head of out-patient clinic	3,267.00	46,718.10	100%	46,718.10		
5 Phy. Trainer	1,815.00	25,954.50	100%	25,954.50		
6 Phy. Trainer	1,815.00	25,954.50	100%	25,954.50		
8 Phy. Trainer - open	3,025.00	43,257.50	100%	43,257.50		
9 Nurse Trainer	3,031.05	43,344.02	100%	43,344.02		
10 Nurse Trainer	2,904.00	41,527.20	100%	41,527.20		
11 Computer Operator	1,916.64	27,407.95	90%	24,667.16	10%	2,740.8
12 Chief accountant	3,031.05	43,344.02			100%	43,344.0
13 Cost accountant	2,781.79	39,779.60			100%	39,779.6
14 Accountant	2,230.03	31,889.43			100%	31,889.4
15 Admin assist	2,528.90	36,163.27			100%	36,163.2
16 Store keeper	1,633.50	23,359.05			100%	23,359.0
17 Exec. Secretary	2,296.58	32,841.09			100%	32,841.0
18 Secretary	2,230.03	31,889.43	100%	31,889.43	0%	0.0
19 Secretary	1,633.50	23,359.05	50%	11,679.53	50%	11,679.5
20 Secretary	2,003.76	28,653.77	25%	7,163.44	75%	21,490.3
21 Janitor	532.40	7,613.32	75%	5,709.99	25%	1,903.3
22 Janitor	572.33	8,184.32	75%	6,138.24	25%	2,046.0
23 Janitor	544.50	7,786.35	75%	5,839.76	25%	1,946.5
24 Driver	726.00	10,381.80	10%	1,038.18	90%	9,343.6
25 Outpatient clin. Sup.	3,206.50	45,852.95	100%	45,852.95		0.0
26 Outpatient clin. Phy (8)	4,840.00	69,212.00	100%	69,212.00		0.0
27 Outpatient clin. Nurse	419.87	6,004.14	100%	6,004.14		0.0
28 Outpatient clin. Nurse	419.87	6,004.14	100%	6,004.14		0.0
29 Outpatient clin. Nurse	419.87	6,004.14	100%	6,004.14		0.0
30 Clinic Secretary	419.87	6,004.14	100%	6,004.14		0.0
31 Marketing Specialist - open	3,025.00	43,257.50		0.00	100%	43,257.5
<b>Totals</b>	<b>68,660.35</b>	<b>981,843.01</b>		<b>546,464.53</b>		<b>435,378.4</b>

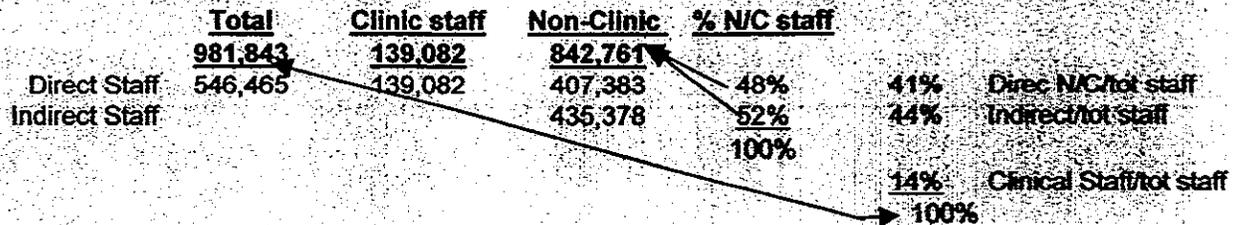


Table : 3/2

Detailed Follow-Up visits' cost From July 1, 1999 to June 30, 2000										
Categories of Governorates	Governorates	# of visits	Travel Cost	Lodging	Meals	Internal Travel	Profes'l Fees	Visit Cost	Total Cost	
Group 1	1 Kalyobia	10	25		100	20	100	245	2450	
	2 Gharbia	8	25		100	20	100	245	1960	
	3 Menofia	6	25		100	20	100	245	1470	
	4 Sharkia	5	25		100	20	100	245	1225	
	5 Kafr Elshaikh	6	40	80	100	20	100	340	2040	
	6 Beni Suef	7	30		100	20	100	250	1750	
Group 2	7 Dakahlia	6	40	100	100	20	100	360	2160	
	8 Assuit	4	70	100	100	30	100	400	1600	
	9 Minia	6	60	140	100	20	100	420	2520	
	10 Sohag	5	80	100	100	30	100	410	2050	
	11 Behira	7	50	180	100	30	100	460	3220	
	12 Damiattaa	8	50	180	120	30	100	480	3840	
	13 Alex	7	50	180	120	30	100	480	3360	
	14 Port Said	4	50	180	100	20	100	450	1800	
Group 3	15 South Sinai							0	0	
	16 North Sinia	7	203	120	120	70	100	613	4291	
	17 Qena	6	223	180	140	70	100	713	4278	
	18 Aswan	5	303	180	140	70	100	793	3965	
	19 Luxor	1	223	180	140	70	100	713	713	
	20 Red Sea	4	191	180	120	70	100	661	2644	
	21 Mersa Matrouh	2	203	120	120	70	100	613	1226	
		114						9136	48562	

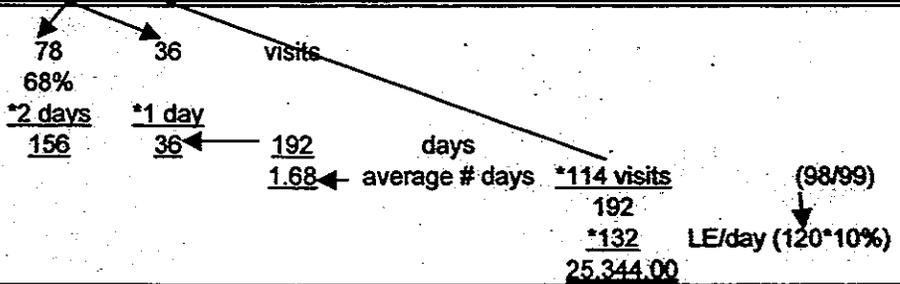


Table: 3/2/1

Detailed Follow-Up visits' cost										
From July 1, 2000 to June 30, 2001 (Projection)										
Categories of Governorates	Governorates	# of visits	Travel Cost	Lodging	Meals	Internal Travel	Profes'l Fees	Visit Cost	Total Cost	
Group 1	1 Giza	15	50			40	100	190	2,850	
	2 Kalyobia	6	50		180	40	100	370	2,220	
	3 Gharbia	6	50		180	40	100	370	2,220	
	4 Menofia	6	50		180	40	100	370	2,220	
	5 Sharkia	6	50		180	40	100	370	2,220	
	6 Beni Suef	6	50		180	40	100	370	2,220	
	7 Kafr Elshaikh	6	50	100	180	50	100	480	2,880	
	8 Fayoum	6	50	120	180	40	100	490	2,940	
Group 2	9 Dakahlia	6	50	100	180	40	100	470	2,820	
	10 Assuit	6	90	120	180	80	100	570	3,420	
	11 Minia	6	80	140	180	80	100	580	3,480	
	12 Sohag	6	100	100	180	80	100	560	3,360	
	13 Behira	6	80	180	180	50	100	590	3,540	
	14 Damiattaa	7	100	180	180	50	100	610	4,270	
	15 Alex	6	100	180	180	55	100	615	3,690	
	16 Port Said	6	100	180	180	50	100	610	3,660	
	17 Ismalia	6	50	100	180	50	100	480	2,880	
	18 Suez	6	50	100	180	50	100	480	2,880	
Group 3	19 South Sinai	10	287	180	180	100	100	847	8,470	
	20 North Sinia	5	235	180	180	70	100	765	3,825	
	21 Qena	6	259	180	180	100	100	819	4,914	
	22 Aswan	6	351	180	180	100	100	911	5,466	
	23 Luxor	6	259	180	180	100	100	819	4,914	
	24 New Valley	4	279	180	180	70	100	809	3,236	
	25 Red Sea	6	279	180	180	100	100	839	5,034	
	26 Mersa Matrouh	4	235	180	180	70	100	765	3,060	
									92,689	

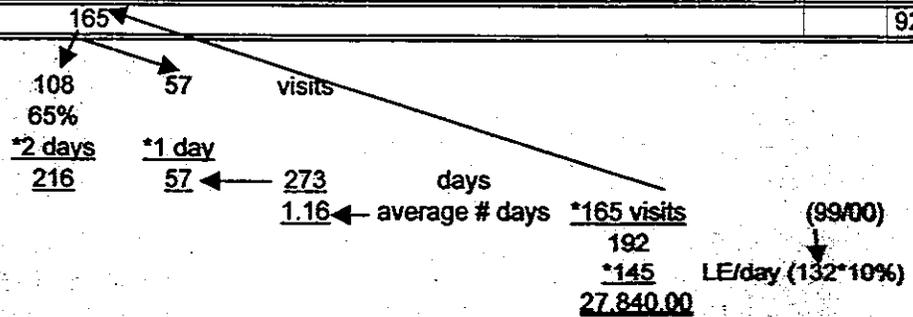


Table : 3/3

1999/2000 Actual Training Weeks Comparing to Total Number of Available Training Weeks during the year

RCT USAID-Activities	Period/ week	# of courses	Training weeks	Number of Trainees		
				In	Out	Total
<b>1) Training Activity</b>						
Multiscope	1	10	10	9	148	157
Service Providers	2	10	20	3	137	140
Early detection	1	12	12	52	108	160
TOT -Phy	4	4	16	5	52	57
Infertility	1	13	13	42	133	175
Infertile couples - Counseling	1	5	5	7	52	59
Lab Tech.	2	4	8	16	44	60
Ob/Gyn Specialist	2	1	2	4	14	18
Management	2	5	10	18	43	61
RTI's	1	3	3	5	32	37
HRT	1	5	5	5	60	65
RH	1	3	3	4	30	34
<b>Sub-Total</b>		<b>75</b>	<b>107</b>	<b>170</b>	<b>853</b>	<b>1023</b>
<b>2) Norplant</b>						
For Physicians	1	38		49	151	200
For Nurses	1	20		42	146	188
<b>Sub-Total</b>		<b>58</b>		<b>91</b>	<b>297</b>	<b>388</b>
<b>Total Training</b>		<b>133</b>		<b>261</b>	<b>1150</b>	<b>1411</b>
<b>3) Workshops</b>						
4 Conferences		4		50	247	297
<b>4) Follow-Up visits</b>						
114 visits to 20 governorates		114				

Total # of days/year	365	
(-) holidays	-13	
(-) month of Ramadan	-30	
(-) Fridays	-52	
# of days available	270	
# of weeks/year	45	
# of training rooms available	4	
Total # of training weeks/year	180	
USAID training weeks (99/00)	107	59%
Non-USAID training weeks (99/00)	29	16%
	136	76%

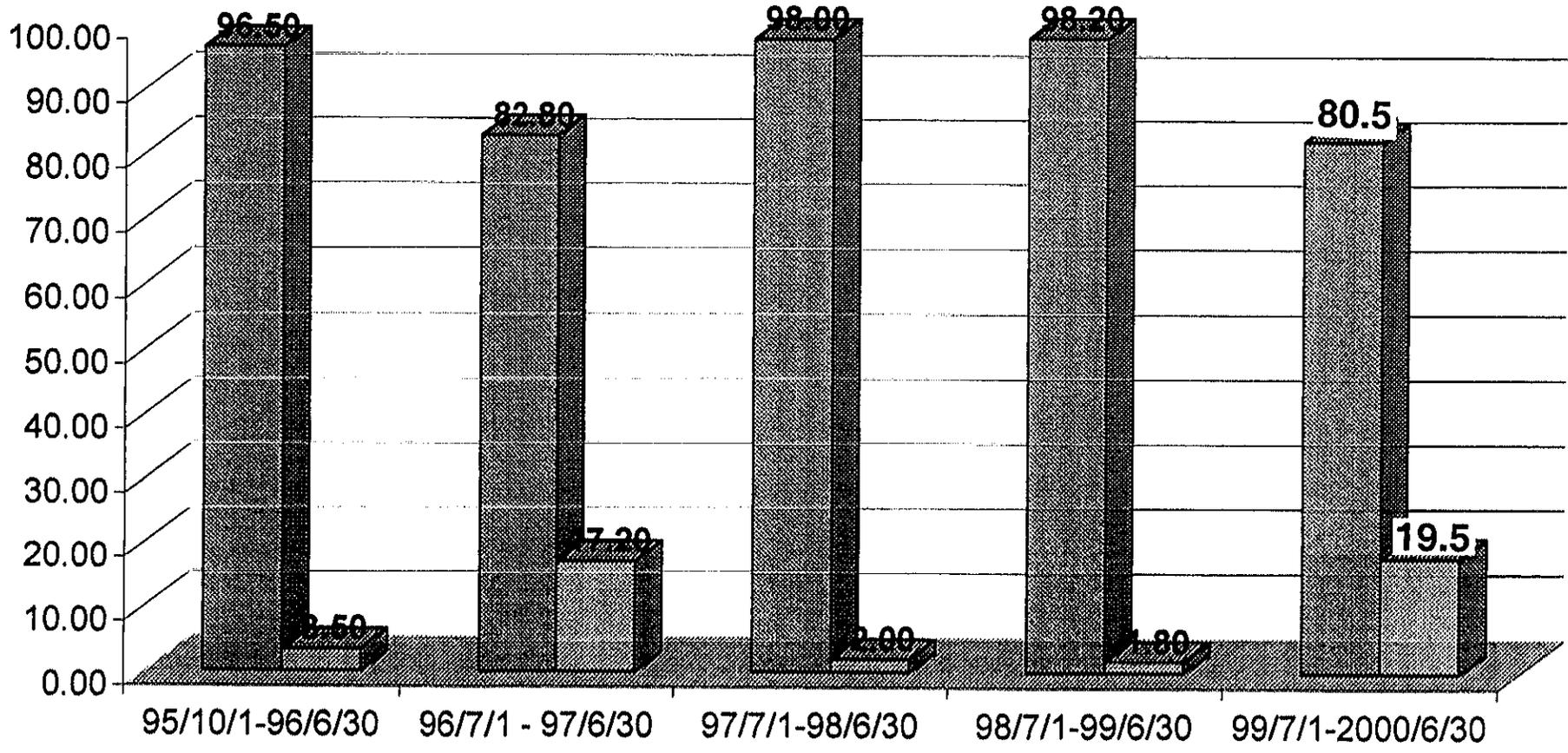
Table : 4  
 RCT Marketing Budget  
 2000/2001 - 2002/2003

Line-Item	<u>Sub-Total</u>	<u>Total</u>	<u>2000/2001</u>	<u>2001/2002</u>	<u>2002/2003</u>
Interim Brochure and Catalogue	10,000				
New Brochure and Catalogue (design & printing)	150,000				
Distribution	5,000				
Annual Report	10,000				
Market Survey					
1 week consultant (design)	5,000				
1 week consultant (evaluation)	5,000				
Distribution	5,000	15,000			
Consutant 60 days @ LE 1,000/day (performance base contract)	60,000	250,000	62,500	187,500	
Visits to CInents:					
Airfairs	40,000				
Perdiem	24,000	64,000		64,000	
Distribution	5,000				
Annual Report	10,000				
Marketing consultant 30 days @ LE 1,000/day	30,000				
Travel Expenses	30,000	75,000			75,000
<b>Totals</b>		<b>389,000</b>	<b>62,500</b>	<b>251,500</b>	<b>75,000</b>

**V. HISTORICAL MARKET SHARE OF BUSINESS**

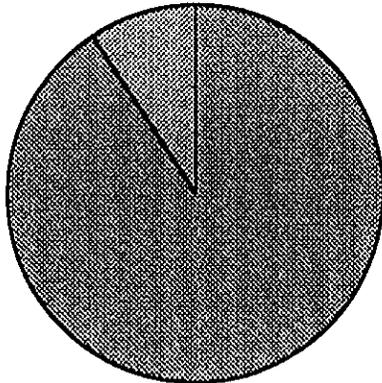
## Revenue Percentage USAID Fund Comparing to other Funds Period from 1/10/1995 to 30/6/2000

■ USAID ■ Others



**Revenue Percentage USAID Fund Comparing to other Funds  
Period from 1/10/95 to 30/6/2000**

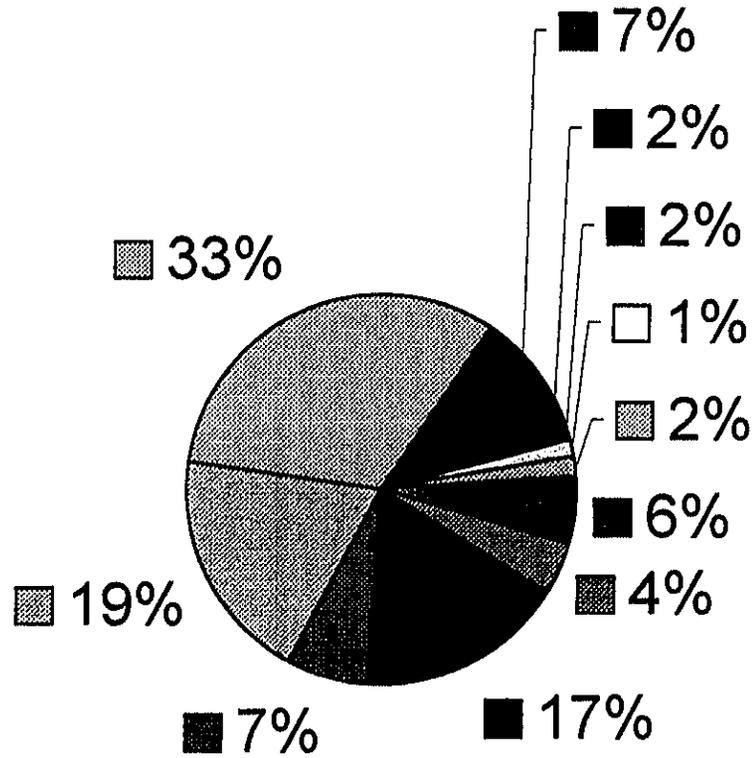
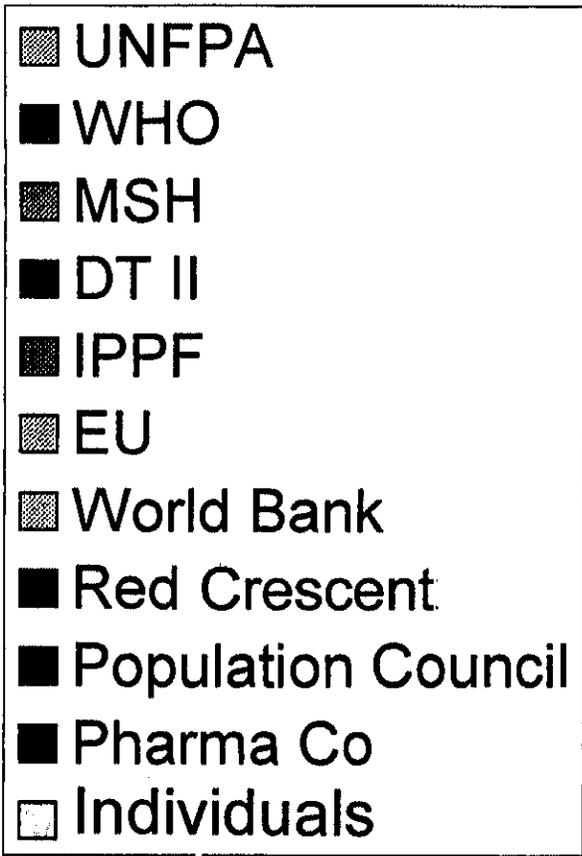
Others  
9%



USAID  
91%

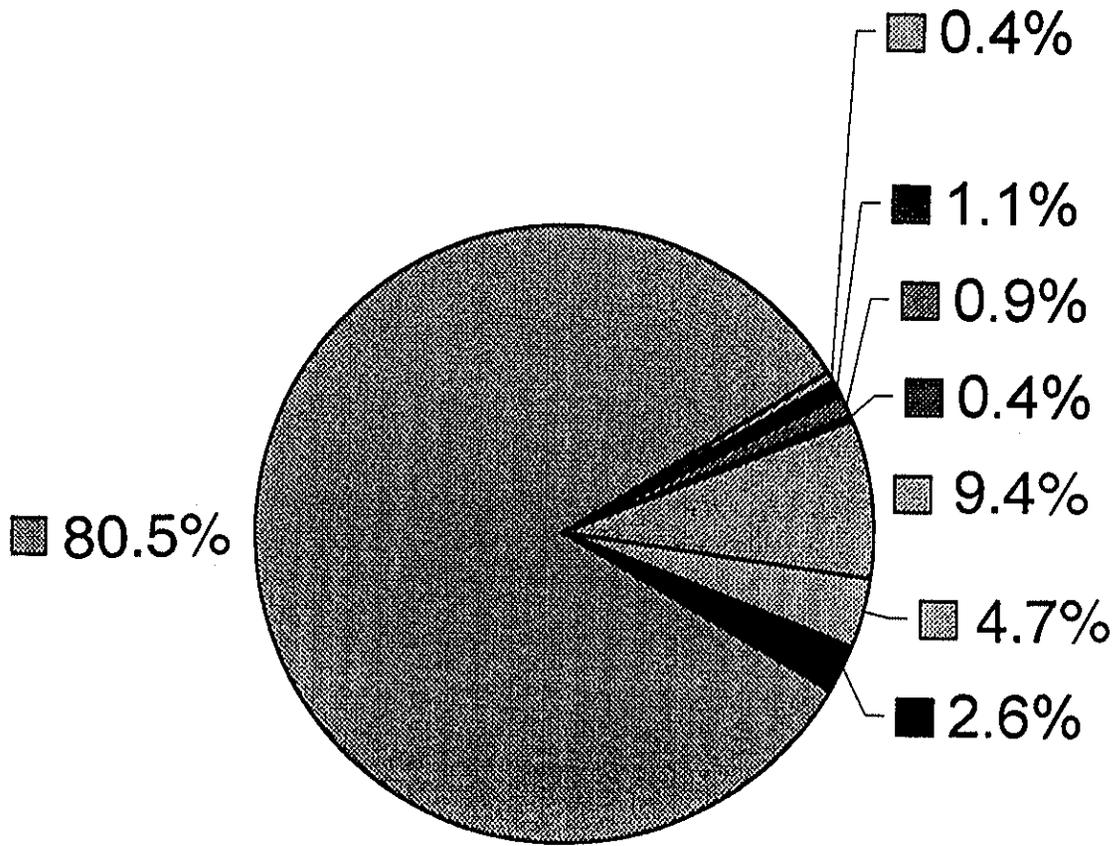


## Cumulative Percentage of Private Courses Fund Period from 1/10/95 to 30/6/2000

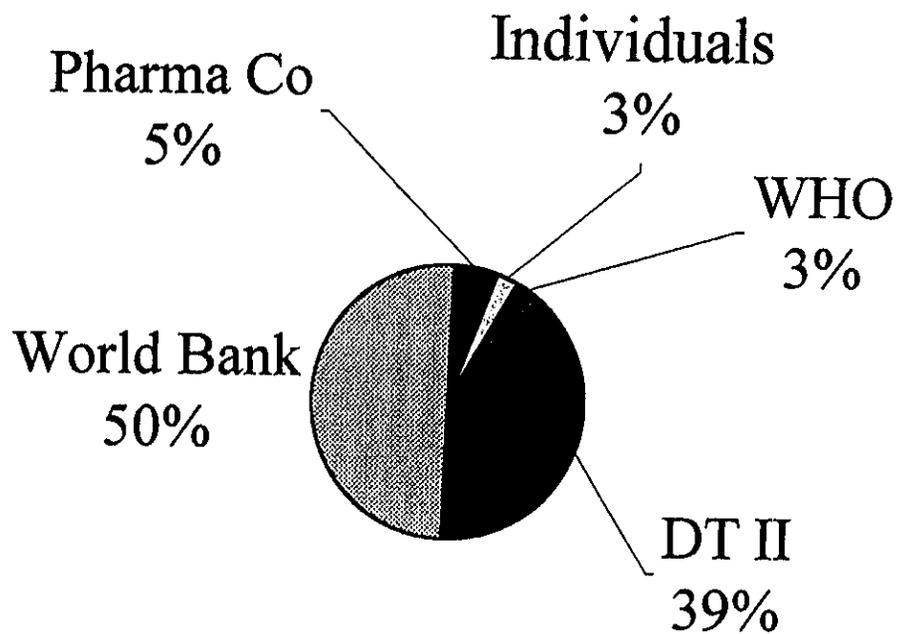


### Revenue Percentage USAID Fund Comparing to other Funds Period from 1/7/1999 to 30/6/2000

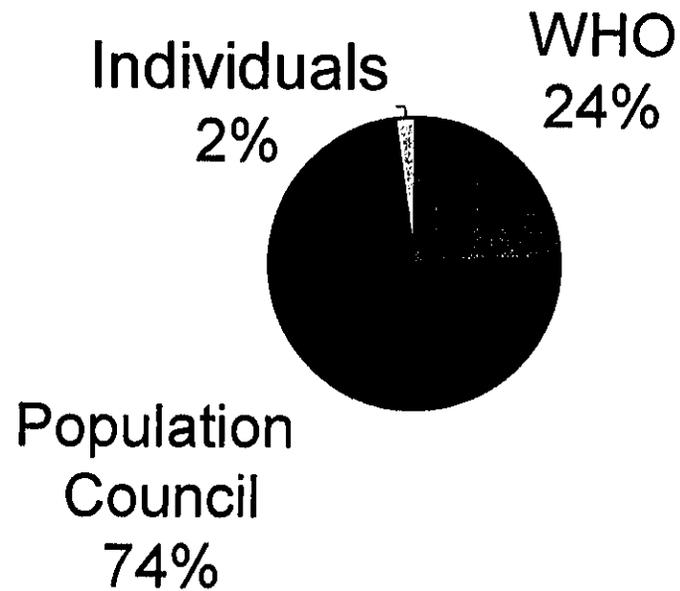
- USAID
- UNFPA
- WHO
- MSH
- IPPF
- EU
- World Bank
- Red Crescent



## Revenue Percentage of Private Courses Period from 1/7/99 to 30/6/2000

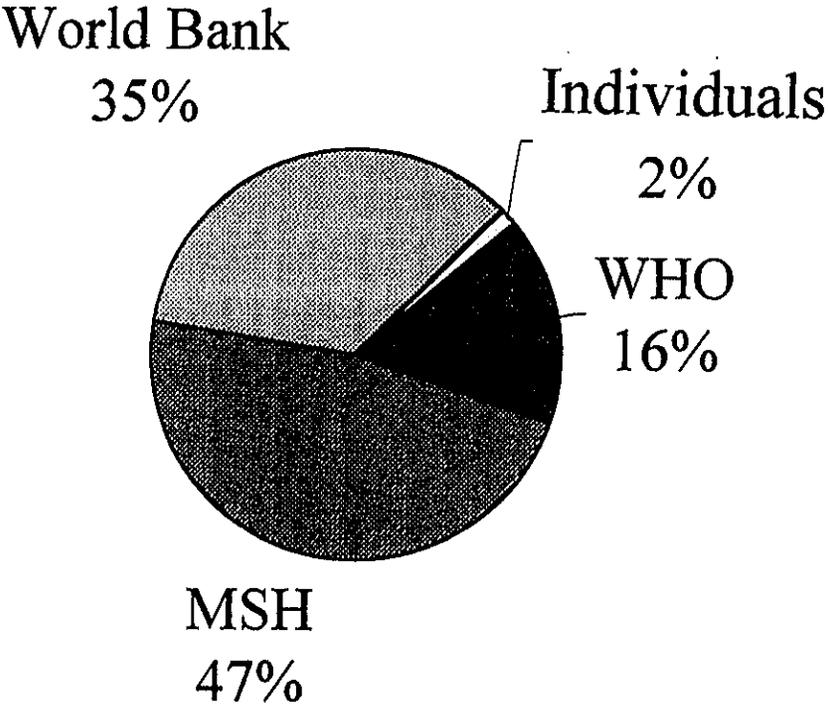


## Revenue Percentage of Private Courses Period from 1/7/98 to 30/6/1999

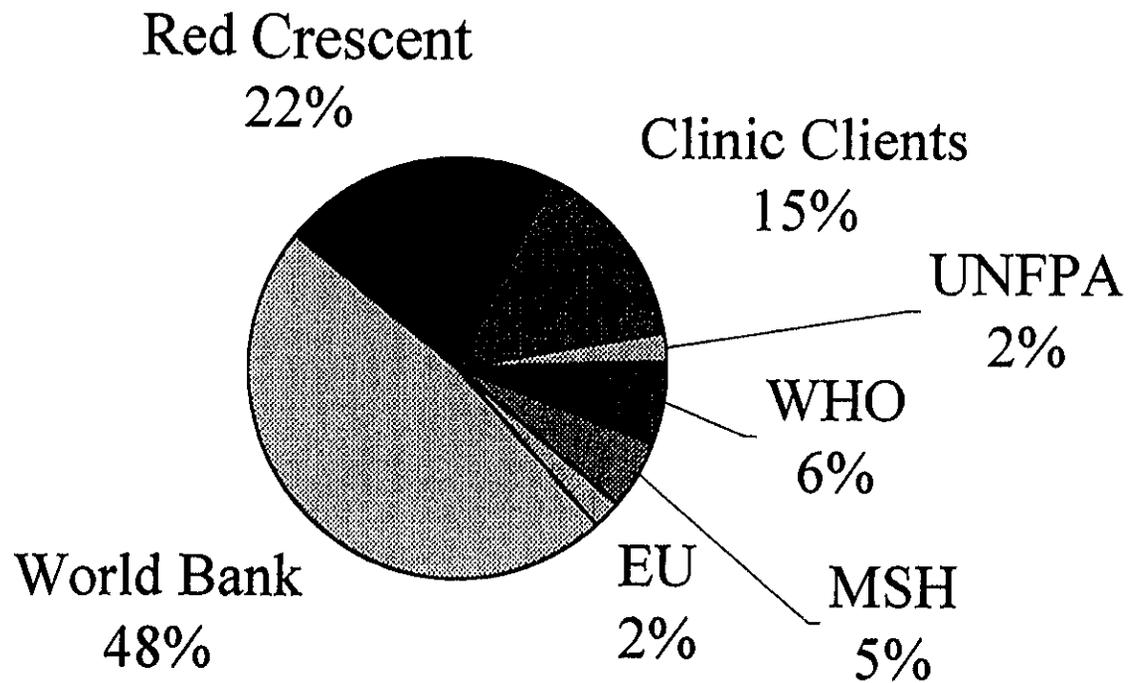


# Revenue Percentage of Private Courses Period from 1/7/97 to 30/6/1998

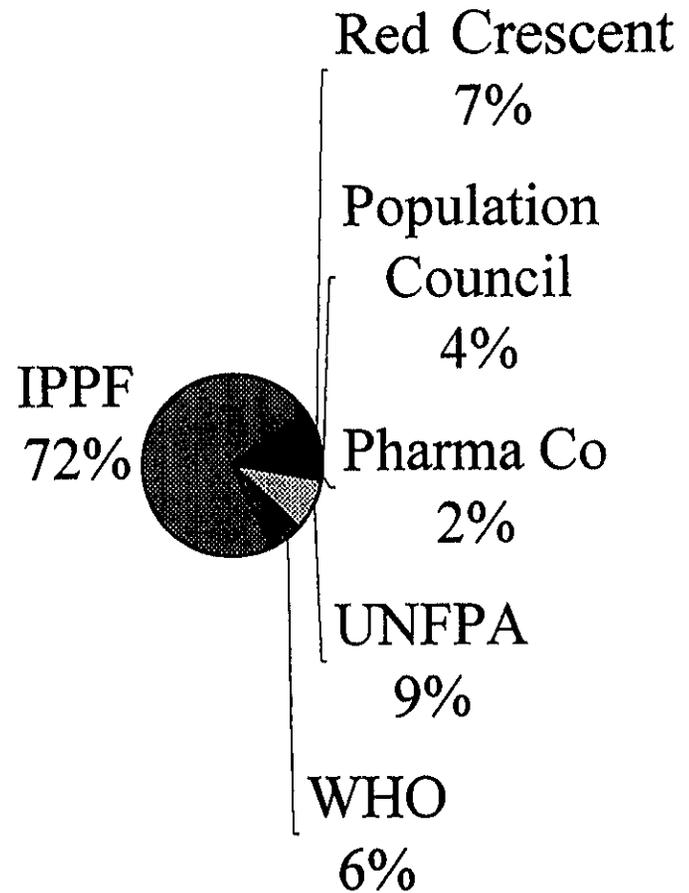
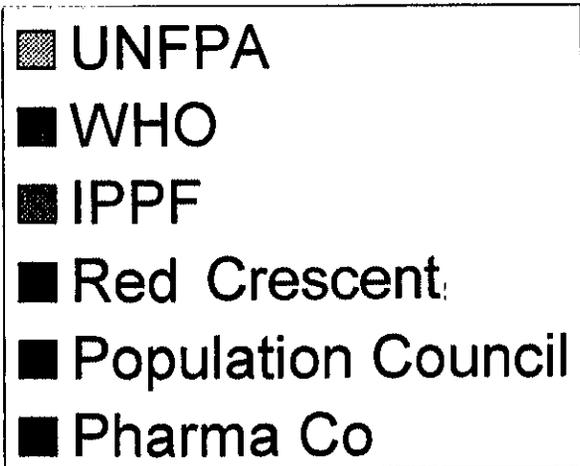
- WHO
- MSH
- World Bank
- Individuals



## Revenue Percentage of Private Courses Period from 1/7/96 to 30/6/1997



## Revenue Percentage of Private Courses Period from 1/10/95 to 30/6/1996



**VI. BUSINESS AND ORGANIZATIONAL DEVELOPMENT IMPLEMENTATION  
SCHEDULE**











