



Healthy Mother/Healthy Child Project

**Quarterly Performance
Monitoring Report
Option Period
Quarter Ten
January 1 – March 31, 2004**



John Snow, Inc.
Arabic Software Engineering (ArabSoft)
Clark Atlanta University
The Manoff Group, Inc.
TransCentury Associates

In collaboration with
The Ministry of Health and Population
Cairo, Egypt
and
USAID/Egypt
(Contract No. 263-C-00-98-00041-00)

April 15, 2004

TABLE OF CONTENTS

TABLE OF CONTENTS	I
LIST OF ANNEXES	II
LIST OF TABLES	III
ACRONYMS	V
INTRODUCTION	1
MAJOR EVENTS DURING THIS QUARTER	3
C.10.1 TASK ONE: BASIC PACKAGE OF ESSENTIAL SERVICES ESTABLISHED AND STANDARDS DEFINED	7
C.10.2 TASK TWO: PRE/ IN-SERVICE TRAINING SYSTEM DESIGNED TO DISSEMINATE STANDARDS TO PUBLIC AND PRIVATE PROVIDERS	13
C.10.3 TASK THREE: PUBLIC AND PRIVATE PROVIDER PARTNERSHIP WITH COMMUNITIES TO DEVELOP AND MANAGE DISTRICTS PLANS	27
C.10.4 TASK FOUR: MONITORING SYSTEM IN PLACE TO TRACK UTILIZATION AND IMPACT AND PROVIDE FEEDBACK	31
C.10.5 TASK FIVE: RESEARCH ACTIVITIES	35
C.10.7 TASK SEVEN: BETTER SOCIAL COMMUNITY SERVICES	37
C.10.10 TASK TEN: SMALL GRANTS PROGRAM	45
C.10.11 TASK ELEVEN: COMMODITY PROCUREMENT PROGRAM	47
C.10.12 TASK TWELVE: CO-ORDINATION ACTIVITIES	49
CONTRACT ADMINISTRATION	57

LIST OF ANNEXES

Annex A: Status of the Option Period Performance Milestone -----	58
Annex B: Maps of Target Governorates -----	62
Annex C: Contract Staff List -----	71
Annex D: Summary of Implementation Status in Minya -----	79
Annex E: Summary of Implementation Status in Assiut -----	108
Annex F: Summary of Implementation Status in Sohag -----	146
Annex G: Summary of Implementation Status in Giza -----	166

LIST OF ATTACHMENTS

Attachment A: Coordination and Collaboration on Quality Minutes of Meeting -----	187
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LIST OF TABLES

Table 1: HM/HC Coverage Profile (March 2004) -----	05
Table 2: Selected BEOCs for Phases III and IV -----	07
Table 3: Integrated Visits -----	10
Table 4: Hospital Management and CQIS Training -----	11
Table 5: Training for Lead Trainers -----	13
Table 6: EOC Training --- -----	13
Table 7: Training for BEOCs -----	14
Table 8: EONC Training -----	14
Table 9: NC Training -----	15
Table 10: CEOC Training -----	16
Table 11: BEOC Training -----	16
Table 12: I.V. Fluid Preparation and Mixing Training -----	17
Table 13: Training for Nurses -----	17
Table 14: Blood Transfusion and Managing the Hypovolemic Shock Training -----	18
Table 15: EMS Training in Minya and Giza Governorates -----	19
Table 16: EMS Training in Assiut and Giza Governorates -----	20

Table 17: Laboratory Training -----	21
Table 18: OR and CSSD Training -----	22
Table 19: Infection Control Training -----	22
Table 20: Service Providers Sensitization Training -----	27
Table 21: Governorate Level Participation -----	27
Table 22: MCH Quality Assurance System Training -----	29
Table 23: Assessment for MHIS Centers in Giza -----	31
Table 24: Training on MMSS -----	35
Table 25: Health Offices and Health Districts Selected for The Assessment of MMSS -----	36
Table 26: Training for Community Outreach Workers -----	37
Table 27: CNA Training -----	38
Table 28: Health Care Providers Sensitization Training -----	39
Table 29: FGC Training -----	41
Table 30: Distribution for Grants -----	45
Table 31: Training for Proposal Writing -----	45

ACRONYMS

AWP	Annual Workplan
BEOC	Basic Essential Obstetric Care
CAP	Community Action Plan
CBT	Competency Based Training
CBTM	Competency Based Training Methodology
CDA	Community Development Association
CDS	Community Development Specialist
CEOC	Comprehensive Essential Obstetric Care
CHC	Community Health Committee
CHL	Communication for Healthy Living
CHW	Community Health Worker
CNI – DMT	Community Needs Identification and Decision Making Tool Process
CNI - RHS	Community Needs Identification and Rapid Household Survey
CAN	Community Needs Assessment
CDC	Center for Disease Control and Prevention
CEOSS	Coptic Evangelical Organization for Social Services
COP	Chief of Party
CPAP	Continuous Positive Airway Pressure
CQI	Continuous Quality Improvement
CTO	Cognizant Technical Officer
DCOP	Deputy Chief of Party
DH	District Hospital
DSMC	District Safe Motherhood Committee
DT2	Development Training Two

EHP	Environmental Health Project
EMS	Emergency Medical Services
EOAC	Essential Obstetric Anesthesia Care
EOC	Essential Obstetric Care
EONC	Essential Obstetric Nursing Care
ER	Emergency Room
FGC	Female Genital Cutting
GALAE	General Authority for Literacy and Adult Education
GH	General Hospital
GOE	Government of Egypt
GSMC	Governorate Safe Motherhood Committee
GWU	George Washington University
HIL	Health Integrated Literacy
HIO	Health Insurance Organization
HIS	Health Information System
HM/HC	Healthy Mother/ Healthy Child
HSMC	Hospital Safe Motherhood Committee
HU	Health Unit
HWDP	Health Workforce Development Project
IC	Infection Control
I.V.	Intra Venus
IEC	Information, Education and Communication
IFA	Invitation for Application
IIE/ DT2	Institute of International Training/ Development Training Two
IIT	Integrated Implementation Team
IMCI	Integrated Management of Childhood Illnesses
IPC	Interpersonal Communication

JSI	John Snow, Inc.
MCH	Maternal and Child Health
MCH/ FP	Maternal and Child Health/ Family Planning
MHIS	Management Health Information System
MIS	Management Information System
MMSS	Maternal Mortality Surveillance System
MOC	Memorandum of Cooperation
MOE	Ministry of Education
MOHP	Ministry of Health and Population
MOISA	Ministry of Insurance and Social Affairs
NAMRU3	Naval American Medical Research Unit 3
NC	Neonatal Care
NCU	Neonatal Care Unit
NGO	Non Governmental Organization
NICHP	National Information Center for Health and Population
NID	National Immunization Day
NICU	Neonatal Intensive Care Unit
NMMS	National Maternal Mortality Study
NMMR	National Maternal Mortality Ratio
Ob/Gyn	Obstetric and Gynecology
OJT	On Job Training
OR	Operation Research
PAC	Post-Abortion Care
PHC	Primary Health Care
PHR+	Partners for Health Reform Plus
QA	Quality Assurance
QPMR	Quarterly Performance Monitoring Report

RCT	Regional Center for Training
RFP	Request for Proposal
RFQ	Request for Quotation
RH/FP	Reproductive Health/Family Planning
RHS	Rapid Household Survey
SHIP	Student Health Insurance Program
SMC	Safe Motherhood Committee
SWOT	Strengths, Weaknesses, Opportunities and Threats
TCA	TransCentury Associates
TOT	Training of Trainers
UHC	Urban Health Center
US	United States
USAID	United States Agency for International Development
WE	World Education
WHO	World Health Organization

INTRODUCTION

Pursuant to Section F.4.1 of the John Snow, Inc/U.S. Agency for International Development (JSI/USAID) Contract No. 263-C-00-98-00041, JSI is required to submit Performance Reports summarizing the progress of major activities in process, indicating any problems encountered and proposing remedial actions as appropriate. These reports are to be submitted quarterly for calendar quarters ending the last day of March, June, September and December for each year of the Contract.

This current Quarterly Performance Monitoring Report (QPMR X) represents the ninth quarter of the Option Period contract and covers the period from January 1 through March 31, 2004.

This document is organized according to the nine tasks of the contract along with a section on contract administration. Each task contains a narrative with the following sections:

- Accomplishments
- Constraints
- Proposed Actions to Overcome Constraints

The attached annexes document progress in the following aspects of the Project:

Annex A: Status of the Option Period Performance Milestones

Annex B: Maps of Target Governorates

Annex C: Contract Staff List

Annex D: Summary of implementation status in Minya

Annex E: Summary of implementation status in Assiut

Annex F: Summary of implementation status in Sohag

Annex G: Summary of implementation status in Giza

Major Events During This Quarter

The National Safe Motherhood Committee – Second Meeting

- The second meeting of the National Safe Motherhood Committee (NSMC) was held on March 25, 2004. The Committee, which was chaired by H.E. the Minister of Health and Population, reviewed the accomplishments and progress achieved so far in safe motherhood since the first meeting of the committee last year, discussed in depth the 2003 results of the National Maternal Mortality Surveillance System and the proposed plan of action to further reduce maternal and neonatal mortality in Egypt. This meeting was attended by MOHP-Under Secretaries-for each department, USAID HM/HC CTO and JSI.
- After deliberations and discussions that involved First Undersecretaries, Undersecretaries and selected Director Generals of MOHP, prominent university professors of Obstetrics/Gynecology, Neonatology and Pediatrics as resource persons and the Secretary General of the Medical Syndicate, the Committee approved a plan of action that charts the way to attain the national goal to reduce MMR to 50 per 100 thousand live births by the year 2007.

Briefing to Dr. M. Fathalla

- A briefing was organized and conducted for Dr. Mahmoud Fathalla, Senior Consultant, WHO, and Professor of Obstetric and Gynecology, Assiut University at El Eman Specialized Hospital on January 6, 2004.
- The briefing was attended by the Undersecretary of MOHP-Assiut Governorate and her key staff as well as the manger of the hospital, obstetricians and neonatologist working in the hospital. The briefing meeting was followed by a site visit to the newly renovated Departments of Obs/Gyn and Neonatal Care of the Specialized Hospital.

Graduation of Trained Midwives

- The Governor of Minya, Undersecretary for Integrated Health Care/Executive Director of HM/HC Project, MOHP Undersecretary for Research and Development and MOHP Undersecretary for Nursing Services participated on January 12, 2004 in the Graduation Ceremony of twenty five midwives who were trained for four months on safe motherhood activities and particularly delivery, antenatal and postpartum care. The training was conducted by the HM/HC Project with technical support from JSI.

Safe Motherhood Meeting (New Technologies to Reduce Maternal Mortality)

- On January 14, HM/HC Project, MOHP in cooperation with USAID, JSI, University of California, San Francisco and Berkeley, organized a one day meeting for 87 participants from: MOHP; planners; mangers and providers; university professors; medical associations; and USAID funded health projects to review new interventions that may be effective to reduce maternal mortality in Egypt.

Second Regional Conference on 2003 Maternal Mortality Surveillance System-North Upper Egypt Governorates

- The results of the 2003 Maternal Surveillance System for North Upper Egypt Governorates (Minya, Assiut, Beni Suef and Fayoum) were presented and reviewed in a conference that was held in Minya on February 9-10. Factors contributing to maternal deaths were identified and a plan of action for each governorate to avert maternal deaths due to avoidable factors was developed and presented to more than 90 participant representing key officials of the four governorates. The Governor inaugurated the conference, which was held, under the auspices of H.E. Minister of Health and Population and attended by the USAID Head of the office of Health and Population and HM/HC CTO.

Health Integrated Literacy (HIL) Conference

- One-day conference was held on February 23 to provide an overview of HIL and main findings from the Health Knowledge Survey recently conducted in Cairo and Giza slum neighborhoods by the Social Research Center (SRC) of the American University in Cairo. The conference was jointly organized by World Education (WE) and attended by the Ministry of Health and Population (MOHP), General Authority for Literacy and Adult Education (GALAE), World Education (WE), Ford Foundation and JSI. USAID and its contractors providing technical assistance to Health, population and education projects also participated in the meeting. Research results indicated that the impact of exposure to the HIL curriculum materials on increased health knowledge was dramatic for teachers, students and household respondents.

Dissemination of Perinatal Teleconference Series and IEC Materials

- The Perinatal Medical Teleconference is a complete educational and training system which has been produced by HM/HC in collaboration with George Washington University and support from USAID/IEC –DT2.
- To maximize the benefit of these materials an agreement was reached on March 10, 2004 with HORUS TV Channel (target to health providers) to air the teleconference sessions for half an hour twice per week. Another agreement with Nefertity TV Channel (targeted to family) was reached to air the TV spots produced for the two HM/HC mass media campaigns.
- A dissemination plan for HM/HC publications was discussed and approved by Dr. Esmat Mansour, MOHP Undersecretary and Executive Director of HM/HC on the same day.

Inauguration of the updated Health Center in a Slum Area

- Ms Mary Ott, Deputy Mission Director, USAID Mission to Egypt inaugurated on February 4, 2004 the newly upgraded Urban Health Center in Gharb El Mattar Slum Area. The visit to the renovated and equipped center by USAID assistance included a meeting with the physicians and nurses trained by HM/HC as well as women community leaders.

Table 1: HM/HC Coverage Profile (March 15, 2004)

1-	Aswan	306,567	151,766	34,906	9,983	6,314
2-	Daraw	92,740	45,911	10,560	3,020	2,707
3-	Kom Ombo	264,663	131,021	30,135	8,619	5,555
4-	Nasr Nouba	74,826	37,043	8,520	2,437	1,650
5-	Edfu	330,530	163,629	37,635	10,763	6,781
	Total	1,069,326	529,369	121,755	34,822	23,007
6-	Luxor Bandar	172,732	85,511	19,668	5,625	4,480
7-	Bayadaya	230,181	113,951	26,209	7,496	5,319
	Total	402,913	199,462	45,876	13,121	9,799
8-	Qous	332,822	164,763	37,896	10,838	9,158
9-	Esna	317,121	156,991	36,108	10,327	8,282
10-	Armant	153,168	75,826	17,440	4,988	4,315
11-	Qena	494,017	244,563	56,249	16,087	13,864
12-	Deshna	294,766	145,924	33,562	9,599	9,737
13-	El-Wakf	63,746	31,557	7,258	2,076	1,812
14-	Neqada	131,719	65,207	14,998	4,289	4,259
15-	Qift	113,281	56,080	12,898	3,689	3,467
16-	Naga Hamadi	422,793	209,303	48,140	13,768	11,048
17-	Abu Tesht	329,734	163,235	37,544	10,738	10,683
18-	Farshout	135,434	67,047	15,421	4,410	4,063
	Total	2,788,601	1,380,496	317,514	90,809	80,688
19-	Sohag	569,520	281,941	64,846	18,546	14,698
20-	Tahta	352,039	174,277	40,084	11,464	10,246
21-	Gerga	327,817	162,286	37,326	10,675	11,128
22-	Tema	311,877	154,395	35,511	10,156	8,319
23-	El Balyana	359,266	177,854	40,907	11,699	10,494
24-	Dar El Salam	282,269	139,737	32,140	9,192	10,309
25-	Saqolta	158,314	78,373	18,026	5,155	4,722
26-	Geheina	192,607	95,350	21,931	6,272	5,365
27-	Maragha	294,489	145,787	33,531	9,590	8,294
28-	Akhmeim	281,777	139,494	32,084	9,176	8,539
29-	El Mounshaa	456,698	226,088	52,000	14,872	11,644
	Total	3,586,673	1,775,581	408,384	116,798	103,758
30-	Gharb Assiut	215,528	106,697	24,540	7,019	8,960
31-	Shark Assiut	161,039	79,722	18,336	5,244	3,121
32-	Markaz Assiut	372,790	184,550	42,446	12,140	9,702
33-	El Ghanayem	96,897	47,969	11,033	3,155	3,819
34-	El Kouseyah	337,123	166,893	38,385	10,978	10,860
35-	El Fath	225,442	111,605	25,669	7,341	7,000
36-	Sahel Selim	126,175	62,463	14,366	4,109	3,903
37-	El Badary	199,905	98,963	22,761	6,510	6,687
38-	Sedfa	148,080	73,307	16,861	4,822	5,315
39-	Dayrout	426,666	211,221	48,581	13,894	14,456

40-	Abnoub	288,868	143,004	32,891	9,407	8,560
41-	Manfalout	385,354	190,769	43,877	12,549	13,564
42-	Abu Tieg	257,313	127,383	29,298	8,379	8,233
Total		3,241,180	1,604,545	369,045	105,547	104,180
Minya						
43-	Minya	683,412	338,323	77,814	22,255	17,720
44-	Samalout	530,211	262,481	60,371	17,266	15,411
45-	Fekreya	434,789	215,242	49,506	14,159	12,466
46-	Deir Mowas	286,237	141,701	32,591	9,321	10,394
47-	Beni Mazar	429,112	212,432	48,859	13,974	14,875
48-	El Edwa	185,251	91,708	21,093	6,033	6,505
49-	Mattay	226,400	112,079	25,778	7,373	7,153
50-	Maghagha	397,947	197,003	45,311	12,959	12,407
51-	Malawi	656,770	325,134	74,781	21,387	20,899
Total		3,830,129	1,896,103	436,104	124,726	117,830
Beni Suef						
52-	Beni suef	467,726	231,548	53,256	15,231	12,820
53-	Ehnasia	265,972	131,669	30,284	8,661	8,407
54-	El Wasta	333,430	165,064	37,965	10,858	5,592
55-	El Fashn	313,801	155,347	35,730	10,219	8,428
56-	Beba	309,839	153,386	35,279	10,090	9,763
57-	Nasser	258,824	128,131	29,470	8,428	7,639
58-	Somosta	184,083	91,130	20,960	5,995	5,073
Total		2,133,675	1,056,275	242,943	69,482	57,722
Fayoum						
59-	Sennoures	384,469	190,331	43,776	12,520	11,442
60-	Etsa	452,271	223,897	51,496	14,728	13,664
61-	Bandar Fayoum	289,974	143,551	33,017	9,443	7,668
62-	Tamia	288,726	142,934	32,875	9,402	8,981
63-	Markaz El Fayoum	351,433	173,977	40,015	11,444	10,315
64-	Ibshway	525,198	259,999	59,800	17,103	17,400
Total		2,292,071	1,134,689	260,978	74,640	69,470
Giza						
65-	El Wahat El Bahareya	29,691	14,699	3,381	967	828
66-	North Giza (Imbaba Kism)	716,085	354,498	81,534	23,319	21,629
67-	Etfeih	233,964	115,824	26,639	7,619	8,108
68-	El Saff	263,816	130,602	30,038	8,591	9,778
69-	El Badrashein	327,433	162,096	37,282	10,663	10,902
70-	El Ayat	313,345	155,121	35,678	10,204	8,015
71-	Agouza	187,858	92,999	21,390	6,117	5,235
72-	El Hawamdeya	129,691	64,203	14,767	4,223	3,822
73-	Osseim	218,610	108,223	24,891	7,119	7,167
74-	El Warrak	434,908	215,301	49,519	14,162	6,670
75-	Menshaat El Qanater	391,502	193,813	44,577	12,749	10,894
Total		3,246,903	1,607,378	369,697	105,733	93,048
Slum Areas						
76-	Gharb El Mattar	45,437	22,494	5,174	1,480	1,108
77-	Basateen Shark	298,000	147,525	33,931	9,704	983
Total		343,437	170,018	39,104	11,184	2,091
Grand Total		22,934,908	11,353,915	2,611,400	746,861	661,593

C.10.1 TASK ONE: Basic Package of Essential Services Established and Standards Defined

Accomplishments:

Activity No. 1.1: Phasing in New Districts / Governorates

Activity No. 1.1.1: Establish and Orient Facility Safe Motherhood Committees

- The Safe Motherhood Committees were oriented in all hospitals of Phases III and IV of the Option Period and continued to have their monthly meetings to identify problems and discuss solutions.

Activity No. 1.1.2: Select BEOCs

- Based on the District Profiles developed for 22 target districts of Phases III and IV of the Option Period, 53 BEOCs were selected as follows in Minya, Assiut and Giza:

Table 2: Selected BEOCs for Phases III and IV

Governorate	District	BEOCs
Minya	Mallawi	1. Mallawi MC
		2. OM Komos RHC
		3. Kalandol IH
		4. Beni Khaled WHC
		5. Al Barsha WHC
	Mattay	1. Manshiet Menbal WHU
	Maghagha	1. Dahamro WHC
		2. Bartabat IH
		3. Dahrout HU
	Edwa	1. Atf Heder IH
Total BEOCs Selected in Minya		10
Assiut	Badary	1. El Othmania Women Health Center (El TADAMON)
	Sahel Selim	1. Sahel Selim MC
	Sedfa	1. Sedfa MCH
	Abu Tieg	1. El Dowina IH
	Manfalout	1. Hawatka IH
		2. Arab Beni Shokir WHC
	Dayrout	1. Kodiet Mubark IHU
		2. Dasherout IH
Abnoub	1. Al Mabda IH	
Total BEOCs Selected in Assiut		9

Giza	Etfeih	1. Soal H.Group
		2. Qababat IH
	El-Saff	1. Arab Abo Saed WHU
		2. El-Hay RHU
		3. El-Saff Maternity
	Hawamdeya	1. MCH Center (maternity)
	Ayat	1. Nasria IHU
		2. Matania IHU
		3. Barnasht UHC
	Badrashein	1. Badrashein Maternity
		2. Menshat Dahshour RHU
		3. Abo Ragwan WHU
	Warak	1. Gezerat Mohammed HU
		2. Bashteel IH
	Wahat Baharia	1. Qabala RHU
		2. El-Qasr
		3. Mandesha
		4. El-Zabo
		5. Al-Boweitty (main city)
		6. Al Harra RHU
	Oseim	1. El Motemideya IH
		2. Nahia IH
		3. Saquil IH
		4. Kerdasa IH
		5. Barageil IH
	Agouza	1. MCH center in Imbaba
	Menshaat Qanater	1. Baharmos HC
		2. Atrees WHU
		3. Om Dinar RHU
		4. Nekla IH
	North Giza	1. Madinet El Ommal MC
		2. Aziz Ezzat MC
		3. El Bouhy UHC
		4. Imbaba UHC
Total BEOCs Selected in Giza		34
Total for Phases III and IV		53

Activity No. 1.1.3: Assist General / District Hospital to Conduct Self-Assessment and Development of Improvement Plans

- Profiles of Phases III and IV General and District Hospital in Assiut, Minya and Giza were updated on a monthly basis. Profiles include:
 - Facility baseline assessment.
 - Facility plan for renovation with schedule of implementation.
 - List of commodities needed for each hospital and schedule of procurement, delivery and installation.
 - Human resources development plan for the hospital, including training plan and status of implementation.

- Reports on the results of management and clinical performance indicators (retrospective and summary of concurrent indicators).
- Facility self-improvement plans for these hospitals were developed by Facility Safe Motherhood Committees.
- Facility profiles and self-improvement plans for Phase I and II Option Period hospitals are being updated on a monthly basis through the SMC meetings.

Activity No. 1.2: Monitor the Implementation of the Renovation Plans

- Renovation activities planned and supported by the HM/HC Project at Gerga, Tema, Saqolta, Akhmeim and El Balyana District Hospitals in Sohag have already started and are expected to be completed in May 2004.
- The blue prints, estimated cost and bills of quantity for Phases III & IV hospitals in Minya, Assiut and Giza were developed by JSI and submitted to HM/HC to start the bidding process. El-Edwa DH site was handed over to the contractor to start the renovation.
- Coordination between JSI, HM/HC Project, MOHP and Giza MOHP Department is ongoing to ensure that the construction of Oseim and Wahat District Hospitals complies with the standards and specifications.
- Blue prints for the selected BEOCs of Phase III and IV were developed according to standards. Site delivery for the selected BEOCs in Minya and Assiut governorates was completed. Giza selected BEOCs will be delivered on April 2004.

Activity No. 1.3: Monitor the Delivery, Installation, Staff Training on New Commodities and Maintaining and Repairing Out-of-Order Equipment

- In coordination with task 11, list of commodities were delivered to all Option Period Phase II hospitals except Tema, Saqolta, Akhmeim, Dar El-Salam, Balyana and Gerga DHs in Sohag where renovation by HM/HC is underway. In those hospitals the interim commodities were delivered in addition to some other urgently needed commodities.
- Commodities were delivered to the following hospitals of Phase III: Mallawi DH in Minya Governorate and Sedfa DH and Badary DH in Assiut Governorate.
- Interim commodities were delivered to the following Phases III and IV hospitals: Edwa DH in Minya Governorate, Abu Tieg DH in Assiut Governorate and Tahrir GH, Imbaba GH, Oseim DH and El Saff DH in Giza Governorate.
- The biomedical engineers conducted 74 person/day visits to the Ob/Gyn, NC, CSSD, and OR Departments in the facilities of both the Base Period and the Option Period to maintain and repair the out-of-order equipment. During these visits, they provided technical assistance and conducted on-the-job-training sessions to hospital maintenance staff.

Activity No. 1.4: Conduct Integrated Field Visits to Monitor the Implementation of PES

- Integrated visits by the JSI Implementation Team including Clinical Supervisors, Biomedical Engineers and Field Offices continued to accomplish the following tasks:
 - Discuss the status of implementation of activities at the facility level.
 - Ensure information flow among different members / departments within the facility.
 - Identify problems at facility level and develop a facility improvement plan.
 - Identify problems that require higher level involvement and decision.
 - Integrate and coordinate activities at the facility level.
- The three day integrated visit is organized as follows:
 - On the first and second days of the integrated visits, members of the team conduct their own regular OJT/supervisory activities in the target facilities.
 - A regular meeting/group discussion is held on the evening of the second day to prepare for the agenda and issues to be discussed in the next day Hospital SMC meeting. During this meeting, problems are identified and openly discussed to suggest appropriate corrective actions. Problems and issues are identified through records review (patients' sheets, hospital statistics, etc.), meetings with the staff and hospital management, comments from Clinical Supervisors and direct observation of the staff performance.
 - On the third day, the HSMC holds its monthly regular meeting during which the previously pinpointed problems are raised and possible solutions are suggested. By the end of the meeting, the committee develops and/or revises a self-improvement plan.
- JSI Integrated Teams paid an integrated visit (three days) per month for the following hospitals during this quarter:

Table 3: Integrated Visits

Governorate		Facility
Sohag	1	Sohag GH
	2	Tahta DH
	3	Gerga DH
	4	Maragha DH
	5	Tema DH
	6	Geheina DH
	7	Akhmeim DH
	8	Saqolta DH
	9	Balyana DH
	10	Dar El Salam DH
	11	El Mounshaa DH
Assiut	1	Assiut GH
	2	New Eman GH
	3	Specialized Hospital
	4	El Ghanayem DH
	5	El Kouseyah DH

Governorate		Facility
	6	Abnoub DH
	7	Abu Tieg DH
	8	Badary DH
	9	Dayrout DH
	10	Sedfa DH
	11	Sahel Selim DH
	12	Manfalout DH
Minya	1	Minya GH
	2	Samalout DH
	3	El Fekreya DH
	4	Beni Mazar DH
	5	Deir Mowas DH
	6	Mallawi DH
	7	Mattay DH
	8	Edwa DH
	9	Maghagha DH
Giza	1	Imbaba GH
	2	Tahrir GH
	3	Hawamdeya GH
	4	Saff DH
	5	Etfeih DH
	6	Ayat DH
	7	Badrashein DH
	8	Oseim DH

Activity No. 1.5: Upgrade the Managerial Capacity of Hospital Management and Hospital Safe Motherhood Committee

- Four day workshops on hospital management and CQIS were conducted:

Table 4: Hospital Management and CQIS Training

Governorate	Hospitals	Date	No. of participants
Giza	Imbaba, Tahrir GHs and Osseim DH	January 19-22	24
Giza	Saff and Etfeih DHs	January 26-29	16
Minya	Maghagha and Edwa DHs	March 21-24	16
Assiut	Dayrout and Manfalout DHs	March 29 to April 1	16
Total			72

Activity No. 1.6: Coordinate the Phasing-out and Develop Sustainability Plans from Target Governorates

- A workshop on phasing out from Sohag was conducted on March 15, 2004. The Governorate Safe Motherhood Committee (nine participants), members of HM/HC Project led by the Director General of MCH and the HM/HC Team Leader/USAID participated in this one day workshop.
- The workshop reviewed the achievements of HM/HC and discussed strategies and plans of MCH, Curative Care and Sohag MOHP Department to sustain HM/HC project achievements. Service standards, protocols, competency

based training curriculum, the continuous quality improvement system (CQIS) and management tools were elements included in sustainability plan developed by the end of this workshop.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.2 TASK TWO: Pre/ In-Service Training System Designed to Disseminate Standards to Public and Private Providers

Accomplishments:

Activity No. 2.1: Disseminate Standards and Build Training Capacity

- Two Pre-service Training workshops were conducted with a total number of 55 participants. The first workshop was conducted in Assiut Governorate from January 10-19, 2004 with a total of 41 physician participants. The second workshop was conducted in Giza Governorate from February 7-16, 2004 for 14 participants.
- Two Training of Trainers Workshops for 38 Supervisor/Lead Trainers were conducted. The workshops included Minya from February 14-19, 2004 and Giza from February 21-26, 2004. The Supervisor/Lead Trainers trained belong to the following areas.

Table 5: Training for Lead Trainers

Governorate	Ob/Gyn	Neonat.	Anesth.	ER	No. of participants
Minya	9	5	3	3	20
Giza	15	0	3	0	18
Total	24	5	6	3	38

Activity No. 2.2: Sustain, Organize and Implement EOC Training Clinical Supervision

- Three CEOC workshops were conducted in Giza Governorate; where 97 obstetricians, from the General and District Hospitals, were trained to identify the causes of maternal death, highlight the avoidable factors, substandard care and harmful practices that are contributing to maternal deaths. The workshops were held as follows:

Table 6: EOC Training

Date	Hospital	Number	No. of participants
January 13-22	Hawamdeya	11	26
	Badrashein	11	
	Ayat	2	
	Etfeih	2	
February 14-24	Tahrir	14	35
	Imbaba	12	
	Osseim	8	
	Etfeih	1	
March 9-18	Hawamdeya	13	36
	Tahrir	3	
	Imbaba	11	
	Osseim	9	
Total		97	97

- Continuous OJT/Clinical Supervisory visits were paid to 48 General & District Hospitals in Sohag, Assiut, Minya and Giza Governorates (Phases I, II & III hospitals). Each of these hospitals was visited between three to nine days per month by Clinical Supervisors with a total of 831 person-days during this quarter to ensure the compliance with the EOC protocols.
- The Concurrent Assessment Clinical Performance Monitoring Indicators are being used in Sohag, Assiut, Minya and Giza facilities to monitor progress of the obstetricians towards competency and mastery of the essential obstetric care skills. The Concurrent Assessment Tool has proven to be very helpful to the obstetricians to identify their areas of weakness and to include corrective actions in their clinical self improvement plans.
- CEOC training materials are under technical review according to the latest evidence-based medical research. This updating will include the CEOC Protocol, CEOC Modules, CEOC Flowcharts and CEOC Concurrent Assessments. The major part of the protocol has already been reviewed and editing will begin soon.
- A complete set of the newly developed training materials for the primary health care physicians, including the BEOC Protocol, BEOC Flow-Charts, BEOC Concurrent Assessments in addition to BEOC Modules were field tested, edited and are now ready for publication. They are currently being used in BEOC training interventions.
- Four BEOC workshops were conducted in Assiut, Minya and Giza Governorates, where 97 Primary Health Care physicians, from Assiut, Minya and Giza Governorate BEOCs, were trained to identify the causes of maternal death, highlight the avoidable factors, and recognize substandard care and harmful practices that are contributing to maternal deaths. The workshops were held as follows:

Table 7: Training for BEOCs

#	Governorate	Date	No. of participants
1	Assiut	January 17-22	23
2	Giza	January 24-29	22
3	Giza	March 6-11	18
4	Minya	March 13-18	13
TOTAL			97

- Five EONC workshops were conducted in Giza, Assiut and Minya Governorates, where 139 obstetric nurses, from General and District Hospitals, were trained on environmental sanitation to ensure that each sector of the Obstetric Department is complying with the according to the service standards. In addition, aware nurse duties and responsibilities was attained. The workshops were conducted as follows:

Table 8: EONC Training

#	Governorate	Date	Hospital	No. of participants	Total
1	Giza	January 10-15	Ayat	7	32
			El Saff	1	

#	Governorate	Date	Hospital	No. of participants	Total
			Hawamdeya	11	
			Badrashein	13	
	Giza	January 24-29	Tahrir	10	28
			Imbaba	7	
			Osseim	11	
		February 21-26	Ayat	11	32
			Imbaba	10	
			Oseim	11	
2	Assiut	February 14-19	Abu Tieg	15	34
			Assiut	4	
			Abnoub	5	
			Sedfa	8	
			Esna	1	
			Ghanayem	1	
3	Minya	February 14-19	Beni Mazar	3	13
			Mallawi	4	
			Abo Qorkas	3	
			Mattay	1	
			Edwa	2	
Total					107

Activity No. 2.3: Sustain, Organize and Implement NC Training and Clinical Supervision

- The following Basic and Advanced Neonatal Care Workshops were conducted for 105 physicians during this quarter:

Table 9: NC Training

#	Governorate	Workshop	Date	Hospital	No. of participants
1	Minya	Advanced N. Care	January 11-15	Minya	1
				Kouseyah	2
				Mallawi	9
				Maragha	3
				Mounshaa	2
				Maghagha	1
				Sahel Selem	2
				Dayrout	2
				Manfalout	2
				El Edwa	1
	Sub-Total				25
2	Giza	Basic	February 15-18	Tahrir	7
				El Hawamdeya	6
				Imbaba	4
	Fayoum			Ebshway	2
	Sub-Total				19

3	Giza	Basic	February 22-25	Tahrir	5
				El Hawamdeya	4
				Imbaba	7
				Osseim	4
	Assiut			New Eman	1
	Sub-Total				21
4	Giza	Advanced	March 7-11	Tahrir	7
				El Hawamdeya	6
				Imbaba	4
	Fayoum			Ebshway	2
	Sub-Total				19
5	Giza	Advanced	March 14-18	Tahrir	5
				El Hawamdeya	4
				Imbaba	7
				Osseim	4
	Assiut			New Eman	1
	Sub-Total				21
	Total				105

- The following Resuscitation Sessions were conducted as an integral part of the following CEOC and BEOC workshops during this quarter:
- **CEOC Workshops:**

Table 10: CEOC Training

#	Governorate	Date	No. of participants
1	Giza	January 13-22	26
2	Giza	February 14-24	35
3	Giza	March 9-18	36
	Total		97

- **BEOC Workshops:**

Table 11: BEOC Training

#	Governorate	Date	No. of participants
1	Assiut	January 17-22	23
2	Giza	January 24-29	22
3	Giza	March 6-11	18
4	Minya	March 13-18	13
	Total		97

- Technical assistance was provided to Phase I & II facilities of the Option Period through Supervisory/OJT visits to Minya, Assiut and Sohag facilities; in addition to three facilities of Giza Governorate. Each of these facilities was visited monthly for three days by the clinical supervisor to ensure implementation of neonatal protocols.

- The training program for I.V. fluid preparation and mixing was provided to an additional seven NICUs in the following facilities:

Table 12: I.V. Fluid Preparation and Mixing Training

Facilities	Date	No. of Trainees		Total
		Physician	Nurse	
Sedfa	January 12-14	3	12	15
Maragha	February 7-9	15	4	19
Hawamdeya	February 8-10	12	15	27
Imbaba	February 10-12	12	16	28
Badary	February 15-17	6	13	19
Manfalout	February 16-18	10	13	23
Tahrir	March 20-22	11	14	25
Total		69	87	156

- Infection control and resuscitation training for neonatal and obstetric staff was also conducted. The clinical supervisory practice concentrated on emphasizing the use and sustainability of the QA checklists for assessment of the training (Concurrent Checklist) and Clinical Performance (Retrospective Checklist). A total of 349 supervisory person/days were carried out during this quarter.
- An integrated perinatal workshop was conducted on March 28, 2004 for 84 participants from HM/HC Project and JSI. The workshop reviewed the different activities and interventions needed to activate and strengthen the perinatal function in the facilities.

Activity No. 2.4: Sustain, Organize and Implement Nursing Supervisor/Lead Trainer/Clinical Supervisor Training

- Three EONC workshops for nurses were conducted in Giza governorate with a total of 92 participants. One EONC workshop for nurses was held in Assiut for 34 participants and one in Minya for 13 participants with a total number of 139 EOC nurses trained.
- Each of these facilities was visited for three days by nursing supervisors to ensure implementation of the EONC protocols.
- One NC nurses training was conducted in Giza for 22 nurses.

Table 13: Training for Nurses

	Giza	Assiut	Minya	Total
EONC				
No. of Workshops	3	1	1	5
No. of Participants	92	34	13	139
NC				
No. of Workshops	1			1
No. of Participants	22			22

- One TOT course was conducted for 24 Ob/Gyn nurses and three OR nurses as Clinical Supervisor/Lead Trainers in Giza Governorate from March 21-25, 2004.

Activity No. 2.5: Sustain, Organize and Implement Nurse Midwifery Training

- A Midwifery Training Course was completed in Minya. The Graduation Ceremony was held on January 12, 2004, where 25 nurse midwives, received their graduation certificates and their licenses to work as midwives.

Activity No. 2.6: Strengthen Other Clinical Support Services

Activity No. 2.6.1: Anesthesia Services

- Supervisory visits were regularly conducted to the 11 hospitals of Sohag, 9 hospitals of Minya and the hospitals of Giza. The OJT covers the following areas: safe obstetric anesthesia (preoperative visits, monitoring during operation time and at recovery time, general and regional anesthesia, and infection control).
- The supervisory visits were conducted at a rate of one to two visits for each hospital monthly with a total number of 117 person-days.
- Clinical Supervisor/OJT for anesthesiologists on the installed anesthesia machines and ventilators was conducted by JSI biomedical engineers.
- Assessment of the present status of anesthesia equipment and procurement plan for the deficiencies was completed.
- A special session covering fluid therapy, blood transfusion, managing hypovolemic shock was conducted during the three CEOC workshops in Giza covering 97 obstetricians.

Table 14: Blood Transfusion and Managing Hypovolemic Shock Training

Date	Hospital	No. of participants
January 13-22	Hawamdeya	11
	Badrashein	11
	Ayat	2
	Etfeih	2
February 14-24	Tahrir	14
	Imbaba	12
	Oseim	8
	Etfeih	1
March 9-18	Hawamdeya	13
	Tahrir	3
	Imbaba	11
	Oseim	9
Total		97

- Anesthesia modules were developed and are now under final review.
- The manual for anesthesia technician training program is under final review.
- Clinical performance monitoring indicators (concurrent assessment) for anesthesia is used in all governorates.
- The hypovolemic shock module was developed and is being edited.
- The second edition of the anesthesia protocol developed and is now being edited.

Activity No. 2.6.2: Emergency Medical Services (EMS)

- Service standards for EMS were completed.
- A Protocol for Maternal and Neonatal Emergency Medical Service for Physicians was developed and is now being edited.
- A binder on Emergency Service for Obstetric and Neonatal Care in Upper Egypt Pilot Hospitals was developed to summarize the processes and progress of this activity. The binder will be used to coordinate actions between the relevant sectors of the MOHP.
- A draft Emergency Room Protocol for Nurses (Arabic) was developed and is being revised.
- An organizational structure for Emergency Departments (ED), compatible with the local context, was developed and established in the following facilities:
 - El-Minya General Hospital, Samalout, Maghagha, Deir Mowas and Mallawi District Hospitals (Minya);
 - Sohag General Hospital, Tahta, Tema and El-Balyana District Hospitals (Sohag);
 - Assiut and El-Eman General Hospitals, El-Kouseyah and Dayrout District Hospitals (Assiut);
 - Tahrir General Hospital and Ayat District Hospital (Giza).
- OJT supervisory visits were conducted in five General Hospitals (Minya, Sohag, Assiut, New Eman and Tahrir) and ten District Hospitals (Samalout, Maghagha, Deir Mowas, Mallawi, Kouseyah, Dayrout, Tahta, Tema, Balyana, and Ayat District Hospitals. A total of 53 visits were conducted for the 15 facilities during the period from January to March 2004 with total 53 days. Clinical supervisory visits were completed in Sohag Governorate in February 2004.
- Three EMS workshops for physicians were conducted in Giza and Minya Governorates as follows:

Table 15: EMS Training in Minya and Giza

Governorate	Date	No. of participants
Giza	January 17-18	19
Giza	February 7-8	11
Minya	March 21-22	20
Total		50

- One EMS workshop for 31 nurses was conducted in Giza Governorate on March 6-7, 2004.
- Concurrent assessment forms for EMS were developed and are being used. This tool is used to assess the service providers performance and assist in developing self-improvement plans. A data base for the results of the concurrent assessment was developed in cooperation with Task Four. Data entry will start soon.
- Emergency Medical Service Package for Training of Pre-Service Physicians was developed. This package aims at providing those newly graduated doctors with training materials required for proper management of essential emergency cases with emphasis on major causes of maternal and neonatal mortalities.

- Two pre-service training workshops in Emergency Medical Services were conducted in Assiut and Giza Governorates and attended by 55 physicians as follows:

Table 16: EMS Training in Assiut and Giza

Governorate	Date	No. of participants
Assiut	January 14	41
Giza	February 14	14
Total		55

- A simple Emergency Room Clinical Notes Sheet was developed and is being applied in pilot hospitals (Assiut and Tahrir General Hospitals and Samalout District Hospital).
- Ten Emergency Medical Services Modules were completed and are now being edited.
- Posters for standing orders in Emergency Department and flow charts for Emergency Department physicians were developed and are being distributed to target hospitals.

Activity No. 2.6.3: Blood Bank Services

- OJT on the blood transfusion protocol started. Orientation on the blood components and its practical use, as well as, orientation on the central blood bank services and how to cooperate with these services were conducted to all nine hospitals of Minya Governorate and eleven hospitals of Assiut Governorate and eight hospitals of Giza Governorate. The supervisory visits were conducted at a rate of one to two visits for each hospital monthly with a total number of 37 days during this quarter.
- The Blood Transfusion Services Standards and Blood Bank Monitoring Checklists were developed and edited.
- The Blood Bank Protocol was developed and is now under final editing.
- The Infection Control Protocol for Blood Banks is being developed.
- The Blood Bank Module is under final development.
- The Blood Bank Equipment Module is under development.

Activity No. 2.6.4: Laboratory Services

- A Guide to Clinical Aspects of Laboratory Services was drafted and is currently being revised in cooperation with the Central Department of Laboratories.
- A list of essential laboratory investigations for General and District Hospitals was developed in conjunction with the Central Department of Laboratories.
- A list of available laboratory investigations during and after regular working hours was developed by the Central Department of Laboratories in each of the pilot hospitals.
- A policy on the use of the Integrated Laboratory was developed in each governorate to provide bacteriological laboratory services for hospitals where this was lacking. Implementation of this procedure started in Assiut and El-Minya General Hospitals. Strengthening of this integrated microbiology service needs combined effort from HM/HC Project, Central Department of Laboratories, and Governorates.

- Laboratory Committees have been established in pilot hospitals in the three governorates of the Option Period. The duties of these committees are as follows:
 - Establish and monitor laboratory services at the hospital
 - Issue local guidelines
 - Solve local problems, and
 - Follow-up on the use of the laboratory manual
- A national revised Laboratory Request Form has been developed in cooperation with the Central Department of Laboratories. Pilot testing of the new Laboratory Request Form started in Assiut General Hospital.
- Laboratory Service Standards were developed.
- A Laboratory Checklist was developed to be used by JSI Clinical Supervisors during their field visits to collect information, monitor performance, and record incidences related to laboratory services in the visited facilities. All incidence reports are discussed with the Central Department of Laboratories on monthly basis. Corrective actions are taken by the Central Department of Laboratories.
- Three laboratory one-day workshops were conducted for 54 participants from Giza Governorate. The workshop provided laboratory activities to pilot and non-pilot hospitals of Giza.

Table 17: Laboratory Training

Date	No. of participants
January 24	21
February 28	18
February 29	15
Total	54

- A guide to answer the commonly asked questions related to laboratory equipment, kits and supplies shortage, equipment maintenance and training of technicians was issued and distributed to participating hospitals (non-pilot hospitals).
- A Concurrent Assessment for Laboratory Services was developed and completed. This tool is to be used to assess the service provider's performance and help facilitators to develop their Self Improvement Plans. An electronic data-base for the concurrent assessments will be developed with the help of Task Four.
- A questionnaire on available laboratory resources and root causes for deficiency is collected from participating hospitals and the results are discussed with the Central Department of Laboratories in Cairo.

Activity No. 2.7: Infection Control Activities

- Infection Control OJT/Supervisory follow-up visits were conducted in all the hospitals of Minya, Assiut, Sohag & Giza with a total of 182 days during this quarter.
- Infection Control Specialists, during their OJT/Supervisory visits, oriented and discussed with the hospital staff (physicians & nurses), the universal precautions of infection control.

- The concurrent assessment checklists for infection control were used by all clinical supervisors during their Supervisory/OJT visits to monitor compliance with infection control standards.
- One OR and two CSSD workshops were conducted during this quarter as follows:

Table 18: OR and CSSD Training

Governorate	Workshop	Date	No. of participants
Giza	CSSD	March 23-25	24
Giza	OR	March 20-22	26
Sohag	CSSD	February 22-24	16
Total			66

- OR/CSSD Nursing Clinical Supervisors conducted OJT visits to all Phase II, III and IV hospitals of Sohag, Assiut, Minya and Giza Governorates with total of 199 person-days during this quarter. During these visits the supervisors coach the OR/CSSD nurses and monitor their performance using the concurrent assessments checklists.
- Three infection control training sessions were conducted as an integral part of the EOC workshops in Giza Governorates on the following dates:

Table 19: Infection Control Training

Date	No. of participants
January 20	26
February 22	35
March 16	38
Total	99

Activity No. 2.8: Involve Private Sector Services Providers

- Local syndicates, MOHP Private Sector Department and the Pharmacy Inspection Department continue to provide JSI with updated information on private sector providers in Sohag, Assiut and Minya Governorates. The information includes the number of private clinics, polyclinics, private hospitals, and pharmacies in the targeted governorates.
- Three CBT EOC training courses were conducted for 99 private physicians in Giza Governorate.

Activity No. 2.9: Teleconferencing and Off-Shore Training

- The competency-based Module in the Teleconference was developed.
- A plan for teleconference dissemination was completed.
- Preparations for Dissemination / Utilization workshops for the Perinatal Medical Teleconference were completed.

Activity No. 2.10: Assist MOHP to Pilot Test Adapted HM/HC Project Interventions in Urban Slum Areas

Activity No. 2.10.1: Develop a Situation Analysis

- A series of meetings were held between the JSI Slum Areas Team, NGO Specialist and the Operational Research Specialist to plan and develop a

timeline, the survey methodology and the appropriate sampling technique to be used for the slum areas of El-Basateen Sharq and Gharb El-Mattar. The survey aims to collect base-line data.

Activity No. 2.10.2: Adapt HM/HC Project Interventions in 1-2 Slum Areas

- A “MCH Reference Manual for Family Nurse” was developed. It includes chapters that were originally developed within EOC Protocols for nurses by HM/HC. Other chapters from the Family Medicine Protocols developed by the Health Sector Reform were added. The “Safe Home Birth Protocol” that was newly developed during the year 2003 was translated to Arabic and used. The manual is to be used to train the PHC nurses.
- One MCH training workshop for Family Nurses was conducted. The workshop was conducted on January 11-18, 2004 for fifteen nurses: seven from El-Basateen Sharq and eight from Gharb El-Mattar.
- The above workshop was followed by practical OJT/training on January 20-28, 2004. The training included clinic activities as well as home visits. The “Nurses Training Manual” was distributed to the trainee as a second document addressing the practical implementation of the theoretical components already covered during the classroom sessions of the first workshop.
- A similar workshop –as the one mentioned above- was conducted from February 8-16, 2004 with the participation of thirteen nurses: seven from Basateen Sharq and six from Gharb El-Mattar. The training followed the same agenda and procedures as mentioned above.
- A draft “MCH Reference Manual for Family Physicians” was developed according to similar steps that were previously followed for the development of the Nurses Manual.
- The outreach activities of the NGO’s Health workers were discussed. The messages were selected from the IEC materials previously developed by JSI. The different techniques to be used for health education settings were decided upon as well as the needed number of visits to be covered per woman over the duration of the project implementation phase. The targeted population for health education will be selected from the reproductive age group according to their current marital and reproductive status.
- Each of the Urban Health Centers of the two slum areas was visited to involve the Center’s Director and the medical staff in discussing and planning the implementation process of the project activities.
- Two Daya (TBA) refresher courses were planned and conducted: the first one took place from January 11 to 15, 2004 with a total of 16 Dayas attending: four from El-Basateen Sharq and 12 from Gharb El-Mattar. The second course was conducted from January 21 to 26, 2004 with a total of 22 Dayas attending: eight from El-Basateen Sharq and 14 from Gharb El-Mattar. Each workshop covered the various topics related to antenatal care (proper follow up and danger signs/symptoms that need referral), natal care (how to perform safe clean delivery and the proper setting for birth as well as danger signs/symptoms that need referral), postnatal care (timing and adequate care as well as danger signs/symptoms that need referral), breastfeeding, proper maternal nutrition during pregnancy and during lactation, health messages on households hygienic practices, infection control steps and precautions to be followed when conducting home deliveries to guard against maternal and

neonatal sepsis. There was a great emphasis on the role of Daya as a member of the health team to provide a positive collaborative environment from which the woman and her baby would benefit the most.

- Renewal of Daya licenses was discussed and necessary logistics arrangements were planned for. The clinical sessions were conducted by the qualified trainers who attended the TOT organized during the month of December 2003 and who are currently working with Dayas either as local facilitators, district supervisors or physicians who receive referred cases. Creating a friendly relation between the Dayas and the physicians at both the medical health center and the referral hospital was a successful achievement that shaped their relation and alleviated the fear that existed previously creating a better working environment.
- A three-day workshop was conducted from January 26-29, 2004 to NGOs on proposal writing and was attended by six participants from three NGOs who were asked to develop and submit written proposals for the NGO Small Grant Program.
- Community Health Committees (CHC) were established at the local council level in each of the two slum areas. A one-day orientation was conducted to members of the CHC to present the project objectives and highlight the CHC expected participatory role in improving and solving community problems.
- Twenty Community Health Workers (CHW) were selected from a group proposed by the CHC. The CHWs were chosen according to a previously set selection criteria based mainly on educational qualifications and field experience. The selected Community Health Workers were oriented in a meeting on the Project's interventions and activities.
- A Community Needs Assessment (CNA) was conducted using the previously prepared Rapid Household Survey after being adapted to fit slum conditions. This activity was designed to identify community needs and to prioritize them as perceived by the community. This activity was achieved through a seven-day workshop during which problems were determined and improvement plans were developed by a joint effort between the CHC members and the CHWs.
- The Safe Motherhood Committees of Cairo and Giza Governorates were trained on planning and management. The three-day workshop covered the national health policies and objectives, the current facility health services utilization and coverage rates, the constraints and obstacles to the use of available services. Lastly in an organized group activity each administrative level of the committee worked together to produce a plan of action to improve the current situation and attain targeted levels of services.
- The first workshop was held for Cairo Governorate SMC on February 16-18, 2004 with 22 participants: five from the governorate level, 10 from the district level, 7 from the facility level "El-Basateen Sharq Urban Health Center" and 3 from the referral hospital "El-Khalifa General Hospital".
- The second workshop was held for Giza Governorate on March 2-4, 2004 with 23 participants: five from the governorate level, eleven from the district level, seven from the facility level "Gharb El-Mattar Urban Health Center" and three from the referral hospital "El-Tahrir Hospital".
- The Delivery Room, MCH Clinic and the Family Planning Unit of Gharb El-Mattar Urban Health Center were renovated, furnished and equipped

according to the standards. The Center was inaugurated by the USAID Mission's Deputy Director.

Activity No. 2.10.3: Assist in the Development and Monitoring a Plan to Improve Perinatal Health Care Services and Their Utilization in Slum Areas

- The HM/HC Project Quality Assurance Team Conducted a monthly visit to the Urban Health Centers of the two slum areas to monitor the progress in registration by the medical staff, the accuracy of diagnosis and flow of data to higher administrative levels.
- Task Three with the slum areas development team planned and implemented a monthly visit for each Urban Health Center in the two slum areas to monitor progress in implementing the plans of action.

Activity No. 2.11: Facilitate and Document MCH and IMCI Training Interventions at BEOC Level

- An agreement was reached with MOHP-HM/HC Project staff to develop a plan to cover the 53 selected BEOCs of Phases III and IV with MCH training courses to supplement the training conducted to the staff of BEOC on Basic Essential Obstetric Care.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.3 TASK THREE: Public and Private Provider Partnership with Communities to Develop and Manage Districts Plans

Accomplishments:

Activity No. 3.1: Community Level Involvement

During this quarter, 23 community needs assessments were conducted and based on the results community action plans (CAPs) were developed in ten districts: four districts in Assiut, three districts in Minya, and three district in Giza. These CAPs were submitted to District Health and Safe Motherhood Committees for incorporation into the district health plans.

Activity No. 3.2: District Level Involvement

Activity No. 3.2.1: Safe Motherhood Committees

- One orientation workshop for DHCs and DSMCs was conducted in Minya Governorate on January 5, 2004. The workshop was attended by 48 participants from Mattay and Mallawi Districts. This workshop was conducted in a different way to accommodate the integration of FP/MCH services in the two districts (for more details on the integration see Task Twelve).
- Based on the orientation workshop, HM/HC in coordination with TAHSEEN conducted one four-day workshop on Management and Planning in Minya from January 26 to 29, 2004 for Mallawi and Mattay Districts and was attended by 21 participants. The workshop was adapted to introduce RH/FP topics along with the HM/HC planning approach. A draft plan on integrated RH/FP and HM/HC activities was developed and is in the process of being finalized.
- Seven three-day workshops on Management and Planning were conducted in 13 Districts in Assiut, Minya and Giza. A total of 126 participants attended representing the District SMCs of Manfalout, Abnoub, Al Badary, and Sedfa in Assiut; Maghagha and Edwa in Minya and El Saff, Etfaih, El Ayat, El Badrashein, North Giza, Menshaat Al Qanater, and Al Warak in Giza governorates. Managers of BEOCs of the mentioned districts also attended these workshops.
- Participants were asked to bring a district situation analysis that includes basic data and MCH services indicators at the district level to be used for the practical training sessions of the workshops. The situation analysis was also used to develop District HM/HC Plans based on the revised Guidelines for District Planning and Monitoring. A session on service provider sensitization was added to the workshop agenda and was conducted by Task Seven. A training report was developed and included the results of pre/post tests, participation and course evaluation.

Table 20: Service Providers Sensitization Training

Governorate	Date	Districts	No. of participants
Minya	March 16-18	El Edwa & Maghagha	16

Governorate	Date	Districts	No. of participants
Assiut	February 24-26	Manfalout & Abnoub	14
	March 8-10	Sedfa & El Badary	17
Giza	January 13-15	El Saff & Etfeih	20
	January 20-22	El Ayat & El Badrashein	20
	March 2-4	North Giza	14
	March 21-23	Al Warak & Menshaat Al Qanater	25
Total			126

Activity No. 3.2.2: District Plans

- After the planning and management workshops, district management teams started developing and finalizing the District Health Plans.

Activity No. 3.2.3: Monitoring Activities

Monthly Meetings were continued for District SMC members.

- Quarterly progress reports were developed by District SMCs detailing achievements during the quarter: October – December 2003. These achievements were compared to the planned activities of the annual work plans (AWPs) and HM/HC indicators.

Activity No. 3.3: Governorate Level Participation

- Eleven members of the Governorate SMC of Giza attended the management and planning workshops conducted for the District SMCs during the period from January to March, 2004.
- Two joint Safe Motherhood and Health Committees meetings were conducted according to the following table and were attended by 217 participants representing members of governorate and district Safe Motherhood and Health Committees from the eleven districts of Sohag to review the quarterly progress reports.

Table 21: Governorate Level Participation

Date	Districts	No. of participants
March 2	Governorate level	24
	Akhmeim	21
	Saqoulta	21
	Geheina	17
	Tema	15
	El Maragha	18

Date	Districts	No. of participants
March 3	Tahta	18
	Sohag	15
	Balyana	12
	Dar Al Salaam	16
	Al Mounshaa	17
	Gerga	23
Total		217

Activity No. 3.4: National Level Oversight

- The Second National Safe Motherhood Committee meeting was conducted on March 25, 2004 (for further details see Major Events).

Activity No. 3.5: Continuous Quality Improvement

Activity No. 3.5.1: Quality Improvement

- In coordination with the HM/HC Quality Assurance Unit, seven training workshops were conducted in Assiut, Minya, and Giza Governorates in an effort to support institutionalization of the MCH Quality Assurance system. The training workshops covered the different programs of MCH activities in terms of service standards and monitoring checklists in order to be used as a tool for continuous monitoring and improvement of services. A total of 115 participants representing BEOC physicians and governorate and district SMCs attended these workshops which took place as follows:

Table 22: MCH Quality Assurance System Training

Governorate	Date	No. of participants
Assiut	January 12-14	16
Minya	January 19-21	16
Giza	January 26-28	14
Giza	February 9-11	15
Assiut	February 22-24	13
Giza	March 1-3	19
Minya	March 22-24	22
Total		115

Activity No. 3.5.2: Support Monitoring Activities

- Quality reports covering both managerial and clinical aspects of performance for obstetric and neonatal departments of the Fourth Quarter (Q4), 2003 have been produced and submitted to the SMCs. The reports illustrated the areas of improvement as well as the deficiencies and its main causes. The reports were effectively used during SMC meetings to identify problems and opportunities for improvement. They were also used as critical inputs for developing self-improvement plans.
- The final draft of the Continuous Quality Improvement (CQI) Manual has been completed. This manual covers quality activities in the Obstetric Department and Neonatal Unit in addition to the Emergency Department.

Infection Control, CSSD, Blood Bank, OR, Nursing, Anesthesia and Laboratory. The Manual includes the following sections:

- Managerial performance standards and a monitoring checklist-hospital wide.
- Managerial and inputs standards at the department level and their monitoring tools. These are described in separate chapters, one for each of the above mentioned departments. Departments' clinical performance is monitored both retrospectively and concurrently. Retrospective assessment is confined to obstetric and neonatal units only and using clinical indicators. Concurrent assessment tools have been developed - in coordination with Task Two -for all the above mentioned departments and are attached to the clinical protocols.
- Describe the improvement activities based on the monitoring of both managerial and clinical standards.

Activity No. 3.5.3: Coordination Activities

- In coordination with Task Two, a new coding system for the clinical performance of the Obstetric and Neonatal Departments is being developed. A data collection format for the Neonatal Department was developed and pre-tested in Beni Mazar District Hospital in Minya Governorate. Based on the results of the test, the coding system is being revised and refined.
- An introductory chapter for the clinical protocols has been developed in coordination with Task Two. This chapter describes briefly the CQIS Manual and emphasizes the importance of the process used in developing protocols and the use of concurrent assessment for performance measurement and hence improvement.
- In an attempt to support the area of coordination and integration between the Quality, Curative Care, and MCH MOHP Departments and JSI, a meeting was held on March 9, 2004 in the JSI Cairo office with Dr. Bassuini, Head of the General Directorate for Quality and Dr. Khaled Nasr, HM/HC Deputy Executive Director. An overview of the HM/HC Continuous Quality Improvement System: Scope, Types, Quality Monitoring Checklists, etc. was presented. Dr. Bassuini explained the accreditation system for General/District Hospitals and discussed the constraints. An action plan was developed.
- In response to the above mentioned plan, the final draft of the CQIS Manual was introduced to Dr. Bassuini in a meeting held on March 21, 2004 for review and comments. A plan was developed with Dr. Bassuini and his staff for accreditation of the two selected facilities (Gharb El-Mattar Urban Health Center unit and El-Tahrir District Hospital). Dr. Bassuini promised that this plan will be incorporated into their next quarterly plan (April – June, 2004).

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.4 TASK FOUR: Monitoring System in Place to Track Utilization and Impact and Provide Feedback

Accomplishments:

Activity No. 4.1: Assist the MOHP to Set Up MHIS Centers at District Level in Coordination with Family Planning

- During this quarter, the Task Four team assessed the operation of the District MHIS centers in Giza. The assessment took place against a quality monitoring checklist with a scoring system to evaluate the performance of each District MHIS Center. The following table presents the score for each district:

Table 23: Assessment for MHIS Centers in Giza

	Physical Structure	Furniture	Equipment	Supplies	DIC Personnel	DIC Procedures	Operation /security	Total Score
North Giza	83	100	88	100	100	88	80	90
El Agouza	67	100	75	100	100	88	60	83
El Omrania	83	100	88	100	100	88	60	88
South Giza	83	100	63	100	100	88	80	85
El Haram	67	100	88	100	100	88	60	85
Markaz Giza	100	100	75	100	100	88	80	90
El Warak	83	100	63	100	100	88	75	85
Oseim	100	100	88	100	100	88	60	90
El Hawamdeya	67	100	88	75	100	75	60	80
El Badrashein	100	100	88	100	100	88	80	93
El Ayat	83	100	88	75	75	88	80	85
El Saff	67	100	100	75	100	88	80	88
Etfeih	50	100	75	100	75	88	25	74
El Wahat El Baharia	100	80	63	100	75	88	80	83
Menshaat El Qanater	83	100	88	75	100	0	60	68
El Dokki	83	100	50	33	100	80	80	75
Boulaq El Dakrou	83	100	88	100	100	88	80	90

- The results of the assessment revealed low performance of Hawamdeya, Etfeih, Menshaat El Qanater, and El Dokki MHIS Centers.
 - Etfeih still suffers from unavailability of a room allocated for MHIS Center.
 - Menshaat El Qanater's computer is out-of-order and needs to be repaired.
 - El Dokki does not have a printer and supplies for printing. Family Planning did not provide them with a printer. JSI will provide the printer.
- Currently Task Four is working on solving these problems.

Activity No. 4.2: Design and Upgrade User Friendly Software for MHIS

- During this quarter training programs on the upgraded MHIS application took place for all District and Governorate MHIS centers in Upper Egypt. The total number of participants in these training programs was 182. The training program is conducted under the close supervision and by trainers from NICHHP.
- JSI provided technical assistance to the NICHHP to establish a Help Desk for the MHIS application. The main function of the Help Desk is to provide on-line technical assistance and troubleshooting for MHIS Centers at governorate and district levels. The Help Desk includes four units, namely: Coding Maintenance Unit which is responsible for maintenance of facility codes and other MOHP code standards; Data Quality Unit which is responsible for monitoring data completion, accuracy and timeliness; Call Receiving Unit which is responsible for providing on-line trouble shooting over telephone calls to governorate and district MHIS Centers, and Technical Support Unit which is responsible for computer and HIS application trouble shooting in the sites in case of failure of the Call Receiving Unit to solve the problem on the phone. Moreover, JSI provided technical assistance for NICHHP to establish a HIS Development Unit that is capable to maintain the MHIS application in future. Currently, the HIS Development Unit is responsible for adding all the new data input forms of the Preventive Care Sector to the HIS application under supervision of JSI. JSI provided NICHHP with two training courses during the last quarter of 2003. Currently, JSI is preparing for advanced course on HIS application troubleshooting and implementation for the Help Desk staff.

Activity No. 4.3: Develop and Implement Quality Assurance Checklist for the District MHIS Centers

- A comprehensive Manual for the Quality Assurance System was developed and includes:
 - Procedures for District and Governorate MHIS Centers operating the upgraded MHIS system.
 - Data quality monitoring system.
- A training module was developed for Governorate MHIS Center Managers.
- A two day workshop is planned to improve data quality procedures at the governorate level.

Activity No. 4.4: Data Use Workshops

- During February and March 2004, two meetings were held with MHIS Center Managers and Governorate MCH Managers of the nine Governorates of Upper Egypt to agree on an outline, content and plan for data use workshops for 2004. The data use workshops were redesigned to allow MCH Managers at the governorate level to meet with the District Manager Assistants (MCH) to better plan and manage MCH activities using data from the HIS application and Planning and the Monitoring system.

- In summary, the data use workshops format is designed as follows:
 - Each Assistant District Manger presents MCH indicators used by SMC in his district for the last two years.
 - The MCH Manager at the governorate level discusses the sub-standard indicators after each presentation to identify problems and agree with the Assistant District Manager for MCH on recommended interventions.
 - The MCH Manager at the governorate level presents the MCH situation in the governorate.
 - The proposed recommendations for action reached for each District represent the annual plans for the SMCs at the district and governorate levels.
- During the second and third quarters of 2004, HM/HC Project will conduct - in cooperation with Task Three- the data use workshops to improve planning and monitoring activities at governorate and district levels.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.5 TASK FIVE: Research Activities

Accomplishments:

Activity No. 5.1: Identify and Conduct Operation Research Studies

- Approval was received on five topics and the proposals for two more studies are in process of development:
- Studies for which approval was received are:
 - *Impact of the use of CPAP on neonates with respiratory distress*: all preparatory phases completed, piloting completed and the process of data collection has started.
 - *Collaborative patterns between specialists during and immediately following deliveries*: proposal completed and the development of data collection tools is in progress.
 - *Hospital practices for normal delivery in Upper Egypt Governorates*: proposal development is in progress, revision of data collection tools is in progress.
 - *The role of the non-pneumatic anti-shock garment in the first-aid management of obstetric hemorrhage*: proposal and data collection tools development are in progress.
 - *The use of uterotonics for the management of the third stage of labor*: proposal and data collection tools development are in progress.

Activity No. 5.2: Training on the Maternal Mortality Surveillance System (MMSS)

- The MMSS was introduced to the selected members of Cairo Governorate Safe Motherhood Committee for MMSS on January 12-13, 2004. The total trainees were 40.
- Four-one day trainings were conducted for all Health Officers / Clerks for Cairo governorate during this quarter. A total of 97 health officers and 99 clerks were trained as follows:

Table 24: Training on MMSS

Date	Number of Participants	
	Health Officers	Clerks
March 7	25	22
March 8	26	23
March 9	25	25
March 10	21	29
Total	97	99

- An orientation on MMSS to the remaining 18 governorates of Egypt (Urban, Lower Egypt and Frontier Governorates) was conducted on January 21-22, 2004. MCH Directors and Preventive Directors of these 18 governorates attended this orientation training session.

Activity No. 5.3: Monitor the Implementation of Maternal Mortality Surveillance System (MMSS) in Upper Egypt Governorates

- An assessment of the MMSS performance for the Health Offices, Health Districts and Health Directorates in the 27 governorates of Egypt was conducted during this quarter. The findings of this assessment have been reported to the MOHP Undersecretary for Integrated Health Care and the HM/HC Executive Director. The report includes an assessment of the performance of a selected sample of 71 Health Offices and 51 Health Districts in the 27 governorates of Egypt. The following table shows the distribution of Health Offices and Districts assessed.

Table 25: Health Offices and Health Districts Selected for the Assessment of MMSS

Governorates	Date of Visit	Number of Days	Number of Districts	Number of Health Offices
1. Giza	January 12	1	2	2
2. Fayoum	January 13	1	3	4
3. Beni Suef	January 14	1	2	2
4. Minya	January 15	1	2	3
5. Assiut	January 18	1	2	3
6. New Valley	January 19-20	2	1	2
7. Sohag	January 21	1	2	5
8. Cairo	January 22	1	2	2
9. Alexandria	January 24	1	2	2
10. Marsa Matrouh	January 25-26	2	2	2
11. Beheria	January 27	1	2	3
12. Gharbia	January 28	1	2	4
13. Kafr El Sheikh	January 29	1	2	4
14. Aswan	February 07	1	2	2
15. Luxor	February 08	1	2	2
16. Quena	February 09	1	2	3
17. Qualuobia	February 10	1	2	2
18. Red Sea	February 11-12	2	1	2
19. Daqhleya	February 14	1	2	1
20. Damietta	February 15	1	2	2
21. Port Said	February 16	1	0	3
22. Ismailia	February 17	1	2	2
23. Suez	February 18-	1	3	2
24. Sharkia	February 19	1	2	3
25. North Sinai	February 22-23	2	1	2
26. Menoufia	February 24	1	2	2
27. South Sinai	February 25-26	2	2	2
Total		32	51	71

- A CDC consultant visited Cairo from February 18-24, 2004 to assess the MMSS implemented by the MOHP in Egypt.

C.10.7 TASK SEVEN: Better Social Community Services

Accomplishments:

Activity No. 7.1: Community Needs Identification and Decision-Making

- Twenty three one-day workshops were held in Assiut, Minya, Giza, and the slum area of Gharb El-Mattar in Giza to orient Community Health Committees (CHCs) on the Community Needs Identification and Decision-Making Tools (CNI-DMT).
- The workshops were attended by 184 participants representing CHC members, Heads of Local Administration Units, Health Managers in some of the Districts and Managers of the BEOCs in these communities. The main result of the workshops was to agree on the scheduling of the Rapid Household Survey Workshops to be conducted in their communities and the selection of the Community Outreach Workers to be trained to conduct the surveys.

Table 26: Training for Community Outreach Workers

Governorate	District	Community	Date
Assiut	Manfalout	El-Hawatka	January 3
		Arab Beni Shokeir	January 10
	Abu Tieg	El-Dweena	March 27
	Sahel Selim	Sahel Selim	February 21
Minya	Mallawi	Sedfa	March 13
		Om Komos	January 10
		Kalandoul	January 22
		Beni Khaled	January 22
	El-Edwa	Atf Heidar	March 6
	Maghagha	Dahmaro	March 27
Giza	El-Saff	El-Hay	January 19
Giza	Gharb El-Mattar	Gharb El-Mattar (Slum area)	January 8
	North Giza	Aziz Ezzat	March 2
		El-Bohy	March 2
		Madinat El-Omal	March 2
		Imbaba	March 2
	El-Wahat El-Baharia	El-Baweity	February 22
		El-Zabow	February 23
		Mandeisah	February 24
		Qabala	February 25
		El-Harra	February 26
	El-Qasr	February 26	

- Five-day workshops were conducted for 23 communities in Assiut, Minya, and Giza. The purpose of the workshops was to train Community Outreach Workers on conducting the Community Needs Identification-Rapid Household Survey (CNI-RHS). Fifteen Outreach Workers from each of the twenty three communities (a total of 345) were selected and trained to conduct the CNI-RHS. Following the training, the outreach workers conducted the needs assessment in each of the following communities:

Table 27: CNA Training

Governorate	District	Community	Date
Assiut	Manfalout	El-Hawatka	January 4-8
		Arab Beni Shokeir	January 11-15
	Abu Tieg	El-Dweena	March 28 – April 1
	Sahel Selem	Sahel Selim	February 22-26
	Sedfa	Sedfa	March 14-18
Minya	Mallawi	Om Komos	January 11-15
		Kalandoul	January 25-29
		Beni Khaled	January 25-29
		El-Barcha	February 29-March 4
	El-Edwa	Atf Heidar	March 7-11
	Maghagha	Dahmaro	March 28 – April 1
Giza	El-Saf	El-Hay	January 25-29
Giza	North Giza	Gharb El-Mattar (Slum area)	January 10-15
		Aziz Ezzat	March 7-11
		El-Bohy	March 7-11
		Madinat El-Omal	March 7-11
		Imbaba	March 14-18
	El-Wahat El-Baharia	El-Baweity	March 20-25
		El-Zabow	March 20-25
		Mandehsah	March 20-25
		Qabala	March 20-25
		El-Harra	March 20-25
		El-Qasr	March 20-25

- The main objectives of the workshops were to learn how to use the RHS to identify:
 - Practice of key behaviors related to MCH issues,
 - Knowledge of danger signs during pregnancy, delivery, postpartum and care for the newborn, and
 - Main obstacles that could hinder accessing MCH services in these communities.

- To conduct the RHS, a random sample of at least 50 mothers with a baby less than one year old were selected from the birth registers from the health units for interview during the RHS.
- Over a five-day period, the RHS interview process was conducted in each community and the results were manually tabulated and finalized for appropriate action.
- The workshops were preceded by the development of community profiles for each of the twenty three communities. These profiles included demographic data collected from the local administration units and health units of the communities. The main purpose of these profiles is to portray communities with their unique characteristics, services, and resources.
- Following the RHS, CHC workshops were conducted in all communities - except for El-Wahat- to:
 - Share the results of the RHS,
 - Identify the community needs/problems related to MCH issues,
 - Prioritize and analyze these problems,
 - Suggest alternatives for solutions to address these problems and meet the community needs, and
 - Develop Community Actions Plans (CAPs) to guide the community actions in this respect.
- The action plan workshops were attended by 419 participants who represent CHCs members on Community Outreach Workers who conducted the CNI-RHS process and Heads of the Village Chief Executive in these communities.
- The CAPs describe the problems/needs of the community, their priority order, their causes, suggested interventions, and the responsible persons and time frame for each intervention. Some of the problems/needs are addressed at the community level. Others that are beyond the capability of the community are submitted to the district to be incorporated within the district health plan.

Activity No. 7.2: Community Health Education

Activity No. 7.2.1: Health Care Providers Sensitization

- Eight workshops were conducted for 126 health providers and decision-makers from Giza, Assiut, Minya and Cairo. Participants were sensitized to the community perceptions and beliefs related to MCH issues. The main objective was for health providers to take these perceptions and beliefs into consideration during interactions with patients. The following table illustrates the number of participants per workshop and the districts represented.

Table 28: Health Care Providers Sensitization

Governorate	Date	Districts	No. of participants
Minya	March 16-18	El Edwa & Maghagha	16
Assiut	February 24-26	Manfalout & Abnoub	14
	March 8-10	Sedfa & El Badary	17

Governorate	Date	Districts	No. of participants
Giza	January 13-15	El Saff & Etfeih	20
	January 20-22	El Ayat & El Badrashein	20
	March 2-4	North Giza	14
	March 21-23	Al Warak & Menshaat Al Qanater	25
Total			126

Activity No. 7.2.2: Integrating HM/HC Messages in the Literacy Curricula of the General Authority for Literacy and Adult Education (GALAE)

- During this quarter, World Education (WE) started to pursue the implementation of the Memorandum of Cooperation signed with GALAE, MOHP, Ford Foundation, USAID, WE and JSI to develop 10 more health lessons. To do this, WE conducted a meeting to share the suggested health topics for integration in the literacy curricula of GALAE. JSI was invited to the meeting to provide technical input to the content of the health messages from both the community and medical perspectives.
- The agreed-upon health topics were geared towards three main topics: nutrition, reproductive health and hygiene/sanitation.

Activity No. 7.3: Training of Health Educators

- During this quarter a series of health education workshops were conducted by lead trainers trained by HM/HC as follows:
 - A training workshop was conducted in Assiut Governorate from January 12 to 15, 2004. Twenty four participants participated in the workshop.
 - A training workshop was conducted in Sohag Governorate from December 17 to 19, 2004. Twenty seven participants attended the training workshop.
 - A training workshop was conducted in Minya Governorate from March 7 to 10, 2004. Twenty six participants attended the workshop.
- As a result of the TOT that was implemented in Minya and Sohag Governorates, Health Educators presented their health education plans that were developed in the TOT workshop and included it as part of the overall Governorate Health Education Plan. The plan included promoting antenatal care and delivery by a trained health provider in health facilities.
- Two follow up meetings were conducted with the lead trainers in Assiut on January 16, 2004 and in Minya on March 11, 2004 to discuss progress related to the implementation of plans and identify constraints in implementing this plan. In addition, training skills were reinforced.

Activity No. 7.4: Female Genital Cutting**Activity No. 7.4.1: Activities Targeting the Community and the Non-Medical People**

- During this quarter, 78 participants including: Social Workers, Health Educators, and Community Outreach Workers from local NGOs were trained on advocating against FGC in two three-day workshops that were conducted in Assiut Governorate and one in Minya Governorate.

Table 29: FGC Training

Governorate	Date	No of participants
Assiut	February 24-26	23
Assiut	March 16-18	27
Minya	March 23-25	28
Total		78

Activity No. 7.4.2: Activities Targeting the Health Providers

- A draft of the FGC Protocol has been developed and is in the process of being finalized. The protocol will be printed next quarter. The FGC training module has been revised and is being finalized.
- Training Obstetricians using the FGC module began as follows:
 - Two one-day FGC workshops were conducted in Sohag governorate on February 14-15, 2004. Forty five Ob/Gyns attended the workshops.
 - Two one-day workshops were conducted in Minya from February 13-14, 2004 including 29 participants.
 - Two one-day workshops in Assiut were conducted from February 27-28, 2004 including 48 participants.
- During this quarter, an FGC consultant from the Manoff consultant developed a draft documentation report for the HM/HC FGC activities, as well as an evaluation plan for the HM/HC FGC training activities.

Activity No. 7.5: Continuing Community Activities

- All printed IEC materials were delivered to JSI warehouse. A distribution plan was developed and is being implemented.
- Two posters were designed and printed for the Conference on Preventing Postpartum Hemorrhage from Research to Practice that was held in Bangkok, Thailand. The first poster displayed the HM/HC activities and the second poster displayed averting maternal deaths due to postpartum hemorrhage.
- A meeting was held with the Horus Channel to discuss the airing of the eight medical teleconferences. The meeting resulted in an agreement to provide HM/HC two hours per week during the telemedicine program.
- Work is on-going to divide each teleconference topic to several 30 minute episodes.
- Nefertity Channel was given beta - cams of the campaign TV spots for the purpose of re-airing HM/HC campaign TV spots.

Activity No. 7.6: Strengthen IPC Training for Physicians and Nurses

- Four IPC workshops were conducted in Sohag attended by 84 participants (physicians and nurses). Each workshop lasted for two days. The first three workshops for 59 physicians and the second for 25 nurses. The workshops were conducted on January 5-6, 11-12, 21-22, and 24-25, 2004.
- Two IPC workshops were conducted in Assiut for physicians and attended by 48 participants on February 11-12 and March 21-22, 2004.
- Three workshops were conducted in Minya one for physicians on March 3-4, 2004 and attended by 24 participants and two for nurses and attended by 50 participants on February 22-23, and March 14-15, 2004.

Activity No. 7.7: Iron Supplementation Program

- Distribution of iron tablets is taking place in target schools in Sohag, Assiut and Minya as well as in the rest of Upper Egypt governorates, Giza, and Suez.
 - In Sohag distribution took place in all districts except for the rural areas of Sohag and Geheina districts.
 - In Assiut, tablets were distributed in most of the urban areas as well as rural areas in Shark Assiut, El Ghanayem, Dayrout, Abu Tieg and El Fath.
 - In Minya, distribution of iron tablets took place in all districts except rural areas of Samalout, Mallawi and El Edwa.
- A total of 174,500 cups were received and distributed by the HIO in Assiut. They were distributed to students in urban schools in all districts of Assiut except for Sahel Selim.
- Three one-day refresher workshops were organized and conducted by JSI Assiut Field Office from January 26-28, 2004. a total of 32 program leaders from Assiut, Manfalout, El Kouseyah and Dayrout districts attended the first day. Twenty seven participants from El Badary, Sahel Selim and El Ghanayem attended the second day. Thirty participants from Abnoub, El Fath, Sedfa, and Abu Tieg attended the third day. The workshops reviewed the program protocol with the leaders from HIO, MOHP, MOE and Azhar. Implementation obstacles at the district level were also discussed and practical solutions for problems and obstacles were developed.
- Three one-day refresher workshops were organized and conducted by JSI Minya Field Office from February 7-9, 2004. Thirty program leaders from Minya, Beni Mazar and Maghagha districts attended the first day. Twenty nine leaders from Mallawi, Samalout and Mattay attended the second day. Twenty nine from Deir Mowas, Fekreya and El Edwa attended the third day. The same objectives and outcome as those of the Assiut workshop were accomplished.

Activity No. 7.9: Health Education Activities to Support SHIP in Schools

- Health education activities are taking place in target schools. Trained science teachers are conducting two sessions for each target class, one addressing smoking and the other addressing anemia.

- By the beginning of the second semester, IEC materials were distributed to most of the target schools in Sohag, Assiut and Minya. In Minya, the materials were distributed to all districts except rural Samalout, Mallawi and El Edwa.

Constraints:

- HIO is procuring iron tablets from another pharmaceutical company (Sedico) in addition to the current company (Misr Pharmaceutical Company). There is still a shortage of the tablets due to the increasing number of students that resulted from the expansion of the program to Giza and Suez Governorates. As a result, some students in different districts either did not receive the tablets this semester or they received irregular doses.
- There is a shortage of cups as well that might affect the compliance of the students.

Proposed Actions to Overcome Constraints:

- JSI notified MOHP and HIO with the constraints and on proposed actions to overcome them. Follow-up with the concerned parties will continue in the next quarter.
 - Purchase tablets from another pharmaceutical company/companies in addition to the current ones.
 - Accelerate the process of cup manufacturing and distribution to target schools.

C.10.10 TASK TEN: Small Grants Program**Accomplishments:****Activity No. 10.1: Management and Monitoring of the Base Period Awarded 120 Grants**

- A total amount of LE 317,962 was disbursed to 38 NGOs in accordance with the grant contracts' financial scheme.
- The below table shows the distribution of grants by governorate.

Table 30: Distribution for Grants

Governorate	Installment in LE	Number of NGOs
Beni Suef	23,605	2
Qena	10,687	2
Fayoum	19,627	3
Minya	130,776	15
Assiut	31,300	5
Sohag	101,967	11
TOTAL	317,962	38

Activity No. 10.2: Training Awarded NGOs (Technically and Financially)

- No activities were conducted this quarter.

Activity No. 10.3: Award New Grants to Capable Local NGOs

- Thirty two NGOs in 13 districts of Giza were visited for institutional and financial capacity assessments during January 2004 (in addition to the 12 NGOs previously assessed during December 2004 in Cairo and Giza).
- Thirty-six NGOs from Giza and Cairo passed the assessment and were invited to attend three four-day workshops on proposal writing.
- Fifty four representatives of 27 NGOs attended three training workshops on proposal writing in Cairo and Giza Governorates as follows:

Table 31: Training for Proposal Writing

Governorate	Date	Number of NGOs	Number of Participants	
			NGOs	MOISA
Cairo	January 26-29	1	2	2
Giza	January 26-29	9	18	1
	February 9-12	12	24	3
	February 16-19	5	10	3
Total		27	54	9

- Participants were introduced to Healthy Mother/ Healthy Child Project and were trained on how to write a comprehensive proposal within the context of HM/HC goal and objectives.
- A total of 22 NGOs submitted their proposals to JSI by February 29, 2004.
- Proposals are currently being assessed and scored by members of the Review Panel.

Activity No. 10.4: Evaluation, Closing and Setting Plan for Sustainability

- No activities were conducted this quarter.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.11 TASK ELEVEN: Commodity Procurement Program

Accomplishments:

Activity No. 11.1: Commodities

- JSI/TCA completed the procurement process and issued Purchase Orders for a total of US\$7,550,288. The total amount committed to date is 84% of the total procurement budget.
- TCA has procured the following items this quarter per the Life of Contract Procurement Plan:
 - Offshore medical equipment
 - Local medical furniture, equipment, and supplies
 - Computer equipment, parts, and supplies for the MOHP
 - Local office furniture
- The two sample Preemicare incubators passed the ECRI testing in the US. The final report was shared with MOHP and USAID representatives. The incubators are being returned to Egypt and JSI is planning for an ECRI representative to visit Egypt to train and supervise the testing of a first tranche of incubators.
- JSI and TCA have accepted delivery and installed the following items for Option Period recipient locations this quarter:
 - Medical equipment, furniture, and supplies in completed facilities
 - Air conditioners for completed facilities
 - Computing equipment, parts, and supplies for the MOHP
- A comprehensive spreadsheet was updated defining the remaining local and offshore procurement requirements.
- Inventory in the warehouse was maintained and a physical inventory was completed.
- The computerized Commodity Procurement Database was maintained and is producing required reports.
- Distribution reports were provided to the GOE Customs Representative and Sales Tax Authority as required.

Activity No. 11.2: Renovations

- All the bidding, contracting and financial procedures related to the renovation process were implemented according to the renovation plan.
- Four contracts for a total of LE 316,645 were signed for renovations in Basateen Sharq UHC, Gharb El-Mattar UHC and Phase III BEOCs in both Minya and Assiut.
- Three RFQs were issued for renovations in Minya and Assiut Phase III BEOCs, Saff District Hospitals and Giza BEOCs for a total estimated cost of LE 505,900.
- A total amount of LE 149,248 has been paid during this quarter and LE 233,622 is still obligated.

Activity No. 11.3: Publications

- Two thousand copies of Arabic HM/HC Brochure were printed and distributed.

- One thousand copies of the Counseling Cards were reprinted. Implementation of the distribution plan will be implemented the next quarter.
- The following IEC materials were reprinted for distribution in the option period governorates:
 - Copies of Campaign 1 and 2 posters (26,000)
 - Copies of each of the following flyers (26,000):
 - Antenatal care
 - Elements of birth preparedness
 - Care for mother in postpartum
 - Care for the newborn
 - Care for the mother and baby in the postpartum period
 - Breastfeeding flyer
 - The Birth Preparedness Guide

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

C.10.12 TASK TWELVE: Coordination Activities

Accomplishments:

MOHP/ USAID/ JSI Monthly Coordination Meetings

- During this quarter a series of the following meetings were held:
 - **January 4, 2004:** The meeting concentrated on the preliminary results of the MMSS 2003 and the preparatory actions to organize the Second Regional Conference on the results of MMSS in North Upper Egypt: Minya, Assiut, Beni Suef and Fayoum.
 - **January 12, 2004:** This meeting concentrated on the reasons and remedies for discrepancies in the figures of Female Maternal Deaths, Maternal Deaths and Live Births between CAPMAS, NICHP and HM/HC MIS Unit. For this purpose, Dr. Bothaina El Dib, Head of Population Research Center, CAPMAS, and Dr. Sanaa Ibrahim, Director General of NICHP, MOHP, were invited to attend the meeting. A mechanism of re-checking and validation was developed between the concerned parties and an agreement was reached that the 2003 figures will witness absolute consistency.
 - **January 28, 2004:** Draft materials and agenda for the Second Regional Conference on the results of MMSS to be held in Minya, the agenda of the second meeting of the Safe Motherhood Committee and the agenda of the National Conference on Safe Motherhood were discussed and reviewed in this meeting.
 - **February 22, 2004:** The specific purpose for this meeting was to brief Dr. Esmat Mansour on the main conclusions and recommendations of the CDC/WHO Consultant who assessed the National Maternal Mortality System to identify its points of strengths and weaknesses and provide recommendations for consolidating and upgrading the system. Dr. Hani El Atrash, CDC/WHO Consultant, presented the conclusions and recommendations to the Population and Health Division of USAID/Egypt on the same day.

Central Department for Curative Care:

- As a follow up on the outcome of the one day Safe Motherhood Meeting on “*New Advances in Obstetric Care for Reduction of Maternal Mortality*” that was held on January 14, 2004, a meeting was held with Dr. Hassan El Kalla, MOHP Undersecretary for Curative Care on January 21, 2004 to brief him on the main recommendations of the meeting and discuss the outline of the proposed operation research on: “*Active Management of The Third Stage of Labor in Egypt with Concentration on Prevention and Management of Hemorrhage*” that is planned to be conducted in five University Medical School hospitals in Cairo, Alexandria, Assiut, Minya, Ein Shams plus El Eman Specialized Hospital in Assiut.
- The Operation Research pre-proposal was presented by Dr. Ndola Prata, MD, MS., Coordinator of the Bixby Population Program, University of California. Dr. Hassan El Kalla advised that it could be more rewarding if this operation research would be extended to cover multi-level MOHP facilities. This will help consolidating the results of the research and render it

- more representative. JSI promised to discuss the issue with USAID and provide feedback to Dr. El Kalla.
- JSI COP raised with the MOHP Undersecretary for Curative Care the situation and allocation of duties and responsibilities of the newly recruited 18 Hospital Supervisors and areas of technical assistance required to arm them with tools for effective supervision.
 - Dr. Hassan El Kalla expressed his willingness to share the names, area of specialization and the allocated governorate for each one of the hospital supervisors and requested the support of JSI to provide them with an orientation on the HM/HC Project, continuous quality improvement system and tools for the quality monitoring format and self improvement plan.
 - Dr. El Kalla welcomed any initiative to coordinate and cooperate with the General Department of Quality Assurance to accredit the Obstetrics and Neonatal Departments of the targeted hospitals for HM/HC and in this respect he mentioned that there is a Ministerial Decree establishing a “*Joint Committee for Accreditation*” which constitutes the legal basis for the accreditation process.

Quality and MCH General Departments

- Dr. Bassuini Salem, Director General of Quality, Dr. Khaled Nasr, Deputy Executive Director, HM/HC; and the JSI team, met on March 9, 2004 to mainstream and secure compatibility between HM/HC Protocols, the CQIS and the MOHP Accreditation System. (Attachment A: Minutes of the meeting).

Central Departments of Curative Care, Emergency and Integrated Health Care

- To follow up on the conclusions and decisions of the second meeting of the National Safe Motherhood Committee that was chaired by H.E. the Minister of Health and Population, the MOHP Undersecretaries for Integrated Health Care, Emergency Care, and Curative Care met on March 31, 2004 to discuss areas of coordination and collaboration between the three sectors to provide quick and quality emergency care. The current status for emergency medical service (EMS) was discussed. Efforts exerted by HM/HC Project to develop service standards, protocols for physicians and nurses, training modules, clinical performance indicators and job description for EMS staff and deficiencies are in –existence and have to be addressed. By the end of the meeting, the participants developed a plan of action with specific activities to address constraints and obstacles in EMS to be submitted to the Minister for approval.

Regional Center for Training (RCT)

- JSI participated in the workshop organized by RCT on “Quality of Reproductive Health Care” from January 14 to 16, 2004. The JSI Chief of Party moderated the first technical session entitled “Approaches to Quality of Reproductive Health Care”. Dr. Wafaie El Sakkary, JSI Quality Specialist, inaugurated this session with a presentation entitled “Introduction to Quality Care”. Two JSI consultants from the University of California introduced the latest advances in managing obstetric hemorrhage, namely the use of the non-

- pneumatic anti-shock garment and the use of misoprostol in the prevention and treatment of postpartum hemorrhage.
 - RCT requested CDs and hard copies of the protocols and modules developed and used by HM/HC so that they use them in conducting their training courses and workshops. JSI positively responded to this request and added to the request CDs of the eight Perinatal teleconference videos to be used for training and expressed its willingness to train the trainers of RCT on how to use them.

USAID/JSI/Catalyst

- On February 12, 2004, HM/HC, USAID Team Leaders and TAHSEEN USAID Team Leader met with JSI and Catalyst teams to discuss coordination and cooperation with MOHP counterparts in the areas of MCH and family planning. The meeting was closed by an agreement to seek the guidance of the two Undersecretaries for FP and IHC on the integration between two sectors.

USAID Coordination Meeting

- A meeting was held on March 16, 2004 between USAID, HM/HC Team Leader, HWFP team and JSI. The main purpose of the meeting was to discuss areas of coordination and collaboration of activities between the HM/HC Project and Health Workforce Development Project (HWD). The agenda covered two general areas:
 - Perinatal Medical Teleconference Package
 - Research Proposals
 The conclusions of the discussion were as follows:
 - Perinatal Medical Teleconference
 - The Perinatal Medical Teleconference Package was reviewed.
 - The Memorandum of Cooperation for Technical Assistance between the Ministry of Health and Population of ARE and the USAID (including its contractors John Snow, Inc. and JHPIEGO) were reviewed and it was decided to delay implementation of this activity. This decision was based on the fact that the universities were in an early stage of curricula revision and the appropriate time for implementation of the Perinatal Medical Teleconference Package would be after this process is completed.
 - Research Proposals
 - The plan for collaboration between the HM/HC and HWD Projects in the implementation of the research activity entitled “The role of Non-inflatable Anti-Shock Garment (NASG) in the First-aid Management of Obstetric Hemorrhage in Egypt” was discussed in reference to the following areas:
 - Implementation Matrix (including sites)
 - Research Protocol
 - Draft Data Collection Form
 - It was agreed that Cairo and Alexandria University Maternity Hospitals would be added as sites. The other sites are El Galaa Teaching Hospital, Assiut Ob/Gyn Hospital and El Hawamdeya General Hospital in Giza.

- The plan for collaboration between the HM/HC and HWD Projects in the implementation of the research activity entitled “The Role of Uterotonics / Misoprostol (and Active Management of the third Stage of Labor) for the Prevention of Post-Partum Hemorrhage” was discussed in reference to the following areas:
 - Implementation Matrix (including sites)
 - Research Protocol
- It was agreed that Mansoura University would be added as a site. The other hospital sites are; Ain Shams University, Assiut University, Menya University, Assiut General Hospital, Kouseyah District Hospital, Abnoub District Hospital, DASHLOUT Rural Hospital and Osseim District Hospital.
- The plan for collaboration between the HM/HC and HWD Projects in the implementation of the research activity entitled “Use of Manual Vacuum Aspiration (MVA) in Management of Bleeding Before 20 weeks of Gestation” was given to all parties for review and comments.
- The materials for this activity include the following:
 - Implementation Matrix
 - Research Protocol
 - EOC Protocol for Physicians: Bleeding Before 20 Weeks Gestation
 - CBT Module for Physicians: Bleeding Before 20 Weeks Gestation
 - Workshop Report: Development of a Comprehensive Post-abortion Care Package (CATALYST Consortium/TAHSEEN Project)
 - Resources Materials: Management of bleeding before 20 weeks of gestation including MVA
 - Clinical Performance Monitoring Indicators (Concurrent Assessment): Manual Vacuum Aspiration (MVA)
 - Reference Articles: Post-abortion Care
- A status report was given on the implementation of the research study entitled “Comparison of Constant Flow Nasal Continuous Positive Airway Pressure (NCPAP) to Ventilation in Neonates with Respiratory Distress”. Orientation and data collection has started.
 - Implementation Matrix (being implemented in 13 Neonatal Units)
 - Protocol
- The 13 Neonatal units are:
 - A. Giza**
 1. Imbaba General Hospital
 2. El Tahrir General Hospital
 3. El Hawamdeya General Hospital
 - B. Minya**
 1. Menya General Hospital
 2. Beni Mazar District Hospital
 3. Mallawi District Hospital
 - C. Assiut**
 1. Assiut General Hospital
 2. Obstetrics and Gynecology General Hospital

3. Badary District Hospital
4. Dayrout District Hospital
5. El Quosaya District Hospital

D. Sohag

1. Sohag General Hospital
 2. Gerga General Hospital
- A briefing was given on the plan to implement the research entitled “Collaborative patterns between specialists (obstetricians and neonatologists) during and immediately following delivery”. Orientation will take place in April and the study will start in May 2004.
 - Implementation Matrix (eight sites to be selected)
 - Protocol
 - The study entitled “Facility-based normal labor and delivery practices” was discussed in reference to the following areas: Implementation Matrix and Protocol which both have to be revised

USAID/EHP in Ezbet El Nawar Slum Area

- A meeting was held at USAID with Dr. Emad Yanni on April 1, 2004 to discuss issues related to providing environmental health services in urban slums in general and review progress achieved in the demonstration project of Ezbet El Nawar. Representatives of WE, GEOSS, NGO Service Center, JSI, EHP participated in this meeting.
- The meeting demonstrated that among the participants there exists a lot of great expertise and materials available about health, hygiene, nutrition and the environment. With collaboration between all of the parties represented, work together can produce some great outputs.
- Following the meeting, Ms. Sarah Fray of JSI and Mr. Nakashima of EHP had the opportunity to meet at World Education and to see the draft version of the hygiene literacy materials and also the process of preparing the materials in collaboration with the trainers and supervisors of GALAE. In this meeting JSI and World Education heard for the first time that GEOSS is using the HM/HC World Education/GALAE MCH materials in their work. It is anticipated that they will also adopt the World Education/GALAE hygiene materials when those become available.

TAHSEEN Project

A) Joint District Health Planning

- The Safe Motherhood Committee of Mallawi and Mattay - the two districts of Minya selected for integrated implementation for FP/MCH package of Services – were adjusted to accommodate more representation of the Family Planning Sector. The two committees, in addition to the Health Committees of the Elected Local Councils of the two districts, were oriented on the objectives of the FP/MCH activities. A training on decentralized district level planning/management was then conducted for 21 participants on January 26-29, 2004.
- The training course had been extended from the normal three days to four days to give an ample time to accommodate the topics related to family planning in detail.

- TAHSEEN was involved since the start of the preparation and during the implementation of this integrated activity. The Quality and Sustainability Specialists (Catalyst) in addition to a consultant from Catalyst participated. The Deputy of Quality Unit-Family Planning Sector also participated in the workshop.
- During the workshop, TAHSEEN resource persons led three sessions, 20 minutes each, that covered the following topics:
 - FP four indicators used for planning and the current status of these indicators in Minya Governorate.
 - TAHSEEN activities to be implemented within the scope of these district plans.
 - FP Supervisory System.

B) Development of a Comprehensive PAC Package

- JSI provided all the materials produced by the Healthy Mother/Healthy Child Project: protocols, curricula and training materials related to 20-week pregnancy bleeding and participated in the workshop mentioned above organized by TAHSEEN Project on March 4, 2004. The purpose of the workshop was to complete a recommended comprehensive PAC training curriculum for MOHP review and approval.

C) MIS/HIS

- JSI participated and presented a paper on MOHP HIS in response to TAHSEEN invitation -on behalf of USAID- to a meeting that was held on February 8, 2004 to discuss coordination of MIS activities within USAID funded projects. Coordination is on-going between the two partners and a follow-up meeting on the same topic will be hosted by JSI.

D) Coordination between USAID Funded Projects

- On March 25, 2004 TAHSEEN called for a meeting to coordinate activities, share information and agree on joint activities between HM/HC, CHL and TAHSEEN and PHR+. Chief of Parties of USAID contractors providing technical assistance to these projects agreed to meet regularly for this purpose.

E) Scaling up for Success: Best Practices in Family Planning and Reproductive Health Workshops

- JSI participated in the above workshop organized by CATALYST from March 29 to April 2, 2004. The objectives of the workshop were:
 - To share with MOHP and public officials, program planners and the NGO Sector innovative, successful and best practice models in FP and RH services.
 - To support program planners to implement model interventions appropriate to the national FP/RH Programs.
- The workshop, which was attended by participants from Asia and Near Cost Countries, focused on issues such as optimal birth spacing intervals, integration of FP and RH and linkages with non health programs, post-abortion care, community and post partum care, sustainability and commercial partnerships for providing family planning and reproductive health services.

World Education

- JSI, in cooperation with World Education, organized and facilitated a meeting to share the results of the community needs assessment conducted in Mallawi, Minya related to topics to be included in the Health Integrated Literacy curriculum. The meeting which was held on January 22 was attended by the Director General of Integrated Health Zones, MOHP, Head of IEC Unit, HM/HC Project: representatives of the Environmental Health Project, WE and JSI.
- World Education briefed the participants on the progress made in developing the ten new literacy lessons-funded by Ford Foundation- in Mallawi District, Minya Governorate and particularly the type of topics that were deemed necessary by the stakeholders.
- Resource persons from the MOHP provided facts -from the technical point of view- to educationalists on the health topics to be incorporated in the literacy curriculum. These topics cover maternal and child nutrition, reproductive health and personal and domestic hygiene.
- It was agreed by the end of the meeting that the same groups will meet again to review the design of the literacy lessons incorporating these health messages.

Plan International

- A meeting was held on March 11, 2004 with Dr. Raed Azab, Health Advisor, Plan International to join efforts in the slum area of El Basateen Shark where Plan International is working. It was agreed at the end of the meeting to coordinate activities in the area of reproductive health in a complementary way.

UNICEF

- A meeting was held on March 22, 2004 with Miss Heba Ali, Assistant Project Officer, UNICEF, to discuss collaboration in the area of micronutrients in general and the prevention of anemia in particular. UNICEF was briefed on the objectives and components of the Adolescent Anemia Prevention Program and provided with materials produced under the umbrella of this program.

Contract Administration

Accomplishments:

- Full and part time staff positions were filled for the Option Period. A Contract Staff List detailing employee names and positions can be found in Annex C.
- The Sohag Field Office was closed and commodities transferred to the governorate.
- The JSI budget-tracking tool was updated monthly and actual and projected expenses were entered.
- JSI provided monthly expenditure estimates to USAID as required.
- JSI use of PIL funds is being tracked daily and reconciled with the Project on a monthly basis.
- Project inventory records were updated and reviewed for accuracy.
- Travel and registration paperwork for the MOHP counterparts attending workshops was processed.

Constraints:

- None

Proposed Actions to Overcome Constraints:

- None

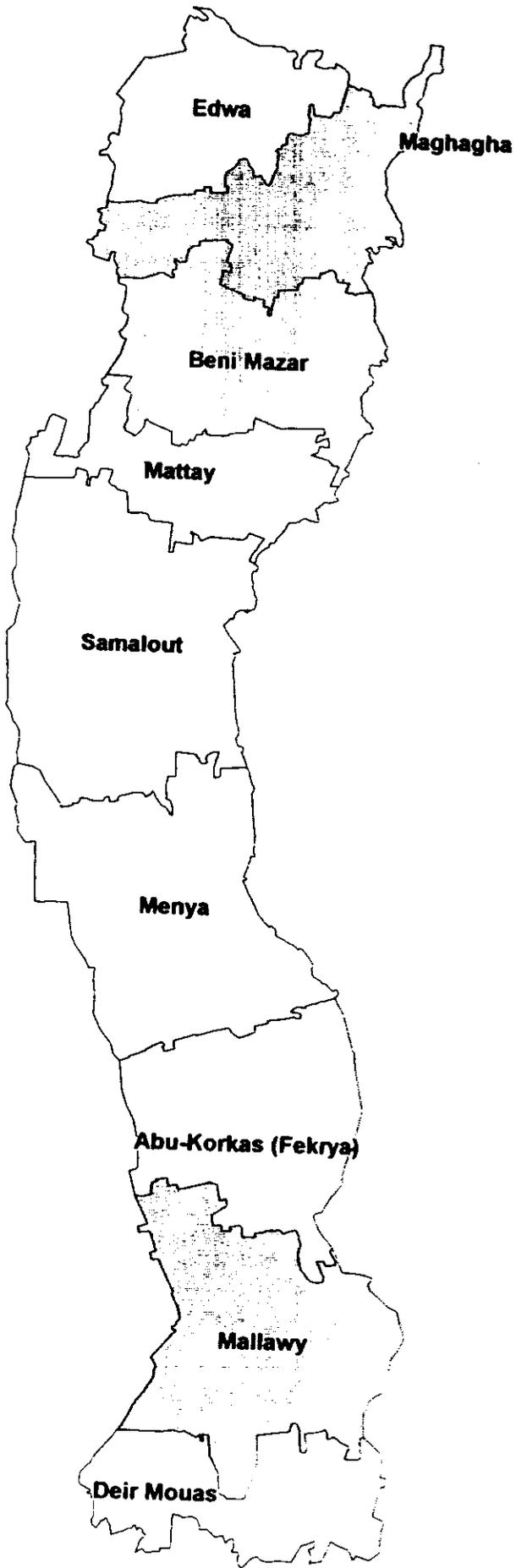
**ANNEX A: STATUS OF THE OPTION PERIOD
PERFORMANCE MILESTONE**

No.	Date Due	Task No.	Milestone	Submitted	Validated	Approved	Comments
1	3/15/2002	11	Development of HM/HC Project Procurement Plan			USAID	
2	9/15/2002	1	Implementation of basic package in 12 additional districts for a cumulative total of 37 districts.	4/14/2002	√	6/2/2002	Completed
3	9/15/2002	2	Assist in the coordinated implementation of IMCI training in at least one additional target governorate.	3/15/2003	√	5/21/2003	Completed
4	9/15/2002	3	12 Additional District Health Plans and Monitoring Systems developed and implemented for a cumulative total of 37 districts.	9/8/2002	√	9/30/2002	Completed
5	9/15/2002	4	Assist MOHP to establish 70 district MHS centers.	9/12/2002	√	12/29/2002	Completed
6	9/15/2002	5	Comprehensive research plan developed	9/8/2002	√	12/31/2002	Completed
7	9/15/2002	7	Community Action Plans developed and implemented in 12 additional districts for a cumulative total of 37 districts.	9/13/2002	√	2/4/2003	Completed
8	9/15/2002	10	A cumulative total of 120 small grants awarded to NGOs in target districts.	9/8/2002	√	9/30/2002	Completed
9	9/15/2002	11	Procurement of \$ 1.5 Million of Project commodities.	9/13/2002	√	10/3/2002	Completed
10	3/15/2003	11	Procurement of \$ 3 Million of Project commodities.	9/13/2002	√	6/21/2003	Completed
11	9/15/2003	1	Implementation of basic package in 16 additional districts for a cumulative total of 53 districts.	3/15/2003	√	11/12/2003	Completed
12	9/15/2003	2	Monitor QA scores of neonatal centers in target governorates.	3/15/2003	√	11/9/2003	Completed
13	9/15/2003	3	16 Additional District Health Plans and Monitoring Systems developed and implemented for a cumulative total of 53 districts.	9/15/2003	√	11/5/2003	Completed
14	9/15/2003	4	Assist MOHP to establish 75 district MHS centers.	9/15/2003	√	11/5/2003	Completed
15	9/15/2003	5	5 operations research studies completed.	10/9/2003	√	2/4/2004	Completed
16	9/15/2003	7	Community Action Plans developed and implemented in 16 additional districts for a cumulative total of 53 districts.	9/15/2003	√	11/12/2003	Completed
17	9/15/2003	7	Assist the MOHP and HIO to maintain the Adolescent Anemia Prevention Program in the five original UE governorates and phase into the new target governorates.	9/15/2003	√	1/29/2004	Completed
18	9/15/2003	10	A cumulative total of 140 small grants awarded to NGOs in target districts.	9/15/2003	√	11/12/2003	Completed
19	9/15/2003	11	Procurement of \$ 5.5 Million of Project commodities.	9/15/2003	√	11/5/2003	Completed
20	9/15/2004	1	Implementation of basic package in 17 additional districts for a cumulative total of 70 districts.	3/15/2003	√	11/5/2003	Completed
21	9/15/2004	2	Complete implementation of MCH-FP integrated package of services in one pilot district including Health Sector Reform.				
22	9/15/2004	3	17 Additional District Health Plans and Monitoring Systems developed and implemented for a cumulative total of 70 districts.				
23	9/15/2004	4	Assist MOHP to establish 80 district MHS centers.				
24	9/15/2004	5	Assist MOHP in the development and pilot test of a national maternal mortality surveillance system.				
25	9/15/2004	7	Community Action Plans developed and implemented in 17 additional districts for a cumulative total of 70 districts.				
26	9/15/2004	10	A cumulative total of 160 small grants awarded to NGOs in target districts.				
27	9/15/2004	11	Procurement of \$ 7.5 Million of Project commodities.				
28	3/15/2005	1	Implementation of basic package in 5 additional districts for a cumulative total of 75 districts.				
29	3/15/2005	2	Assist the MOHP/Urban Health Department to pilot test adapted HM/HC interventions in 1-2 urban slum areas.				
30	3/15/2005	3	5 Additional District Health Plans and Monitoring Systems developed and implemented for a cumulative total of 75 districts.				
31	3/15/2005	4	Assist MOHP to establish 85 district MHS centers.				
32	3/15/2005	5	12 operations research studies completed.				
33	3/15/2005	5	Monitor implementation of surveillance system in target governorates of Upper Egypt.				
34	3/15/2005	7	Community Action Plans developed and implemented in 5 additional districts for a cumulative total of 75 districts.				
35	3/15/2005	10	A cumulative total of 170 small grants awarded to NGOs in target districts.				
36	3/15/2005	11	Procurement of \$ 9 Million of Project commodities.				

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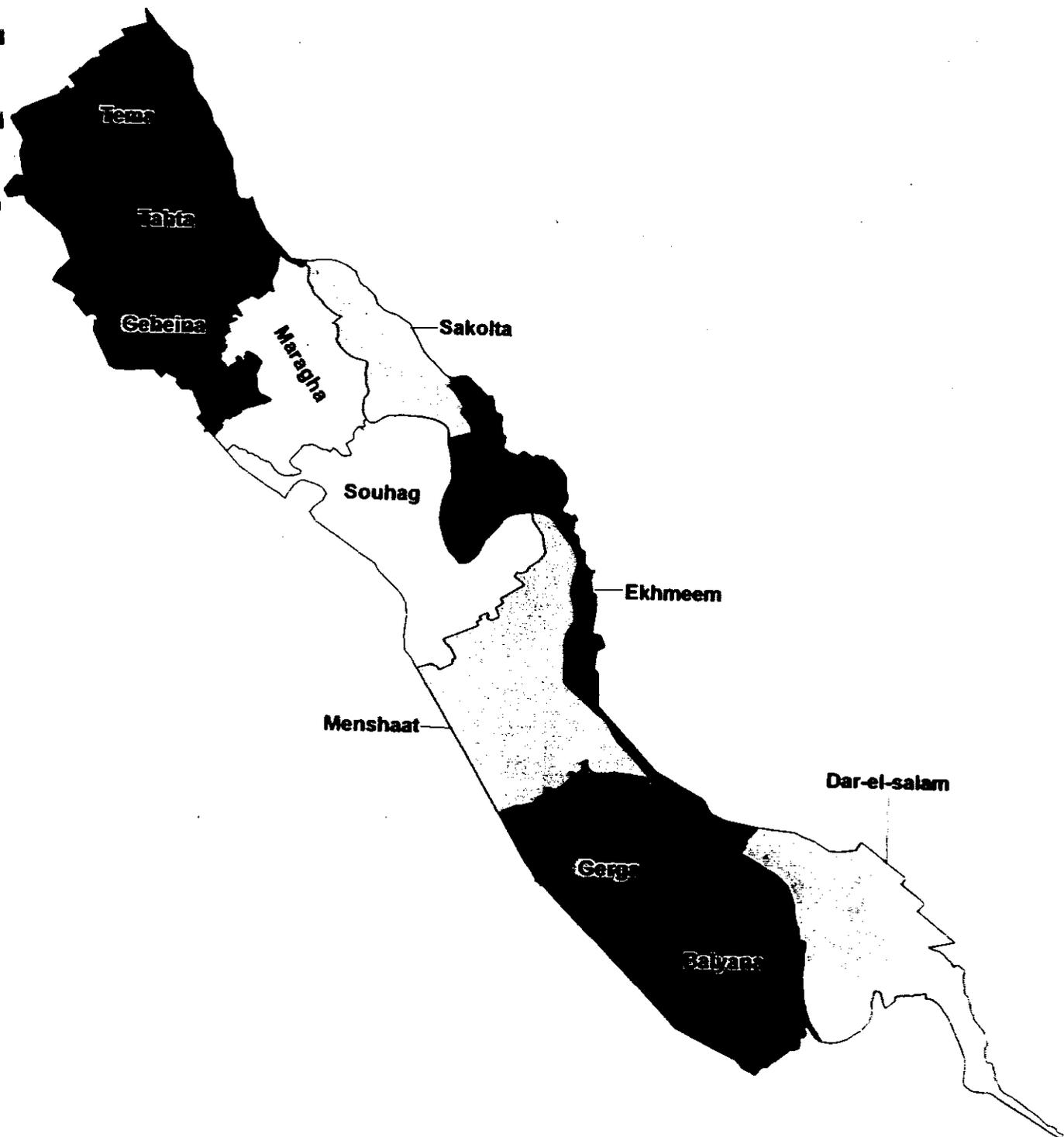
ANNEX B: MAPS OF TARGET GOVERNORATES

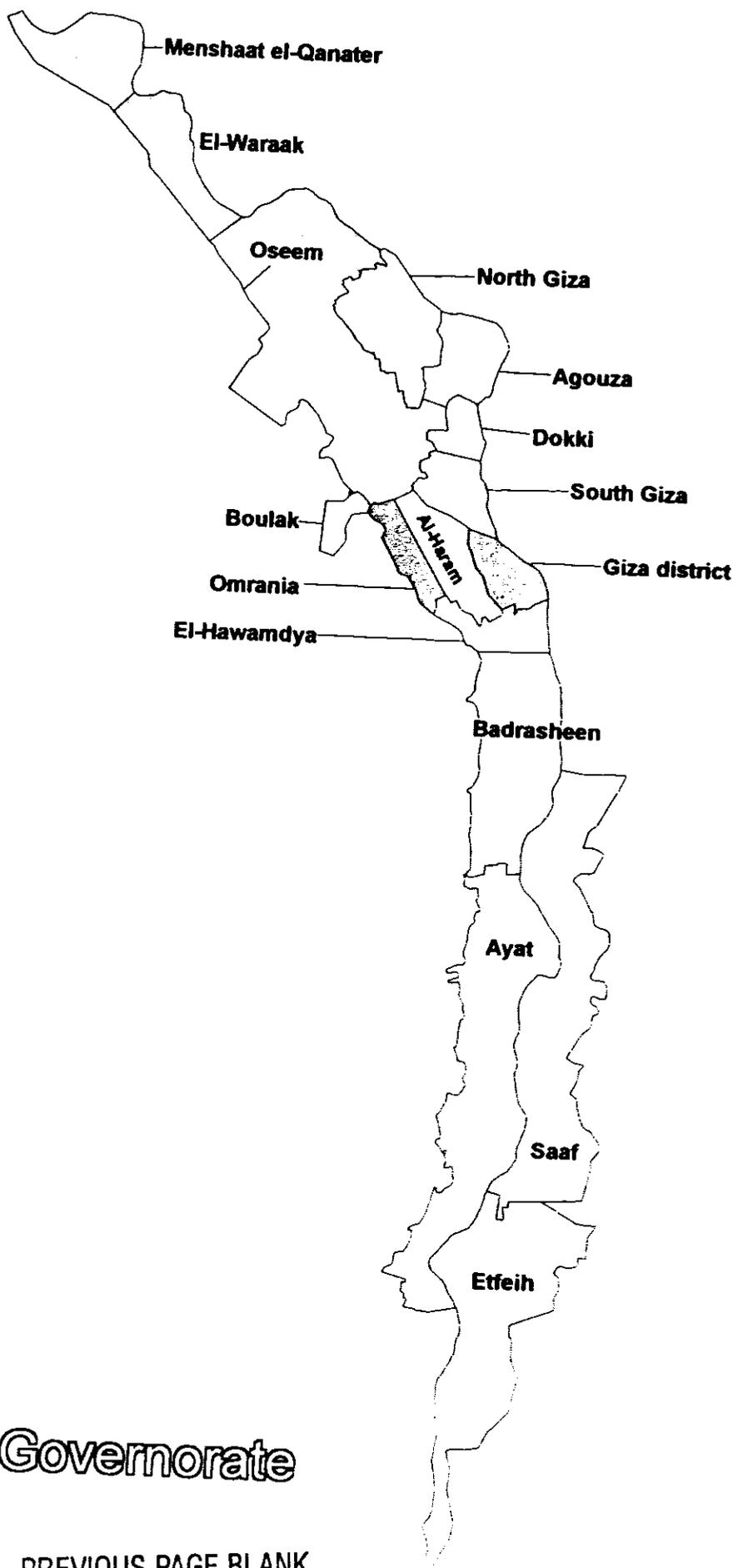
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**Menya
Governorate**







Giza Governorate

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ANNEX C: CONTRACT STAFF LIST

**John Snow, Inc. HM/HC
Staff Names and Titles
Option Period - March 31, 2004**

ISJ/ Cairo office Full-Time Employees	
Names	Titles
Reginald Gipson	Chief of Party
Sobhi Moharram	Deputy Chief of Party
Tom Coles	Coordinator for Tasks 1, 3, 4, 5, 7 & 10 Health Providers Training Supervisor Coordinator for Task 2
Katrina Kruhm	Project Administrator Coordinator for Task 11
Hassan El Sheikh	Implementation Team Coordinator Task Team Member: Task 1 & 2
Mohsen El-Said	Implementation Specialist (Assiut & Menya) Task Team Member: Task 1
Abdel Moneim Hamed	Implementation Specialist (Sohag & Giza) Task Team Member: Task 1
Dalia Raafat	Architect & Quantity Surveyor Task Team Member: Task 1
Nevine Mohsen	Junior Field Civil Engineer Task Team Member: Task 1
Lamiaa Mohsen	Perinatal Coordinator Task Team Member: Task 2
Mohamed Moustafa	Training Specialist Task Team Member: Task 2
George Sanad	Health Management Specialist Task Team Member: Task 3
Ossama Ibrahim Mohamed	Health Management Specialist Task Team Member: Task 3
Dalia Hassan	Health Management Assistant Task Team Member: Task 3
Wafaei El-Sakkary	Quality Assurance Specialist Task Team Member: Task 3
Sherif El-Kamhawy	Quality Assurance Assistant Task Team Member: Task 3
Khaled Abdel Fattah	Senior Systems Analyst (Arabsoft) Task Team Member: Task 4
Sameh Gamil	Senior Systems Engineer (Arabsoft) Task Team Member: Task 4
Adel Hakim	Maternal Mortality Surveillance System Specialist Task Team Member: Task 5
Khaled Nada	Operation Research Specialist Task Team Member: Task 5
Marwa Kamel	Communications & Behaviour Change Specialist Task Team Member: Task 7
Ihab Abdel Ghani	Health Education Specialist Task Team Member: Task 7
Heba Rafik	Public Relations, Communications & Contracting Specialist Task Team Member: Task 7
Dalia Sherif	Health Communications Specialist Task Team Member: Task 7

Names	Titles
Khaled El-Sayed	Community Development & Mobilization Specialist Task Team Member: Task 7
Maha Anis	SHIP Implementation & Training Specialist Task Team Member: Task 7
Hana Abdel Megeid	Program Assistant (SHIP) Task Team Member: Task 7
El-Sayed Kishta	NGOs Small Grants Specialist Task Team Member: Task 10
Ingy Kotb	NGOs Small Grants Assistant Task Team Member: Task 10
Mohamed Mansour	Procurement & Commodity Logistics Specialist Task Team Member: Task 10 & 11
Marion Charobim	Procurement Specialist Task Team Member: Task 11
Ola Zakaria	Administrative / Contracting Specialist Task Team Member: Task 11
Hazem Mansour	Financial Manager & Deputy Administrator
Amr Obeid	Senior Accountant
Bassem Reda	Senior Accountant
Ayatallah Mohamed	Accountant
Naglaa El-Bakri	Office Manager
Manar Adel	Administrative / Personnel Specialist
Rami Ezzy	Senior Network Administrator
Amr Hassan	Assistant Network Administrator
Gihan Iskandar	Senior Program Assistant (COP)
Mariam Samir	Program Assistant (MMSS)
Passant Al-Ashkar	Program Assistant (Management)
Neveen Sami	Program Assistant (Health Providers Training Supervisor)
Neveen Fathi	Program Assistant (Tasks 3 & 4)
Nesrine Sobhi	Program Assistant (Perinatal)
Sameh Sabry	Program Assistant (Slum Areas)
Amira Daa	Executive Secretary
Dina Khairy	Executive Secretary / Travel Assistant
Ola Hussein	Secretary
Nashwa Bahgat	Secretary
Roa Ibrahim	Secretary
Dina Bahader	Secretary
Mai Qandil	Receptionist / Secretary
Cherine ElKemary	Assistant Editor / Formatter
Iris Guirguis	Data Entry Assistant
Walid Salah	Data Management Assistant
Tarek El-Nadi	Senior Driver
Adel Kamel	Driver
Ali Yassin	Driver
Hassaballah Mostafa	Driver
Ayman Mohamed	Messenger/ Expeditor
Ahmed Moawad	Expeditor/Storekeeper
Mohamed Harbi	Messenger / Storekeeper
Ayman Mirghani	Photocopy Clerk / Messenger
Hassan Fawzi	Office Clerk / Messenger

Names	Titles
Khaled El-Ghoneimy	Office Clerk / Messenger
Essam Adel	Porter
Mohamed Taha	Porter
Sayed Eid	Porter
Part-Time Employees	
Nevine Hassanein	Slum Areas Development Coordinator
Omaima Kamel	Slum Areas Development Specialist
Mohamed Rashad	Architectural & Engineering Specialist
Ahmed Osman	Field Civil Engineer
Mohamed Helmy	Electrical Engineer
Khaled Saber	Bio-Medical Engineer
Iman Radwan	Bio-Medical Engineer
Mahmoud AbdelRahman	Bio-Medical Engineer
Walid Saber	Bio-Medical Engineer
Hussein Khamis	Support Services Coordinator
Sabry Hamza	EOC Coordinator
Ashraf Shawat	Support Services Coordinator (Anesthesiology & Blood Banks)
Ahmed Farag	Anesthesiology Specialist
Fareed Farouk	Anesthesiology Specialist
Mokhtar Abdel-Hai	Anesthesiology Specialist
Hany ElSayed	Blood Bank Specialist
Amr Abul Fadl	Emergency & Laboratory Specialist
Amr Abdallah	Emergency & Laboratory Specialist
Walid Abdel Gabbar	Emergency & Laboratory Specialist
Ahmed Ashraf Wegdan	Infection Control Specialist
Alaa Abou Zeid	Infection Control Specialist
Gamal Hamed Koraisy	Infection Control Specialist
Ahmed Hamdy	Midwifery Trainer
Mohamed Cherine	Master Trainer / Clinical Supervisor
Mohamed Sabry	Master Trainer / Clinical Supervisor
Amr Fathi	Clinical Supervisor
Abdel-Ghaffar Mohamed	Clinical Supervisor
Ahmed Fahim	Clinical Supervisor
Ahmed Samy	Clinical Supervisor
Ahmed Mohamed	Clinical Supervisor
Hossam Ahmed	Clinical Supervisor
Ihab El-Nashar	Clinical Supervisor
Karim Wahba	Clinical Supervisor
Khaled El-Sheikha	Clinical Supervisor
Khaled Azmy	Clinical Supervisor
Magdy Tawfik	Clinical Supervisor
Mahmoud Rizk	Clinical Supervisor
Mahmoud Shokry	Clinical Supervisor
Mohamed Mahmoud	Clinical Supervisor
Mohamed Morad	Clinical Supervisor
Sayed Mostafa	Clinical Supervisor
Tarek Khalaf	Clinical Supervisor
Ahmed Reda	Neonatal Clinical Supervisor

Names	Titles
Ahmed Abdel Salam	Neonatal Clinical Supervisor
Ahmed Tarek	Neonatal Clinical Supervisor
Aly Bayoumi	Neonatal Clinical Supervisor
Dahlia El-Sebaei	Neonatal Clinical Supervisor
Hala Atta	Neonatal Clinical Supervisor
Hisham Ali	Neonatal Clinical Supervisor
Mohamed A.Aziz Hagrass	Neonatal Clinical Supervisor
Mostafa Abdel Azeem	Neonatal Clinical Supervisor
Ossama Abdel Salam	Neonatal Clinical Supervisor
Salah El-Din Ahmed	Neonatal Clinical Supervisor
Sherif Mohamed	Neonatal Clinical Supervisor
Ismail El-Hawary	Neonatal Specialist
Maaly Guimei	Senior Nurse Advisor
Rosario Raz	Nursing Master Trainer
Abeer El-Kotb	Nursing Trainer / Supervisor (EOC)
Amira Morsy	Nursing Trainer / Supervisor (EOC)
Amaal Fathy	Nursing Trainer / Supervisor (EOC)
Azza Mohamed	Nursing Trainer / Supervisor (EOC)
Hamida Alam El-Din	Nursing Trainer / Supervisor (EOC)
Hanan Said	Nursing Trainer / Supervisor (EOC)
Hanan Abdel Fattah	Nursing Trainer / Supervisor (EOC)
Hoda AbdelAzeem	Nursing Trainer / Supervisor (EOC)
Nadia Abd-Allah	Nursing Trainer / Supervisor (EOC)
OmElSaad Farouk	Nursing Trainer / Supervisor (EOC)
Rasha Adel	Nursing Trainer / Supervisor (EOC)
Sabah Mohamed	Nursing Trainer / Supervisor (EOC)
Sahar younes	Nursing Trainer / Supervisor (EOC)
Sahar Moussa	Nursing Trainer / Supervisor (EOC)
Soad Ramadan	Nursing Trainer / Supervisor (EOC)
Doaa ElSayed A.Aziz	Nursing Trainer / Supervisor (NC)
Enayat El-Sayed	Nursing Trainer / Supervisor (NC)
Heba Ezzat	Nursing Trainer / Supervisor (NC)
Marzouka Gadailah	Nursing Trainer / Supervisor (NC)
Rabab El-Sayed	Nursing Trainer / Supervisor (NC)
Randa El-Sayed	Nursing Trainer / Supervisor (NC)
Salwa Ali	Nursing Trainer / Supervisor (NC)
Samar Mohamed ElSheshtawy	Nursing Trainer / Supervisor (NC)
Entisar Mohamed	Nursing Trainer / Supervisor (OR/CSSD)
Gehan Ahmed	Nursing Trainer / Supervisor (OR/CSSD)
Iman Abdel Samea	Nursing Trainer / Supervisor (OR/CSSD)
Lobna Mohamed	Nursing Trainer / Supervisor (OR/CSSD)
Madiha Mohamed	Nursing Trainer / Supervisor (OR/CSSD)
Mervat AbdelKader	Nursing Trainer / Supervisor (OR/CSSD)
Sahar Ahmed	Nursing Trainer / Supervisor (OR/CSSD)
Sahar Nagieb	Nursing Trainer / Supervisor (OR/CSSD)
Safaa Mohamed	Nursing Trainer / Supervisor (OR/CSSD)
Yousria ElSayed	Nursing Trainer / Supervisor (OR/CSSD)
Said El-Dib	Community & Health Management Coordinator

Names	Title
Olivia Riad	Management Specialist
Assiut Field Office	
Abdel Aziz Mohamed	Maternal & Child Health Specialist
Tarek Abdel-Wahed	Health Planning & Management Specialist/ Field Office Manager
Mohamed Youssef	Community Development & Mobilization Specialist
Akram Yehia	Field Program Assistant (SHIP), Assiut & Sohag
Mahmoud Ahmed	Administrative Assistant
Ashraf Mostafa	Administrative Assistant
Mohamed Badawi	Secretary
Mohamed Ali	Driver
Seoudi Fayez	Office Clerk / Messenger
Giza Field Office	
Marwan Abdel Fattah	Maternal & Child Health / Field Office Manager
Hala Mahmoud Sadek	Health Planning & Management Specialist
Ahmed Ramadan	Community Development & Mobilization Specialist
Ashraf Saad	Administrative Assistant
Mohamed Labib	Administrative & Logistical Assistant
Ibrahim AbdelMawgood	Secretary
Gamal Abdel-Azeem	Driver
Rabie AbdelNabi	Office Clerk / Messenger
Minia Field Office	
Gihan Shafik	Maternal & Child Health Specialist / Field Office Manager
Medhat Atta Morkos	Health Planning & Management Specialist
Mostafa Sayed	Community Development & Mobilization Specialist
Ahmed Hosni	Field Program Assistant (SHIP)
Samah Khalifa	Administrative Assistant
Mohamed Sayed Youssef	Regional Administrative & Logistical Assistant
Walaa AbdelMoneim	Secretary
Ahmed Al-Kassem	Driver
Gamal Ahmed	Office Clerk / Messenger

ANNEX D: SUMMARY OF IMPLEMENTATION STATUS IN MINYA

Option Period

Status of Implementation

September 16, 2001 - September 15, 2003

Minya Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Minya Governorate

Anchor Facilities

Funding Source	Completed	Not Completed			Comments/ Action Required
		IFB Issued	Contract Awarded	Expected Date for Completion	

Minya District

Minya Central Hospital

MOHP/ USAID/JSI	yes				
MOHP/ USAID/JSI	yes				
MOHP/ USAID/JSI	yes				
MOHP/ USAID/JSI	yes				
MOHP/ USAID/JSI	yes				
MOHP/ USAID/JSI	yes				
MOHP/ USAID/JSI	yes				
JSI	Yes				
JSI	Yes				
JSI	Yes				
JSI	Yes				
JSI	Yes				

Sakha District

USAID/JSI	Yes				
USAID/JSI	Yes				
USAID/JSI	yes				
USAID/JSI	Yes				
USAID/JSI	Yes				
USAID/JSI	Yes				
JSI	Yes				
					did not need renovation
JSI	Yes				
JSI	Yes				
JSI	Yes				

22 Gokona I.H.

23 Dagoof I.H.

24 El Sakha I.H.U.

25 Manshat El Sherate I.H.

26 El Bayaho I.H.

Anchor Facilities

Funding Source	Completed	Not Completed			Comments/ Action Required
		IFB Issued	Contract Awarded	Expected Date for Completion	

Abu Qaroon District

5.1 Abu Qaroon District Hospital

JSI	Yes				
JSI	Yes				
JSI	Yes				
JSI/MOHP	Yes				
JSI	Yes				
JSI	Yes				

Dahr Bawana District

5.2 Dahr Bawana District Hospital

MOHP	Yes				
HMHC	Yes				
MOHP	Yes				
MOHP	Yes				
HMHC	Yes				
JSI	Yes				
JSI	Yes				
JSI	Yes				

Dahr Bawana District

	Yes				
	Yes				
	Yes				
	Yes				plan to renovate female OR, and make extension for CEOC, HMHC
	Yes				
JSI	Yes				
Social Fund	NO				It is expected to finish by the end of September.
JSI	Yes				
JSI	Yes				

5.2 Sarataa Integrated Hospital

5.3 Beni Ali Integrated Hospital

5.4 Abu Garg Women Health Center

5.5 El Sheikh Fadl Integrated Hospital

Anchor Facilities

Delivery

Comments/ Action Required

Delivered

Partial

Expected Date for Completion

3. Abu Qirwa District Hospital

3.1 Abu Qirwa District Hospital

3.2 Asmat District Hospital

3.3 Dair Nowas District Hospital

4.1 Dair Nowas District Hospital

5.1 Dair Nowas District Hospital

5.2 Sandafa Integrated Hospital

5.3 Beni Ali Integrated Hospital

5.4 Abu Garg Women Health Center

5.5 El Sheikh Fadl Integrated Hospital

Yes			
No	No	May-04	Pending arrival of Off-Shore Procurement
Yes			

Yes			
Yes			
Yes			
Yes			Equipped By JESSICA, JSI provided only supplies
Yes			

Yes			
No	No	May-04	Pending arrival of Off-Shore Procurement (Beds)
Yes			
Yes			

Legend	Number of Physicians Trained <input type="checkbox"/>
	Number of Nurses Trained <input type="checkbox"/>
	Number of Lead Trainers Trained <input type="checkbox"/>
	HSMC <input type="checkbox"/>

		11	12	13	14	15	16	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	
Number of Physicians Trained	Blood Bank Services for Physicians																											
	Actual	1						1																				
	Planned	0						0							1		1										1	
	Blood Bank Services Competency																											
	Actual	1						1																				
	Planned	0						0							1		0										0	
	Blood Bank Services Mastery																											
	Actual	0						0																				
	Planned	0						0							1		0											
	Blood Bank Ser J OJT (# of Days)																											
Actual	8						8																					
Planned	0						0																					
Number of Physicians Trained	EOC (Infection control)																											
	Actual																											
	Planned																											
	Infection control Team																											
	Actual	4						3																				
	Planned	0						0																				
	IC Competency																											
	Actual																											
	Planned																											
	IC Mastery																											
Actual																												
Planned																												
IC/OJT (# of Days)																												
Actual																												
Planned	3							3																				
Private sector (physicians)																												
Actual																												
Planned																												
Private sector (pharmacists)																												
Actual	92																											
Planned	0																											

2 - District Health Planning & Management

Minya Governorate

MHC Members Trained											MSSS Members Trained								
MHC Members	MHC Members	MHC Members	MHC Members	MHC Members	MHC Members	MHC Members	MHC Members	MHC Members	MHC Members	MHC Members	MHC Members (# trained)		Health Officers (physicians and clerical) (# trained)		OMCyn Specialists (# trained)		MSSS OJT (# of Days)		
											A	P	A	P	A	P	A	P	
2	2	2	2	2	2	2	2	2	2	2	24	460	87	128	8				
													46	13					
													8	19					
											2	47	8	24	2				
											2	41	3	13	2				
											2	48	6	24	2				

Option Period

Status of Implementation

September 16, 2003 - September 15, 2004

Minya Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Minya Governorate

Anchor Facility		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
1	B Ebn... 1.1 B Ebn...	HMHC/ USAID	NO	Yes	Yes	End of May 04	
		HMHC/ USAID	NO			End of May 04	
		HMHC/ USAID	NO			End of May 04	
			N.A				
		HMHC/ USAID	NO			End of May 04	
			N.A				
		JSI / USAID	No	Yes	Yes	End of May 04	
2	Magh... 2.1 Magh...	HMHC / GOE	No	No	No	End of Sep. 04	expected awarding contract by June 2004
		JSI / USAID	No	Yes	Yes	End of May 04	
		JSI / USAID	No	Yes	Yes	End of May 04	
		JSI / USAID	No	Yes	Yes	End of May 04	
3	Manshiet Merbel WHU	HMHC/ USAID	No	Yes	Yes	End of Jul. 04	
		HMHC/ USAID	No			End of Jul. 04	
		HMHC/ USAID	No			End of Jul. 04	
		HMHC	No				
		MOHP	Yes	Yes	Yes	Yes	
		MOHP	Yes	Yes	Yes	Yes	
		HMHC					
3.2	Manshiet Merbel WHU	JSI / USAID	NO	Yes	Yes	End of May 04	

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
4	Makheri District						
4.1	Makheri District Hospital	HMHC	Yes	Yes	Yes	Yes	completed & functioning
		HMHC	Yes				
		HMHC	Yes				
		HMHC	Yes				
		HMHC	Yes				
		JSI / USAID	No	Yes	Yes	End of May 04	
			NA				
4.2	Makheri MC	JSI / USAID	NO	Yes	Yes	End of May 04	
4.3	Dayore Om Nakhin WHC	JSI / USAID	NO	Yes	Yes	End of May 04	
4.4	Kalanda WHC	JSI / USAID	NO	Yes	Yes	End of May 04	
4.5	Bera Kherid WHC	JSI / USAID	NO	Yes	Yes	End of May 04	
4.6	Al Bersha WHU	JSI / USAID	NO	Yes	Yes	End of May 04	

1 - CEOCs & BEOCs
 1.2 - COMMODITIES
 Minya Governorate

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
1	El Edwa District	No	No		Pending Renovations
10	El Edwa District	Yes			Interim Commodities supplied until completion of Renovations
12	Atfah District	No	No		Pending Renovations
	Matruh District	No	No		Interim Commodities will be sent on April 04
		Yes			
		Yes			Only The Anesthesia Machine Delivered.
		Yes			
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
3	Matruh District	No	No		Pending Renovations
		Yes			
		Yes			
Equipped By JESICA, JSI will only provide supplies					
		Yes			
3.2	Manshiet Menbal WHU	No	No		Pending Renovations

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
4	Malawi District				
4.1	Malawi District Hospital				
		Yes			Except few missing items for later delivery
		Yes			
4.2	Malawi No.	No	No		Pending Renovations
4.3	Deyouk One Health Post	No	No		Pending Renovations
4.4	Kalandou #1	No	No		Pending Renovations
4.5	Bwa Khatou WAC	No	No		Pending Renovations
4.6	Al Barsha WAC	No	No		Pending Renovations

1 - CEOCs & BEOCs
 1.3 - Training
 Mllyra Governorate

Legend		1	2	3	4	5	6	7	8	9	10	11	12
Number of Physicians Trained	<input type="checkbox"/>												
Number of Nurses Trained	<input type="checkbox"/>												
Number of Lead Trainers Trained	<input type="checkbox"/>												
HSBC	<input type="checkbox"/>												
Number of Physicians Trained	NC Physician Trained on Basic NC												
	Actual	5		5				3		10			
	Planned												
	NC Physician Trained on Advanced NC												
	Actual	5		5				3		10			
	Planned												
	NC Competency												
	Actual	4		8				5		7			
	Planned												
	NC Mastery												
Actual	1		2						1				
Planned													
NC/ OJT (# of Days)													
Actual	17		14				18		18				
Planned	3		3				3		3				
Number of Physicians Trained	EOC Physician Service Providers												
	Actual	3		15	1			7	1	17	6		1
	Planned												1
	(EOC Basic Competency)												
	Actual												
	Planned												
	(EOC Mastery)												
	Actual												
	Planned												
	EOC/ OJT (# of Days)												
Actual	6		9				6		9				
Planned	2		6				2		6				
Number of Physicians Trained	EOC Anesthesia												
	Actual	11											
	Planned												
	EOC Anesthesia Competency												
	Actual												
	Planned												
	EOC Anesthesia Mastery												
	Actual												
	Planned												
	EOC Anesthesia/ OJT (# of Days)												
Actual	5		5				5		9				
Planned	2		3				2		3				

Number of Physicians Trained
Number of Nurses Trained
Number of Lead Trainers Trained
HSMC

Legend

	13	12	11	10	09	08	07	06	05	04	03	02	01	00
--	----	----	----	----	----	----	----	----	----	----	----	----	----	----

		13	12	11	10	09	08	07	06	05	04	03	02	01	00
Private sector (physicians)	Actual	3	15					7		17					
	Planned	0	0					0		0					
Private sector (pharmacists)	Actual	92													
	Planned	0													
NC Nurses	Actual	3	6					4		3					
	Planned														
NC Nurses Competency	Actual	3	6					3		3					
	Planned	3	6					4		3					
NC Nurses Mastery	Actual	4	2					4		4					
	Planned														
NC Nurses/OJT (# of Days)	Actual	13	12					14		18					
	Planned	2	2					2		2					
EOC Nurses	Actual	3	3					7		9					
	Planned														
EOC Nurses Competency	Actual														
	Planned														
EOC Nurses Mastery	Actual														
	Planned														
EOC Nurses/ OJT (# of Days)	Actual														
	Planned	6	6							6					
Emergency Services for Nurses	Actual		10												
	Planned		5												
ER Competency	Actual		4												
	Planned		4												
ER Mastery	Actual		3												
	Planned		3												
ER for Nurses/ OJT (# of Days)	Actual		8												
	Planned		9												
OR Nurses	Actual	6	7					10		9					
	Planned														
OR Competency	Actual														
	Planned														
OR Mastery	Actual														
	Planned														
OR Nurses/ OJT (# of Days)	Actual	12	12					12		9					
	Planned	0	0					0		0					

Number of Physicians Trained
Number of Nurses Trained
Number of Lead Trainers Trained
HSMC

	13	12	11	10	9	8	7	6	5	4	3	2	1
--	----	----	----	----	---	---	---	---	---	---	---	---	---

		13	12	11	10	9	8	7	6	5	4	3	2	1	
Number of Lead Trainers Trained	EOC Physicians	Planned													
		Actual	3	1	3				3		2				
	EOC Competency	Planned		2	2				2		2				
		Actual													
	EOC Mastery	Planned													
		Actual													
	Emergency Services for Physicians	Planned													
		Actual			2										
	ER Competency	Planned			1						1				
		Actual									1				
	ER Mastery	Planned													
		Actual													
Number of Lead Trainers Trained	Anesthesiologists	Planned													
		Actual							1		2				
	Anesthesiologists Competency	Planned			1						1				
		Actual													
	Anesthesiologists Mastery	Planned													
		Actual													
	Nurses	Planned													
		Actual	12	4	6				2		7				
	Nurses Competency	Planned	8	4	4				4		4				
		Actual													
	Nurses Mastery	Planned													
		Actual													
HSMC	Mngt & QA Training (# trained)	Planned													
		Actual	10		10				10		10				
	Integrated Visits	Planned													
		Actual	4		4				4		7				
	QR Submitted Quarterly	Planned	4		4				4		7				
	Hospital SMCs Meetings	Planned													
	Actual	3		3				3		3					

2 - District Health Planning & Management

Minya Governorate

Districts	SMC Members Trained										MMBS Members Trained													
	Planning and Management Training (# trained)		Quality Improvement (# trained)		Data Use Training		# of Health Committee members Oriented		TOT (# trained)		Service Improvement Fund	District Health Plan Developed	Quarterly Review Reports	# of GSMCs Meetings	# of DSSMCs Meetings	# of SMCs & HCs Joint Meetings	SMC Members (# trained)		Health Offices (physicians and Clerks) (# trained)		Ob/Gyn Specialists (# trained)		MMBS OUT (# of Days)	
	A	P	A	P	A	P	A	P	A	P							A	P	A	P	A	P	A	P
Minya Governorate	22		22	22	0	10	12		11		5		12		3	49							63	
6 Bahari District	6	6	7	7		1										3							12	
7 Bahari District	7	7	8	8		2										4							12	
8 Bahari District	10	10	8	8		2	18						2		5								12	
9 Bahari District	12	12	11	11		1	30						1		4								12	

ANNEX E: SUMMARY OF IMPLEMENTATION STATUS IN ASSIUT

Option Period

Status of Implementation

September 16, 2001 - September 15, 2003

Assiut Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Assiut Governorate

	Anchor Facility	Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
3	Gharb Assiut District						
1.1	El Eman El Gharbi	MOHP/ JSI	Yes				
		MOHP/ JSI	Yes				
		MOHP/ JSI	Yes				
		MOHP/ JSI	Yes				
		MOHP/ JSI	Yes				
		MOHP/ JSI	Yes				
1.2	El Anbar	JSI	Yes				
4	Sharq Assiut District						
2.1	Assiut General Hospital	HMHC/USAID	No	No	No	End of Dec 04	
		HMHC/USAID	No			End of Dec 04	
		HMHC/USAID	No			End of Dec 04	
		HMHC/USAID	No			End of Dec 04	
		HMHC/USAID	No			End of Dec 04	
		HMHC/USAID	No			End of Dec 04	
			N/A				
2.2	El Moteaa University Center	JSI	Yes				
5	Marout Assiut District						
3.1	Ob/Gyn Hospital	USAID/JSI	Yes				
		USAID/JSI	Yes				
		USAID/JSI	Yes				
		USAID/JSI	Yes				
		USAID/JSI	Yes				
3.2	Naga Sabea Integrated Hospital	JSI	Yes				
3.3	El Moteaa Integrated Hospital	JSI	yes				

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
El Ghazayeh District							
4.1	El Ghazayeh District Hospital	MOHP	Yes				
		MOHP	Yes				NCU extension done by JSI need a new incubator in washing room
		MOHP/ JSI	Yes				
		MOHP/ JSI	Yes				
4.2	El Ghazayeh Integrated Hospital	JSI	Yes				
El Kousayeh District							
5.1	El Kousayeh District Hospital	HMHC		Yes	Yes	December	Complete renovation, interim space is used for CEOC and NCU
		HMHC		Yes	Yes	December	
		HMHC		Yes	Yes	December	
		HMHC		Yes	Yes	December	
		HMHC		Yes	Yes	December	
5.2	El Kousayeh Integrated Hospital	JSI	Yes				
5.3	Beit Katta Integrated Hospital	JSI	Yes				
5.4	Razara Integrated Hospital	JSI					
El Fath District							
6.1	El Fath Urban Health Center	MOHP	Yes				
6.2	El Alawla Integrated Hospital	JSI	Yes				
6.3	El Wasta Integrated Hospital	MOHP/JSI	Yes				not handed by the contractor

1 - CEOCs & BEOCs

1.2 - COMMODITIES

Assiut Governorate

Anchor Facilities		Delivery			Comments/Action Required
		Delivered	Partial	Expected Date for Completion	
1	1.1	Yes			
		Yes			
		Yes			
		Yes			
2	2.1	Yes			
		Yes			
		Yes			
		Yes			
3	3.1	Yes			
		Yes			
		Yes			
		Yes			
3.2		Yes			
		Yes			
		Yes			
		Yes			
3.3		Yes			
		Yes			

Anchor Facility		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
4	<input type="checkbox"/> Glenview (Hospital)	Yes			
	<input type="checkbox"/> Glenview (Medical Center)	Yes			
		Yes			
		Yes			Equipped By JESSICA, JBI provided only supplies
		Yes			
		Yes			
5	<input type="checkbox"/> Kenosha (Hospital)	Yes			
	<input type="checkbox"/> Kenosha (Medical Center)	Yes			
		Yes			
6	<input type="checkbox"/> El Paso (Hospital)	Yes			
	<input type="checkbox"/> El Paso (Medical Center)	Yes			
	<input type="checkbox"/> El Paso (Medical Center)	Yes			
33	<input type="checkbox"/> El Paso (Medical Center)	Yes			

1 - CEOCs & BEOCs
 1.3 - Training
 Asslut Governorate

Legend		Number of Physicians Trained													
		Trained <input type="checkbox"/>		Number of Nurse <input type="checkbox"/>		Number of Lead Trainers <input type="checkbox"/>		Trained <input type="checkbox"/>		HSMC <input type="checkbox"/>					
Number of Physicians Trained	NC Physician Trained on Basic NC	Actual	8	25	20			2	9						
		Planned						1	1						
	NC Physician Trained on Advanced NC	Actual	6	25	20			2	7						
		Planned						1	1						
	NC Competency	Actual	10	26	38			2	17						
		Planned													
	NC Mastery	Actual	1	4	2			1	1						
		Planned													
	NC/ OJT (# of Days)	Actual	51	56	55			50	32						
		Planned													
	Number of Physicians Trained	EOC Physician Service Providers	Actual	10	21	3	20	2	3	12	1	2	1	2	
			Planned	0	0	0	0	0	3	4					
(EOC Basic Competency)		Actual	8	10	8			0	0						
		Planned	0	0	0			8	6						
(EOC Mastery)		Actual	1	1	1			0	0						
		Planned	1	8	1			8	6						
EOC/ OJT (# of Days)		Actual	2	3	3			2	6						
		Planned	1	2	3			1	3						

Legend		Number of Physicians Trained																				
		1	2	3	4	5	6	7	8	9	10	11	12									
Number of Physicians Trained <input type="checkbox"/>																						
Number of Nurse Trained <input type="checkbox"/>																						
Number of Lead Trainers Trained <input type="checkbox"/>																						
HSMC <input type="checkbox"/>																						
Number of Physicians Trained	Blood Bank Services for Physicians																					
	Actual	1	1	3				1														
	Planned	0	0	0				0														
	Blood Bank Competency																					
	Actual	0	1	2				0														
	Planned	0	0	0				0														
	Blood Bank Mastery																					
	Actual	0	1	0				0														
	Planned	0	0	0				0														
	Blood Bank OJT (# of Days)																					
Actual	10	12	12				6															
Planned	0	0	0				0															
Number of Physicians Trained	EOC (infection control)																					
	Actual							6														
	Planned							0														
	Infection control Team																					
	Actual	4	4	4				0														
	Planned	0	0	0				0														
	IC Competency																					
	Actual																					
	Planned																					
	IC Mastery																					
Actual																						
Planned																						
IC/OJT (# of Days)																						
Actual	2	2	1				11															
Planned	0	0	0				0															
Private sector (physicians)	Actual							6														
	Planned							0														
	Actual	164																				
	Planned	30																				
Private sector (pharmacists)	Actual																					
	Planned																					

Legend	Number of Physicians Trained <input type="text"/>																		
	Number of Nurse Trainers <input type="text"/>																		
	Number of Lead Trainers <input type="text"/>																		
	Trained <input type="text"/>																		
	HSMC <input type="text"/>																		

Number of Nurses Trained	NC Nurses																			
	Actual	15	21	15			10	7												
	Planned							5												
	NC Competency																			
	Actual	7	9	8			12	7												
	Planned																			
	NC Mastery																			
	Actual																			
	Planned																			
	NC Nurses/OJT (# of Days)																			
	Actual	38	38	33			35	28												
	Planned																			
	EOC Nurses																			
	Actual	13	30	19			8	12												
	Planned	0	0	0			1	2												
	EOC Competency																			
	Actual	3	5	3			4	4												
	Planned	0	0	0			0	0												
	EOC Mastery																			
	Actual	2	4	2			4	4												
Planned	0	0	0			0	0													
EOC Nurses/ OJT (# of Days)																				
Actual						38	18													
Planned						9	18													

Emergency Services for Nurses		* Not included in pilot hospitals of EMS - No OJT, only attended classroom																		
		** Not included in pilot hospitals of Lab Services - No OJT, only attended classroom																		
Actual	10		14															3 (Aug 03)	7	
Planned	5		10																5	
ER Competency																				
Actual	8		9																3	
Planned	4		8																4	
ER Mastery																				
Actual	5		8																2	
Planned	3		5																3	
ER for Nurses/ OJT (# of Days)																				
Actual	15		17																8	

110

Legend		Number of Physicians Trained													
		Trained													
	Number of Nurses	Planned	16	16										8	
Number of Nurses Trained	OR Nurses	Actual								6	8				
		Planned								0	10				
	OR Competency	Actual													
		Planned													
	OR Mastery	Actual							10	14					
		Planned							0	0					
	OR Nurses OJT (# of Days)	Actual	4	4	4			2	6						
		Planned	4	4	5			2	8						
	CSSD Nurses	Actual													
		Planned													
	CSSD Nurses	Actual													
		Planned													
	CSSD Competency	Actual													
		Planned													
	CSSD Nurses OJT (# of Days)	Actual	4	4	4			2	6						
		Planned	4	4	5			2	6						
	Infection Control Team	Actual	5	4	4			0	0						
		Planned						0	0						
	IC Competency	Actual													
		Planned													
	IC Mastery	Actual													
		Planned													

115

Legend	Number of Physicians Trained <input type="checkbox"/>															
	Number of Nurses <input type="checkbox"/>															
	Number of Lead Trainers <input type="checkbox"/>															
	Trained <input type="checkbox"/>															
	HSMC <input type="checkbox"/>															

Number of Nurses Trained	Midwifery Skills for Nurses															
	Actual	23														
	Planned	0														
	Midwifery Competency															
	Actual															
	Planned															

Number of Lead Trainers Trained	NC Physicians															
	Actual	1		4		2			3		2					
	Planned										2					
	NC Competency															
	Actual															
	Planned															
	NC Mastery															
	Actual															
	Planned															
	EOC Physicians															
	Actual	4	2		2				1		3					
	Planned								3		3					
	EOC Competency															
	Actual															
	Planned															
	EOC Mastery															
	Actual															
	Planned															
	Emergency Services for Physicians															
	Actual		2		1						1					
	Planned										1					
	ER Competency															
	Actual															
	Planned															
ER Mastery																
Actual																
Planned																

2/1

2 - District Health Planning & Management

Asslut Governorate

Districts		SMC Members Trained												MMSS Members Trained											
		Planning and Management Training (# trained)		Quality Improvement (# trained)		Data Use Training		# of Health Committee members Oriented		TOT (# trained)		Service Improvement Fund	District Health Plan Developed	Quarterly Review Reports	# of GSMCs Meetings	# of DSMCs Meetings	# of SMCs & HCs Joint Meetings	SMC Members (# trained)		Health Offices (Physicians and Clerics) (# trained)		Ob/Gyn Specialists (# trained)		MMSS OJT (# of Days)	
Asslut Governorate		22		22		0	10	17		10		11		15		5	25		148		110		131		
1	Gharb Asslut District	11		11			6	13		4		10	2	5		16	5	2	9		2				
2	Shari Asslut District	11		11			8	12		3		8	2	5		17	5	1	7		4				
3	Markaz Asslut District	15		15			14	15		2		5	2	5		17	5	9	25		29		12		
4	El Ghazirah District	9		9		0	6	25	20	1		5	1	1		6	2	1	6		5		3		
5	El Kousayeh District	12		12		0	7	33	30	0		6	1	1		7	2	1	16		21		26		
6	El Fath District	12		12		0	7	20	30	1		5	1	1		6	2	1	8		9		12		

1/5

Option Period

Status of Implementation

September 16, 2003 - September 15, 2004

Assiut Governorate

Workbook

1 - CEOs & BEOCs

1.1 - RENOVATION

Assiut Governorate

Anchor Facilities	Funding Source	Completed	Not Completed			Comments/Action Required
			IPB Issued	Contract Awarded	Expected Date for Completion	
	HMHC / USAID	No	NO	No	End of Sep. 04	Expected awarding contract by the end of May 2004
	HMHC / USAID	No			End of Sep. 04	
	HMHC / USAID	No			End of Sep. 04	
	HMHC / USAID	No			End of Sep. 04	
		NA				
	HMHC / USAID	NO			End of Sep. 04	
		NA				
	JSI / USAID	No	yes	yes	End of May 04	
	HMHC / USAID	Yes	Yes	Yes	Done	Completed and functioning
	HMHC / USAID	Yes			Done	
	HMHC / USAID	Yes			Done	
	HMHC / USAID	Yes			Done	
		N/A				
	HMHC / USAID	Yes			Done	
	JSI / USAID	No	yes	yes	End of May 04	
	MOHP	Yes				Renovation completed by MOHP but very minor modifications will be done by JSI
	JSI / USAID	No			End of June 04	
	JSI / USAID	No			End of June 04	Expected awarding contract by the end of April 04
	MOHP	Yes				
	MOHP	Yes				
	MOHP	Yes				
	MOHP	Yes				
	JSI / USAID	No	yes	yes	End of May 04	
	HMHC / USAID	No	No	No	End of Sep. 04	Expected awarding contract by the end of May 2004
	HMHC / USAID	No			End of Sep. 04	
	HMHC / USAID	No			End of Sep. 04	
		NA				
	HMHC / USAID	NO			End of Sep. 04	
	HMHC / USAID	No			End of Sep. 04	
		NA				
4.2 Kodat Maharrak BH	JSI / USAID	No	yes	yes	End of May 04	
4.3 Dashed BH	JSI / USAID	No	yes	yes	End of May 04	

Agency/Program/Office	Pending Source	Completed	Not Completed			Comments/Action Required
			PIB Issued	Contract Awarded	Expected Date for Completion	
[Redacted]	HMHC / USAID	No	NO	No	End of Sep. 04	Expected awarding contract by the end of May 2004.
	HMHC / USAID	No			End of Sep. 04	
	HMHC / USAID	No			End of Sep. 04	
	HMHC / USAID	No			End of Sep. 04	
	HMHC / USAID	No			End of Sep. 04	
	NA					
[Redacted]	JSI / USAID	No	yes	yes	End of May 04	
	HMHC / USAID	No	No	No	End of Sep. 04	Expected awarding contract by the end of May 2004.
	HMHC / USAID	No			End of Sep. 04	
	HMHC / USAID	No			End of Sep. 04	
	NA					
	NA					
[Redacted]	JSI / USAID	No	yes	yes	End of May 04	
	HMHC / USAID	No	No	No	End of Sep. 04	Expected awarding contract by the end of May 2004.
	HMHC / USAID	No				
	HMHC / USAID	No				
	HMHC / USAID	No				
	NA					
7/2 EIDowne #1	JSI / USAID	No	yes	yes	End of May 04	

1 - CEOCs & BEOCs

1.2 - COMMODITIES

Assiut Governorate

Anchor Facilities		Delivery			Comments/Action Required
		Delivered	Partial	Expected Date for Completion	
1	Sohag Safety Center	No	No		Pending Renovations
		Yes			
					Only The Anesthesia Machine Delivered
		No	No		Pending Renovations
2	El Bahari	Yes			
		No	No		Pending Renovations
3	Bahr El Jebel	Yes			
		No	No		Only The Anesthesia Machine Delivered
3.2	Sohag MC	No	No		Pending Renovations
4	Dayrest District	No	No		Pending Renovations
		Yes			
4.1	Dayrest District Hospital	No	No		Pending Renovations

Anchor Facilities		Delivery			Commodities Action Required
		Delivered	Partial	Expected Date for Completion	
					Only The Anesthesia Machine Delivered.
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
					Only The Anesthesia Machine Delivered.
		No	No		Pending Renovations
		No	No		Pending Renovations
		Yes			
					Only The Anesthesia Machine Delivered.
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
					Interim Commodities supplied until completion of Renovations
		No	No		Only The Anesthesia Machine Delivered.
	72 El Dornia II	No	No		Pending Renovations

1 - CEOs & BEOCs
 1.3 - Training
 Assist Governors

Legend		Assist Governors																				
		1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	7.1	7.2						
Number of Physicians Trained	Actual																					
	Planned																					
Number of Nurses Trained	Actual																					
	Planned																					
Number of Lead Trainers Trained	Actual																					
	Planned																					
HSMC	Actual																					
	Planned																					
Number of Physicians Trained	NC Physician Trained on Basic NC																					
	Actual	5	2		3		15					4										
	Planned																					
	NC Physician Trained on Advanced NC																					
	Actual	5	2		3		15					4										
	Planned																					
	NC Competency																					
	Actual	3	4		4		13					5										
	Planned																					
	NC Mastery																					
Actual	1	2																				
Planned																						
NC OJT (# of Days)																						
Actual	18	17		18		18		18				18										
Planned	3	3		3		3		3				3										
Number of Physicians Trained	EOC Physician Service Providers																					
	Actual	2	1		10		17				6	6					2					
	Planned																					
	(EOC Basic Competency)																					
	Actual																					
	Planned																					
	(EOC Mastery)																					
	Actual																					
	Planned																					
	EOC OJT (# of Days)																					
Actual	6	6		2		9		9		9	6						6					
Planned	2	2		2		6		6		6	2						2					
Number of Physicians Trained	EOC Anesthesia																					
	Actual	10																				
	Planned																					
	EOC Anesthesia Competency																					
	Actual																					
	Planned																					
	EOC Anesthesia Mastery																					
	Actual																					
	Planned																					
	EOC Anesthesia OJT (# of Days)																					
Actual	14	9		8		6		11		9							8					
Planned	2	2		2		3		2		2							2					

Legend		Number of Physicians Trained															
		11	12	21	22	31	32	41	42	43	44	45	46	47	48	49	50
Number of Physicians Trained	Actual																
	Planned																
Number of Nurses Trained	Actual																
	Planned																
Number of Lead Trainers Trained	Actual																
	Planned																
HSMC	Actual																
	Planned																
Number of Physicians Trained	Emergency Services for Physicians																
	Actual																
	Planned																
	ER Competency																
	Actual																
	Planned																
	ER Mastery																
	Actual																
	Planned																
	Emergency Services/OJT (# of Days)																
	Actual																
	Planned																
	Laboratory Services for Physicians																
	Actual																
	Planned																
	Laboratory Competency																
	Actual																
	Planned																
Laboratory Mastery																	
Actual																	
Planned																	
Laboratory Services/OJT (# of Days)																	
Actual																	
Planned																	
Number of Physicians Trained	Blood Bank Services for Physicians																
	Actual																
	Planned																
	Blood Bank Competency																
	Actual																
	Planned																
	Blood Bank Mastery																
	Actual																
Planned																	
Blood Bank/ OJT (# of Days)																	
Actual																	
Planned																	

Legend		Number of Physicians Trained		Number of Nurses Trained		Number of Lead Trainers Trained		HSMC		1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	6.3	6.4	6.5	6.6		
		Actual	Planned	Actual	Planned	Actual	Planned	Actual	Planned																			
Number of Physicians Trained	EOC (Infection control)		Actual	2	1	10	17	6	6																			
			Planned		0	0	0	0	0	0																		
	Infection control Team		Actual	0	0	0	0	0	0	0																		
			Planned	0	0	0	0	0	0	0																		
	IC Competency		Actual	0	0	0	0	0	0	0																		
			Planned	0	0	0	0	0	0	0																		
	IC Mastery		Actual	0	0	0	0	0	0	0																		
			Planned	0	0	0	0	0	0	0																		
	IC/OJT (# of Days)		Actual	0	0	0	0	0	0	0																		
			Planned	0	0	0	0	0	0	0																		
	Private sector (physicians)		Actual		1	1	1		5	5																		
			Planned		0	0	0		0	0																		
	Private sector (pharmacists)		Actual	164																								
			Planned	0																								
Number of Nurses Trained	IC Nurses		Actual	7	9	8	12																					
			Planned																									
	IC Competency		Actual	4	6	5	7																					
			Planned																									
	IC Mastery		Actual																									
			Planned																									
	IC Nurses/OJT (# of Days)		Actual	21	19	18	15																					
			Planned	4	4	4	5																					
	EOC Nurses		Actual	5	11		22		10	9																		
			Planned																									
	EOC Competency		Actual																									
			Planned																									
	EOC Mastery		Actual																									
			Planned																									
EOC Nurses/ OJT (# of Days)		Actual																										
		Planned			6	6	6																					

Number of Physicians Trained Number of Nurses Trained Number of Lead Trainers Trained HSMC		Legend																	
		1.1	1.2	2.1	2.2	3.1	3.2	4.1	4.2	4.3	5.1	5.2	6.1	6.2	6.3	7.1	7.2	8.1	8.2
Emergency Services for Nurses																			
Actual																			
Planned																			
ER Competency																			
Actual																			
Planned																			
ER Mastery																			
Actual																			
Planned																			
ER for Nurses/ OJT (# of Days)																			
Actual																			
Planned																			
OR Nurses																			
Actual		5	6		4	4				5	5					4			
Planned																			
OR Competency																			
Actual																			
Planned																			
OR Mastery																			
Actual																			
Planned																			
OR Nurses/ OJT (# of Days)																			
Actual		12	12		12	9				12	9					12			
Planned		0	0		0	0				0	0					0			
CSSD Nurses																			
Actual		4	9		4	9				5	5					7			
Planned																			
CSSD Nurses																			
Actual																			
Planned																			
CSSD Competency																			
Actual																			
Planned																			
CSSD Nurses/ OJT (# of Days)																			
Actual		12	12		12	9				12	9					12			
Planned		0	0		0	0				0	0					0			
Infection Control Team																			
Actual																			
Planned																			
IC Competency																			
Actual																			
Planned																			
IC Mastery																			
Actual																			
Planned																			
Midwifery Skills for Nurses																			
Actual		23																	
Planned		0																	
Midwifery Competency																			
Actual																			
Planned																			
Midwifery Mastery																			
Actual																			
Planned																			

Legend Number of Physicians Trained <input type="checkbox"/> Number of Nurses Trained <input type="checkbox"/> Number of Lead Trainers Trained <input type="checkbox"/> HSMC <input type="checkbox"/>		1.1 1.2 2.1 2.2 3.1 3.2 4.1 4.2 4.3 5.1 5.2 5.3 6.1 6.2 6.3 7.1 7.2																
		(This area is heavily obscured by a dark pattern in the original image)																
Number of Lead Trainers Trained	IC Physicians	Actual	2		1		1		3					1				
		Planned																
	IC Competency	Actual																
		Planned																
	IC Mastery	Actual																
		Planned																
	EOC Physicians	Actual	4	2		1		3		4			2		2			2
		Planned																
	EOC Competency	Actual																
		Planned																
	EOC Mastery	Actual																
		Planned																
	Emergency Services for Physicians	Actual																
		Planned																
	ER Competency	Actual																
		Planned																
	ER Mastery	Actual																
		Planned																
Number of Lead Trainers Trained	Anesthesiologists	Actual																
		Planned	2															
	Anesthesiologists Competency	Actual																
		Planned																
	Anesthesiologists Mastery	Actual																
		Planned																
	Nurses	Actual	12				2											
		Planned	8	2		2		2		3			2		2			3
	Nurses Competency	Actual																
		Planned																
Nurses Mastery	Actual																	
	Planned																	
HSMC	Mngt & QA Training (# trained)	Actual	8		8		8		8			0		8			0	
		Planned	8		8		8		8			8		8			8	
	Integrated Visits	Actual	4		4		4		4			4		4			4	
		Planned	4		4		4		4			4		4			4	
	QR Submitted Quarterly	Actual																
	Hospital SMCe Meetings	Actual	4		4		4		4			4		4			4	
	Planned	4		4		4		4			4		4			4		

ANNEX F: SUMMARY OF IMPLEMENTATION STATUS IN SOHAG

Option Period

Status of Implementation

September 16, 2001 - March 15, 2004

Sohag Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Sohag Governorate

Anchor Facility	Funding Source	Completed	Not Completed			Comments/ Action Required
			IFB Issued	Contract Awarded	Expected Date for Completion	
1 Sohag District 23 Sohag District	JSI	Yes				
	JSI	Yes				
	JSI	Yes				
	JSI	Yes				
	JSI	Yes				
	JSI	Yes				
	JSI	Yes				
	2 Taha District 24 Taha District	JSI	Yes			
MOHP		Yes				
MOHP		Yes				
MOHP		Yes				
MOHP		Yes				
JSI						There is a place near OR and needs minor renovation, will be funded through the hospital
HMHC		Yes				JSI supplied one A/C for the DR.
JSI		Yes				
JSI		Yes				
32 El-Magabra Integrated Hospital	HMHC		Yes	Yes	Feb. 04	Interim space will be renovated
	HMHC		Yes	Yes	Feb. 04	
	HMHC		Yes	Yes	Feb. 04	
	HMHC		Yes	Yes	Feb. 04	
	HMHC		Yes	Yes	Feb. 04	
	JSI	Yes				

Funding Source	Completed	Not Completed			Comments/Action Required
		RFI Issued	Contract Awarded	Expected Date for Completion	
HMHC		Yes	Yes	Feb. 04	
HMHC		Yes	Yes	Feb. 04	
HMHC		Yes	Yes	Feb. 04	
HMHC		Yes	Yes	Feb. 04	
HMHC		Yes	Yes	Feb. 04	
JSI	Yes				
JSI	Yes				
JSI	Yes				
JSI	Yes				
JSI	Yes				
JSI	Yes				
JSI	Yes				
MOHP	Yes				
MOHP	Yes				
JSI	Yes				
92 JSI	Yes				
93 JSI	Yes				

	Funding Source	Completed	Not Completed			Comments/ Action Required
			IFB Issued	Contract Awarded	Expected Date for Completion	
10	Almanar (D...)					
10.1	Almanar (D...)					
			Yes	Yes	Feb. 04	
			Yes	Yes	Feb. 04	
			Yes	Yes	Feb. 04	
			Yes	Yes	Feb. 04	
			Yes	Yes	Feb. 04	
10.2		Yes				
10.3		Yes				
11	Elmanar (D...)					
11.1	Elmanar (D...)					
		Yes				
		Yes				
		Yes				
		Yes				
		Yes				
		Yes				
11.2		Yes				
11.3		Yes				
11.4		Yes				
11.5		Yes				

1 - CEOCs & BEOCs

1.2 - COMMODITIES

Sohag Governorate

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
1.1	Sohag District				
	Sohag General Hospital	Yes			
		Yes			
2.1	Tanta District				
	Tanta District Hospital	Yes			
		No	No	May-04	Pending arrival of Off-Shore Procurement
		Yes			
		Yes			Equipped By JESSICA, JSI provided only supplies
		Yes			
3.1	Gerga District				
	Gerga District Hospital	No	No		Interim Commodities supplied until completion of Renovations
		Yes			
		No	No		Pending Completion of Renovations
		No	No		Only The Anesthesia Machine Delivered.
	No	No		Pending Completion of Renovations	

Anchor Facilities

		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
3.2	El Magbra Integrated Hospital	Yes			

4	Terna District				
4.1	Terna District Hospital	No	No		Interim Commodities supplied until completion of Renovations
		Yes			
		No	No		Pending Completion of Renovations
		No	No		Only The Anesthesia Machine Delivered.
		No	No		Pending Completion of Renovations
		Yes			
4.2	Terna Urban Health Center	Yes			
4.3	Om Doona Integrated Hospital	Yes			
4.4	El Fayyaz Integrated Hospital	Yes			

5.1	El Bahariya District				
	El Bahariya District Hospital	No	No		Interim Commodities supplied until completion of Renovations
		No	No	May-04	Pending arrival of Off-Shore Procurement
		Yes			
		Equipped By Jessica JSI will only provide supplies * Pending Completion of Renovation.			
		Yes			
		No	No		Pending Completion of Renovations
5.2	Al Sheikh Faraha Integrated Health Unit	Yes			
5.3	Al Sheikh Marmar Integrated Health Unit	Yes			

6	Bar El-Salam District				
6.1	Bar El-Salam District Hospital	No	No		Interim Commodities supplied until completion of Renovations
		Yes			
		No	No		Pending Completion of Renovations
		Equipped By Jessica JSI			
		No	No		Pending Completion of Renovations
6.2	El Naghameesh Rural Health Unit	Yes			

Anchor Facilities

Delivered	Delivery		Comments/ Action Required
	Partial	Expected Date for Completion	

7.1

Siqolia District Hospital

No	No		Interim Commodities supplied until completion of Renovations
Yes			
No	No		Pending Completion of Renovations
No	No		Only The Anesthesia Machine Delivered.
No	No		Pending Completion of Renovations
Yes			
Yes			

7.2

Siqolia Health Center

7.3

El Gharazat Integrated Health Unit

Goharna District

8.1

Goharna District Hospital

Yes			

8.2

Enbes Integrated Hospital

Marracha District

9.1

Marracha District Hospital

Yes			

9.2

Shandaweel Integrated Hospital

9.3

El Gharazat Integrated Health Unit

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
10	Akhmelm District				
10.1	Akhmelm District Hospital				
	CEO	No	No		Interim Commodities supplied until completion of Renovations
	NCL	Yes			
	CSSD	No	No		Pending Completion of Renovations
	OR	No	No		Only The Anesthesia Machine Delivered.
	LI	No	No		Pending Completion of Renovations
10.2	Nada Integrated Hospital	Yes			
10.3	El Koola Integrated Hospital	Yes			
11	El-Mounshaa District				
11.1	El-Mounshaa District Hospital				
	CEO	Yes			
	NCL	No	No	May-04	Pending arrival of Off-Shore Procurement
	CSSD	Yes			
	OR	Yes			
	LI	Yes			
11.2	El-Mounshaa Maternity Center	Yes			
11.3	El Zak El Sharba Integrated Hospital	Yes			
11.4	Awad El Sharkh Women Health Unit	Yes			
11.5	Awad Panza Integrated Hospital	Yes			

Number of Physicians Trained <input type="checkbox"/>		1.1	1.2	1.3	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	7.1	7.2	7.3	8.1	8.2	8.3	9.1	9.2	9.3	10	10.2	10.3	11	11.2	11.3	11.4	11.5			
Number of Nurses Trained <input type="checkbox"/>		1.1	1.2	1.3	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	7.1	7.2	7.3	8.1	8.2	8.3	9.1	9.2	9.3	10	10.2	10.3	11	11.2	11.3	11.4	11.5			
Number of Lead Trainers Trained <input type="checkbox"/>		1.1	1.2	1.3	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	7.1	7.2	7.3	8.1	8.2	8.3	9.1	9.2	9.3	10	10.2	10.3	11	11.2	11.3	11.4	11.5			
HSMC <input type="checkbox"/>		1.1	1.2	1.3	2.1	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	7.1	7.2	7.3	8.1	8.2	8.3	9.1	9.2	9.3	10	10.2	10.3	11	11.2	11.3	11.4	11.5			
Number of Nurses Trained	Planned	15			15						8				2																								
	Actual				3				4		10				4			5		4				2		3													
	Planned				0				0		0				0			0		0				0		0													
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Legend Number of Physicians Trained <input type="checkbox"/> Number of Nurses Trained <input type="checkbox"/> Number of Lead Trainers Trained <input type="checkbox"/> HSMC <input type="checkbox"/>	1.1	1.2	1.3	2.4	2.2	2.3	2.4	3.1	3.2	4.1	4.2	4.3	4.4	5.1	5.2	5.3	6.1	6.2	7.1	7.2	7.3	8.1	8.2	9.1	9.2	9.3	10	10.2	10.3	11	11.2	11.3	11.4	11.5
	Abing-Compton																																	
	Abing-Compton																																	
	Abing-Compton																																	
	Abing-Compton																																	

Number of Nurses Trained	Midwifery Skills for Nurses	Actual	21																																		
		Planned	0																																		
	Midwifery Competency	Actual																																			
		Planned																																			
	Midwifery Mastery	Actual																																			
		Planned																																			
Number of Lead Trainers Trained	NC Physicians	Actual	4					4																													
		Planned	4																																		
	NC Competency	Actual																																			
		Planned																																			
	NC Mastery	Actual																																			
		Planned																																			
	EOC Physicians	Actual	1	10		3			4		3																										
		Planned	2																																		
	EOC Competency	Actual																																			
		Planned																																			
	EOC Mastery	Actual																																			
		Planned																																			
	Emergency Services for Physicians	Actual	2			1																															
		Planned																																			
	ER Competency	Actual																																			
		Planned																																			
	ER Mastery	Actual																																			
		Planned																																			

601

2 - District Health Planning & Management

Sohag Governorate

Districts		SMC Members Trained										MMSS Members Trained													
		Planning and Management Training (# trained)		Quality Improvement (# trained)		Data Use Training		# of Health Committee members Oriented		TOT (# trained)		Service Improvement Fund	District Health Plan Developed	Quarterly Review Reports	# of GSMCs Meetings	# of DSMCs Meetings	# of SMCs & HCs Joint Meetings	SMC Members (# trained)		Health Offices (physicians and Clerks) (# trained)		Ob/Gyn Specialists (# trained)		MMSS OJT (# of Days)	
		A	P	A	P	A	P	A	P	A	P							A	P	A	P	A	P	A	P
Sohag Governorate		17		17			10	11		11		8			11		5	28		132		78		132	
1	Sohag District	15		15				20		5		10	2	4		11	5	10		27		25		8	
2	Tahta District	14		14			5	22		8		8	2	4		11	5	2		12		13		9	
3	Gerga District	12		12			5	21		4		8	2	4		11	5	2		8		10		22	
4	Terna District	12		12			5	18		0		4	1	1		9	3	2		0		10		8	
5	El Bahyana District	9		9			5	23		0		0	1	1		7	3	1		0		1		8	
6	Dar El-Salam District	9		9			5	16		0		0	1	1		7	3	2		7		1		8	
7	Saqqa District	9		9			5	24		0		0	1	1		5	3	1		27		2		20	
8	Gehara District	8		8			5	14		0		0	1	1		9	3	1		10		3		6	
9	Marsaha District	9		9			5	20		0		2	1	1		5	3	2		11		3		16	
10	Akhmim District	9		9			5	25		0		8	1	1		9	3	2		13		4		11	
11	El-Mounshaa District	12		12			5	22		0		0	1	1		8	3	1		17		8		18	

ANNEX G: SUMMARY OF IMPLEMENTATION STATUS IN GIZA

Option Period

Status of Implementation

September 15, 2003 - December 15, 2004

Giza Governorate

Workbook

1 - CEOCs & BEOCs

1.1 - RENOVATION

Giza Governorate

Project ID	Project Name	Funding Source	Completed	Not Completed			Comments/ Action Required
				IFB Issued	Contract Awarded	Expected Date for Completion	
1	El Qababel IH	MOHP	NO				blueprints were sent to HMHC & Giza Health Directorate to be considered
1	El Qababel IH	MOHP	NO				Under construction by MOHP. Ground floor to be completed at the end of July 2004.
1	El Qababel IH	MOHP	NO				
1	El Qababel IH	MOHP	NO				
1	El Qababel IH	MOHP	NO				
17	Qababel IH	JSU/ USAID	No			End of June 04	Expected awarding contract by the end of April 2004.
18	Qababel IH	JSU/ USAID	NO	NO	NO	End of June 04	
19	Qababel IH	JSU/ USAID	NO	NO	NO	End of June 04	
20	Qababel IH	JSU/ USAID	No	NO	NO	End of June 04	
21	Qababel IH		N/A				
21	Qababel IH		N/A				
22	Qababel IH	HMHC/ USAID	NO	No	NO	End of Sep. 04	expecting awarding the contract by the end of May 2004.
22	Qababel IH	HMHC/ USAID	NO			End of Sep. 04	Very minor renovation needed in the NCU.
22	Qababel IH	MOHP	Yes				Completed 1 year ago.
22	Qababel IH	MOHP	Yes				Completed 1 year ago.
22	Qababel IH	MOHP	Yes				Completed 1 year ago.
22	Qababel IH		NA				
23	Qababel IH	JSU/ USAID	NO	yes	NO	End of June 04	Expected awarding the contract by the end of April 2004
23	Qababel IH	JSU/ USAID	NO	yes	NO	End of June 04	Expected awarding the contract by the end of April 2004
24	Qababel IH	JSU/ USAID	NO	yes	NO	End of June 04	Expected awarding the contract by the end of April 2004
25	Qababel IH	JSU/ USAID	NO	yes	NO	End of June 04	Expected awarding the contract by the end of April 2004
3.1	Qababel IH	HMHC/ USAID	No	No	No	End of Sep. 04	Expected awarding the contract by the end of May2004
3.1	Qababel IH	HMHC/ USAID	No			End of Sep. 04	
3.1	Qababel IH	HMHC/ USAID	No			End of Sep. 04	
3.1	Qababel IH	HMHC/ USAID	No			End of Sep. 04	
3.1	Qababel IH	HMHC/ USAID	No			End of Sep. 04	
3.2	Sool H. Group	JSU/ USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
3.3	El Qababel IH	MOHP	No				new building under construction by MOHP

Funding Source	Completed	Not Completed			Comments/ Action Required
		IPB Issued	Contract Awarded	Expected Date for Completion	
					HMHC - check with planning dept. in MOHP for constructing the new Building
JSI/ USAID	No	Yes	No	End of May 04	Minor renovation by JSI. Expected awarding the contract at the middle of April.
JSI/ USAID	NO			End of May 04	CEOC & OR: as interim spaces by JSI
JSI/ USAID	No			End of May 04	
	NA			End of May 04	
JSI/ USAID	NO	Yes	NO	End of June 04	Expected awarding the contract by the end of April 2004
JSI/ USAID	NO	Yes	NO	End of June 04	Expected awarding the contract by the end of April 2004
JSI/ USAID	NO	Yes	NO	End of June 04	Expected awarding the contract by the end of April 2004
HMHC/ USAID	No	No	No	End of Sep 04	expecting awarding the contract by the end of May 2004
HMHC/ USAID	No			End of Sep 04	
HMHC/ USAID	No			End of Sep 04	
HMHC/ USAID	No			End of Sep 04	
HMHC/ USAID	No			End of Sep 04	
JSI/ USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
JSI/ USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
JSI/ USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
					Expected awarding the contract by the end of May 2004
HMHC/ GOE	No	No	No	End of Sep 04	
MOHP	Yes				
HMHC/ GOE	No			End of Sep 04	
HMHC/ GOE	No			End of Sep 04	
	N/A				
JSI/ USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
JSI/ USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
JSI/ USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004

Anchor Facilities		Funding Source	Completed	Not Completed			Comments/ Action Required
				IPB Issued	Contract Awarded	Expected Date for Completion	
7	7.1	HMHC/GOE	No	No	No	End of Sep. 04	Expected awarding the contract by the end of May 2004
		HMHC/GOE	No				Very minor renovation needed in the NCU
		MOHP	Yes				Completed 1 year ago.
		MOHP	Yes				Completed 1 year ago.
			N/A				
			N/A				
9	9.1	HMHC/GOE	No				Expected awarding the contract by the end of May 2004
		HMHC/GOE	No				
		MOHP	Yes				old and functioning -Ground Floor
		MOHP	Yes				old and functioning
			N/A				
		JSI/USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
8	8.1	MOHP	No				Revised blueprints were sent to MOHP to be considered during construction.
		MOHP	No				Under construction.
		MOHP	No				Under construction.
		MOHP	No				Under construction.
		MOHP	No				Under construction.
		MOHP	No				Under construction.
		MOHP	No				Under construction.
		JSI/USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
		MOHP	No				
		JSI/USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
10	10.1	JSI/USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
	10.2	JSI/USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004

Funding Source	Completed	Not Completed			Contract Action Required
		IFB Issued	Contract Awarded	Expected Date for Completion	
JSV USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
JSV USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
JSV USAID	No	Yes	No	End of June 04	Expected awarding the contract by the end of April 2004
MOHP					
JSV USAID	Yes				Handed over.
JSV USAID	Yes				Handed over.

1 - CEOCs & BEOCs

1.2 - COMMODITIES

Giza Governorate

Anchor Facility	Delivery			Comments/ Action Required
	Delivered	Partial	Expected Date for Completion	
1.1 El Manshi El Bahary El Manshi				
1.2 El Manshi El Bahary El Manshi				
1.3	No	No		Pending Renovations
1.4	No	No		Pending Renovations
1.5	No	No		Pending Renovations
1.6	No	No		Pending Renovations
1.7	No	No		Pending Renovations
1.8	No	No		Pending Renovations
1.9	No	No		Pending Renovations
1.10	No	No		Pending Renovations
1.11	No	No		Pending Renovations
1.12	No	No		Pending Renovations
1.13	No	No		Pending Renovations
1.14	No	No		Pending Renovations
1.15	No	No		Pending Renovations
1.16	No	No		Pending Renovations
1.17	No	No		Pending Renovations
2.1				
2.2				
2.3	No	No		Interim Commodities supplied until completion of Renovations
2.4	No	No		Pending Renovations
2.5	Yes			
2.6	No	No		Only The Anesthesia Machine Delivered
2.7	No	No		Pending Renovations
2.8	No	No		Pending Renovations
2.9	No	No		Pending Renovations
2.10	No	No		Pending Renovations
2.11	No	No		Pending Renovations
2.12	No	No		Pending Renovations
2.13	No	No		Pending Renovations
2.14	No	No		Pending Renovations
2.15	No	No		Pending Renovations
2.16	No	No		Pending Renovations
2.17	No	No		Pending Renovations
2.18	No	No		Pending Renovations
2.19	No	No		Pending Renovations
2.20	No	No		Pending Renovations
2.21	No	No		Pending Renovations
2.22	No	No		Pending Renovations
2.23	No	No		Pending Renovations
2.24	No	No		Pending Renovations
2.25	No	No		Pending Renovations
2.26	No	No		Pending Renovations
2.27	No	No		Pending Renovations
2.28	No	No		Pending Renovations
2.29	No	No		Pending Renovations
2.30	No	No		Pending Renovations
2.31	No	No		Pending Renovations
2.32	No	No		Pending Renovations
2.33	No	No		Pending Renovations
2.34	No	No		Pending Renovations
2.35	No	No		Pending Renovations
2.36	No	No		Pending Renovations
2.37	No	No		Pending Renovations
2.38	No	No		Pending Renovations
2.39	No	No		Pending Renovations
2.40	No	No		Pending Renovations
2.41	No	No		Pending Renovations
2.42	No	No		Pending Renovations
2.43	No	No		Pending Renovations
2.44	No	No		Pending Renovations
2.45	No	No		Pending Renovations
2.46	No	No		Pending Renovations
2.47	No	No		Pending Renovations
2.48	No	No		Pending Renovations
2.49	No	No		Pending Renovations
2.50	No	No		Pending Renovations
2.51	No	No		Pending Renovations
2.52	No	No		Pending Renovations
2.53	No	No		Pending Renovations
2.54	No	No		Pending Renovations
2.55	No	No		Pending Renovations
2.56	No	No		Pending Renovations
2.57	No	No		Pending Renovations
2.58	No	No		Pending Renovations
2.59	No	No		Pending Renovations
2.60	No	No		Pending Renovations
2.61	No	No		Pending Renovations
2.62	No	No		Pending Renovations
2.63	No	No		Pending Renovations
2.64	No	No		Pending Renovations
2.65	No	No		Pending Renovations
2.66	No	No		Pending Renovations
2.67	No	No		Pending Renovations
2.68	No	No		Pending Renovations
2.69	No	No		Pending Renovations
2.70	No	No		Pending Renovations
2.71	No	No		Pending Renovations
2.72	No	No		Pending Renovations
2.73	No	No		Pending Renovations
2.74	No	No		Pending Renovations
2.75	No	No		Pending Renovations
2.76	No	No		Pending Renovations
2.77	No	No		Pending Renovations
2.78	No	No		Pending Renovations
2.79	No	No		Pending Renovations
2.80	No	No		Pending Renovations
2.81	No	No		Pending Renovations
2.82	No	No		Pending Renovations
2.83	No	No		Pending Renovations
2.84	No	No		Pending Renovations
2.85	No	No		Pending Renovations
2.86	No	No		Pending Renovations
2.87	No	No		Pending Renovations
2.88	No	No		Pending Renovations
2.89	No	No		Pending Renovations
2.90	No	No		Pending Renovations
2.91	No	No		Pending Renovations
2.92	No	No		Pending Renovations
2.93	No	No		Pending Renovations
2.94	No	No		Pending Renovations
2.95	No	No		Pending Renovations
2.96	No	No		Pending Renovations
2.97	No	No		Pending Renovations
2.98	No	No		Pending Renovations
2.99	No	No		Pending Renovations
2.100	No	No		Pending Renovations
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Anchored Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
7.1	[Illegible]	No	No		Interim Commodities supplied until completion of Renovations
		No	No		
		Yes			
		No	No		
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		
		No	No		Pending Renovations
		No	No		Pending Renovations
7.2	[Illegible]	No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Only The Anesthesia Machine Delivered.
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
7.2	MCH Center in Imbaba	No	No		Interim Commodities supplied until completion of Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Only The Anesthesia Machine Delivered.
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations
		No	No		Pending Renovations

Anchor Facilities		Delivery			Comments/ Action Required
		Delivered	Partial	Expected Date for Completion	
8	8.1	No	No		Pending Renovations
	8.2	No	No		Pending Renovations
	8.3	No	No		Only The Anesthesia Machine Delivered
	8.4	No	No		Pending Renovations
	8.5	No	No		Pending Renovations
	8.6	No	No		Pending Renovations
9	9.1	No	No		Interim Commodities supplied until completion of Renovations
	9.2	No	No		Interim Commodities supplied until completion of Renovations
	9.3	No	No		Interim Commodities supplied until completion of Renovations
	9.4	No	No		Only The Anesthesia Machine Delivered.
	9.5	No	No		Pending Renovations
	9.6	No	No		Pending Renovations
	9.7	No	No		Pending Renovations
	9.8	No	No		Pending Renovations
	9.9	No	No		Pending Renovations
	9.10	No	No		Pending Renovations
10	10.1	No	No		Pending Renovations
	10.2	No	No		Pending Renovations
11	11.1	No	No		Pending Renovations
	11.2	No	No		Pending Renovations
	11.3	No	No		Pending Renovations
	11.4	No	No		Pending Renovations
12	12.1	Yes			
13	13.1	Yes			

Number of Physicians Trained <input type="text"/> Number of <input type="text"/> Trained Number of Lead Trained <input type="text"/> Trained NSMC <input type="text"/>		[REDACTED]										[REDACTED]						
Number of Nurses Trained	EOC Nurses																	
	Actual																	
	Planned		10		15		11		13		17		18		11		21	
	EOC Competency																	
	Actual																	
	Planned																	
	EOC Mastery																	
	Actual																	
	Planned																	
	EOC Nurses/ OJT (# of Days)																	
Actual																		
Planned																		
Emergency Services for Nurses																		
Actual																		
Planned																		
ER Competency																		
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Planned																		
ER Mastery																		
Actual																		
Planned																		
ER for Nurses/ OJT (# of Days)																		
Actual																		
Planned																		
Number of Nurses Trained	OR Nurses																	
	Actual	0																
	Planned		20		15		14		18		17		12		16		23	
	OR Competency																	
	Actual																	
	Planned																	
	OR Mastery																	
	Actual																	
	Planned																	
	OR Nurses/ OJT (# of Days)																	
Actual	12		12		12		12		12		12		12		12		12	
Planned	12		0		0		0		12		12		12		12		12	
CSD Nurses																		
Actual	0		20		15		14		0		18		13		12		23	
Planned																		
CSD Competency																		
Actual																		
Planned																		

371

Legend		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	524	525	526	527	528	529	530	531	532	533	534	535	536	537	538	539	540	541	542	543	544	545	546	547	548	549	550	551	552	553	554	555	556	557	558	559	560	561	562	563	564	565	566	567	568	569	570	571	572	573	574	575	576	577	578	579	580	581	582	583	584	585	586	587	588	589	590	591	592	593	594	595	596	597	598	599	600	601	602	603	604	605	606	607	608	609	610	611	612	613	614	615	616	617	618	619	620	621	622	623	624	625	626	627	628	629	630	631	632	633	634	635	636	637	638	639	640	641	642	643	644	645	646	647	648	649	650	651	652	653	654	655	656	657	658	659	660	661	662	663	664	665	666	667	668	669	670	671	672	673	674	675	676	677	678	679	680	681	682	683	684	685	686	687	688	689	690	691	692	693	694	695	696	697	698	699	700	701	702	703	704	705	706	707	708	709	710	711	712	713	714	715	716	717	718	719	720	721	722	723	724	725	726	727	728	729	730	731	732	733	734	735	736	737	738	739	740	741	742	743	744	745	746	747	748	749	750	751	752	753	754	755	756	757	758	759	760	761	762	763	764	765	766	767	768	769	770	771	772	773	774	775	776	777	778	779	780	781	782	783	784	785	786	787	788	789	790	791	792	793	794	795	796	797	798	799	800	801	802	803	804	805	806	807	808	809	810	811	812	813	814	815	816	817	818	819	820	821	822	823	824	825	826	827	828	829	830	831	832	833	834	835	836	837	838	839	840	841	842	843	844	845	846	847	848	849	850	851	852	853	854	855	856	857	858	859	860	861	862	863	864	865	866	867	868	869	870	871	872	873	874	875	876	877	878	879	880	881	882	883	884	885	886	887	888	889	890	891	892	893	894	895	896	897	898	899	900	901	902	903	904	905	906	907	908	909	910	911	912	913	914	915	916	917	918	919	920	921	922	923	924	925	926	927	928	929	930	931	932	933	934	935	936	937	938	939	940	941	942	943	944	945	946	947	948	949	950	951	952	953	954	955	956	957	958	959	960	961	962	963	964	965	966	967	968	969	970	971	972	973	974	975	976	977	978	979	980	981	982	983	984	985	986	987	988	989	990	991	992	993	994	995	996	997	998	999	1000	1001	1002	1003	1004	1005	1006	1007	1008	1009	1010	1011	1012	1013	1014	1015	1016	1017	1018	1019	1020	1021	1022	1023	1024	1025	1026	1027	1028	1029	1030	1031	1032	1033	1034	1035	1036	1037	1038	1039	1040	1041	1042	1043	1044	1045	1046	1047	1048	1049	1050	1051	1052	1053	1054	1055	1056	1057	1058	1059	1060	1061	1062	1063	1064	1065	1066	1067	1068	1069	1070	1071	1072	1073	1074	1075	1076	1077	1078	1079	1080	1081	1082	1083	1084	1085	1086	1087	1088	1089	1090	1091	1092	1093	1094	1095	1096	1097	1098	1099	1100	1101	1102	1103	1104	1105	1106	1107	1108	1109	1110	1111	1112	1113	1114	1115	1116	1117	1118	1119	1120	1121	1122	1123	1124	1125	1126	1127	1128	1129	1130	1131	1132	1133	1134	1135	1136	1137	1138	1139	1140	1141	1142	1143	1144	1145	1146	1147	1148	1149	1150	1151	1152	1153	1154	1155	1156	1157	1158	1159	1160	1161	1162	1163	1164	1165	1166	1167	1168	1169	1170	1171	1172	1173	1174	1175	1176	1177	1178	1179	1180	1181	1182	1183	1184	1185	1186	1187	1188	1189	1190	1191	1192	1193	1194	1195	1196	1197	1198	1199	1200	1201	1202	1203	1204	1205	1206	1207	1208	1209	1210	1211	1212	1213	1214	1215	1216	1217	1218	1219	1220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**ATTACHMENT A:
COORDINATION AND COLLABORATION ON
QUALITY BETWEEN QUALITY, CURATIVE CARE,
MCH MOHP DEPARTMENTS AND JSI
MARCH 9, 2004**

**Coordination and Collaboration on Quality
between
Quality, Curative Care, MCH MOHP Departments and JSI
March 9, 2004**

Background:

- JSI invited Dr. Bassiuni Salem, Director General of Quality, MOHP, to meet with JSI team to know more about the Accreditation Procedures adopted by the Quality Department to accredit the health facilities, and discuss how to streamline and coordinate HM/HC-JSI efforts in this area with the MOHP. To secure more mutual benefit of this meeting, HM/HC and the Curative Department of MOHP were invited to share in the discussions and deliberations. Dr. Esmat Mansour, MOHP Undersecretary for integrated Health Care and HM/HC Executive Director, delegated Dr. Khaled Nasr, HM/HC Deputy Executive Director to attend the meeting. Curative Department, MOHP did not attend these said meeting, took place on March 9, 2004, due to change of the time of the meeting which conflicted with previous commitment.

Agenda of the Meeting:

The agenda covered three items:

1. Introduction and an overview of HM/HC Continuous Quality Improvement System: Scope, Types, Quality Monitoring Checklists, etc. presented by Dr. Reginald Gipson/Dr. Wafaie El Sakkary.
2. An overview of the MOHP Accreditation Procedures: the process, monitoring compliance with standards and scoring system presented by Dr. Bassiuni Salem.
3. Discussion to reach consensus on a plan of action on future coordination and collaboration between concerned parties.

Meeting Proceedings:

- Dr. Gipson and Dr. Wafaie presented an overview of what HM/HC have developed in the area of quality at the level of general and district hospitals.
- Dr. Bassiuni introductory note on the Accreditation Procedures
- Q & A that followed the presentations, revealed the following points:
 - a) **Purpose of Accreditation Procedure:**
 - The Accreditation is used as a quality improvement tool for the time being and not as a regulatory tool which could be applied in the future at the appropriate time.

h) Main Constraints:

- There are no policies and procedures for all the departments of a hospital.
- There are no national clinical guidelines (protocols) covering all areas of patient care of a hospital.
- Dr. Bassiuni stated that the surveyors, for practical reasons, any available protocols in the department to assess the performance and compliance with standards. In case of non-availability of protocols, surveyors ask the hospital management to develop their own protocols.
- Dr. Bassiuni welcomed an initiative by HM/HC and Curative Department to finalize and institutionalize the EOC and NC protocols as national standards of service and practice. In such case, the surveyors will mandatory use them for assessing the quality of care in hospitals.

Plan of action:

The participants concluded the meeting by agreeing on immediate plan of action that includes the following activities:

Activity	Responsible
1) To institutionalize the EOC and NC Protocols developed, tested and used in Upper Egypt hospitals as the accredited national standards of service and patient care and basis for accrediting health facilities.	
<p>2) To work with the Quality Department to create a model accreditation process for HM/HC PHC and hospital facilities that could be replicated in all the targeted HM/HC facilities at the first and second levels.</p> <p><i>This process includes the following steps:</i></p> <ul style="list-style-type: none"> ➤ Selection of a hospital (CEOC) and PHC facility (BEOC) as the model for the accreditation exercise in cooperation with the Quality Directorate MOHP. HM/HC and JSI selected Gharb El Mattar Health Center as the PHC facility. The concept of Family Medicine was introduced and the staff was trained on it. El Tahrir Hospital was selected as a General Hospital and point of referral of Gharb El Mattar. ➤ Set up the surveyors group that will assess the two facilities and conduct a workshop for orientation and agree on the process. ➤ Organize the conference to orient the staff of the facilities on the facilities and the preparatory management for accreditation. ➤ Conduct on the site assessment jointly (HM/HC, Curative Department and JSI) ➤ Assess and evaluate the model process and agree on action plan for replication. 	<p>HM/HC, Curative Care Department and Quality Department</p> <p>JSI</p>