Brief Report:


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Brief Report


A key requirement of the Health Center Renovation (HCR) project was to assist the FMOH/PPD develop a ‘road map’ or model for standardizing and streamlining the health center (HC) assessment and renovation processes (practices and procedures). To accomplish, it was collectively decided that a guidelines manual and associated resources materials, as well as a field handbook, should be developed. In addition, based on subsequent discussions with the FMOH/PPD staff, it was recommended that the guidelines should include a section on HC expansion (new construction) and maintenance of HCs (both new and old).


Over the course of the first project year (2006/07), the project team, working in conjunction with available RHB, woreda and HC staff, developed and field-tested an extensive array of resource materials for use in:

- standardizing the stages (steps) in conducting HC assessments,
- analyzing the data collected and prioritizing it,
- developing tenders and awarding works contracts, and
- supervising renovation works.

Since November 2007, the major work has been to assist the FMOH/PPD convert what has been learned into the Guidelines for HC Renovation and Expansion Manual and Health Center Assessment Handbook together with a complete set of resource materials (See Attachment A, updated materials list.)

In March 2008, the draft Guidelines manual, draft Handbook and a compact disc (CD) containing the resource materials were submitted for formal review to 27 engineers, architects and health professionals. The organizations represented included the FMOH/PPD, FMOH/HSD, federal and regional HAPCOs, RHBs (Amhara, Oromia, SNNP, Tigray and Addis Ababa), GTZ-IS, CDC, key USG partners (eight USAID supported and four by CDC), and several private architects and engineers (civil, electrical, structural and sanitation). (See Attachment B, complete list of organizations and contact persons.)

Sixteen reviewers (59%) submitted comments and suggestions as well as completing an anonymous Evaluation Questionnaire. The results of the questionnaire are summarized in Table 1 (next page).
Table 1. Evaluation Questionnaire: Summary of Results (N = 16)*

<table>
<thead>
<tr>
<th>Guidelines Manual</th>
<th>Strongly Agree (Percent)</th>
<th>Agree (Percent)</th>
<th>Not Agree (Percent)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SECTION ONE Introduction</td>
<td>70</td>
<td>30</td>
<td></td>
</tr>
<tr>
<td>SECTION TWO Health Center Assessment Process</td>
<td>94</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>SECTION THREE Renovation Guidelines and Practices</td>
<td>80</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>SECTION FOUR Expansion of Health Centers</td>
<td>75</td>
<td>25</td>
<td></td>
</tr>
</tbody>
</table>

| HC ASSESSMENT HANDBOOK                                  |                          |                 |                     |
| Text and Attachments                                    | 79                       | 21              |                     |

| COMPACT DISC                                           |                          |                 |                     |
| Forms, Checklists, Tenders & Contracts, etc.           | 94                       | 6               |                     |

* Of the 27 reviewers, 16 (59%) completed the review process and questionnaire.

The methodology used for summarizing the results of the questionnaire was the following:

- For the Guidelines manual, reviewers were asked to rate each of the four sections by responding to the same five statements:
  1. The objectives of the section were met (strongly agree, agree or disagree).
  2. The content was sufficiently detailed (strongly agree, agree or disagree).
  3. The content was accurate (strongly agree, agree or disagree).
  4. The content was relevant (strongly agree, agree or disagree).
  5. The content was (easy, difficult, very difficult) to understand.

- Next, the number of reviewers selecting each response (strongly agree, agree or disagree) for statements 1 to 4 and for statement 5 (easy, difficult or very difficult) was summed, divided by 16 and multiplied by 100 to get the percent score for each section.1

- For rating the CD, three questions were asked to which the response was either “yes” or “no”:
  1. Were you able to open:
     a) MS Word files?
     b) MS Excel files?

1 The same process was used for summarizing the reviewers’ rating of the Handbook.
c) PowerPoint files?
d) Adobe Acrobat files?

2. Were the sample forms, checklists and tenders, etc. useful?

3. Were the computer-assisted drawings (CADs) useful?

As with the Guidelines manual, the responses were summed, divided by 16 and multiplied by 100 to get the percent score.

The responses from this sample of reviewers were overwhelmingly positive with no reviewer rating any section of the Guidelines manual, Handbook or CD as “not well met” or “difficult to use”. Similarly, all but one reviewer rated the content and presentation of the materials in the CD as “useful” and “able to open the folders and files”.

In April and May 2008, both documents were revised based on the many excellent comments and suggestions made by the reviewers. For example, the original SECTION ONE (Health Center Assessment and Renovation Findings) was deleted and repurposed as a Special Report submitted to USAID/Ethiopia in April 2008. In addition, SECTION TWO (Standards and Guidelines) was extensively revised and more appropriately renamed (Introduction). Other revisions included adding more detail and examples to SECTION THREE (Health Center Assessment Process) and moving many of the attachments to a new section in the Compact Disc (Part 3A). Finally, suggested design changes to the proposed 2008 Model HC design (SECTION FOUR) were incorporated, including adding a computer-assisted drawing (CD 4.7.3) detailing how the model HC could be sequentially and cost-effectively converted to a hospital.

Summary

When taken together, these two documents and associated resource materials provide a model for standardizing and streamlining the HC assessment, renovation and expansion processes. In addition, each section of the Guidelines manual:

- is fully referenced,
- has its own appendix, annex and key resource materials,
- is page-numbered by section, and
- subsections are indexed numerically.

Because of this, the manual, and handbook as well, can be easily updated and/or repurposed. For example, each section of the manual can be printed and used as a stand-alone handout for short course (in-service) training, on-the-job (OJT) training or on site mentoring of architects and engineers. Moreover, because of the modular design, the Guidelines manual, Handbook and resource materials, all of which are included on a compact disc, can be incorporated into the pre-service (undergraduate degree or diploma) curricula for architects and engineering students and/or converted to a self-paced, interactive e-learning package for delivery via the Internet or by CD.
Next Steps

1. Both the revised Guidelines manual, Handbook and CD, which contains all sample forms, checklists, tear sheets, tenders, contracts and computer-assisted drawings) will be submitted to USAID/Ethiopia by/before June 1, 2008 for their consideration.

2. Then, the documents and resources materials (CD) will be presented to the FMOH/PPD for formal acceptance as official FGOE documents.

3. Once this occurs, the documents and resource materials (CD) will be presented at the next National Health Center Coordination meeting.²

² The date and full agenda for this meeting has not, as yet, been set by FMOH/PPD nor concurred on by USAID/Ethiopia.
Attachment A

Updated List of Materials Developed (April 30, 2008)

Contracts and Contractual Tools

Pre-qualification documents for works contractor selection (adapted from FGOE standard)
Tender document for contracting with A&E firm (adapted from FGOE standard)
Tender document for construction works (adapted from FGOE standard)
Tender document for construction works (adapted from USAID)
Sample contract agreement (adapted from FGOE standard)
Master bill of quantities (BoQ) document
Normal BoQ document
Memorandum of Understanding for Regional Health Bureaus
Memorandum of Understanding for Health Centers and Woreda Health Offices

Checklists and Forms

Health Center Maintenance Management Checklist (self-administered)
Damage Assessment Checklist
Reporting Forms
  • Progress (Supervision) Report
  • Health Center Assessment Site Visit Report

Construction Works Certificates and Forms

Health Center Data Collection Form
Health Center Site Handover Form
Damage Assessment Checklist
Damage Take-off sheet form
Initial Payment Certificate
Final Payment Certificate
Provisional Acceptance Certificate
Final Acceptance Certificate

TO BE FINALIZED

1. Minimum Package for HC Renovation (drawn from HSDP-III, COP06, COP07, Recommendations from The First Emergency Plan for AIDS Relief USG and Partners ART Consultation in Ethiopia (August, 2005), and other FGOE and PEPFAR documents

2. Guidelines for Health Center Renovation and Expansion Manual and associated resource materials

3. Health Center Assessment Handbook – a field guide for architects and engineers

3 All items are available electronically.
## Attachment B

**List of Organizations and Contact Persons Receiving the Guidelines Manual, the Health Center Assessment Handbook and the Compact Disc for Review**

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>CONTACT PERSON</th>
<th>Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  HIV/AIDS Prevention and Control Office (HAPCO)</td>
<td>Betru Tekle (MD, MPH)</td>
<td>Director General</td>
</tr>
<tr>
<td>2  HAPCO</td>
<td>Yebeltal (MD)</td>
<td></td>
</tr>
<tr>
<td>3  Addis Ababa HAPCO</td>
<td>Zelalem Demeke (MD)</td>
<td>Head of RHB HAPCO</td>
</tr>
<tr>
<td>4  FMOH/PPD</td>
<td>Rik Nagelkerke</td>
<td></td>
</tr>
<tr>
<td>5  PPD/FFMOH</td>
<td>Getachew Abgesol</td>
<td>A&amp;E Team Leader</td>
</tr>
<tr>
<td>6  PPD/FFMOH</td>
<td>Alemayehu Shwareg</td>
<td>Architect</td>
</tr>
<tr>
<td>7  Federal Ministry of Health, Health Services Department (HSD)</td>
<td>Hassen Mohammad (MD)</td>
<td>Head of the Department</td>
</tr>
<tr>
<td>8  Oromia Health Bureau, Planning and Programming Services</td>
<td>Asfaw Bekele</td>
<td>Head of the service</td>
</tr>
<tr>
<td>9  Addis Ababa City Administration Health Bureau</td>
<td>Samson Tekeste</td>
<td>Health Services team leader</td>
</tr>
<tr>
<td>10 SNNPR Health Bureau</td>
<td>Getahun Mekoya</td>
<td>RHB Engineering Head</td>
</tr>
<tr>
<td>11 Tigray Regional Health Bureau</td>
<td>Hailu Belay</td>
<td>RHB Engineer</td>
</tr>
<tr>
<td>12 CDC</td>
<td>Alton J. King</td>
<td>Facilities Project Specialist</td>
</tr>
<tr>
<td>13 IntraHealth</td>
<td>Yetnayet Demissie (MD)</td>
<td>Country Director</td>
</tr>
<tr>
<td>14 GTZ-IS</td>
<td>Imma Frame</td>
<td>Architect</td>
</tr>
<tr>
<td>15 MSH-HACSP</td>
<td>Muluken Melesse</td>
<td>Technical Director</td>
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<tr>
<td>16 MSH-HACSP</td>
<td>Asaminew Girma (MD MPH)</td>
<td>M&amp;E and Quality Management Advisor</td>
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<tr>
<td>17 RPM plus</td>
<td>Taye, Tibebe</td>
<td>Engineer</td>
</tr>
<tr>
<td>18 Pathfinder International</td>
<td>Tilahun Giday</td>
<td>Country Representative</td>
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<tr>
<td>19 SCMS</td>
<td>Mike Healy</td>
<td>Logistics Advisor</td>
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<tr>
<td>20 MMTS</td>
<td>Solomon Worku (MD)</td>
<td>Country Director</td>
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<tr>
<td>21 FHI - NO REVIEWER</td>
<td>Altye (MD)</td>
<td>Technical Support Director</td>
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<tr>
<td>22 CU-ICAP</td>
<td>Zenebe Melaku (MD)</td>
<td>Country Director</td>
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<td>23 JHU-SEHAI</td>
<td>Solomon Zewdu (MD)</td>
<td>Country Director</td>
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<tr>
<td><strong>UCSD - NO REVIEWER</strong></td>
<td>Diane Mattanovich</td>
<td>Country Director</td>
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<td>24 UW-ITECH</td>
<td>Jack Jourend</td>
<td>Country Director</td>
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<tr>
<td>25 STTA Secondee</td>
<td>Abnet Gezaghen</td>
<td>Architect - PPD</td>
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<tr>
<td>26 Peer Reviewer</td>
<td>Wubistet Jekale</td>
<td>Structural Engineer</td>
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<tr>
<td>27 STTA Secondee</td>
<td>Damensaw Yohannis</td>
<td>Civil Engineer - PPD</td>
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<tr>
<td>28 PPD</td>
<td>Marta Behne</td>
<td>Senior Engineer</td>
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