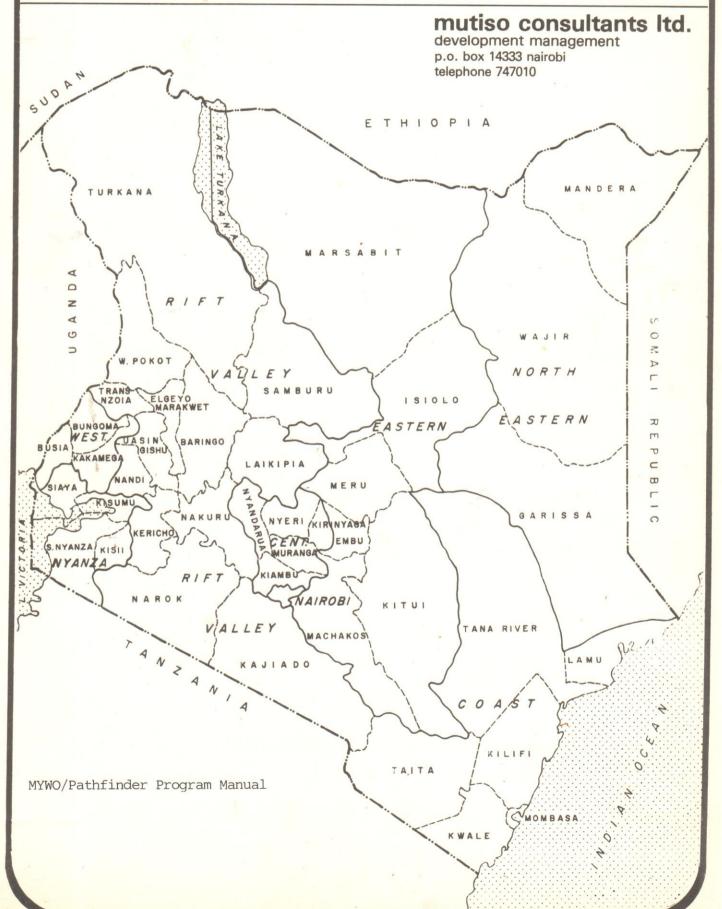
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MYWO/Pathfinder: CBD Program Manual.

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INTRODUCTION.

This consultancy was requested by Pathfinder and Maendeleo ya Wanawake Organisation.

Its output was to be a manual which would be used for management of the MYWO/CBD Program.

The report which follows consists of Parts I and 2. Part One, Program Structure and Staff identifies the policy, management and field implementation levels of the program and specifies the responsibilities of committees and individuals.

Part Two, Program Information, proposes a recording and reporting system which will facilitate a) more systematic record keeping b) easy retrieval of information for management, planning and financing needs and c) better accountability at all levels.

Towards the design of the manual 4 out of the ll contracted days were spent in the field in Kandara and Emuhaya discussing the existant system with the Program Manager, Provincial Supervisors, District Nurse Coordinators, Locational/Sublocational/Group Supervisors and Distributors. Drafts were put to all for discussion. The final draft was therefore derived from discussion. It is the consultants hope and wish that it will be extensively field tested later.

At a conceptual level two management issues struck the consultant as being significant enough to require further thought by Maendeleo ya Wanawake and Pathfinder. They are the span of control from the Program Manager to the Distributor, and the uniqueness of the program in terms of policymaking and implementation being the domain of volunteers but management is by paid staff.

On span of control, one wonders about the utility of the Provincial Supervisors. They are not technical staff in either health or family planning. If one tries to justify them in terms of supervision then one runs in to the classic trap of a non-professional supervising technical staff.

District Nurse Coordinators are clearly technical staff. Perhaps the program can rethink their role.

On the other issue in span of control is the creation of the MYWO/CBD Steering Committee at the Divisional level. One has to weigh whether it will give any advantages other than increasing supervision steps and tying the District Nurse Coordinators and possibly Locational/Sublocational/Group Supervisors in more meetings.

On the policy level and the implementation level being voluntary and management being paid, I think MYWO has a good system going. The only problem seems to be the dearth of management staff. During the consultancy there was not a Program Assistant, Program Accountant, or Administrative Assistant. The Program Nurse Supervisor was nowhere to be found.

Private Voluntary Organisations in Kenya have problems attracting specialist staff and retaining them lately since the market is turbulent. It seems to me important that the specialised staff be found and hired immediately for the supervisory load to the Program Manager level is heavy if these staff are not on board. Lack of these staff will lead to loose project management.

# PART I. PROGRAM STRUCTURE AND STAFF.

#### 1. POLICY LEVEL.

The Policy Level for this project is made up of the MYWO/CBD Steering Committee and the Program Director who is the National Chairman of Maendeleo ya Wanawake. As shown in the Organisational Chart, this level is voluntary.

a) MYWO/CBD Steering Committee.

#### 1. Introduction

The MYWO Steering Committee, under the chairmanship of the National Maendeleo ya Wanawake Chairman, is the overall supervising body of the CBD Program jointly implemented by the MYWO and the Pathfinder Fund.

The Program Manager should be the member secretary of the committee.

The MYWO/CBD Steering Committee meets once every two months, or as often as necessary to review the project, including staff performance.

The MYWO/CBD Steering Committee is responsible for disciplining staff on the advise of the Project Manager.

# 2. Membership.

The membership shall be made up as follows:

- Program Director who is the National Chairman of MYWO.
- Program Manager MYWO/CBD.
- Chief Executive of MYWO.
- National Treasurer of MYWO.

- provincial MYWO Chairmen (4);
- representative of MOH;
- representative of NCPD;
- representative of Pathfinder Fund;

#### Responsibilities.

The responsibilities of the MYWO/CBD Steering Committee shall fall into 4 distinct areas. These are: CBD Expansion, Project Performance Supervision, Financial Supervision and Project Personnel Management.

#### i) CBD Expansion.

The expansion of the MYWO/CBD program demands that new areas for coverage be identified.

Experience from the pilot project areas will be used in assessing :-

- new areas of CBD demand;
- availability of volunteers supervisor and distributors who are members of those communities;
- possibilities of coordination with community and governmental and non-governmental organisations in those communities;
- liaison with National Council of Population and Development (NCPD) on linkages with existing and planned CBD activities to minimise overlaps and uncoordinated projects;

## ii) Project Performance Supervision.

- review quarterly project performance relative to annual objectives;
- in case of shortfall in performance, determine the cause and recommend appropriate course of action to the Program Manager;

# 111) Project Personnel Management.

- selection of the Program Manager, the Program Assistant,
  Program Accountant, Administrative Assistant and the National
  Nurse Supervisor will be done by MYWO in consultation with
  Pathfinder Fund, Nairobi;
- recruitment of other project staff will be made by the Program Manager and the MYWO/CBD Steering Committee with approval of the Pathfinder Fund, Nairobi;
- firing of project staff on the recommendation of the Program Manager for one or more of the following reasons;
  - unauthorized or extended absence beyond the conditions of service for Pathfinder - funded projects;
  - poor performance for three continuous months relative to the performance of the other field-workers;
  - . improper behaviour in the community or in the office;
  - . false reporting;
  - granting leave without pay, as detailed in the service condition;

# iv) Project Financial Supervision.

- at the two monthly meeting, the Chairman of the MYWO/CBD

  Steering Committee will review the monthly Bank Reconciliation

  Statements to verify that the cash balance shown in the checkbook agrees with the actual or net balance available in the bank at the end of each month;
- the Chairman of the MYWO/CBD Steering Committee will make periodic spot checks of the accounting records to ensure appropriate maintenance of accounts;
- the Chairman of the MYWO/CBD Steering Committee will review and give prior approval for all purchases in excess of K.Shs.5,000. All purchases will be made in the open market;

## b) Program Director (20% of time)

## 1. Line Responsibility .

 responsible to the MYWO National Executive Committee through the MYWO/CBD Steering Committee Membership;

#### 2. Qualifications.

- not applicable as she is the National MYWO Chairman;

#### 3. Responsibilities.

- overall Director and Supervisor of the program activities and the Program Manager;
- responsible and accountable for the Pathfinder Fund program funds in accordance with standard terms of Pathfinder Fund Awards to the Pathfinder Fund;
- submits quarterly programmatic, narrative and financial reports to the Pathfinder Fund, the MYWO/CBD Steering Committee and the Ministry of Health;
- maintains close coordination with relevant government and non-governmental agencies through regular attendance of coordinating meetings of the National Council for Population Development and the National CBD Technical and Coordinating Committee;
- works as the Chairman and Chief Advisor of the MYWO/CBD Steering Committee;
- responsible for advertising for vacant posts and recruiting new program staff;
- makes one site visit to each program area per year;
- meets with the Program Manager fortnightly for consultations,
   briefings on progress of program and planning for the month;

#### 2. MANAGEMENT LEVEL.

This level consists of the paid staff recruited by MYWO to run this program other related Maendeleo work.

## a) Program Manager (100% of time)

- 1. Line Responsibility.
  - responsible to the Program Director and through her to the MYWO/CBD Steering Committee;

#### 2. Qualifications.

- university graduate in Social Sciences, Education or any other relevant disciplines;
- should have post-graduate training in Population, Community Health or Nutrition;
- should have at least 3 years working experience in healthrelated community-based programmes as administrator;
- mature and with keen interest in women programmes:

#### Responsibilities.

- responsible to the Program Director and works in close consultation with her;
- acts as technical advisor to the Program Director;
- overall manager and coordinator of MYWO Maternal Child Health and Family Planning Program;
- responsible for day-to-day management of all program activities funds equipment and supplies;
- participates in recruitment of program staff and responsible for training, on-the-job orientation and supervision;

- provides direction and guidance to program staff in program of work, particularly planning, programming, reporting and evaluation of activities;
- plans, designs and develops training programs for staff;
- plans new year program activities and prepares and designs draft program proposals and budgets for review and discussion with the Program Director;
- implements the approved program activities;
- drafts program financial, programmatic and narrative progress reports for review and discussion with Program Director and for subsequent submission to donor agency other relevant bodies and government departments;
- makes one site visit to each district in the program quarterly to:
  - monitor program activities;
  - assess progress;
  - hold consultative meetings with the field staff;
  - ensure coordination between MYWO and other field agencies;
- attends relevant meetings, seminars and workshops;
- member of the National CBD Technical and Coordinating Committee;
- holds fortnightly consultative meetings with the Program Director;
- holds quarterly (or as need be ) consultative meetings with the Pathfinder Fund program officer;
- carries out any other functions as may be necessary in the implementation of the program or as may be required of her by MYWO/CBD Steering Committee.

# b) Program Assistant (100% of time)

# 1. Line Responsibility.

directly responsible to the Program Manager and through her,
 to the Program Director;

#### 2. Qualifications.

- a university graduate in education, social sciences or any other related discipline;
- should have additional training in research and evaluation methodologies and family planning;
- at least three years working experience as a research and evaluation officer in a government department or recognized organization/institution;
- experience in working with rural communities in health and population related programmes will be an added advantage;

#### Responsibilities.

- acts as personal advisor to the Program Manager and, in the absence of the latter, she/he deputises for her;
- receives on-the-job training and orientation;
- responsible for research and evaluation activities of the project and works in close consultation with the Program Manager;
- receives monthly field project reports, analyses them, prepares and submits monthly and quarterly progress reports to the Program Manager;
- identifies strengths and weaknesses of the project and advises the Program Manager accordingly;
- ensures that the monthly work programmes and reports from the field staff are submitted punctually and that the necessary facedback feedback and advice are communicated to the relevant project s staff immediately;

- assists in the training, supervision and monitoring activities of the project;
- responsible for logistics and supplies of the project;
- assists in planning, designing and development of refund project proposals;

# c) Program Accountant (100% of time)

- Line Responsibility.
  - responsible to the Program Manager and through her the Program Director:

# 2. Qualifications.

- a university graduate with a Bachelor of Commerce with accounting option;
- should possess the Certified Public Accounts Certificate Part 1 or above;
- at least two years of practical experience in an accounts office of a reputable organization;

#### 3. Responsibilities.

- works under the direction and supervision of the Program Manager;
- understands and adhers to the Pathfinder Fund grant guidelines;
- responsible for all project accounts, ie. (i) maintenance of the Cash Book, Journal, Ledger, General and Petty Cash Books; ii) Preparation of payment vouchers, project staff payrolls and statutory deductions; iii) Preparation of monthly postings and bank reconciliations;
- compiles and prepares monthly, quarterly and annual financial reports for review by the Program Director, Program Manager and the MYWO/CBD Steering Committee;

- assists and advises the Program Manager, Program Director and the MYWO/CBD Steering Committee in the control and management of project funds;
- maintains a comprehensive project assets register/inventory and ensures proper maintenance of office equipment and supplies;
- prepares books for auditing;
- d) National Nurse Supervisor (100% of time)
  - 1. Line Responsibility.
    - operates under the direction and supervision of the Program
       Manager and works in close consultation with her;
  - 2. Qualifications.
    - Kenyan Registered Nurse or equivalent;
    - post-graduate training in Public Health, including Maternal Child Health/Family Planning;
    - at least three years post-qualification working experience in rural Kenyan communities;
    - mature, preferrably over 25 years of age;
    - sound record of good managerial and organizational qualities and integrity;
    - personal initiative and enthusiasm;
    - demonstrated ability to work in harmony with all levels of people and communities;
    - willing to travel extensively with the Republic of Kenya;
    - keen interest in women programs;

## 3. Responsibilities:

- assists the Program Manager and Program Assistant to Plan, design and develop appropriate training curriculum and materials for the program staff and volunteers;
- assists other program staff and volunteers to implement the under-mentioned training :-
  - conduct six 1-day refresher courses for the old distributors yearly;
  - conduct eleven 2-week training workshops for new distributors yearly;
  - conduct six 1-day refresher courses for old Sub-locational and Locational supervisors yearly;
  - conduct two 2-week follow-up workshops for new Sublocational and Locational supervisors yearly;
- conducts two supervisory/monitoring field trips to each program area to meet with the Sub-locational and Locational supervisors and District Nurse Coordinators; during such visits, she will make stop checks of the records, deal with identified technical problems and identify strengths and weaknesses of the program for discussion with the Program Manager and Program Assistant;
- assists in the on-the-job training and orientation for the Nurse Coordinators and Program Assistant;
- provides needed technical materials for the training of volunteers on the program;
- assists other program staff and volunteers in planning and developing draft renewal proposal;

- holds fortnightly consultative meetings with the Program Manager;
- prepares monthly schedules and reports of her activities for submission to and discussion with the Program Manager;
- works in close coordination with other program staff and the volunteers;

## e) Administrative Assistant.(100% of time)

#### 1. Line of Responsibility.

- responsible to the Program Manager and through her, the Program Director;

#### 2. Oualifications.

- should possess at least Division II Ordinary Level of Kenya School Certificate of Education with a good credit in the English language;
- must be a qualified secretary with speeds of at least 50 words per minute in typing and 120 words per minute in shorthand of Pitman's or Kenya Examination Council;
- mature, competent and with at least three years of working experience as a personal secretary in a reputable organisation;

#### 3. Responsibilities.

- responsible for all secretarial work of the project including, typing, filing, correspondences;
- maintains and ensures safe storage of all project documents, files and office supplies and stationery;
- responsible for petty cash of the project and submits weekly and monthly returns to the Program Manager;

- f) Provincial Supervisor (100% of time).
  - 1. Line Responsibility.
    - works under the direction and supervision of the Program Manager;
  - 2. Qualifications.
    - must be a Certified Community Development Officer or Social Worker with Public Health experience;
    - at least 7 years field experience in a program supervisory capacity;
    - must have had short courses in either project planning field extension work;
  - 3. Responsibilities.
    - responsible for day-to-day monitoring and supervision of the program activities and program staff and volunteers in the Province;
    - assists other program staff to :
      - conduct six 1-day refresher workshops for old Distributors;
      - conduct eleven 2-week training workshops for new Distributors;
      - conduct six 1-day refresher workshops for old Locational/
         Sub-locational Supervisors and two 2-week training workshops
         for new Locational/Sub-locational Supervisors;

- conduct two 2-week training workshops and two 2-week
   follow-up workshops for new Locational/Sub-locational
   Supervisors;
- identification of new areas and groups and relevant staff for program expansion in her Province;
- assists in the on-the-job training and orientation for new District Nurse Coordinators and Program Assistant;
- conducts monthly supervisory/monitoring site visits in her respective project area;
- meets quarterly with the Provincial MYWO Committee and the Provincial Development Committee;
- conducts monthly staff meetings for her Nurse Coordinators,
   Locational and Sub-locational Supervisors;
- ensures that the District Nurse Coordinators' reports on the Locational/Sub-locational Supervisors performance are submitted accurately and punctually every month and that she provides necessary feed-back on time;
- identifies problems and assists the Nurse Coordinators and the Locational/Sub-locational Supervisors to resolve them;

- responsible for the stocks on contraceptives and other supplies in her Province and ensures regular and adequate supplies to the District Nurse Coordinators;
- provides on-going education to the District Nurse Coordinators;
- coordinates visits to the project;
- maintains smooth coordination of program activities with relevant officials of the government and other agencies in the Province through regular quarterly coordinating meetings and progress reports;
- prepares and submits her work programs and reports monthly to the Program Manager;
- assists in preparation of renewal proposal drafts;
- participates in follow-up, evaluation and research activities of the program;
- g) District Nurse Coordinator (100% of time).
  - 1. Line Responsibility:
    - answerable to the Provincial Supervisor and through her, the Program Manager;

# 2. Qualifications:

- EITHER Community Nurse training OR Enrolled Nurse/Midwife plus in-service training Family Planning or Public Health;
- practical field experience of at least three years;

- knows the community, its tradition and culture;
- respected by the CBD community;
- resident of the selected CBD Program area;

# 3) Responsibilities :

- responsible for the day-to-day monitoring and supervision of program activities at the Locational/Sub-locational/ Group - Supervisors in her district;
- prepares and submits her work program monthly to the Provincial Supervisor;
- compiles Locational/Sub-locational progress reports and submits them monthly to the Program Manager with copies to the Provincial Supervisor and provides relevant feed-back on time;
- attends quarterly the local MYWO Committee and acts as its secretary;
- assists in :
  - conducting of six 1-day refresher workshops for old distributors and eleven 2-week training workshops for new distributors;
  - conducting of six 1-day refresher workshop for old Locational/Sub-locational Supervisors and two 2-week training workshops and two 2-week follow-up workshops for new Locational/Sub-locational Supervisors;

- identification of new areas and groups and new Distributors and Locational/Sub-locational Supervisors for the expansion program;
- conducts weekly monitoring/supervisory site visits to Locational/Sub-locational Supervisors and Distributors;
- holds monthly staff meetings with Locational/Sub-locational
   Supervisors and Distributors;
- maintains an up-to-date record of her stock of contraceptives and other supplies and ensure regular replenishing of the Locational/Sub-locational Supervisor's stocks;
- attends the District Divisional Development Committees'
   Meetings and Reports to them regularly on the progress of the program;
- liaises and coordinates with relevant officials of the government and other agencies;
- makes monthly visits to the service delivery points for follow-up of referred clients and maintains good coordination with clinic staff;
- provides needed technical advise to program staff and clients on MCH/FP methods and services in her district;
- conducts regular blood pressure checks/examinations of clients;
- provides the injectables to clients in need of the contraceptive method;
- identifies problems in the program and assists in resolving them;
- participates in follow-up, evaluation and research activities of the program;

#### 3. FIELD IMPLEMENTATION LEVEL.

This level is voluntary. It is the real base of the program in the sense that it is in daily touch with the clients in their communities.

a) Divisional MYWO/CBD Steering Committee.

The formation of this body is under discussion and its functions and role are yet to be spelled out in detail.

- b) Locational/Sub-locational/Group Supervisor.
  - 1. Line Responsibility:
    - works under the direction of the District Nurse Coordinator.

#### 2. Qualifications:

- minimum O-level education; preference will be given to the candidates having A-level education;
- married women, minimum age 20 years;
- area resident, amiable personality;
- experience in family planning or social work;
- effective interpersonal communication skills for field work;
- proven leadership skills;
- ability to travel independently;

#### 3. Responsibilities :

- identification and registration of all eligible couples; identify those interested in family planning; educate clients for acceptance of family planning; provide contraceptives to users through household visits; ensure a one-month reserve supply for users AT ALL TIMES;
- accompany clients interested in IUD's or injectables to the cooperating family planning clinic; refer clients desiring sterilization to a cooperating hospital/clinic and accompany client to and from service site;

- follow-up visits to Distributors for resupply and reassurance;
- follow-up of clinical contraceptors and ensure continuation of use; deal with complications by referring such cases to the family planning clinics;
- refer clients requesting care for gynecological complaints and pre- or post-natal care to family planning clinics, refer clients and/or children needing immunization; supply iron capsules, multivitamins and other medicines as and when available upon approval from the program;
- assists the Distributor in the MYWO group activities;
- maintain accurate record of users/couples in appropriate recording format;
- updating couple registration data on a continuous basis;

#### c) Distributor.

#### 1. Line Responsibility:

 works in conjunction with the Locational/Sub-locational/Group supervisor;

#### 2. Qualifications:

- qualified extension worker from a government institution; or
  - a community leader with training in family planning from
  - a recognized government or private institution;

- extensive experience in MYWO group activities desirable;
- acceptance as a leader by MYWO member is a must;
- active member of MYWO;
- O-level education is desirable;

# 3. Responsibilities.

- the Distributor will be working distributing to a specific MYWO group;
- she will in conjunction with Locational/Sub-locational/Group Supervisors help in community diagnosis, record keeping and motivation;
- refer needy clients to the Locational/Sub-locational/Group Supervisors and/or District Nurse Coordinators;

#### PART II. PROGRAM INFORMATION SYSTEM.

In this part we propose an information structure which will enable the MYWO to have a comprehensive reporting system for purposes of monitoring the activities of all levels as well as building information for eventual impact evaluation.

In doing this we have specifically kept the information load for Distributors low. We have arrived at this design after discussions in the field.

This system is so designed as to be compatiable with micro-computer data processing.

It also significantly borrows from the experience of the past MYWO/CBD reporting system and Pathfinder experience in designing the Bangladesh CBS Manual which was supplied to the Consultant during briefing.

- a) CBD Project Couple Registration.
  - 1. Purpose.

In community-based distribution projects, Couple Registration constitutes and important management tool. Couple Registration is designed to provide information to the Program Manager and staff about contraceptive practice in a given project area, and to identify women at risk of unwanted pregnancy.

Couple Registration is designed to be conducted in the first (1) month of a new project and may be conducted again at a later date. As soon as the staff is hired and trained, registration begins. The Couple Registration provides baseline data on the Contraceptive Prevalence (what proportion of couples use a family planning method) in the project area.

Couple Registration should be done in a new area by a team made up of Provincial Supervisor, District Nurse Coordinator, Locational/Sub-locational/Group Supervisors and Distributors. Before it is initiated coordination with Provincial Administration is mandatory.

The Couple Registration plan calls for a uniform definition of "eligible couple"

Eligible couples are women who are married, under 50 years of age and living with their husbands. Eligible couples include women who are currently pregnant because they are eligible to receive family planning information and pre-and post-natal care. After the delivery, they will be eligible for family planning services.

# 2. Work Plan.

- In the planning of MYWO/CBD Program the Program Manager assigns specific Distributors to specific groups. Locational and Sublocational/Group Supervisors and assigned to specific areas so that:
- all Distributors and Supervisors have approximately the same number of couples;
- boundaries are clear so that no eligible couples are omitted or registered by more than one Supervisor;
- each Supervisor registers the couples she will continue to serve in so far as possible;
- Every group is visited by the Locational/Sub-locational Supervisors.
- Every eligible couple is registered, including pregnant women. A client card (in duplicate) is completed for every eligible couple registered.

The Locational/Sub-locational Supervisor verifies the results of the registrations of each Distributor under her supervision. The Registration Team goes to the field for two purposes: first, to determine that the Distributor can correctly identify an eligible couple (that is, the Distributor does not register couples who are not eligible for family planning information and services and conversely, the Distributor does register all eligible couples); and second, to determine whether the Distributor can correctly gather and record the information required in the MYWO/CBD CLIENT CARD. If problems are identified, the Team retrains the Distributor and helps her to collect accurate and complete information.

The Registration Team makes first verifications early in the registration so that mistakes can be quickly corrected.

- When the registration is completed each District Nurse Coordinator adds the couples who are currently pregnant and users of family planning methods. Each District Nurse Coordinator verifies the totals of the Locational/Sub-locational/Group Supervisors under her supervision and submits the verified totals to the Provincial Supervisor.
- The Provincial Supervisor is responsible at all stages of the Couple Registration for assuring that accurate and complete data are collected, and that good relations are created with the community. The District Nurse Supervisor conducts periodic reviews of the registration and provides technical assistance where needed.
- The District Nurse Supervisor submits the RESULTS OF COUPLE REGISTRATION using Recording Form 2 to the MYWO/CBD office in Nairobi within 7 days of completion of the Couple Registration.

- 3. Instructions for Filling in Couple Registration Form.
  - Registration Number.

Each woman has a separate line on the Couple Registration Form. If one man has two wives, the wives do not share a line. Each wife has her own line and registration number.

The Team assigns a registration number to each eligible couple. The Supervisor numbers all the eligible couples in each community or MYWO Group assigned from one to the end. The eligible couple's registration number is the MYWO group dash (-) serial number. For example, the third eligible couple registered in the Kandara Maendeleo is 37 - 3 because the Program Manager assigned the number 37 to Kandara Maendeleo. After the whole MYWO group is covered and all eligible couples are registered, the Supervisor leaves several pages blank and she/he starts Couple Registration work in the next group say Kirima Maendeleo, 38.

- Wife's Name/Husband's Name.

The Supervisor asks the wife's name and the husband's name and records these and the address in the appropriate column.

- Wife's Age.

The Supervisor asks the wife's age and records it in number of completed years.

- Wife's Education.

The Supervisor asks the wife's education and records the level of education, (i.e., up to standard V, O-level, A-level etc.)

- Number of Living Children.

The Supervisor records the number of living sons (M) and doughter (F) she does not record children who have died.

- Number of Children under Five Years.

The Supervisor records the number of children under 5 years of age.

- Age of Youngest Child.

The enters the age of the youngest child in completed years or/and months.

- Want any more Children.

The Supervisor then asks the couple whether they want any more children and records a tick in the form in the appropriate clumn.

- Currently Pregnant.

The Supervisor asks whether the women is currently pregnant. The answer is recorded in the appropriate column.

If the wife is pregnant, skip to "Ever Used a Method in Past" column.

- Whether Using any Family Planning Method.

If the wife is not pregnant, the Supervisor asks the eligible couple if they are practicing any family planning method. If the answer is yes, the Supervisor asks what method they are using and puts a tick under the appropriate method. (Dates for IUD and sterilization are to be recorded in the appropriate column;). If the answer is negative and the Supervisor suspects that the client does not understand the question, the Supervisor may prompt the client by mentioning some methods.

If prompting brings an affirmative reply, the Supervisor asks to see the brand and records the method. If the couple is not using a family planning method, the Supervisor ticks "none".

- Ever Used a Method in Past.

If anybody reports using methods in the past, but is not a current user, this should be recorded under the "Ever Used a Method in Past" column.

For each completed page of the Couple Registration, the Supervisor tabulates data from the "Currently Pregnant" through "None" column; the Supervisor records the sums in the row marked "TOTAL" at the bottom of each page and she verifies the data tabulated for each page.

- Remarks.

The Supervisor may write observations about or conditions of the couple in the column under "Remarks".

The Supervisor enters the names of new couples who move into the project area in the Couple Registration Book. She/he puts the names of new couples of different groups in appropriate blank pages with the registration number and date. She/he crosses out the names of couples who leave the area. No one who resides outside the project area is registered in the Couple Registration book.

After completion of the Couple Registration, the book is used for planning educational and motivational work in new program area.

The priority couples to be selected for family planning education are those who report:

- they want no more children;
- or they have at least one child;
- or the youngest child is less than one year of age
- or the couple is newly married;

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_											Vas Other Specify	WHETHER USING ANY FAMILY PLANNING METHOD	Supervisor	Distributor	Registration Date
>											None	HOD			ate:
										Yes No	Used a Method in Past	Ever		-	

# ANALYSIS OF COUPLE REGISTRATION

Form 2. Submit to MYWO/CBD

	/ Code No.	Supervisor:	/ Code No.		istrict
Couple Registration.	/ Code No	Distributor:	/ Code No.		ocation
7 days of completing	/ Code No.	Reg. Date :	/ Code Nb.	л 	ub-location
Program Manager within	/ Code No.	Province :	/ Code No.	••	illage

Total :	74				A	Code No.	Group
		•			В	tor	Name of
					0	Registered Couples	Total No.
. 9	-				D	Pregnant	Total No. No.Currently
,					Е	Pill	
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- Berlin		Chrometeanness of Child Child		-	6	Foam	7
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,					ل	1.1	NO.OF COUPLES USING FAMILY PLANNING
					~	Vas	PLANNIN
						Other, Specify	IG (
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= D + E + F + G + H + I + J + K + L + M Contraceptive Prevalence = Total (E + F + G + H + I + J + K) X 100 Pregnancy Prevalence Total D x 100

# b) Family Planning Acceptors & MCH Record.

# 1. Purpose.

The Locational/Sub-locational Supervisor uses this book to keep a record of all Family Planning, MCH and educational activities in the area assigned to her Distributors. The book helps the Supervisor to be sure that all clients have an adequate supply of contraceptives, and it enables her to have an up-to-date count of all active family planning users in her area.

#### 2. Procedure.

After Couple Registration all clients are entered in the FAMILY PLANNING MCH RECORD (Recording Form 3). As users shift from the project area they are crossed out of the Record. New clients who come to the area are entered in the FAMILY PLANNING & MCH RECORD.

The FAMILY PLANNING & MCH RECORD is divided into different sections so that all the users in one group are kept together just like the Couple Registration book. (All family planning users from outside the project area are kept in a separate book.) The FAMILY PLANNING & MCH RECORD is kept in the project office. The Supervisor makes all entries in the record using the red client cards of the Distributors.

- The first column is the client registration number assigned during Couple Registration.
- The name of the new acceptor and her husbands are entered in the column Name/Address in sequence.
- The rest of the record is used to record project activities. The Supervisor enters in the monthly columns the method used by the client if any, the date of the mome visit, or any MCH activity.

If the Distributor supplies pills, foam or condoms, the Supervisor also enters the amount given. If the client is a market client, the Distributor enters "market" and the method.

# 3. Examples.

The 12 columns represent the calendar months; if the Distributor recruits a new acceptor for Pill in January, the entry is the number of cycles given and the date. Also, "NA" is entered for a New Acceptor. If the Distributor gives 2 cycles of pills on the fifth day of January, the entry in the column looks like:

Jan.	Feb.	Mar.
2 pills 5 NA		

If the Distributor makes a visit to the above acceptor on the 3rd day of February and provides one more cycle of pills, the entry looks like:

Jan.	Feb.	Mar.
2 pills 5 NA	<u>1 pill</u> 3	

If a Distributor makes a follow-up visit to the above acceptor on the 15th day but does not provide more pills, the entry is "Follow-up" and the date:

When a Distributor provides condoms, the Supervisor records the number of condoms and the day of the month. For example, if the Distributor provides 10 condoms on the 3rd day of the month the entry is:

# 10 Condoms

A new acceptor of an IUD, injection, ligation or vasectomy is recorded only after the client starts the method. For example, if the Distributor educated a woman for ligation on the 3rd, the woman obtained the ligation on the 10th and the Distributor visited the home on the 16th to learn of the ligation, the entry is:

Lig 10

When a client accepts sterilization, the entry records the acceptance with the day of the month. The Supervisor draws a line across the rest of the page so that the sterilization acceptor is never counted as a drop-out. The entry looks like:

Jan.	Feb.	Mar.	Apr.	May	Jun.	etc.
	<u>Lig</u> _					ı

If a client drops out and has no supplies on hand the entry is an "X" on the box. For example, if an IUD acceptor has the IUD removed in March, the entry looks like:

Jan.	Feb.	Mar.
IUD 20		

Market client drop-outs should also be recorded regularly. The reason for the drop-out should also be recorded. If the reason is pregnancy, the Distributor will plan to revisit after the birth by filing the client card in the appropriate month.

When a Family Planning user changes methods, the Supervisor continues the record on the same line. The client is not recorded as a drop-out with the old method and a new acceptor with the new method. This is recorded as switch over from one method to another keeping the total users unchanged.

When a client is a new acceptor the Supervisor records "NA" to facilitate end of the month recordkeeping.

The Supervisor also records all of her MCH activities and Family Planning motivation activities. These include pre-natal and post-natal education, immunization referrals, nutrition education, etc.

The final column is for remarks. The Supervisor may make notes in the Remarks column. She should always note the reason for a drop-out, such as the client left the area, is pregnant, etc. The Supervisor notes that a user purchases her supplies in the market. She may make any entry that clarifies an event in the record.

			The second second					
		2				Reg. No.	Client	Group Name: Village: Sub-Location: Location: District:
						NAME/AUURESS		/ Code No.
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						Feb	*	
						Mar		
				0		Apr		
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	5.					un	NDAR M	Province Reg. Date Distribut SB/L Supe DN Superv
						July	CALENDAR MONTHS, 198_	Province Reg. Date Distributor SB/L Supervisor DN Supervisor
		7.	•			Aug	198	isor:
						Sep		
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						Nov		/ Code No. / Code No. / Code No. / Code No.
						Dec		No.
					,			

# c) Client Card Instructions.

The Client Card (Recording Form 4) has two identical parts. A blue card is given to the client, and a red card is kept by the Distributor. Both are completed for all eligible couples in the group at the time of Couple Registration. A card is also completed for a visitor who accepts a family planning method from a Distributor. Every time the Distributor visits a client or meets the group, she records the event on both cards.

The Distributor keeps her red cards at home. They are arranged according to the date she plans to meet various group members. The Distributor carries the red cards corresponding to the clients she plans to meet. She takes the red cards with her to all group meetings. She should always carry spare client cards as well as her diary.

At the end of the day/week the Supervisor, with the help of the concerned Distributor, records all activities from the red cards into the FAMILY PLANNING & MCH Record (Recording Form 3).

The Supervisor uses the client card to make spot checks to verify the Distributor's performance. Every week the Supervisor selects a sample of each Distributor's red client cards. The Supervisor visits the clients home/group and verifies that the information is the same on the blue client card. If the client is a new acceptor, the Supervisor should also ask the client to repeat the instructions for using the method. In this way, the Supervisor verifies that the client knows how to use the method properly. The Supervisor signs and dates both the blue and red cards.

The Supervisor and Distributor can arrange the red cards so that clients who live close together will be visited on the same day if they are not met in group meetings. This will save the Distributor from unnecessary travel.

Each card contains the registration number assigned at the time of Couple Registration. This number makes it easy for the Supervisor to find the client's name in the FAMILY PLANNING & MCH RECORD.

When a client drops out, her card should either be placed in a drop-out file kept by a Supervisor or filed by the Distributor for a visit at a later date to remotivate the woman for family planning. The date and reason for the drop-out should be noted on the client card and the FAMILY PLANNING MCH RECORD.

If a Distributor provides a service to a client when she is not carrying the red client card, this service is recorded in her diary. Upon return to her home, the service is recorded on the client card.

Form 4.

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- d) CBD Daily Distribution Log.
  - 1) Purpose.

The Distributor keeps a record of the number of clients, she/he supplies with contraceptives and the amount of contraceptives she distributes in the DAILY DISTRIBUTION LOG (Recording Form 5).

### 2) Procedure.

At the end of each day, the Distributor records the methods given to the clients in the CBD DAILY DISTRIBUTION LOG using the red client cards. (The cards contain the record of all the Distributors' visits on one day to new and active users and the amount of supplies provided.)

All distribution is recorded in the log whether the client lives inside or outside the project area. However, market clients or clients who are visited for education but do not receive methods from the Distributor are not recorded in the log.

The Distributor makes daily entries on the line corresponding to the date of distribution (date on the client card). At the end of the month all the columns are totalled by the Supervisor. The totals are recorded on the DISTRIBUTOR'S MONTHLY PERFORMANCE REPORT (Recording Forms 6.)

# MYWO/CBD DAILY DISTRIBUTION LOG.

Distributor		*	Code		Month		198	
JIJ CI ID G COI	•		0000		11011011		100	

DAY	PILL	-	CONDC	M	CREAM JE	LLY	FOAM	
OF MONTH	No. Clients	No. Cycles	No. Clients	No. Pieces	No. Clients	No. Vials	No. Clients	No. Tablets
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e) Monthly Distributor's Performance Report.

## 1. Purpose.

This form has several uses. The Sub-locational/Locational/Group Supervisor uses it to prepare the monthly performance of individual Distributors under her supervision. Then she compiles the service statistics of all the Distributors and submits the report to the District Nurse Coordinator. She inturn submits a copy with the performance of all the Distributors to the MYWO/CBD Program Manager.

### 2. Procedure.

- Contraceptives distributed are recorded on this MONTHLY DISTRIBUTOR PERFORMANCE REPORT (Recording Forms 6) using the total figures from the DAILY DISTRIBUTION LOG (Recording Form 5).
- Only clients in the project area are counted. A new acceptor is a client who was not previously using a method but accepts one either in the CBD program or from another source. A previous drop-out is a new acceptor when she starts a method again.
  - Couples who are practicing family planning at the time of Couple Registration are not new acceptors when they are transferred from the Couple Registration book to the FAMILY PLANNING & MCH RECORD-
- Drop-outs in the project area are counted from the FAMILY PLANNING & MCH RECORD:
- Total eligible couples of Distributors is recorded from the Couple Registration Forms.
- The CPL (or the Contraceptive Prevalence Level) is one of the most important indicators of the Distributors achievement in her family planning work. The CPL is always a percentage. It is calculated by dividing the total number of active users by the number of eligible couples.

The "Couples Visited for Family Planning Education or Referral" are counted from the FAMILY PLANNING & MCH RECORD. Every couple who receives a visit for a Family Planning purpose (other than to supply a method) is counted. This is a count of couples visited, not number of visits.

From the assorted MONTHLY DISTRIBUTOR'S PERFORMANCE REPORTS, the District Nurse compiles a SUB-LOCATIONAL/LOCATIONAL/GROUP PERFORMANCE SUPERVISOR REPORT (Form 7).

# DISTRIBUTOR'S MONTHLY PERFORMANCE REPORT

Kikundi SL/L Supervisors Name Code No. Province District Sublocation Location Mgawa-Code nyaji, No. Mpango Zamani Zamani Wapya Zamani Wapya tumia Zamani Wapya Uzazi Wanao-Wapya Wa Wa Wa Wa Sindano SABABU YA KUTUMWA WALIOTUMWA KLINIKI NA Koili Mpira wa Ume Kufungwa Code No. Code No. Code No. Code No. Code No. Kufungwa Kwa Mme Kupimwa Ugonjwa Watu No. Kumeza (Pills) Tembe za VIFAA WALIOPATIWA Mpira Watu No. Watu (Condom) wa Tembe Uke No. Watu Mafuta ya Uke No. Ugonjwa Bwana Kukataa DROP-OUTS & REASONS WALIOACHA NA SABABU Mke Kukataa Uvumi MONTH Matatizo ya Vifaa Mimba Hakuna Sababu Mgawanyaji . AY UUL MAWAZO Kikundi

Form 6.

Coil Inject T/L Check Diseas	- E							. Code	Sub-	
no. or ker	Accepto Old Clients	New Acceptors Old Clients	Acceptors 01d	01d Clients	New Acceptors	01d Clients	New Acceptors	CLIENT	TYPE OF	SL/L/G Supervisor District Nurse Supervisor District Province
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- f) Program Manager's District Quarterly Performance Report.
  - 1. Purpose.

The DISTRICT QUARTERLY PERFORMANCE REPORT (Recording Form 8) summarizes the contraceptives distributed during a 3 - month period. The information, when compiled for a particular project period, will help calculate couple years of protection provided by the project during the period.

### 2. Procedure.

This report may be filled out either in its entirety (monthly + total) or by simply giving the totals for the quarter.

This should include distribution of all contraceptives by all field staff during the quarter in the project office or in the community.

For purposes of reporting to the Pathfinder Fund, data tabulated in DISTRICT QUARTERLY PERFORMANCE REPORTS is aggregated in districts to give the NATIONAL QUARTERLY PERFORMANCE RECORD (Recording Form 9).

# PROGRAM MANAGER - DISTRICT QUARTERLY PERFORMANCE REPORT.

Project Title : MYWO/CBD Program

Program Manager	:/ Code No				
District	:/ Code No				
Period Starting	:Ending		Year	to a company of the c	
		1st Month	2nd Month	3rd Month	TOTAL
1. No of Disti	ributors Reporting				
2. Referrals Steriliz IUD Injectal Side eff Disease F/P chec	ole fects				
3. New Accepto  Pill  Condom  Foam/Jel  IUD	Injectable Sterilization				
4. Visitors S	Served				
5. Active	New Clients	discondinate of the second			
User	Continuing				
2. Method 3. Gone a 4. Death 5. Pregna 6. Rumour 7. No nee	nd/Relative disagree d side effects nway nncy or disease				

# PROGRAM MANAGER - NATIONAL QUARTERLY PERFORMANCE RECORD

47

Project Title : MYWO/CBD Program			4			
Program Manager :/ Code I	No					
Period Starting :Ending	9	Ye	ear			
		_				
	Х	Muranga	Emuhaya	Х	X	X
1. No of Distributors Reporting						
2. Referrals  Sterilization IUD Injectable Side effects Disease F/P check up						
3. New Acceptors Pill Condom Foam/Jelly IUD Injectable Sterilization						
4. Visitors Served						

New Clients

Continuing

5. Active

Users

6. Drop-outs - Reasons :

Husband/Relative disagree

2. Method side effects
3. Gone away
4. Death

5. Pregnancy or disease6. Rumours

7. No need/Reason 8. Unrelated disease

9. Other

g) Spot Verification of Distributor's Performance.

### 1. Purpose.

Spot verifications have three purposes :

- to verify that all new acceptors know how to use their new method,
   and to provide new instructions if the client has forgotten;
- to verify that each Distributor makes the home visit recorded in the FAMILY PLANNING & MCH RECORD, and that the Distributor supplies the exact amount of contraceptives recorded;
- to identify any problems that a Distributor may have in her work so that she may be helped to improve her performance;

### 2. Procedure.

Sub-locational and Locational Supervisors or District Nurse Supervisor will verify all new acceptors. Each week, the Supervisor will select the red client cards of all new acceptors from the previous week. The Supervisor will visit each new acceptor and ask the client to describe how she uses the method. If the client cannot describe proper use of the method, the Supervisor will re-instruct her.

The Supervisor should also visit TEN PERCENT of each Distributor's old clients every month. The Supervisor should select active users whom she has not visited before, or where there appears to be some problem.

When the Supervisor makes spot verifications, she carries the spot verification Register and the red client cards to the field with her. At the end of the spot verification, the Supervisor records her findings in the SPOT VERIFICATION REGISTER (Recording Form 10). If the Supervisor identifies any problems, she should discuss them immediately with the District Nurse Coordinator or Provincial Coordinator, so that steps may be taken to improve the Distributor's performance.

At the end of each month, each Supervisor submits to the District Nurse Coordinator a MONTHLY REPORT ON SPOT VERIFICATION (Recording Form 11). A copy of this monthly report is sent to MYWO/CBD Program Office, Nairobi.

Any of the CBD officials can use the SPOT VERIFICATION FORM as a management tool for monitoring the performance of all levels of the program.

Name

Designation :

HIN S D
Date of Spot Veri- figa
Date Name of of Spot Distri- butor Veri- Code No.
Reg.
Name and Address of Client
New (N) or old (0) client
If new client, does she know how to use method Y/N
Method a Given at Yellow Client
Method and Amount Given at last visit Yellow From Spot Client verification
Any Problem found
Describe Problem and Proposed Solution

# MONTHLY REPORT ON SPOT VERIFICATION

Project Title	:	
Report for the Month of	*	
Submitted by	:	/Code No.
Designation	:	

Name of Fieldworker/Code No.	No. New Acceptors this Month	No. New Acceptor verified	No. old Users	No. old Users veri- fied.
30				
				-
1	* *			
*		# <sup>3</sup>		
			,	
TOTAL				

Describe major problems :

Signature	:	0
Data		

Annexe	1	MYWO CI	BD PILOT	PROJECT
		CLINI	C REFERRA	AL FORM

	Date:
To Sister	/Nurse In-Charge,
Health Ce	ntre/Hospital/Clinic (delate whichever is not relevant):
• • • • • • • • •	••••••
	o introduce Mr./Mrs./Miss
who is be	ing referred to you for the following reasons :-
(i) R	outine check up
(ii) F	amily Planning
(iii) S	ide effects
(iv) A	ntenatal care
(v) He	ealth problem
(vi) Ir	mmunizations
(vii) Nu	utritional counselling
(viii) Of	thers
	• • • • • • • • • • • • • • • • • • • •
Please do	kindly assist her/him as much as you can.
	Yours sincerely,
	, can o canoci cay,
	••••••
	DISTRIBUTOR
PROJECT AS	DEA ·

Annexe 2 MYWO-MCH/FP MOTIVATIONAL SERVICES

SUPPLIES DEMAND VOUCHER (SDV)

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