Appendices

Appendix 1 (a)

Outline of Community Drug Program Protocol

1. Introduction

- 1.2 Purpose
- 1.3. Objectives
- 1.4 Strategies
- 2. Management
- 2.1. User fee
- 2.1.1 Fee Mechanism
- 2.1.2.Collection of fee
- 2.1.3.Banking procedure
- 2.1.4. Accounting and auditing
- 2.2. Drug supply
- 2.2.1.Selection of essential drugs
- 2.2.2.Estimation of drugs
- 2.2.3.Purchase of drugs
- 2.2.4.Inventory
- 2.2.5 Minimum stock

2.3. Recording/reporting

2.3.1. Recording

2.3.2. Use of different forms

2.3.3. Reporting

2.3.4. Use of reporting forms

2.4. Monitoring

- 2.4.1. Master health chart
- 2.4.2. Review meetings

2.5. Supervision

- 2.5.1. Supervision checklist
- 2.5.2. Feedback
- 2.5.3. Reporting

2.6. Health post management committees

- 2.6.1. Formation
- 2.6.2. Membership and termination
- 2.6.3. Authorities and responsibilities
- 2.6.4. Meetings

2.7. Evaluation

- 2.7. 1. Components
- 2.7.2. Indicators
- 2.7.3. Methods

Appendices

Appendix 1 (b)

Workshop schedule for preparing CDP protocol

Venue: District Health Office, Beni, Myagdi.

Number of participants: 12 (HPI=3, HPMCC=3, CDP team=6)

Duration: 2 days

Objective of the workshop: To prepare Community Drug Program protocol.

Day 1st

Time	Subjects	Activities
10-11	Introduction	Ice-breaking game to introduce each other
11-12	Outline of CDP purpose, objectives	Facilitator will present outline of the proposed CDP protocol
12-01	Lunch break	
01-03	Group work on User fee and Drug supply	Participants will discuss about user fee and set charges for different items of drug group using simple heuristic approach. Participants will discuss in groups about selection, estimation, purchase and inventory of essential drugs.
03-04	Presentation of group work	Participants will present the outcome of group work to the class and discuss.

Day 2nd

Time	Subjects	Activities
10-11	Recording/reporting	Presentation of proposed forms and discussion and feedback from the participants. Discussion on reporting.
11-12	supervision	Facilitator will present supervision checklist and approach of the supervision.
12-01	Lunch break	
01-02	Role and responsibilities of Health committees, HPI, DHO and other health staffs.	Participants will discuss in groups about the roles and responsibilities of different committees and people involved in the implementation of CDP.
02-04	Monitoring and evaluation of CDP.	Facilitator will present the methods and techniques of monitoring and evaluation of the CDP and participants will discuss in group and present to the class.

Appendix II (a)

Training curriculums

(A. Training Curriculum for Health Post Committees)

Module I

Day I

Topic: Situation Analysis

Objective: At the end of this module participants will be able to identify health problems of the community and their own.

Time	Contents	Activities
10-11	Introduction	Participants and trainers will take part in ice-breaking game for introducing each other.
11-12	Introduction to training program	Facilitators will present purpose and methodology of the training. Participants in groups will make their own rules and committees for management and evaluation of daily ctivities.
12-01	Lunch-break	
01-03	Collection and analysis of health post statistics.	Participants in different groups will collect data and analyse them with the help from facilitators.
03-04	Health problems	Participants will list the health problems based on health data and compare them with their own health problems and prepare the list of the most common health problems of their community.

Module II

Topic: Introduction to community drug program

Objective: At the end of this module participants will be able to understand concepts,

principles and purpose of CDP and discuss these with villagers.

Time	Contents	Activities
10-11	Review of day I	Evaluation group will present the evaluation of day I activities and discuss with the class.
11-12	Need for CDP	Facilitator will present the overview of health service financing and approaches to health care financing in Nepal.
12-01	Lunch break	
01-02	Concept/principles of CDP	Facilitators' presentation and discussion on concept, principle and purpose of CDP.
02-04	Implementation strategies of CDP	Participants will discuss in group on how to implement CDP. Facilitators' presentation on the conclusion of group discussion. Preparation of different rules for implementation of CDP.

Module III

Day III

Topic: User fee mechanism and exemption policy

Objective: At the end of this module participants will be able to formulate appropriate fee mechanism and exemption policy relevant to their health facility.

Time	Contents	Activities
10-11	Review of day II	Presentation of day I evaluation by the participants.
11-12	User fee mechanism and exemption policy	Facilitators' presentation on different fee policies and exemption criteria.
12-01	Lunch break	
01-03	Fee and exemption policy	Participants in 4 groups will do SWOT analysis of different charging mechanisms and exemption policy. Participants' presentation on their group work.
03-04	Setting fee and exemption policy	Participants with the help of facilitators will set appropriate fee and exemption criteria relevant to their health area.

Module IV

Day IV

Topic: Management of CDP

Objective: At the end of this module participants will be able to identify roles and responsibilities of different agents involved in CDP and can contribute for the better management of the CDP.

Contents	Activities
Review of day III	Evaluation group will present the evaluation of day III activities and discuss it with other participants.
Collection of fees, banking, accounting, auditing and reinvestment policy	Discussion following the facilitators' presentation on fee collection, banking, accounting systems, auditing and use of funds.
Lunch break	
Rules and regulations	Participants will discuss in group in order to make financial rules and regulation for their health facility.
Supervision	Facilitator will present the approaches of supervisory visits
Monitoring Of CDP	Facilitators' presentation regarding use of health post data, master health chart and review meetings for monitoring of CDP activities.
	Review of day III Collection of fees, banking, accounting, auditing and reinvestment policy Lunch break Rules and regulations Supervision Monitoring Of

Module V/VI

Topic: Drug supply

Objective: At the end of this module participants will be able to select, estimate and procure the necessary drugs for their health facility.

Topic: Action plan

Objective: At the end of this module participants will be able to prepare an action plan for the implementation of CDP in their health post.

Time	Contents	Activities
10-11	Revision of day IV	Participants will present their evaluation of day IV activities.
11-01	Selection, estimation and purchase of drugs	Facilitators' presentation on selection, estimation and purchase of drugs and followed by group work on selecting and estimation.
01-02	Lunch break	
02-04	Action Plan	Facilitator will present summary of group works during the training and participants will prepare an action plan for implementing the CDP in their health facility.
04-05	Training evaluation	Participants feedback on training process, and management.

Appendix II (b)

Training curriculum for Health Post Staff-

Day I

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Topic: Community Drug Program

Objective: At the end of this topic participants will be able to understand, discuss and

use CDP protocol appropriately.

Time	Contents	Activities
10-10.30	Introduction	Participants and facilitators will introduce each other. Following the introduction facilitator will present purpose, approaches and aims of the training program.
10.30-12	Principle, purpose, objectives and fee collection, banking and reinvestment.	Facilitators will present about principle, purpose, objectives and management. Following the presentation participants will discuss in group about possible problems and constraints for implementing the CDP and present to the class.
12-01	Lunch break	
01-02	Recording and Reporting	Facilitators will explain about the use of different types of forms for recording and reporting of CDP activities.
02-04	Recording/ reporting	Participants will be divided in to groups and asked to use different forms in their health posts. Participants will discuss about the problems they encountered during the work and present to the class.

Day II

Topic: Rational use of drugs and use of Standard Drug Treatment Schedule.

Objective: At the end of this topic participants will be able to use standard drug

treatment schedule while prescribing and dispensing the drugs at health facility.

Time	Contents	Activities
10-11	Review of day 1 st	Participants will present their evaluation regarding day 1 st activities to the class.
11-12	Rational use of drugs	Facilitators will present about rational use of Drugs its advantages and steps to be followed.
12-01	Lunch break	
01-02	Dealing with patients	Participants in groups will discuss on how better communication will help in better use of drugs during prescribing and dispensing.
02-03	Use of standard drug treatment schedule.	Facilitators will present how standard drug treatment schedule will help health workers for better prescribing. Participants will be asked to go to clinic and work according to SDTS and present their experiences to the class.
03-04	Evaluation	Participants will be asked to participate in OSPE at the end of the day where they will perform set activities in different stations and facilitators will assess the learning outcomes.

Appendix III (a)

Training Evaluation Tools

(Mood Meter: A tool for presenting participants feeling regarding training)

Please put a mark under appropriate mood.

Mood Activities		
How was your overall feeling about today's training activities?		
How was the facilitators' role in teaching learning activities?		
How was your own participation in group activities?		
How were the methods and materials used for teaching learning activities?		
Clarity on subjects and issues discussed.		

Appendix III (b)

Open ended questions for daily evaluation

Please answer the following questions and pass on to the evaluation group.

- 1. What are three most important things that you learned today and why these things are important to you?
- 2. Which were the least interesting things to you and how these could be improved?
- 3. How was the overall management of the training including lunch and sitting arrangement?
- 4. Any other comments -----

Appendix IV

Supervision checklist

Name of the health facility:

Date:

Name of the Supervisor:

Designation:

S. No	Activities		Scores				
		1	2	3			
1	Patient care						
1.1	Registration						
1.2	Consultation						
1.2.1	Dealing with patient						
1.2.2	Examination						
1.2.3	Diagnosis						
1.2.4	Prescribing						
1.3	Treatment						
1.3.1	Connecting about drug use, dose and compliance						
1.3.2	Sterilization of equipment						
2	Management						
2.1	Collection and banking of user fees						
2.2	Recording						
2.3	Drug auditing and minimum stock						
2.4	Reporting						
2.5	Health post management committee meeting						
3	Feedback						
3.1	Subject of discussion with health staffs						
3.2	Expected outcome						
4	Reporting						
4.1	Suggestion and comments for improving the Performance and list of subjects for next visit.						

Note: 1= Very good performance, 2= Satisfactory, 3= poor performance and requires additional support.

Appendix V

Master Health Chart

Name of the Health Facility:

Year:

S. No.	Activities	Target	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
1.	OPV visits								_					
2.	EPI													
2.1	BCG													
2.2	DPT III	· ·												
2.3	Polio III													<u> </u>
2.4	Measles												·	
2.5	TT													
3.	Family Planning													
3.1	Oral pills								1					
3.2	Depoprovera											†	<u> </u>	
3.3	Condoms													

S. No.	Activities	Target	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
4.	Nutrition													
4.1	Growth monitoring													
4.2	Vita. A distribution			<u> </u>										
5.	МСН			}										
5.1	No of under 5 visits													
5.2	No of ANC visits			1										
6.	Drug supply													
6.1	Times drug purchased													
7.	Income/Expenditure													
7.1	Total income													
7.2	Total expenditure			<u> </u>										
7.3	Total no exempted													
8.1	No of meetings			+										
9.	Referral													
9.1	No. of referral													
10.	Staffing													
10.1	HPI													

S. No.	Activities	Target	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec
10.2	AHW													
10.3	ANM						-	1						
10.4	Admin. Clerk													
10.5	Peon													
11.	Supervision													
11.1	From DHO													
11.2	Other													

Appendix VI

Outline of focus group discussions

Stage I: Narrative welcoming to the participants and introduction to each other. Description of reasons for conducting discussion and setting up the ground rules for the session. Ground rules: Time 60-90 minutes. Speak clearly / one at a time. No right / wrong answers. Conversation / all participate. Assurance of anonymity and confidentiality. Stage II: Discussion on the main contents. Health problems / status of the villagers. Health service utilization. Financing mechanisms. Health services satisfaction. Stage III: Wrap up summary: Summarizing and recapping the identified themes of the groups. Thank the participants and acknowledge their ideas have been valuable and will be utilized. Refreshment as the group breaks up. Stage IV: Report writing: A final report will be prepared by the help of field notes, cassette recording which includes, description of place, time, topic and participants, key findings, impressions and lesson learned.

Appendix VII

Focus group discussion guidelines

1. General information of the participants

2. Health problems 1 status

a. What are the most common diseases / illness prevalent in these area?

Probe: Do you think these regularly affect all people?

Is there any seasonality in occurrence of particular illnesses?

Who are the most vulnerable people?

b. How would you rate your health now?

Probe: Do you think you and your villagers are well enough?

How do you or villagers present when becoming ill?

c. What are the beliefs of the people in this community about their health?

Probe: What do you think causes the diseases?

Do you think people have a good idea of when they have diseases?

3. Health services utilization

a. What do you do when you become ill or sick?

Probe: What are the reasons for these actions?

Do other people do the same?

b. Where do you go when you become sick?

Probe: Why do you decide to visit particular health provider?

What do you think is the most important factors in choosing health care Providers?

c. Have you ever been to government health post?

Probe: What was the reason for your visit?

Did you receive the expected treatment?

Do other people visit health post usually?

Do you think health post provides necessary treatments to people? Irrespective to distance and socio-economic status?

d. In your opinion what are the most important reasons for not using health post services by the villagers?

Probe: Is it because of the beliefs or practices?

Is it because of the poor quality of the services or the distance?

Is it because of the unavailability of drugs, staff etc.?

4. Cost of the health services

a. In your opinion which is the most expensive form of treatment in your village?

Probe: How much do you pay for one episode of treatment?

Do you pay in cash or in kind?

What is the most appropriate form of payment?

Do all people can pay for the treatment?

What can be done for those who can not pay?

b. If the health post committee decided to increase users fee for the regular supply of drugs, will you able to pay?

Probe: What will be the response of other villagers?

How much village people pay?

Do you prefer to pay a fixed amount per episode of illness or different

Amount for different item?

Why do you prefer?

5. Health service satisfaction

a. Are you satisfied with the health facilities you use?

Probe: Why or why not?

What do other people say about this?

b. Which type of health facility provides you the most satisfaction?

Probe: What are the reasons for your satisfaction / dissatisfactions?

Do other people in your community have the same idea?

Closing: Narrative to terminate discussion, ask participants their impressions about the

conversation and thank for their co-operation.

Appendix VIII

Interview guidelines for household survey

Serial No.....

Date of the interview.....

Please provide following information about you and your family.

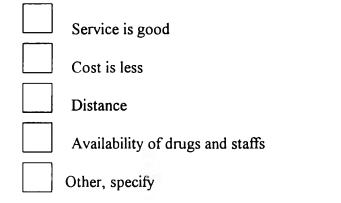
Computer codes A. General information of the respondent: 1. Age in years Male 2. Gender Female 3. Marital status: Married : Single Widow Separated Divorced 4. Educational status: literate Just literate Primary Secondary College

5. Religion:	Hindu	
	Buddhist	
	Muslim	
	Other	
		
6. Occupation:	Farmer	
	Service	
	Business	
	Other, specify	
7. No of people in the household	l: Total	
B. Health status / problems / u	tilization and satisfaction:	
1. Was any one in your family be	come ill during one month?	
Yes	No	
2. What was the disease or symp	otoms of the illness?	
Disease or symptoms:		

3. Where did you or your family member go for treatment or advice and how many times did you visited the health facilities?

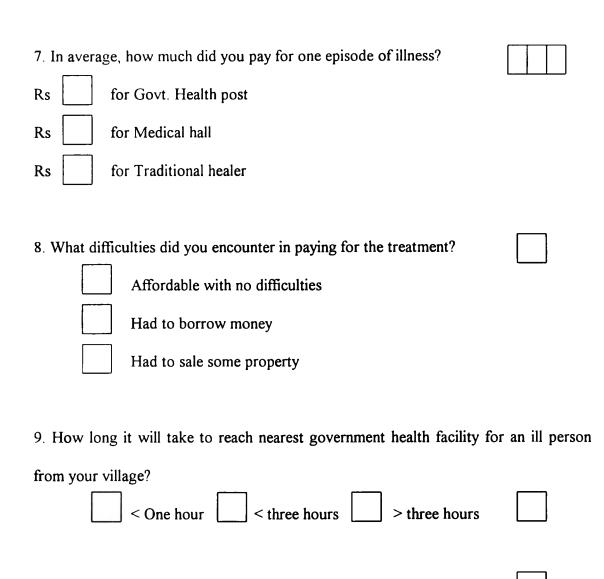


4. Why did you choose the particular health facility?



5. Did you pay for the treatment?

Y	es	No	
6. If yes, what was the	form of payment?		
In cash	In kind	In service	



10. Have you ever used health post services?

Yes	No
-----	----

11. Are you satisfied with the services of health post?

Yes		No
-----	--	----

12. What are the reasons of your dissatisfaction or satisfaction?

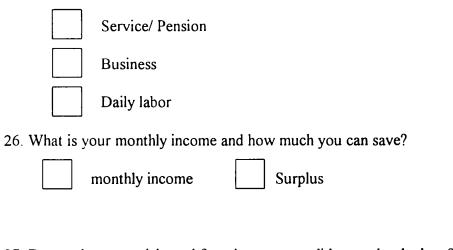
Reasons: a.

b.

13. Did you always receive drugs from the health post?	
Yes No	
14. If no, What you did about the drugs?	
Comments: a.	
b.	
15. Do you know about the services available from the health post? Yes No	
16. If yes, can you say three types of services available at health post?	
a.	
b.	
C .	
17. Did you know about the service charges of health post?	
Yes No	
18. If yes how much is the charge?	
Rs	
10. De very lanen about were booldh as at as were itter of	
19. Do you know about your health post committee?	
Yes No	

20. If yes, what is the role of this committee?	
a .	
b.	
2 1. If your health post committee decided to increase the user fee to	supply drugs and
improved the quality of services, are you willing to pay for it?	
Yes No	
22. If yes, how much you can pay for one episode of illness?	
Rs	
23. If the health committee decided to implement users fee schem	e, which type of
scheme do you prefer?	
Flat fee per episode of treatment	
Different fee per item of drugs or services	
Flat amount of money per family per year	
Other specify	
24. Do you produce sufficient food for your family and for how long?	
Sufficient for 12 months	
Only for 6-9 months	
Less than 6 months	

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25. What is your source of income other than agriculture and live stocks?

27. Do you have any debt and for what purpose did you take the loan?



Schedules for review of health post statistics

Please provide following information regarding health post services during September 1998 to July 1999 in your health post.

1. How many out patient visit were recorded each month during September 1998 to

July 1999 in your health post?

Month	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Total
No. of												
Visits				,								

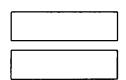
2. Please provide following information regarding use of family planning methods by

the population during September 1998 to July 1999 in your health post?

Month	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Total
Methods												
Dens.												
Pills												

3. Number of drugs per prescription

Total number of samples studied



Total number of drugs prescribed

4. Please provide following information on immunization for less than one-year children during September 1998 to July 1999 in your health post?

Months	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Total
\backslash												
Vaccines												
BCG												
DPT 3												
Polio 3												
Measles												

5. Please provide following information regarding drug supply in your health post during September 1998 to July 1999?

5. 1. When did you receive drugs from the ministry of health?

Date of drugs received

Total cost of the drugs in NRs

٦
L
L
J

5.2. Please provide the cost of drugs carried forwarded from August 1998?

NRs	
-----	--

5.3. Please provide the cost of drugs carried forwarded to 1999 from 1998 July?

NRs

Months	September	December	March	July
Drugs				
Inj. PPF				
Cotrimoxazole				
ORS pkts				
IV Fluids				· · · ·
Paracetamol				
Metronidazole				
Mebandazole				
Pipracite				
Tr.Iodine				
Iron/Folic				

6. Please provide the stocks of following drugs during September 1998 to July 1999?

7. Please provide the information on income derived from drugs in your health post

during September 1998 to July 1999?

Number of total patients	Patient exempted
Total income in NRs	
7.1 Drug cost recovery ratio	
Total income during the period	
Total expenditure during the period	

Forms for recording and reporting of CDP activities

A. Out patient ticket

Name of the health facility:

Address:

Name of the patient: Age: Sex: Address: Date:

History of the illness:	Findings from examination:
	Provisional Diagnosis:

Drugs prescribed:

S. No.	Name of the drugs	Dose and duration	Total quantity
1.			
2.			
3.			

Fee Schedule

1 st grade	2 nd grade	3 rd grade
Rs	Rs	Rs

Health worker

B. Daily record of drug distribution

Name of the health facility: Date: **OPD** numbers 2 9 11 12 13 1 3 4 5 6 7 8 10 14 Name of the drugs Injection processing penicillin Paracetamol Aspirin Metronidazole Mebendazole Pipracite Tetracycline Cotrimoxazole Iron/ folic Ampicillin Ibuprofen Vitamin B-complex Erythromycin tablet Water for injection AB cotton Tr. Iodine Gention voilet Eye/ear drop

C. Monthly Report Form

Name of the Health facility:

Reporting Month:

A. Income and Expenditure

Date	Income		Expenditure	
	Descriptions	Rs.	Descriptions	Rs.
P	6			

B. Patient Attendance

Out patient services.

Age groups	Children			Adults								
	0	4	5	- 14	То	otal	15	45	45	5+	То	tal
Sex	M	F	M	F	Μ	F	Μ	F	Μ	F	М	F
1. OPD visits												
2. EPI												
BCG												
DPT												
Polio		,										
Measles												
3. Family planning											,	
Pills												
Condoms			<u> </u>									
Depo-Provera			<u> </u>									

D. Budgeting format for CDP

Name of the Health Facility:

Year:

A. Estimated income

1. Amount carried forwarded from previous year	Rs
2. Income from bank interest	Rs
3. Income from user's fee	Rs
4. Other income	Rs
Total estimated income(l+2+3+4)	Rs
B. Estimated expenditure	
1. Purchase of drugs	Rs
	D
2. Transportation	Ks
 2. Transportation 3. Utility (fuel for sterilization, batteries etc) 	
	Rs
3. Utility (fuel for sterilization, batteries etc)	Rs

Prepared by:	Approved by:
Name:	Name:

CURRICULUM VITAE

Name	: Ram Prasad Sedhain
Date of Birth	: 30/12/1962
Nationality	: Nepali
Sex	Male
Marital Status	: Married
Language Ability	Nepali, English, Hindi
Designation	: Community Health Officer
Organization	: International Nepal Fellowship (INF)
Education Attended	: Certificate in General Medicine (1983), IOM
	Bachelor in Business Administration (1994),
	Trivhuban University
Work Experience	: Health Post In-charge (1984-1986), HMG/N, DoHS
Health Assistant (1986-	1989), Save The Children (UK), Surkhet, Nepal. Assistant
Training Officer (1989-19	990)
HMG/N, Regional Health	a Training Centre, Surkhet, Nepal.

Community Health Officer (1991-1997), INF, Pokhara, Nepal.