

State Level Training of trainers for District cum Block Nodal NGOs
East Khasi Hills, Jaintia Hills and West Garo Hills District

Community Monitoring of Health Services under NRHM
20th Dec 2011 to 21st Dec 2011



Report

Compiled By:

Voluntary Health Association of Meghalaya

The Training of Trainers for District cum Block NGOs implementing the community monitoring project under NRHM in the 3 districts of Meghalaya was held on 20th of November 2011 to 21st of November 2011 at the High winds Guest House. The training programme was organized by the NRHM Meghalaya in collaboration with VHAM.

The objective of the training is to:

- ✓ Locate community monitoring within the larger NRHM implementation frame work
- ✓ Share process of implementation at different levels, the financial flow and the organizational set up
- ✓ Finalize blocks PHCs and list of villages
- ✓ Develop a realistic time plan for implementation of the activities
- ✓ chart out final action plans with time lines
- ✓ Familiarize the participants with the monitoring tools and formats

The participants for the programme were the staffs selected by the DNGOs specifically for the Community Monitoring Project. The Participating NGOs were the following: **(Attachment 1)**

1: Grassroot from East Khasi Hills District

2: Mihmyntdu Socio Cultural Welfare Association from Jaintia Hills District

3: Socio Economic Welfare Society from West Garo Hills

The Resource Persons for the training programme were:

- Mr. Augustine , State Facilitator RRC
- Mrs. Dakaru Passah, State Programme Executive for Community Monitoring, NRHM
- Mrs. Dona Kharkongor, Assistant Programme Executive, Community Monitoring, NRHM
- Mr. Arnold Nongbri, State Programme Officer, NRHM
- Ms. Eudora Warjri, Executive Secretary VHAM
- Ms. Mayfereen Ryntathiang, Senior Programme Officer, VHAM

The Support team included the following:

- Ronald Phanwar, Facilitator
- Mr. Khlainbor Kharbangar, Documentation and rapporteur
- Mr. Edmund Shangpliang, Logistics and Finance.

At the onset the training programme was started with the inaugural address given by Mr. Ronald, who explained and shared the objectives of the programme, following which the participants made their introduction.

The training programme was scheduled for 2 days and in each day 5 sessions were conducted all of which pertaining to the objectives of the training programme.

The sessions were steered in the following order, and in each session various issues were discussed and deliberated upon and decisions were taken.

Day 1

Session 1: **Role of Different Stake Holders:**

Resource person: Mr. Augustine, NRHM

- He informed the participants about the importance of VHSC and ASHAs at the community level in relation to health issues and the role of the different committees to be set up.
- The importance of ANM's for community monitoring activities.
- He stressed on the importance of convergence amongst the community and the service providers.
- The resource person gave the important inputs to the trainees on how to build linkages and create network with the existing departments such as Social Welfare, PHE, Education etc...
- Mr. Augustine's session can be summarized as being very informative and helpful for the DNGOs to optimally utilize the peripheral Government and Non Government units for achieving the objectives of the community monitoring.



Session 2 (a): Introduction to various activities within community monitoring process

Resource Person: Ms. Eudora Warjri, VHAM

- Ms. Eudora Warjri in her presentation explained and presented the activities to the participants that would have to be undertaken for Community Monitoring.
- She trained the participants on planning the activities right from the creation of the various committees then training and orientation of the committees' members and involving them in community monitoring processes.
- In the presentation Ms. Warjri informed the trainees that they would have to do data collection and collation of reports after all the committee members have been oriented on the community monitoring processes. The DNGOs have to make sure that the community is first aware of the Service guarantees under NRHM and only then would the Data collection be effective.
- One of the activities that the DNGO would have to undertake after compilation of the reports is to conduct Public Hearings or Jan Samvad.

- The trainees were informed that they would have to conduct FGDs, GDs, personal interviews and direction observations which are the tools that have been developed to carry out community monitoring.
- The trainees were also taught on how to make work plans with time frames.
- Based on the session given by Ms. Warjri, the participants were asked to do group work wherein each DNGO would have to come up with the action plan for the next 4 months w.e.f Dec 2011 to Mar 2012.
- Ms. Warjri's session can be summarized as, being helpful to the participants to know the various activities systematically that they would have to undertake and also the session has incorporated vital pointers that would the DNGOs to strategically plan their activities within the predetermined time frame.



Session 2 (c): Principles of Focus Group Discussions and Group Discussions

Resource Person: Ms. Mayfereen Ryntathiang

- In this session Ms. Mayfereen, trained the participants on the basics of conducting FGDs and GDs.
- In her presentation she highlighted on the following points
 - ✓ FGD being A semi-structured discussion among 6-12 individuals that share certain characteristics
 - ✓ Qualitative research used to understand opinions, behaviors, motivations, cultural values, norms, beliefs, and collective experiences.
 - ✓ FGDs are used to identify a problem, plan programs, get feedback
- She also informed when not to use a focus group and why
- She defined the roles of the people who would be involved in an FGD vis-a vis
 - *Moderator* – Guides the discussion and encourages cross-participant discussion
 - *Note taker* – Takes notes during the focus group of what is said, and of the group dynamics, including moods and body language. The note taker is also in charge of the audio recording equipment
 - *Participants* – People participating in the discussion should be from one specific group: a small community, one gender, one age-group, or they share a common behavior
- Ms. Ryntathiang also trained the participants on the following
 - ✚ Developing Questions
 - ✚ Schedule
 - ✚ Summarization of key ideas discussed
 - ✚ Asking for final comments
 - ✚ Reminding participants about confidentiality
 - ✚ Providing contact information
 - ✚ Appreciation

- Ms. Mayfereen's Session stressed on the participants to follow the checklist which can be summarized as
 - ❖ Participants invited one to two weeks ahead of FGD
 - ❖ Arrangements made for comfortable and culturally appropriate location. The time and location of the meeting should be convenient for the participants.
 - ❖ FGD guide developed
 - ❖ Audio recording equipment made available, with replacement batteries
 - ❖ Moderator and Note taker roles assigned



Session 3: **Monitoring Tools: Tabulation and Calculation**

Resource Person: Ronald D Phanwar

- Following the session on activities by Ms. Warjri, the monitoring formats for conducting community monitoring was presented and discussed with the participants.
- The participants were introduced to the formats in chronological order as they would be used in the field.

- Each format was discussed in detail and clarifications and doubts were sorted out.
- The formats included all the forms which would capture the information that are required for carrying out the activities to determine the indicators for community monitoring.
- The indicators being:
 - ❖ Maternal Health Guarantees
 - ❖ Janani Suraksha Yojna
 - ❖ Child Health
 - ❖ Disease Surveillance
 - ❖ Curative Services
 - ❖ United funds
 - ❖ Quality of Care
 - ❖ Community perceptions of ASHA
 - ❖ ASHA functioning
 - ❖ Equity Index
 - ❖ Adverse Outcome or experience reports
- Mr. Ronald presented the following formats to the participants:
 - Village profile format
 - FGD and GD formats
 - Personal Interview formats
 - Facility Check list formats
 - Cumulative report card formats
- The above formats have been attached herewith this report, wherein every information under each format has been explained and simplified for the benefit of the DNGOs.
- Mr. Ronald informed that the formats would be translated in Khasi and Garo languages and all the formats would be printed in the form of a booklet.
- The participants were also informed about the general instructions that would have to be in compliance with while filling up of the formats.



The first day of the training programme concluded with discussions, wherein the participants were asked to work on the action plan after thorough discussions with their chief functionaries as the action plan submitted by them would be treated as final and the same would be submitted to the NRHM for the release of funds.

Day 2

Session 4: **Role of committees under Community Monitoring**

Resource Person: Mrs. Dona Kharkongor, NRHM

- Mrs. Dona started her session by asking the participating DNGOs to do a group work on definition of the :
 1. Members and role of the District Planning and Monitoring committee cum District Mentoring Team
 2. Member and role of PHC Monitoring and Planning Committee
 3. Members and role of Village Health and Sanitation Committee Cum Village Planning and Monitoring Committee

- After the groups made the presentation the relevant points were discussed, finalized and incorporated in the final guidelines for the formation of the committees. The session was facilitated by Mr. Augustine. (**Attachment 2**)

Session 5: **Service Guarantees, IPHS standards, Accounting Procedures**

Resource Person: Mr. A. Nongbri, SPM, NRHM

- Mr. Nongbri before beginning his session briefed the participants on the importance of community monitoring and the vital role that NGOs would play to ensure the success of the project.
- In his lecture Mr. Nongbri cited various examples and statistics from across the country highlighting the status of the health sector in India with special reference to Meghalaya.
- In his session on NRHM Service guarantees, Mr. Nongbri laid emphasis on the following points:
 - The Venture, Vision, Outcomes, Framework under NRHM
 - Service Guarantees under NRHM at Subcentres Level which include the following
 - **Maternal Health**
 - *Antenatal care*
 - *Intranatal care*
 - *Postnatal care*
 - Child Health
 - Family Planning and contraception
 - Adolescent health care
 - Assistance to school health services
 - Control of local endemic diseases
 - Disease surveillance
 - Curative Services
 - Training, Monitoring and Supervision
 - Record of Vital events
 - Service Guarantees under NRHM at PHC Level which include the following

- Maternal Health
 - Family Planning
 - Treatment of RTI/ STIs
 - Basic laboratory services
 - Referral services
 - Service Guarantees under NRHM at CHC Level which include the following
 - Care of routine and emergency cases in surgery and medicine
 - 24-hour delivery services including normal and assisted deliveries.
 - Essential and Emergency Obstetric Care including surgical interventions
 - Full range of family planning services.
 - Safe Abortion Services.
 - Newborn Care and Routine and Emergency Care of sick children.
- Mr. Nongbri also explained to the participants about the IPHS and the Citizen's Charter, their relevance and importance.
- Mr. Nongbri also trained the participants about the accounting procedures including the budget and fund flow.
- Mr. Nongbri informed and highlighted the following points:
- ✓ The Fund for the State Nodal Agency would be released directly from NRHM to the State Nodal Agency (VHAM)
 - ✓ The funds for the DNGOs will be released from the NRHM to the DMHO and the respective DMHO will release the funds to the respective DNGO.
 - ✓ The DNGOs will have to submit monthly Statement of Expenditure to the respective DMHO with a copy to the DHS
 - ✓ Concurrent Auditors will conduct quarterly auditing of accounts for State as well as the District NGOs



Session 6: Selection of Block PHC & Villages

Facilitator: Mr. Augustine, NRHM

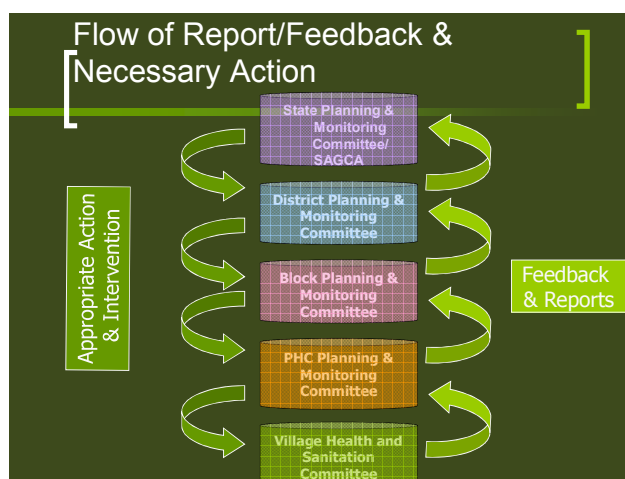
- In this session the DNGOs made a presentation of the list of villages chosen by the DMHO in consultation with the representatives from the respective DMHO.
- It was learned that the allocated number of villages per PHC was 7 at the onset of the project, however after the discussions from the state workshop that was held in Nov 2011, it was decided that the number would be reduced to 5 per PHC.
- Apart from Socio Economic Welfare Society from West Garo Hills District, who has not yet received the list of villages from the DMHO, the DNGOs from East Khasi Hills and Jaintia Hills presented their final list of 5 villages per PHC.

- The NRHM team present in the training decided to finalize the list given by the DNGOs and the same would be submitted to the respective DMHO by the State NRHM. **(Attachment 3)**
- The DNGO from West Garo Hills decided to submit the list latest by 29th of Dec 2011.

Session 7: **Administrative Mechanisms and Documentation and reporting**

Resource Person: Mrs. Dakaru Passah, NRHM

- In this session the participants were informed about the Organogram under the community monitoring process that the DNGOs would have to adhere to.
- The following were the pointers that Mrs. Dakaru clarified and explained to the participants:
 - The flowchart for reporting, feedback and necessary action
 - The DNGOs will have to ensure that the processes will have to involve the Village Health and Sanitation Committee Cum Village Planning and Monitoring Committee, PHC Planning & Monitoring Committee, District Planning & Monitoring Committee, State Planning & Monitoring Committee/SAGCA



- In her Session Mrs. Dakaru also trained the participants on job responsibilities of the DNGOs and also of the individual staffs.
- With regards to funds, after discussions and suggestions from the participants and from the Nodal NGO who stated that the activities cannot be carried out without the timely

release of funds, Mrs. Dakaru, agreed to request the finance department of NRHM to release the funds on a quarterly basis.

- Mrs. Dakaru informed the participants that monthly progress reports will have to be compiled and submitted to the State Nodal NGO on or before the 5th of every month and the State Nodal NGO will have to compile the reports and submit them to NRHM on or before the 10th of every month.
- Concluding her session she asked the respective DNGOs to make the final list of staffs who would be involved exclusively for the community monitoring project which has to be submitted to the State Agency by the 29th of Dec 2011.



Session 8: Action Plan

- The last technical session of the programme was the finalization of the action plans.
- Each DNGO presented their respective action plan for the next 4 months.

- The plans were discussed and deliberated upon by the resource persons, wherein certain activities were removed and some added on.
 - After the discussions and taking unanimous decision the training team finalized on a standardized action plan with time frame for all the 3 DNGOs. **(Attachment 4)**
 - This plan as was decided will be treated as final and the same will be submitted to the NRHM department for the release of funds.
-
- ❖ The participants were given one final group work on practicing the FGDs and GDs and interviews using the formats under the monitoring tools. The Participants had doubts on calculations of results for deriving the results for indicators, and these doubts were duly clarified by the resource persons.



-
- ❖ The training programme concluded with the valedictory speech given by Mr. Augustine, NRHM. In his speech Mr. Augustine acknowledged and thanked the participants for taking part in the training programme and he hoped that the participating team members from the respective DNGOs would remain constant till the end of the project. He also

thanked the NRHM and VHAM team for providing the resources for the sessions in the training programme. He also acknowledged the efforts put in by VHAM the State Nodal NGO for successfully organizing the training programme. As closing remarks he wished all the DNGOs including the State NGO to work hard and to try and accomplish the goals set for the next 4 months. He also assured that NRHM team will be available at any time for any help and support.

The major highlights and decisions agreed to during the training programme can be summarized as follows:

- The DNGOs will network with the existing Government and Non Government units present in their respective project areas.
 - The DNGOs will collect Data for the period November 2011 to Jan 2012
 - The DNGOs will form and orient the committees as per the guidelines that have been revised during the training programme (guideline attached)
 - The numbers of villages for data collection have been reduced to 5 villages per PHC for all the DNGOs.
 - The DNGOs will give monthly progress report to the DMHO and copy to the State Nodal Agency on or before the 5th of every month
 - The state NGO will compile all the DNGOs report and submit the same to the NRHM on or before the 10th of every month
 - The funds for the DNGOs will be disbursed from the State NRHM to the respective DMHOs and from the DMHOs to the respective DNGOs.
 - The funds for the DNGOs will be released on a quarterly basis.
 - The DNGOs will adhere to the planned and finalized action plan developed during the training programme. (Action plan attached)
 - The NRHM will translate the monitoring tools in Khasi and Garo Language.
-

List of Attachments:

1: Registration Sheet

2: Guidelines for Committees

3: List of Villages

4: Action Plan