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Consulting & Management

Better access of the Roma community to the health care in the SR by means of trained health field workers

LOT 1 - Deployment of a System of the health
field workers for selected microregions

Monthly report- April 2005

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List of abbreviations:

PC	Project Coordinator
FHAS	Fieldwork health assistants system
TC	Training coordinator
FHA	Fieldwork health assistants
TL	Team Leader
SR	Slovak Republic
EC	European Commission
FSW	Fieldwork social worker
MR	Microregion
OG	Office of Government
VH	Village Council
CC	Communiy center
CO	County Council
CFCU	Central financial and contractual unit

A. SUMMARY OF THE IMPLEMENTED ACTIVITIES

A.I. OVERVIEW OF THE IMPLEMENTED ACTIVITIES

Coordination meeting of the project team (3rd – 4th April, 2006, EuroPlus Consulting & Management s.r.o., Bratislava) – discussing key managing moments of the project implementation, planning of future activities and finalisation of the monthly report.

Coordination meeting with the regional Social Development Fund (SDF) consultants (6th April, 2006, Košice Self-Governing Region, Košice) – presentation of the SHFA, coordination of the activities, future cooperation at the level of Prešov and Košice region.

Methodical Training of HFA, Prešov (12th April, 2006, Guest House Adam, Prešov) – presentation, methodological direction and comments of the study prepared by the Ministry of Health aimed at searching the efficiency of the intervention of implemented health education.

Coordination meeting of LSIP, Michalovce (18th April, 2006, office of the local SDF consultant, Michalovce) – discussing basic issues of the cooperation at the local level.

Regional steering committee of the local inclusion partnerships, Prešov Region (19th April, 2006, Slovak Environmental Agency, Prešov) – presentation of the SHFA project to the members of the steering committee.

Commission of the Regional Development and Tourism, Prešov Self-Governing Region (20th April, 2006, Prešov Self-Governing Region, Prešov) – presentation of the SHFA project to the members of the Prešov Self-Governing Region Board and to the members of the Commission of the Regional Development and Tourism.

Meeting of EuroPlus Consulting & Management s.r.o. and Ministry of Health of the Slovak Republic representatives, Bratislava (27th April, 2006, Bratislava, Ministry of Health of the Slovak Republic SR) – issues related to continuation and future activities of the SHFA project.

Administrative activities – necessary to the implement of the project.

Evaluation of the survey for doctors and representatives of local authorities – the analysis of the data obtained during the meetings with doctors and representatives of the local authorities with the purpose to obtain information about understanding of the project as such, contribution of HFA and suggestions to improve the efficiency of their work. The wording of the questionnaire is provided as annex to the report. The processed analysis of the completed questionnaires is summarised in Annex - Evaluation of the Survey. Completed questionnaires are enclosed as a printed Annex of the monthly report.

Evaluation of the mapping survey “A” Health of the marginalised groups of inhabitants – analysis of data obtained during mapping survey implemented by HFA in microregions. The wording of the questionnaire is provided in Annex. Analysis of the completed questionnaires within individual microregions is

enclosed in Annex – Processed questionnaire A. Completed questionnaires are attached as hard copies to the report.

Equipment of HFW

The current state situation within the project regarding the administration of the project related to approval of the reports and time sheets resulted in a financial situation of the project when it became not possible to launch the purchase of the health tools for the HFW despite the fact that the MH SR approved the submitted list of equipment.

Having the reports and time sheets been signed the project will launch the process of procurement according to the regulations stated in the conditions of the contract.

Information campaign

Taking into account the above state reasons it was not possible to realise planned information campaign of the project fully as planned and presented during the Steering Committee in Prešov.

In both of the above cases we expect the launch of activities after the key problem has been solved – efficiency of financial flow within the project.

A.II. MONITORING OF THE WORK OF HEALTH FIELD ASSISTANTS (HFA)

Total number of clients in April: ca 4, 500 persons

■ Number of persons addressed with the purpose of health education:	1, 766
■ Number of persons participating in the vaccination upon the invitation of the HFA:	783
■ Number of persons participating in the medical check ups at the doctor's office upon the invitation of the HFA:	125
■ Number of persons participating in preventive medical check ups upon the invitation of the HFA:	489
■ First aid provided by HFA	50
■ Ambulance called by HFW	17

Others:

■ Number of persons participating in children's medical check ups upon the invitation of the HFA:	156
■ Number of persons participating in blood taking upon the invitation of the HFA:	37
■ Number of persons participating in lectures and courses carried out by HFA:	207
■ Number of arranged health insurance cards:	126
■ Number of visits in families with children of up to 18 years old:	181
■ Number of minor injuries treated:	112

- Number of blood pressure measurements upon the request of clients: 414
- Number of children having a bath regularly in nursery schools: 126
- Number of persons informed about the necessity to pay for the waste disposal: 55

Cooperation with pharmacists:

Specialisation of doctors, who are preferably asked for cooperation:

- Paediatrician
- General practitioner for adults
- Dentist
- Gynaecologist
- Dermatologist

The number of cooperating doctors in the given microregions in April: 97

Cooperation with schools:

Number of schools cooperating in the given microregions in April: 69

Forms of cooperation:

- Regular visits to schools, communication with the headmaster and teachers
- monitoring of children's health
- monitoring of pupils' hygiene
- connection of school to Roma communities regarding the above mentioned issues
- intended diffusion of education in families by identified teachers focused on hygiene
- accompanying sick pupils to the doctor's office, or home to their parents if appropriate
- checking pupils' hair hygiene
- monitoring the hygiene of pupils' clothing

Cooperation with COMMUNITY SOCIAL WORKER (CSW):

Number of CSW cooperating in the given microregions in March: 52

Forms of cooperation:

- Identification of potential clients
- Solution of common issues in the field of health and hygiene in communities
- Field work in the Roma settlements, common visit of certain families
- Cooperation in the field of educational activities
- Common implementation of events.

Conclusion:

From the point of view of number of clients the maximum number of people addressed by the HFW was to increase awareness. This type of activity is in most cases targeted (such as visits paid to families, which are identified by the representatives of schools and problematic in the area of hygiene). The awareness is done directly in the settlements, households of identified families or in front of the houses. Parts of the awareness, such as lectures realised by HFW are carried out outside of the settlements, mostly in schools.

The second type of activities targeted to clients are persons approached by HFW following the instructions received from doctors in form of a list. Be it doctor or a nurse elaborate for the HFW a list of persons who should come to see the doctor, mostly to perform vaccination, prevention check up and control of paediatrician. HFW search for these people and announce them what the doctor needs from them or when they should visit the doctor. Sometimes these visits to the settlements must be repeated as the clients do not come to the doctor on the first call (mainly for the financial reasons).

The third key part of the work of the HFW is monitoring. Within the monitoring during the methodical meeting held on 12 April 2006 in Prešov the HFW took part in commenting of the study "Assessment of the efficiency of health education carried out by the HFW" which was elaborated by the MH SR. During the month of May the HFW should be trained how to correctly fill in these inquiries, they should subsequently receive their final versions and each HFW should complete 10 inquiries in the area of their work.

Within the monitoring carried out in the month of April the following two questionnaires were evaluated: mapping inquiry A "Health care of marginalised groups of population" and a survey for the doctors and representatives of local authorities. Processing of the results is provided within this report.

The third important section of the work of the HFA is monitoring. On 12 April 2006 the HFA participated at the methodology meeting that took place in Prešov and focused on commenting the final version of the study "Evaluation of efficiency of health education carried out by the HFA" which was elaborated by the Ministry of Health. During the month of May 2006 the HFA should be trained how to fill in these inquiries correctly. Consequently they will carry out monitoring; each HFA interviewing ten respondents in their microregions.

During the month of April the following inquiries have been processed: mapping inquiry A – Health status of marginalised groups; and inquiry for doctors and representatives of the local authorities. The elaborated analysis is provided within the April monthly report.

B. CHANGES AND RISKS DURING THE PROJECT IMPLEMENTATION

Continuous risks – defined in the previous monthly reports, i.e.

- possible physical attack on the HFA especially at the time of social benefit payment, increased aggressiveness of the intoxicated project clients
- dirt, heaps of dust in settlements, demanding working conditions in term of hygiene and infection
- dogs in settlements, danger of attacking the field health assistant by freely moving strayed dogs
- high percentage of drug addicts in some settlements, potential threat for the field health assistant
- in term of change of climatic conditions (beginning of the warmer period) increased occurrence of fleas, mange and louses in settlements and at schools – worsened working conditions of the HFA's

Proposals of solutions: the addressed problems cannot be primarily solved by the project implementation; the defined problem areas can be solved within the context of the whole issue.

C. ANALYSIS AND PROCESSING OF THE SUBMITTED QUESTIONNAIRES

C.I. ANALYSIS AND PROCESSING OF SURVEY QUESTIONNAIRES OF THE RELEVANT PARTNERS:

Within the project implementation we have prepared the analysis of the data obtained on the basis of the evaluation of the HFA activities and project activities by means of evaluation questionnaires distributed during the training of local authorities (for example mayors, representatives of schools and parish, social field workers, community social workers, local leaders, etc) and doctors (representatives of health facilities presents in participating microregions) in March 2006 (the questionnaires are part of the monthly report of March 2006). The questionnaire forms are annexed to the report.

Processing of the questionnaire is included in a separate annex. The evaluation of the questionnaire in an electronic form is also attached to the March monthly report.

C.II. ANALYSIS AND PROCESSING OF QUESTIONNAIRE "A " - "HEALTH CONDITIONS OF ROMA"

In the process of the project implementation pursuant to the informative mapping surveys the project team conducted several input and evaluation questionnaires. Within this monthly report we are submitting "A" questionnaire (titled as in the Inception report) aimed at mapping the situation in the microregions in terms of Health conditions of the marginalised population.

The survey identifies the opinions from municipalities in terms of the target group – subjective nature. The questionnaire is annexed to the report.

The evaluation of the questionnaire is included in a separate part which is annexed. The evaluation of the questionnaire in an electronic form is also annexed.

Range of the mapping survey:	400 questionnaires/respondents
Content of the mapping survey:	identification data
	demographic data
	geographical data
	closed questions
	open questions
	other
Target group:	inhabitants of excluded settlements

D. ANNEXES

The full version of all the annexes is provided in the Slovak version of the monthly report. The annexes are:

- Detailed description of field activities
- Coordination meeting of the project team in Bratislava
- Coordination and cooperation meeting of the Social Development fund (Košice)
- Methodical training HFA, Prešov
- Coordination meeting of the Local social inclusion partnerships (LSIP), Michalovce
- Regional steering committee of the local inclusion partnerships, Rrešov region
- Commission of the regional development and tourism of the Prešov self-governing region, Prešov
- Meeting of EuroPlus s.r.o. and the representatives of the Ministry of Health of the Slovak Republic, Bratislava
- Questionnaire “A“ – The Health state of Roma
- Evaluation of the questionnaire “A“
- Questionnaire for relevant partners
- Evaluation of questionnaire for relevant partners