



EuroPlus 
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- May 2005

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Original

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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
PSGR	Presov Self-Governing Region

A. SUMMARY OF THE IMPLEMENTED ACTIVITIES

A.I. OVERVIEW OF THE IMPLEMENTED ACTIVITIES

Project Team Coordination Meeting (2.-3.5.2006, EuroPlus Consulting & Management s.r.o., Bratislava) – discussion about the key management points of the project implementation; finalisation of the monthly report for the month of April. See Annex.

FHAS and MH SR Methodological Meeting, Prešov (17.5.2006, Hotel Senátor, Prešov) – presentation of the final version of the survey prepared by the MH SR, methodological directions, and distribution of questionnaires to HFA. See Annex.

FHAS Program Presentation, Huncovce (19.5.2006, Huncovce settlement) – presentation of the FHAS project to the representatives of media. See Annex.

FHAS Program Presentation to the Ambassador of The Kingdom of the Netherlands (23.5.2006, Rudňany) - FHAS project presented to the representatives of the Dutch embassy. The presentation took place in the Roma kindergarten in Rudňany. The meeting was initiated by the mayor, Mr. Miroslav Blišťan, as part of the presentation of all activities undertaken within the municipality. See Annex.

FHAS Program Presentation to the Representatives of the Region (25.5.2006, Chmiňanské Jakubovany) – presentation of the FHAS project to the representatives of microregions (Kojatice, Chmiňany, Chminianske Jakubovany, Svinia) during the “Chminiansky slávik” contest. See Annex.

Meeting with the Chairman of the Regional Chamber of Doctors – PSGR, Prešov (24.5.2006, Prešov) – presentation of the activities implemented within the project to the chairman of the Regional Chamber of Doctors; definition of mutual cooperation. See Annex.

Presentation of the FHAS Program the Representatives of Municipal Police Departments, Prešov Region (26.5.2006, Prešov Municipal Police Station, Prešov) - presentation of the FHAS project, implemented activities, and achieved results to the representatives of the municipal police departments from the Prešov Region. See Annex.

Monthly Report Final Modifications and Translations – finalisation and translation of the relevant materials of the project documentation. See Annex.

Administrative Activities – necessary for the project implementation. See Annex.

Manual for health education – during the month of May the commented manuals by the recipients of the project were sent to the implementation team. The comments were being incorporated in the manuals. After all the comments were included, the recipient of the project will be asked to approve the final version. Due to significant time delays of activities in the project, we expect to produce the manual for health education as well as the manual for HFW during the month of July.

The expert team was informed that the manuals for health education had not been commented by the State Pedagogical Institute yet. Despite this fact, the representatives of the contractor were verbally informed by the MoH SR about their agreement to use manuals before they have been commented. This is why EuroPlus will ensure printing of manuals in a limited number of copies (but sufficient for all HFW) and the copies will bear the following information: The manuals are being commented by the State Pedagogical Institute.

A.II. TZA WORK MONITORING

Total Number of Clients in May: 8971

- Number of people approached for the purposes of health education: 2865
- Number of people invited for vaccination: 1564
- Number of people invited for regular check-up: 160
- Number of people invited for preventive medical examination: 775
- First aid provided by TZA: 28
- Number of times TZA had to call an ambulance: 18
- Other:
- Number of people invited for pregnancy counselling: 274
- Number of contacted girls, pregnant women and young mothers: 366
- Number of people participating in the lectures performed by TZA: 414
- Treated small wounds: 189
- Urine taking: 9
- Dental check-up: 118
- Measured blood pressure: 479
- Hygiene check-up at schools: 338
- Delousing treatment at schools: 366
- Health insurance, ID cards: 191
- Blood taking: 117
- Families with children under 18: 337
- Children bathing: 89
- Other children hygiene: 68

Cooperation with doctors:

Specialisation of doctors, who are primarily contacted for cooperation:

- paediatrician
- general practitioner
- dentist
- gynaecologist

Total number of cooperating doctors in given MRs in May: 114

Cooperation with schools:

Total number of cooperating schools in given MRs in May: 73

Forms of cooperation:

- Regular visits of schools; communication with the principal and teachers
- Monitoring of the health status of children
- Monitoring of the hygiene of children
- Bridging school and the Roma community by solving the above stated problems
- Target-oriented education in particular about the hygiene in families identified by the teachers
- Escorting children to the doctor/parents

Cooperation with KSP:

Total number of cooperating KSP in given MR in May: 66

Forms of cooperation:

- Identification of potential clients
- Solving common problems in health and hygiene fields in villages
- Field work in Roma settlements
- Cooperation by health education
- Common organization of events

Conclusion:

Three main areas, in which TZA are active are the following:

1. communication with the doctor, work in accordance with his instructions
2. health education
3. monitoring

In each MR a functioning system of **communication with doctors** has been established. The doctors provide FHA with lists of people, which should come for vaccination, blood samples taking, regular check-up, preventive medical examination, baby clinics etc. FHA visit these people directly in the settlement and tell them that they should see the doctor. Since mostly villages with high Roma population were included in the project, this work is difficult. Permanent residence (address) is not very helpful in many cases, since the house numbers are very chaotic (or do not exist at all). There are a lot of people in the settlements, which have identical first and last names. That is why doctors/nurses add dates of birth, name of the mother or nicknames to the lists, in order to make the identification of the person for FHA easier.

In some microregions, the number of people, who visit the doctor after the first invitation, is relatively small. Therefore, many times it is necessary to visit these people several times, before they actually go to the doctor. The most frequent response, why the people do not go see the doctor after the first notice is that they do not have enough money. FHA do not have any tools to force/motivate those people, who are not willing to visit the doctor.

FHA deliver **health education** directly in the settlements. They talk to people about personal hygiene, planned parenthood, alcoholism, sniffing; they focus on topics, which cause the most problems in a given area. In some microregions (e.g. MR 10, MR 11) FHA regularly perform group educational activities.

Cooperation with schools is linked to particular hygienic check-ups, target-oriented health education in families with low level of hygiene (based on the instructions from the principal or teachers), etc. Systematic health education in schools will be realised after the distribution of manual and equipment to TZA.

Within **monitoring** in May, during the methodological meeting, which was held on May 17, 2006 in Prešov, FHA made themselves familiar with the final version of survey “Efficiency Evaluation of Health Education Performed by TZA”. The survey was prepared by the MH SR; Mr. Peter Letanovský presented it to the FHA. Each FHA was given 10 copies of the questionnaire, which is to be filled in by interviewing people living in the locality of his responsibility. Preliminary deadline for the submission of questionnaires is June 9, 2006.

B.CHANGES AND RISKS DURING THE PROJECT IMPLEMENTATION

B.I. CHANGES

During the methodological training of the FHAS and the representatives of the MH SR in Prešov (17.5.2006), MUDr. Peter Tatár proposed the below described activities to be carried out by the project coordinators of LOT 01. Since these activities were not formerly included as part of the activities of the project coordinators as defined in the Terms of Reference a written approval and verification to perform such activities is necessary to be issued by the project recipient – MH SR. The approval should highlight a detailed specification of requested activities. The proposed activities are the following:

- Analysis of the so far cooperation with the doctors
- Survey of the willingness of doctors to carry out preventive check ups in the settlement at least once a month (vaccination, depistáž, screening etc.)
- Which day in the week is most suitable for the doctors to carry out such activities
- Allocation and management of ambulances for visits to districts of Poprad, Prešov, Banská Bystrica, Košice

B.II. RISKS

Lower participation of children and youth – Since the climatic conditions in settlements have improved (warm weather), children and youth prefer movement outside settlements (wandering around, playing in nature). School and KC attendance is worsening, which means that health education and other project activities related to schools are more challenging.

Proposals of solutions: the addressed problems cannot be primarily solved by the project implementation, secondarily, we propose to increase the motivational elements for the target group – involvement via specific activities (e.g. games, projection, etc.)

Continuous risks:

Continuous risks as highlighted in the previous reports.

- possible physical attack on the HFA especially at the time of social benefit payment, increased aggressiveness of the intoxicated project clients,
- dirt, heaps of garbage in settlements, demanding working conditions in term of hygiene and infection,
- dogs in settlements, danger of attacking the field health assistant by freely moving stray dogs,
- high percentage of sniffers in some settlements, potential threat for the field health assistant

- 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.

Equipment for HFW and information campaign of the project

Within the activities related to procurement to health equipment as well information campaign of the project the situation described in the April monthly report has not changed. For reasons of delays in the whole administration of the project leading to financial shortages of project activities it was not possible to procure the equipment for the health field workers according to the list verified by the MH SR.

Proposals for solutions

During the month of June we expect to reach a final agreement with the MH SR that will enable us to invoice for services to CFCU. Having received the funds from the CFCU the contractor will launch procurement of the health equipment. According to the statement received from the representatives of the CFCU it is not required that EuroPlus carries out procurement by means of public procurement since the purchase will be done within funds that have already been procured. Based on this, EuroPlus will proceed with at least three proposals received based on the terms of reference. The results of the selection will be reported to the representatives of the MH SR and CFCU from whom their written approval with the selection of the winning company will be sought in accordance to point 5 Incidentals expenditures in the General contract conditions.

C.ANNEXES

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

- Detailed description of the activities carried out microregions for the month of May
- Coordination meeting of the project team in Bratislava
- Methodical training for FHAS with the representatives of the MH SR
- Presentation of the project of FHAS to the representatives of the local media, Huncovce.
- Presentation of the project of FHAS to the representatives of the Embassy of the Kingdom of the Netherlands in SR, Rudnany,
- Presentation of the project of FHAS to the regional authorities, Chminianske Jakubovany
- Meeting with the director of the Regional Chamber of Doctors PSGR, Prešov
- Presentation of the project of FHAS to the representatives of the town and district police, Prešov region
- List of printed annexes