

Minutes of the meeting held with the PCM members (HSCC) on 4th June 2007 involved in proposal development for GAVI HSS 2007 grant (third meeting)

Chairman

Hon'ble Secretary, Ministry of Health

Members present

1. Dr. Ei Kubota, WR, WHO-Bhutan
2. Dr. Ugen Dophu, Director, Department of Public Health
3. Dr. Abdul Waheed, Project Officer, H& Nutrition, UNICEF
4. Mr. Rinchen Namgyal, District Health Officer, Chukha Dzongkhag
5. Mr. Tek Bdr. Chhetri, P.O, Liaison Office of Denmark
6. Mr. B.B. Mishra, P.O, JICA
7. Mr. Tashi Galay, Project Officer, Dratshang Lhentshog
8. Mr. Naichu, Head, AFD, BCCI
9. Mrs. Neyzang, Lecturer, RIHS
10. Mr. Sonam Rinchen, P.O., Reproductive Health
11. Mrs. Karma Tshering, P.O, EPI
12. Ms. Sangay Wangmo, Planning Officer, PPD
13. Ms. Kinzang Wangmo, Asstt. Planning Officer, PPD

After a brief welcome note by the chairman, PPD presented on the GAVI HSS mandates and also the recommendations and decisions taken during the past two meetings (1st & 2nd meeting) which was held with the planning group members who are involved in the proposal development.

It was then followed by presentation by the Program Officers of Reproductive Health Programme and EPI Programme listing out their achievements and challenges. The main idea for inclusion of presentation by the two programmes in the meeting was to identify the health system challenges and constraints that affect immunization coverage and child survival.

The meeting discussed and decided on the following:

- Royal Institute of Health Sciences (RIHS) and Village Health Worker (VHW) programme are the two main to be incorporated in the GAVI HSS round 2007 grant. The proposal should include the activities to strengthen RIHS and VHWs that are playing an important role in achieving/ increasing immunization coverage thereby improving child survival.
- In order to strengthen the VHW programme, the activities to be included in the proposal can be: provide refresher trainings to the village health workers (VHWs) to update their knowledge organize study tours and fund advocacy campaigns. This will help in reaching the un-reached even in some parts of urban areas especially in view

of promoting institutional delivery thereby improving the child health and reducing infant mortality rate. This will also lead to increasing their effectiveness and improving their performance. It was discussed that VHWs will be able to play great role in motivating the community on attending institutional delivery which can further have greater impact in improving child health and also increasing immunization coverage.

- One of the challenges of the Reproductive Health programme is to improve the quality of midwifery services. The presentation by the programme highlighted on the following components in order to strengthen midwifery services:
 - Training of midwifery lecturer
 - Masters degree
 - TOT for clinical updates
 - Teaching aids
 - Modules
 - CD Rom/computers
 - International journals
 - Midwifery and RH Journals
 - Research
 - Capacity building in midwifery research
 - Operational research

The forum then decided that the working group can select the priority activities from the above to be incorporated in the proposal. However, the forum also agreed that the following activities can be considered important:

-TOT for clinical updates

-Acquiring of international midwifery and reproductive health journals,

- Procurement of teaching aids like models and revision of RIHS curriculum (pre-service).

- Updating the pre-service curriculum of RIHS would also mean requirement to train the lecturers so that they are able to teach the updated curriculum.

- Emphasis given on the in-service training of the primary health care workers is quite low and the activities to be included in the proposal should give equal importance to both pre-service and in-service training component of primary health care workers especially focusing on improving child survival. Frequent updates on the knowledge of the health workers should be conducted as this will also ensure improvement in quality of services delivered by the health workers who are working at the field.

Lastly, the chairman thanked all the members for being able to attend the meeting and also for their intensive participation in the meeting.