

NEWSLETTER

**Monitoring, Evaluation and Research (ME&R) Unit of the
National Family Planning Board**



MEET THE LEARNED



Technical Team

Left: Marvin Joseph (Biostatistician), Tazhmoye Crawford (Director), Damion Grant (M&E Officer), Andre Black (Research Officer).



Administrative Team

Left: Claudette Grant-Mcleish (Admin Asst.) and Dorrett McLean

Meet the new Magnificent, Efficient and Resilient Researchers (MERRs)



Lennox Pindling Jr (Data Entry Clerk)



Kimalie Parchment (Research Officer Act.)



In strengthening the multi-sectoral partnerships to effectively plan, implement, monitor and evaluate programmes within an integrated Family Planning/Sexual and Reproductive Health/Human Immunodeficiency Virus Framework, the ME&R team continues to provide technical guidance to the wider NFPB team; and at the same time, consistently meets and surpasses its targets.

No Man is an Island

While the NFPB team continues to work together to achieve its Mission, Vision and Objectives, the team cannot help but give a shout out to those who consistently made the pathway easy for us to meet and surpass our targets, and so we are grateful. Meet the supporters:



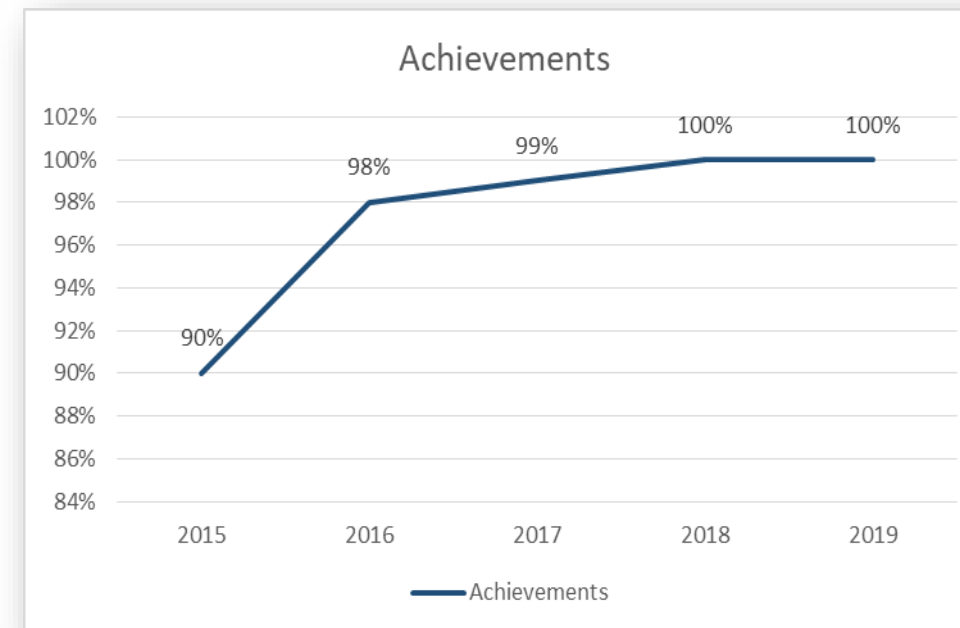
Mesdames Dianne Thomas and Samantha Edwards; Messrs. Joseph Reynolds, Arthur Lewis and Keith Allen



Bush Jacket Day

Sometimes the Technical Team even decked out in their bush jackets.

Here's a synopsis of our performance over the period 2015-2019



Value Statement:
 Commitment to integrity, respect and provision of quality sexual and reproductive health information and results-based monitoring, evaluation and research strategies in an environment that promotes sustainable development.



The uniqueness of the MERRs:

- The technical teams are qualified within and beyond their assigned portfolio responsibilities
- The team does not fail to go beyond the call of duty to get the jobs done efficiently and effectively
- The Unit ensures cross-training of all its team members so that the absence of key workers never halt production
- Majority of the team members consistently perform at an extraordinarily outstanding level
- The team keeps abreast with current events, both locally and internationally, hence able to hold intellectual conversations in any circle.
- The team continues to be poised for greatness!

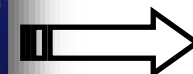
A Synopsis of the Tasks at Hand

Reporting

The Unit continues to provide guidance to the organisation regarding the efficient development of its Logical Framework, Logic Model, Strategic Business and Operational Plans and Quarterly Reports for timely submission to the MoHW and further to the Office of the Cabinet. Similar guidance and assistance also encompass the writing of international and national reports for Directing Council, World Health Assembly, and the United Nations. Some of these reports are Montevideo Consensus, the Medium-Term Socio-Economic Policy Update, Global AIDS Monitoring, National Commitments and Policy Instrument, the Public Administration and Appropriations Committee Report, the Health Chapter (SRH Component) of the Economic Social and Economic Survey of Jamaica, and the Jamaica Survey of Living Condition, *inter alia*.



Note the presence of the ME&R Director, unravelling novel ideas at the MoH's National Strategic Planning Meeting.



Note members of the MERRs, knocked heads together re technical guidance of the wider NFPB team re mapping the Logical Framework

Never a Dull Moment

The MERRs acknowledged that too much work and no constructive fun would surely make them dull, and so, on rare occasions, they joined together in eating the World's third best ice cream at Devon House; engage in a bit of Chess game; and hold pixie session (exchanging of gifts) during the Christmas Season.



The Chess Gang: Tazh, Arthur and Collin

Employees of the Quarter and Year



Over the period of this Newsletter, the Employees of Quarters have been Messrs. Andre Black (now acting Monitoring and Evaluation Officer), Mr. Collin Dosunmu (Database Manager) and Mr. Marvin Joseph (Biostatistician), and Kadie-Ann Campbell (Acting Data Entry Personnel) – the dominant being Messrs. Black and Dosunmu. In terms of Employee of the Year,

Mr. Andre Black has carried the ‘torch’ for the most part.

EMPLOYEES OF THE QUARTER



Trying to Make a Point

Did you know that Family Planning is tied to all 17 Sustainable Development Goals?

Check out the Director and the Acting M&E Officer trying to make a point to support the valid claim made by USAID and Knowledge for Health, that “FP is vital to unlocking all the 17 SDGs”.

Global AIDS Monitoring Report (GAM)

In recent correspondence from The Joint United Nations Programme on HIV/AIDS, Jamaica was congratulated for its 100 per cent compliance regarding this report. The Joint United Nations’ team has, over the years, requested from countries, including Jamaica, report on the Global AIDS Monitoring (GAM) framework. The ME&R Team has been entrusted with the national responsibility to gather the information and write the report regarding such national level data, which has been used to assess progress towards targets and commitments and inform national consultations to reach crucial decision-making consensus, pertinent to matters of HIV.

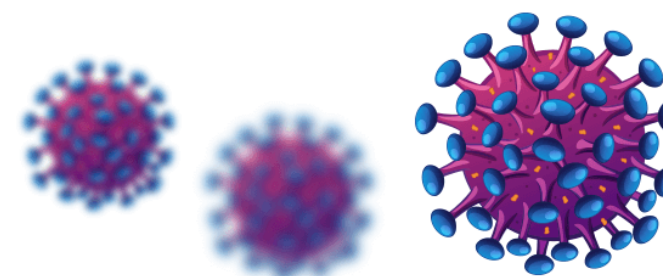
UNAIDS 2019 GUIDANCE

Global AIDS Monitoring 2020

The report featured 10 Fast-Track Commitments, with approximately 200 indicators.

WHAT IS HIV?

Human Immunodeficiency Virus (HIV) is a virus that attacks cells that help the body fight infection.



There’s no cure, but it is **treatable** with medicine.



The rationale for this report is to enable reduction in monitoring burden, better programmatic utility for countries, knowing the epidemic and reallocating resources, coherence, innovation and forward movements. In essence, the Global AIDS Monitoring and the National Commitments and Policy Instrument reporting process has been better able to allow Jamaica to report national data to adequately inform the Political Declaration, the Prevention Gap Report, the Get on the Fast-Track Life Cycle Approach to HIV and several other global and national initiatives to eliminate by 2030, HIV as a public health threat.

Tasks at Hand Cont'd

COVID-19 Research

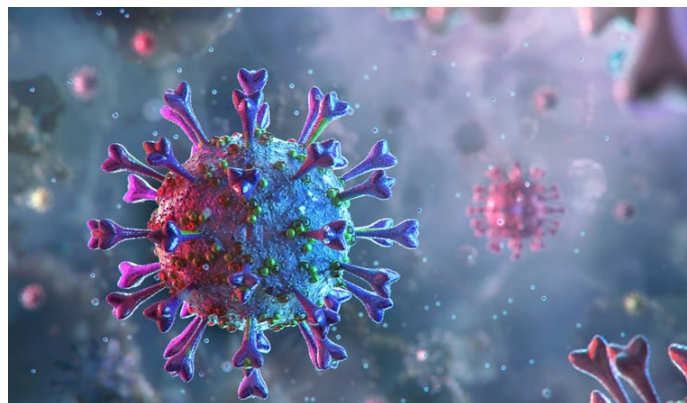
Work continues under the Essential National Health Research Committee of the Ministry of Health and Wellness, which steers/coordinates the COVID-19 Research team, of which the NFPB is a part, particularly the Director of



the ME&R Unit. This Committee is chaired by the National Epidemiologist. A number of groups have been established under the COVID-19 Research Committee, with a wide cross-section of stakeholders from various ministries, agencies and departments, academic institutions, the National Library of Jamaica, and the United Nations. The group, whereby the ME&R Unit is a part is the Health Systems – Universal Health Coverage, chaired by Dr. Georgianna Gordon-Strachan. This team continues to meet regularly outside the Committee level, and has been working assiduously in order to rise to the cause of the pandemic. Such effort involves proposal preparation, implementation planning, training and research. The ME&R Director participated in the COVID-19 Model Training under the auspice of PAHO/WHO. The key focus was to:

- understand the behavior of the epicenter for COVID-19 cases in the country
- identify if the public health measures implemented in a country are having an effect on the reduction of the effective reproductive number
- make projections of the epicurve including the impact of public and social health measures.

Two key pillars were noted; namely, Policymakers and Technical Cooperation Activities. The former was within the context of the fact that policymakers would need the outputs from modelling



and projections in order to inform the relevant decisions according to parameters and approaches based on their reality; relevant strategy to understand the historical context and to provide short- and medium-term projections; adequacy of the model chosen to the purpose for robustness; and sufficient transparency to comprehend and communicate the uncertainty. In regard to the latter

McCaw-Binns was invited to deliver a very important presentation on Decriminalization and Legalization of Abortion in Jamaica. All the aforementioned presentations was well received by the wider NFPB team. The Director of Health Records Services of the MoHW, Mr. Jermaine Martin was also present.

Publications

The Learned MERRs, in continuing to showcase the work of the NFPB, has published articles in international peer-review journals. The latest being:

Jamaica's Contraceptive Logistics Management Information System in the Era of Sustainable Development: A Best Practice Approach by Dr. Tazhmoye Crawford, Messrs. Damion Grant, Andre Black, Marvin Joseph, Collin Dosunmu, and Ms. Dorrett McLean. This was published in the International Journal of Healthcare Sciences, 7(2), pp. 479-488.

Life after Three-Scores and Ten in Jamaica: A Phenomenological Analysis by Dr. Tazhmoye Crawford. This was published in the International Journal of Healthcare Sciences, 6(1), pp. 424-431. This piece received media attention, whereby the author was invited and featured on the television, radio and print media, courtesy of the NFPB's Communications and Public Relations Unit, headed by Miss Dianne Thomas. As a matter of fact, this piece made the editorial of the Jamaica Observer. Check out the link: http://www.jamaicaobserver.com/editorial/tiptoeing-around_146383

Information Dissemination

An avenue for information dissemination to internal and external stakeholders, is through the NFPB's Library which falls under the ambit of the ME&R Unit. This small but dynamic space (the Library) continues to contribute to the Mission and Vision of the entity.



Conference

Some members of the ME& R team participated in the MoHW's 10th annual conference, which was held on November 21-22, 2019, under the theme: Wellness Now: Embracing Change Together, featuring (i) mental health, (ii) nutrition, (iii) best practices, (iv) advances in medicine and (v) Sickle Cell Disease. Such participation was two-fold:

1. The MER Director, Dr. Tazhmoye Crawford chaired the Scientific Panel/Session on Day 1 – under the theme: Chronic Disease and Risk Factors
2. The Monitoring and Evaluation Officer, Mr. Damion Grant delivered a presentation on Improvement of Jamaica's Contraceptive Logistics Management Information System (CLMIS) in the Era of Sustainable Development: A Best Practice Approach", bearing the authors, Tazhmoye V. Crawford, Damion C. Grant, Marvin Z. Joseph, Andre D. Black and Collin A. Dosunmu. This presentation was well received and had stimulated deep intellectual and political discussion regarding SRH services in Jamaica.



this would be based on the idea that modelling should contribute to address the country's concerns pertaining to the evolution of COVID-19 in its territories, with respect to providing adhoc analyses and results, providing relevant methodologies and updated information on parameters, input of the country's own data and context; and generating knowledge and expertise to improve the country capacity. In citing the work of Cori, et al (2013), the trainers posited that Monitoring and Quantifying transmissibility was essential to understanding the evolution of the epidemic, thus forecasting the impact and evaluating and adjusting public health responses; and so an important indicator which may be used to measure transmissibility was the effective reproductive number, which is the average number of secondary cases caused by an infected individual.

It was observed that certain parameters must not be avoided. Some of these were population size, initial infection, latency period (3.1 days), prodromal period (2 days), early infectious period (5 days), late infectious period (7 days), hospitalization (14 days), admission in ICU (21 days), number of Erlang stages (16 by default), *etcetera*.



The ME&R Director was asked by the Chair of the National COVID-19 Research Committee to provide policy implication statements regarding Family Planning. The Director included Maternal and child Health, and Gender-Based Violence - being indicators that are germane to Family Planning. A synopsis of the information submitted indicated that these indicators should be considered from the perspective of Health-in-All-Policy, and be viewed through the policy lens pertaining to Data, Access and Resources. The implications under each of these lens/variables were delineated accordingly.

Brown Bag Seminars

The ME&R Team has been instrumental in organising Brown Bag Seminars so as to showcase relevant updated SRH matters to keep the organisation abreast from time to time. The Enabling Environment and Human Rights Unit had done a phenomenal piece on Legislative Rights re HIV Transmission. The Health Promotion and Prevention team did an engaging demonstration of the female condom; and Professor Affette





Contraceptive Logistics Management Information System (CLMIS) Survey

The ME&R team conducted the NFPB's third CLMIS Survey by engaging internal and external stakeholders.

The survey assessed the contraceptive system performance and the availability of family planning methods at health facilities. It also aimed at providing information to stakeholders regarding the current state of affairs for contraceptive management across the country. The Logistics Indicators Assessment Tool (LIAT) was used; and 162 questionnaires involving 98 items were administered, targeting over 80 public health centres. Miss Mauricha Gooden was hired as the Statistical Analyst Consultant.

In 2019, the ME&R Unit commenced the Dissemination of the CLMIS Survey Report. The target groups were Regional Director, Regional Technical Director, Finance Director, Regional Nursing Supervisor, Senior Public Health Nurses, Midwife Supervisors, Family Planning Coordinator, Medical Officers of Health and Parish Managers.

The objectives of the dissemination were to:

1. share the findings of the 2019 CLMIS assessment;
2. discuss the implications of the results and make recommendations (if any) for the improvement of the system;
3. discuss challenges regarding the Family Planning Register and Contraceptive Logbook and
4. identify areas for improvements.

The dissemination took the form of sharing the methodology, findings, finance component of family planning expenditure and receivables (delivered by the NFPB's Director of Finance, Mr. Joseph Reynolds), followed by discussions and recommendations.

Note that the strengthening of the CLMIS across the health regions also factored regular clinic



visits by the ME&R team. This involved stock check, record check, *etcetera*. The willingness and shared vision of the Regional Heads, Public Health Nurses, Family Planning Nurses, Midwives, and Community Health Aids, made the process of strengthening, seamless and rewarding.

include in the Policy Workplan, an overarching goal; priority areas; strategic outcome; key policy, programme and project actions; performance indicator; baseline data and base year; targets; monitoring frequency and method; evaluation frequency and method; and assumed risks. This was well received.

District Health Information System

The monitoring of the HIV Prevention continues through site visits, capacity building, and the development of interactive dashboards. In regard to the site visits, there are 21 sites across the island, involving the four Regional Health Authorities and the Civil Society of Jamaica. The main aims of the visits are to implement corrective measures where necessary with action plans for strengthening the data management and reporting system; assess the quality of reported data within the context of key performance indicators; and improve data quality. In addition, data management form was developed to improve the quality of HIV prevention data across the 21 sites.

The capacity building measures were slated directly at ensuring that entry and analysis of the data are of top-notch validity and reliability. In terms of the development of the dashboards, note that this is a data management tool that tracks, analyses, monitors, and visually displays key health metrics while allowing users to interact with data, thus enabling them to make well-informed, data-driven, and sound decisions.

Policy

As part of the Health and Population Thematic Working Group, coordinated by the Planning Institute of Jamaica, the ME&R team continued in the discussion, and provided invaluable inputs in the revision of the captioned policy document. Such input was three-fold: SRH Component, Demographic Dividend Component, and the Plan of Action. Key and pertinent SRH goals, objectives and indicators were thoroughly discussed and taken into account in alignment with the SDGs and Vision 2030. The overarching SRH goals were:

- by 2030, replacement level fertility of 2.1 is maintained
- full integration and expansion of quality sexual and reproductive health care services into primary health care by 2030,
- life expectancy at birth has reached 75 years for males and 80 years for females.

The objectives and indicators addressed variables such as maternal morbidity and mortality, contraceptives, family policy, universal access to sexual and reproductive health care services, infertility screening and treatment modalities, media campaigns on reproductive rights and family planning, adolescent health, HIV/STI services, *inter alia*. Note that the indicators, objectives and goals were coupled with respective actions, along with the stated responsible agencies.



After the training the public health team delivered a heart-felt Vote of Thanks to the ME&R team. Their expression of appreciation was overwhelming.

Note Of important note is that after one year of course deliveries, each course was evaluated, using the Kirkpatrick Model, which assessed

Reaction, Learning, Behaviour and Results. This reliable model was developed by Dr. Donald Kirkpatrick in the 1950s, in order to determine the value of training to a business or an operation.



Meet the officials of the Launch

Gender Mainstreaming Policy of the University of the West Indies

The Director of ME&R was officially invited to be a part of the Gender Mainstreaming Policy Committee, whereby the component of Monitoring and Evaluation would be served. She continues to contribute to the process. Recently she advised Committee to

Reproductive Health Survey (RHS)

The NFPB was called to a sitting with the Honourable Minister of Health and the Permanent Secretary at the Infrastructural Committee of Cabinet. This meeting, which was held on March 14, 2019 witnessed the approval of the RHS to be executed over a 16-month period, by the Statistical Institute of Jamaica (consultant) – under a contractual arrangement. This overwhelmingly elated outcome (Cabinet’s Approval) followed the successful Cabinet Submission document which was prepared by the ME&R Director, and later submitted to the Permanent Secretary by the NFPB’s Executive Office. The RHS contract between the NFPB and STATIN was officially executed by both parties on June 10, 2019 in the presence of the media, thus print and online media publicity. The in-house vibrant RHS technical team comprises: Dr. Tazhmoye Crawford, Messrs. Damion Grant, Marvin Joseph, and Andre Black. At the embryonic stage, Miss Dianne Thomas was part of this team.

GLENER - Published: Wednesday | June 19, 2019 | 12:37 AM



Executive Director Lovette Byfield (right) and Director General Carol Coy (second left) held signed copies of documents for the 2019 Reproductive Health Survey with National Family Planning Board’s board member, Dr Diana Thorburn (second right), and Statistical Institute of Jamaica Legal Officer, Gillian Johns (left); following the signing ceremony at the Courtleigh Hotel in New Kingston last week



This is our Director, Dr. Crawford, chairing the Technical Working Group Committee of the RHS which she was instrumental in forming, with the approval of the Executive Director of the NFPB.

Capacity Building

Contraceptive Forecasting Methodology

The individuals trained comprised, Senior Public Health Nurses and Midwives from the Region. The training involved an overview of the forecasting process and its importance in reducing stock-outs and over-stock; data sources, collection and processing (accurate record-keeping); forecasting methodologies, specifically with regard to the principles, simple and moving averages, missing data and real demand; practical inventory control controls, with consideration to minimum and maximum stock levels/Inventory Control Procedures; and the con-

traceptive logbook and register.

These areas involved hands-on practical demonstration/work activities, discussion, questions and answers. At the end of the training, the participants were expected to be able to:

- understand the principles of contraceptive forecasting methodologies and techniques,
- learn how to apply basic forecasting to contraceptive procurement, ordering and stock management
- apply inventory control principles and mechanisms.



Here's a photo of the Biostatistician delivering the practical aspect of the Contraceptive Forecasting Methodology Training. This aspect was very challenging.

Of note is that given detected anomalies in the Monthly Summary Clinical Reporting (MSCR) which

is usually submitted to the Ministry of Health and Wellness, the co-operation of the good Office of the Policy, Planning and Development Division of the MoHW (Messrs. Howard Lynch/H. Shane Daniel) was received.

Overall, on average, seven hours of Continuing Medical Education was earned, courtesy of the Nursing Council of Jamaica.

Qualitative and Quantitative Data Management for Efficient and Effective Reporting

As a means of improving the capacity of healthcare professionals to produce quality reports at both parish and regional levels, the ME&R team trained health care professionals in the captioned. This included training in the Use of the Microsoft Excel Pivot Table. The participants were Public Health Nurses, Midwives and individuals who worked in the field of HIV. The training involved ways to conduct data collection, analysis and reporting using quantitative and qualitative approaches; the calculation of key indicators; the designing of tables based on data table theory; the application of filter and sorting of methods; the creation and deletion of pivot tables and pivot charts; the formatting, sorting, filtering, sub-totaling and refreshing of pivot table; the use of the slicer; and the creation of an interactive dashboard. These areas involved hands-on practical demonstration/work activities, role play, discussion, questions and answers. At the end of the training, the participants were expected to be able to:

- understand the role of Quantitative and Qualitative Data Management and Reporting in Sexual and reproductive Health (SRH) Programmes;
- appreciate the importance of data quality in SRH;
- generate and interpret Descriptive Statistics (Frequency, Rates, Averages and Graphs) using the pivot table in Microsoft Excel;
- understand SRH-related indicators, its measurement and calculations

On average, six hours of Continuing Medical Education was earned, courtesy of the Nursing Council of Jamaica.



ME&R Technical Team preparing to deliver course on Pivot Table and Quantitative Reporting