



NURSING LEVEL III

NTQF Level III

LEARNING GUIDE #55

Unit of Competence: Promote and manage comprehensive Family Planning Service

Module Title: Promoting and managing comprehensive Family Planning Service

LG Code: HLT NUR3 M05 LO4- LG-54

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LO4. Monitor family planning services

Instruction sheet # 1 learning guide # 1

This learning guide is developed to provide you the necessary information regarding the following content coverage and topics:

- HMIS standards of FMOH
- Preparing action plan
- Monitoring family planning practice
- Documentation and reporting

This guide will also assist you to attain the learning outcome stated in the cover page. Specifically, upon completion of this Learning Guide, you will be able to:

- ▶ Preparing registration book for family planning services according to HMIS standards of FMOH
- ▶ Collecting, updating and sustaining Family planning services data on the basis of HMIS guideline of FMOH
- ▶ Reporting and communicating family planning activities to the higher level and relevant body on the basis of HMIS procedure of the FMOH
- ▶ Revising plan on family planning for the catchments for a specific period of time
- ▶ Monitoring family planning practice at kebele is against plan

Learning Instructions:

Read the specific objectives of this Learning Guide.

1. Follow the instructions described in number 2 to 7.
2. Read the information written in the “Information Sheets 4”. Try to understand what are being discussed. Ask you teacher for assistance if you have hard time understanding them.
3. Accomplish the “Self-check” in page 7.



4. Ask from your teacher the key to correction (key answers) or you can request your teacher to correct your work. (You are to get the key answer only after you finished answering the Self-check 1).
5. If you earned a satisfactory evaluation proceed to “Information Sheet next”. However, if your rating is unsatisfactory, see your teacher for further instructions.
6. Submit your accomplished Self-check. This will form part of your training portfolio.
7. Your teacher will give you feedback and the evaluation will be either satisfactory or unsatisfactory. If unsatisfactory, your teacher shall advice you on additional work. .

Information Sheet-1

HMIS standards of FMOH

4.1. HMIS standards of FMOH

Family planning records and reports are important tools for strategic planning, supervision and monitoring.

4.1.1. Client Card

4.1.2. All clients seeking family planning services need to have client card. The client card records the socio-demographic and health history, physical examination findings and current method of use. The follow up section of the card records the history and physical examination findings at the time of the visit (client card insert copy of client card). The client card provides information on past and current use of a FP method and method switch (if any). It is an important tool for monitoring the quality of services as it provides information on whether the client has been screened for eligibility to use the method. It is useful for follow up of clients. When the client cards are organized in a systematic way, it helps to track defaulters.

4.1.2. Family Planning Register

This register records relevant information of all the clients who got service from a health facility. The family planning register is kept in the family planning room of the facility.



Family planning register should be completed by the provider at the time of service provision. The register includes information on the medical record number, sex, date of visit, counseling services, contraindication for methods, method provided and number of visit, FP method used and the date of last visit (in case of condoms, combined oral contraceptives and injectables).

The register:

- Provides information on the contraceptive use in a specified geographical area
- Useful tool for tracking clients, especially defaulters
- Provides information on supplies of contraceptives.

4.1.3. **Referral form:** Records of clients referred are obtained from the referral records.

4.1.4. **Reports**

Family planning reports provide information on the progress of the various indicators that have been identified by the Federal Ministry of Health. The reports shall include complications with use of methods and are important tools for monitoring. The health facility shall compile a monthly report and forward to the woreda health office. A woreda health office shall compile all reports from all facilities in its catchment area monthly and shall submit a report to the zonal health office which in turn will summarize the report every 3 months to Regional Health Bureau. The regional health bureau will compile the total contraceptive acceptor and the LMIS report to FMOH biannually.

Information Sheet-2

Preparing action plan

4.2. **Preparing action plan**

An action plan is a document developed by the manager and staff, which lists all planned activities, the date on which they will occur or by which they will be accomplished, the resources they will require, and the person who is responsible for carrying the out. Such a document is a valuable tool for efficient and effective



programme implementation, and should be used regularly and consistently as a monitoring tool at all levels.

Action plan (also known as operational plans) are distinguished from long term plans in that they show how the broader objectives, priorities and targets of the strategic plan will be translated into practical activities, which will then be carried out over a much shorter time period (anywhere from a week to a year). However, there should be complete harmony between the strategic objectives and the annual targets.

Information Sheet-3

Monitoring family planning practice

4.3. Monitoring family planning practice

Monitoring is a process by which priority data and/or information is routinely collected, analysed, used and disseminated to see progress towards the achievement of planned targets. This helps the managers take timely corrective actions in order to improve performance. It includes monitoring of inputs, outputs, outcomes and impacts of health programmes, including family planning. The most common form of monitoring is often based on input and output indicators using routinely collected service data. Monitoring of outcomes and impacts, on the other hand, requires the collection of target population level data, and for this reason is done at a higher level and for fewer selected priority areas only.

Common performance indicators for a family planning programme:

- ❖ **Inputs** (resources, activities)
 - ▶ Total commodities (supplies, equipment, contraceptives) received.
 - ▶ Training and technical assistance received by the staff.
 - ▶ Supplies and contraceptives expended (subtract inventory from amount received).
 - ▶ Number of educational materials received, by type.



- ❖ **Outputs** (services, training, information, education and communication)
 - ▶ Number of new clients, given by choice of contraceptive method.
 - ▶ Number of providers trained.
 - ▶ Number of households covered.
 - ▶ Number of community meetings and number of people informed at meetings.
 - ▶ Number of referrals for clinical methods.
 - ▶ Number of contraceptives distributed, by contraceptive method.

Information Sheet-4

Documentation and reporting

4.4. Documentation and reporting

- Documentation and reporting is one way that an organization can keep track of patterns of contraceptive use amongst its clients. Keeping records and preparing and analyzing reports are effective ways to determine clients' needs and their use patterns, without doing a formal programme evaluation. Good examples of this are stock on hand (by method and brand), and consumption/ distribution (by method and brand), both of which can be easily collected and analyzed on a routine basis. This information can be collected by using simple HMIS records, forms and reports.

Types of Documentation forms:

- Inventory control card (ICC): This form should be kept at all storage facilities that manage a significant number of inventory items. The purpose of the ICC is to have an up-to-date and continuous record, in one location; of all transactions for each item in the inventory .Daily activity register (DAR) The register is designed to be used when contraceptives are dispensed to family planning clients. It provides a daily log of the number of client visits, subdivided by the types and quantities of contraceptives dispensed to each client on a monthly basis. When anew month begins, service providers should begin anew DAR. The DAR should



be totaled on a monthly and quarterly basis .Quarterly report/ requisition: This form serves several purposes. It provides summary information from the DAR and ICC concerning the number and types of clients served, and quantities of each type of contraceptive received and dispensed over a three-month period.

Self-Check -1**Written Test**

▪ Multiple Choices: Choose the best answer

1. ----- Is priority data and/or information is routinely collected, analysed and disseminated
 - A. Evaluation
 - B. Monitoring
 - C. Implementation
 - D. All

ANSWER SHEET

Name: _____ Date: _____

I - Multiple choices

1. _____

Reference:

1. Federal Democratic Republic of Ethiopia Ministry Of Health 2012, Participant's Handout Basics in Family Planning and Short acting Family Planning Methods
2. Federal Democratic Republic of Ethiopia Ministry Of Health 2012, Participant's Handout, counseling for family planning use



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