# SCOFECATO ISM Rural Citizen's Charter

# **Contents**

- 1. Purpose of the scorecard
- 2. Coverage: (Scorecards reported)
- 3. Results:
  - Clean Drinking Water + Infrastructure
  - Health
  - Education
- 4. Lessons Learnt
- 5. MSS Scorecard Process Challenges
- 6. Recommendations
- 7. Quality assurance and Quality control Mechanism

#### Introduction to community scorecard

#### A community participatory tool that:

- Enables communities (including specific stakeholders) to assess and rate the services provision committed by government through a simple, but systematic approach. These MSSs include access to clean drinking water, road, electricity, irrigation, health and education
- Enables government to act on the scorecard results and findings.

#### It enables the communities specifically look at the:

- > Availability and quality of the services,
- > Attitude and behavior of the services provider staff
- > Condition of the facilities
- > create a dialogue between services users and services providers, and contribute to improved services provision

## Coverage

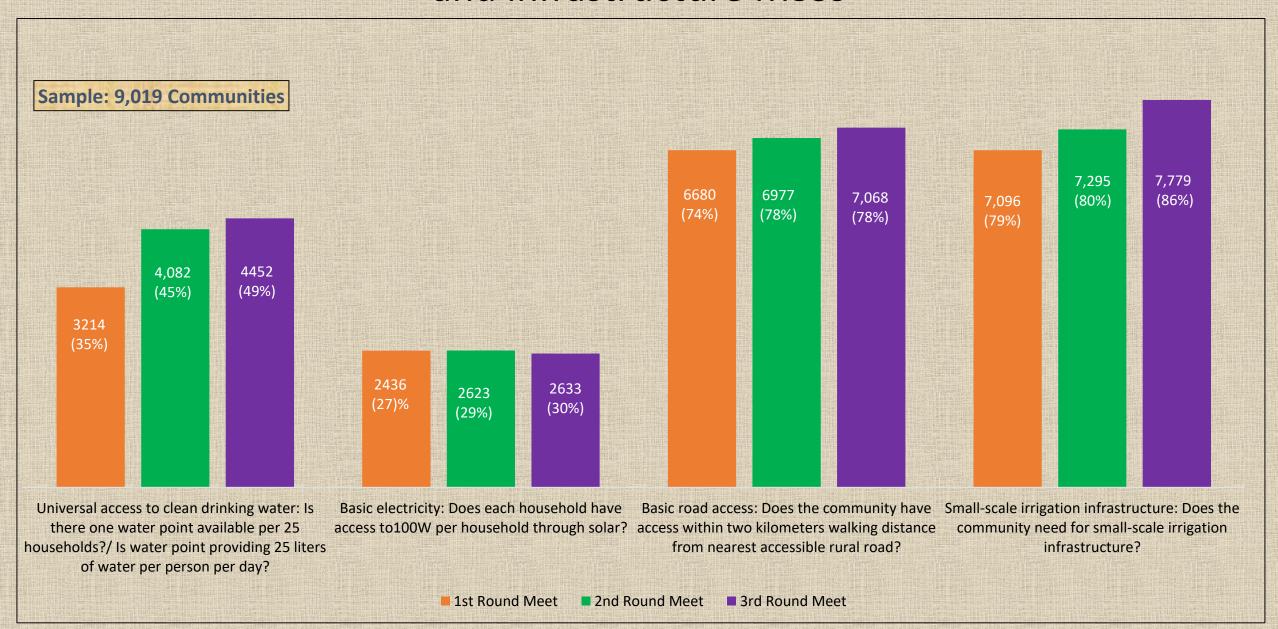
Comm	unities that reported	for Clean D	rinki	ng Water a	nd	infrastru	icture s	coreca	ards I	MSSs	
# of CDCs elected	# of communities reported first period	# of communities reported the second period				# of communities reported third period				otal Scorecards reported	
12,140	11,940 (98%)	11,190 (92	.%)		9,252 (76%)				32,382		
	Schools/o	communiti	es rep	oorted for	ed	ucation N	/ISSs				
		First Round (Baseline)			Second Third Round				# of Education MSS Scorecard completed		
# schools that con	nmunities reported score	ecard for	3	3,769		3,332 2,		854			
# of communities re	eceive services from the	se schools	18,283			16,422 13		,350		9,955	
	Health Cen	ters/comm	nuniti	es reporte	d f	or health	MSSs				
				First Roun (Baseline		Second I	Round	Thi Rou		# of Health MSS Scorecard	
# health centers th	nat communities reporte	d scorecard	for	642		609	9	53	3		
# of communities receive services from these health cent			nters	9,754		9,263		7,638		1,784	

# Results/findings

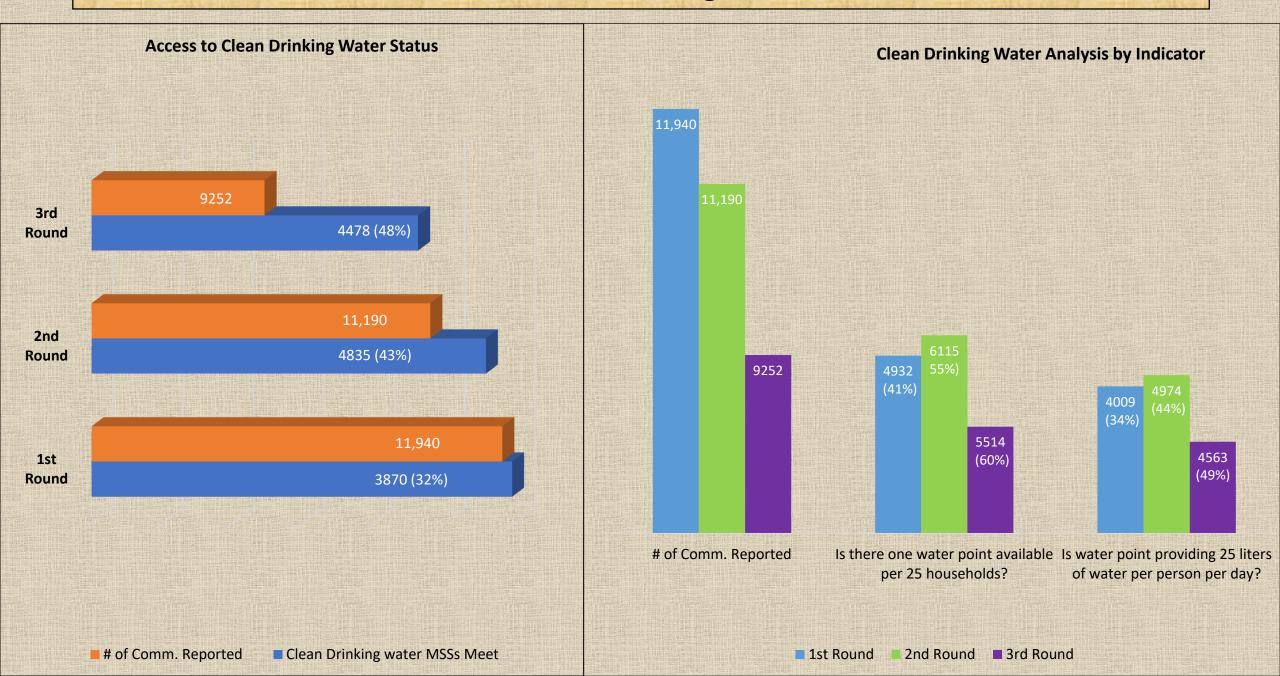
## Overall Results

Indicators	1st Round	2nd Round	3rd Round
# of communities reported scorecard on clean drinking water and Infrastructure	11,940	11,190	9,252
# Communities have access to clean drinking water as per the MSSs	3,870	4,835	4,478
# of communities have access to basic electricity as per the MSSs	3,011	3,171	2,668
# of communities that have access to basic road as per the MSSs	8,900	8,579	7,289
# of communities that need for small scale irrigation	9,293	8,850	7,994
# Health Centers reported on scorecards	642	609	533
# Health Centers provide all Minimum Service Standards	506	514	455

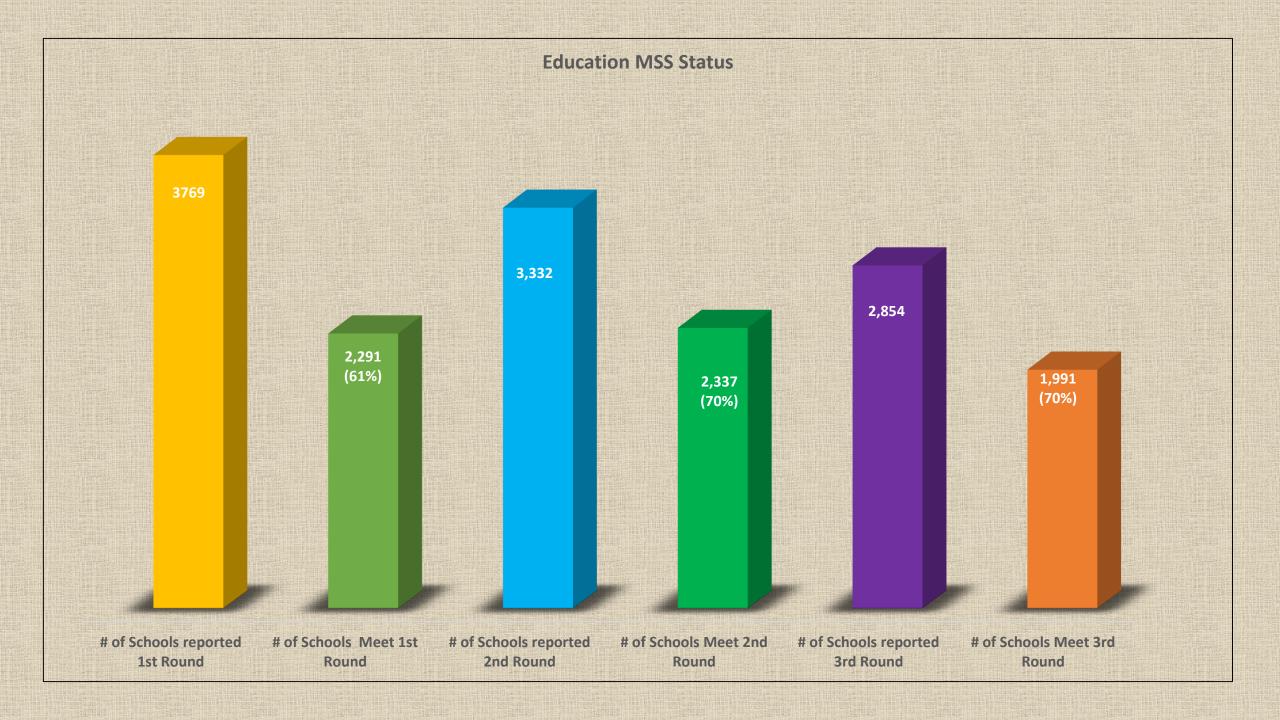
# Three Round comparison of communities access to clean drinking water and infrastructure MSSs

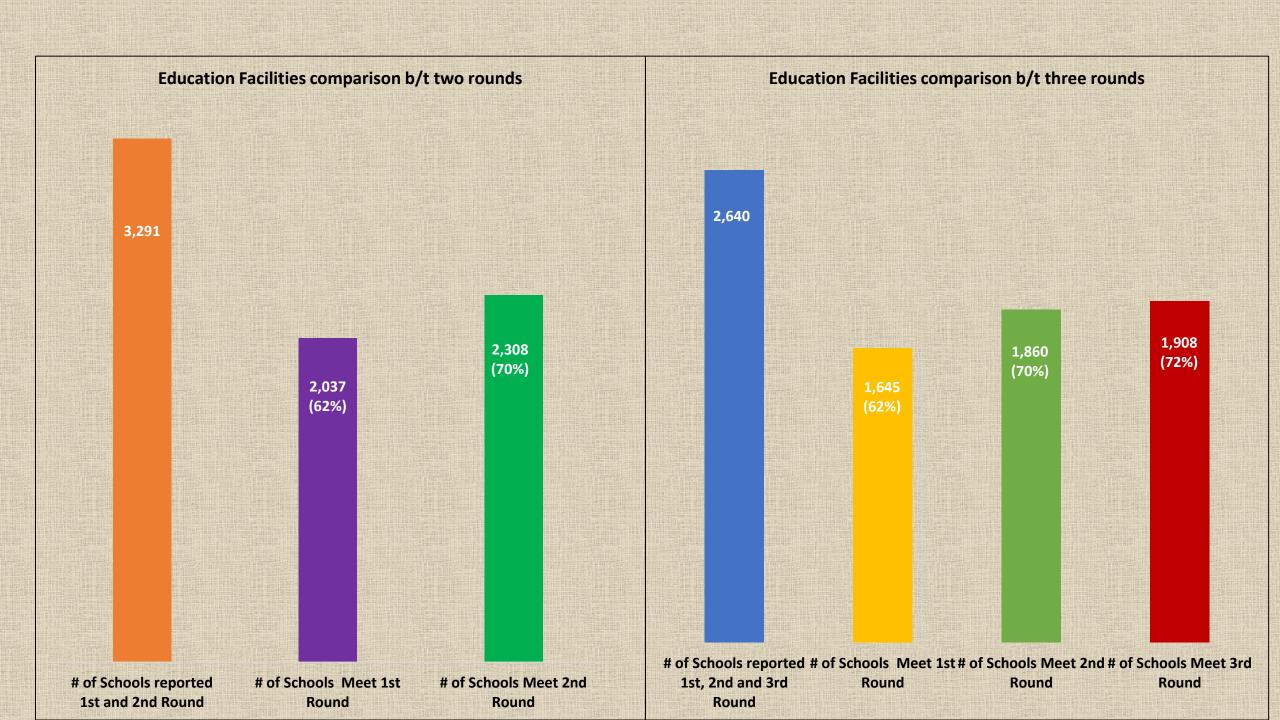


#### Access to clean drinking water MSSs



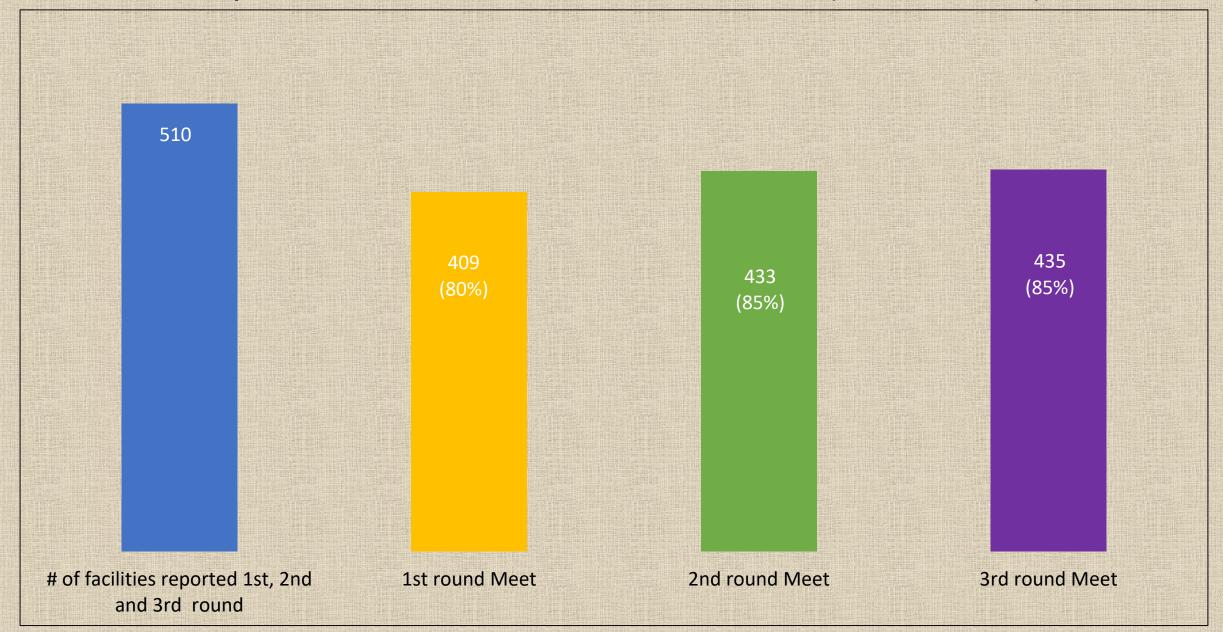
# **Education MSSs Results**





# Health MSSs Results

#### Comparison between same Health facilities (three rounds)

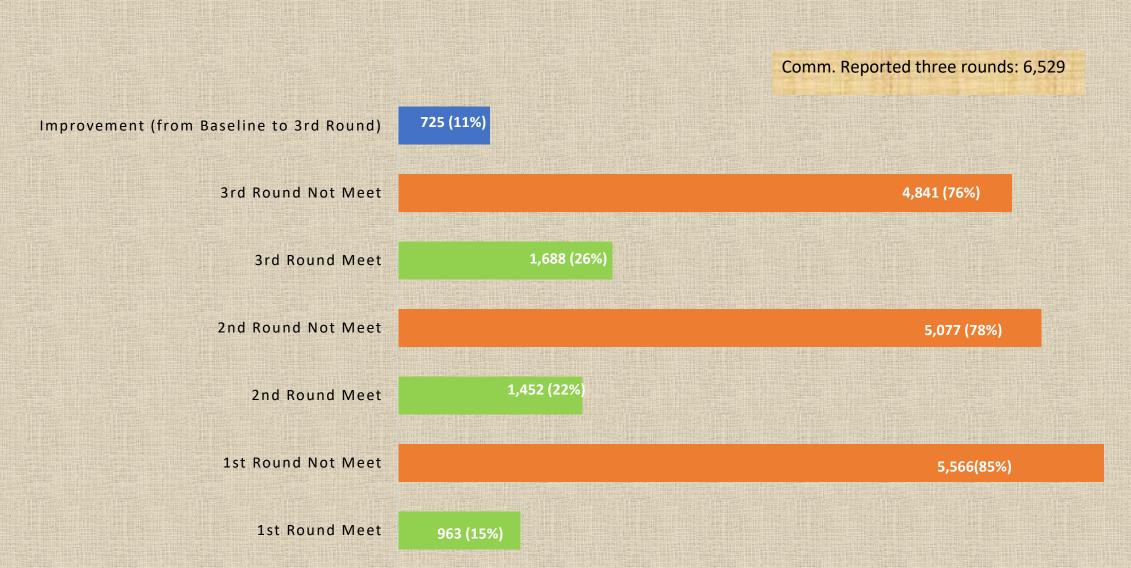


# Overall MSSs (Education, Health and

Infrastructure) Results

# overall MSS status (Health, Education, water and infrastructure)

Comparison between Three Rounds same Comm.



ISM action points

	Politico
Score cards	MRRD Responses
IAs should improve the coordination meetings (at central, provincial, and district levels), record agreements and identify follow up points after each discussion.	This has been shared with Capacity Development Division to include the scorecard agenda in all DCCMC and PCCMC meetings and make it mandatory to report on the results in each meeting.
Ensure regular dissemination workshops so that scorecards are shared with MoE and MoPH	The results are shared with both line ministries. On January 3rd the results of scorecard were shared in detail with MoPH and MoE and on Jan-05-2021 MSS Scorecard result Presentation was delivered in MoF to line ministries.
There should be an official, well-planned and announced, dissemination event once the sampling from base line to end line has been completed	We discussed this within the team and there was a meeting at MoF Jan-05-2021, it was decided that MoF will meet with MRRD and IDLG Public Communication teams to organize a press conference and disseminate MSS Scorecard results.
Both IAs should assess if the CDCs can conduct the score card work (plan, collect the data, and complete the forms) on their own	The assessment of this task is done, Plan for implementation of MSS Scorecard at field level will be prepared by CDD. Further discussion will take place on this issue in this ISM.

# Future Plan

Infrastructure									
1st Period to be conducted	2nd Period to be conducted	3rd Period to be conducted							
241	991	2929							
	Education								
1st Period to be conducted	2nd Period to be conducted	3rd Period to be conducted							
48	475	746							
	Health								
1st Period to be conducted	2nd Period to be conducted	3rd Period to be conducted							
10	35	100							

## Lessons Learnt

- ➤ While reporting on clean drinking water and infrastructure, it was found that some communities do not reflect the services they receive in these areas assuming they will attract the government's attention and thus will be provided with more projects/services.
- ➤ When Schools, Clinics and Provincial Education and Public Health Directorates receive the reported MSS Scorecard photocopy, then they bring positive changes and effects to the MSS delivery.
- > Small-scale irrigation infrastructure MSS: Language for question in MSS Scorecard should be modified/revised, as we are receiving reverse results.

# Challenges and Recommendations

- Distance from Health and Education Facilities, or using facilities in other Provinces, or have access (Flexibility in MIS, Distance question addition in SC form)
- 2. COVID-19 affected MSS SC implementation, Specifically Health and Education (Flexibility in terms of late submission should considered)
- 3. Gathering of huge number of MSS Scorecard committee members. (Reducing number of members, two or three batches)
- Usage of Health and education facilities from neighboring communities not under CC Coverage (only Infra SC should be considered for FP payment, data already gathered on this issue, decision pending)

# Challenges and Recommendations

- 1 Implementation of MSS Scorecard in absence of FPs (initial assessments completed and implementation plan prepared)
- 2. Overall MSSs Status of communities using District hospitals, Provincial Hospitals and Education Facility outside CC coverage (We may include district hospitals in future)
- 3. Ineffective DCCMC and PCCMC meetings regarding scorecards' findings (A Proper mechanism to be developed and meetings to be recorded and reported)
- MSS Scorecard verification for FP invoices payments is challenge as verification percentage is not mentioned in the contract and verification process is very lengthy (a proposal clarify verification percentage and process is submitted to DM office)

Thank you!

# Scorecard implementation process

1. Scorecard committee formation (health & education

2.Instruction on Scorecard forms and meeting appointment

3.Scorecard
Committee visits the facility

4.Scorecard
Committee fills out
scorecard

8.Sharing Scorecard copy with each facility and community

7.Original kept at district/PMU and copy to FP

6. Data Entry (district/PMU)

5. Observe, verify, certify and submit (SO)

9.Sharing a copy with PMU, Reps of Education and Health, Dist Gov

10. PMU head shares the scorecard results with governor, Municipality and MoE/MoPH Directorate

11. MoF coordinates
Report every 6 months,
which is submitted to
the High Poverty
Council for follow-up

### Quality control and assurance mechanisms

- 1. Social Organizer observes the entire process
- 2. Scorecard committee verify the findings, reach consensus and sign the form
- 3. Services providers are part of the process
- 4. District Manager verifies the scorecard form before the entry
- 5. Database officer cross checks the data with the last version of scorecard-if not baseline
- 6. Provincial Monitoring officers check the scorecard in sampled communities
- 7. The scorecard findings are cross checked at HQ for consistent results
- 8. The line ministries' feedback on results also help in the quality control. (Field and HQ)

#### Clean Drinking water and infrastructure MSSs indicators

- 1. Universal access to clean drinking water: Is there one water point available per 25 households? Is water point providing 25 litters of water per person per day?
- 2. Basic electricity: Does each household have access to 100W per household through solar, micro hydro, biogas or wind (only in areas that cannot be reached by the grid)?
- 3. Basic road access: Does the community have access within two kilometers walking distance from nearest accessible rural road (accessible areas only)?

4. Small-scale irrigation infrastructure: Does the community need for small-scale irrigation infrastructure? this includes intakes (for secondary/tertiary canals), water divider, water control gates, siphon, water reservoir up to 10,000 M3 capacity, rehabilitation or construction of small irrigation canal, protection wall, gabion wall, aqueducts, and super passage

# **Education Minimum Service Standards (MSSs)**

- 1. Are Education MSS clearly posted at the school?
- 2. Do teachers have at least grade 12 education?
- 3. Do students have 24 hours per week of education in grade 1-3?
- 4. Do students have 30 hours of education in grade 4-6?
- 5. Do students have 36 hours of education in grade 7-12?

## Health Sub-center Minimum Service Standards (MSSs)

- 1. Are Health MSS clearly indicated at the information board at the health sub-center?
- 2. Is the Health Sub-Center open during the official time?
- 3. Does the Health Sub-Center have one midwife?
- 4. Does the Health Sub-Center provide family planning?
- 5. Does the Health Sub-Center provide services for **any** of the following conditions? (*Diarrhea, Malaria, Antenatal Care, Tuberculosis Detection and Referral, and Immunizations*)

#### **Basic Health Center Minimum Service Standards (MSSs)**

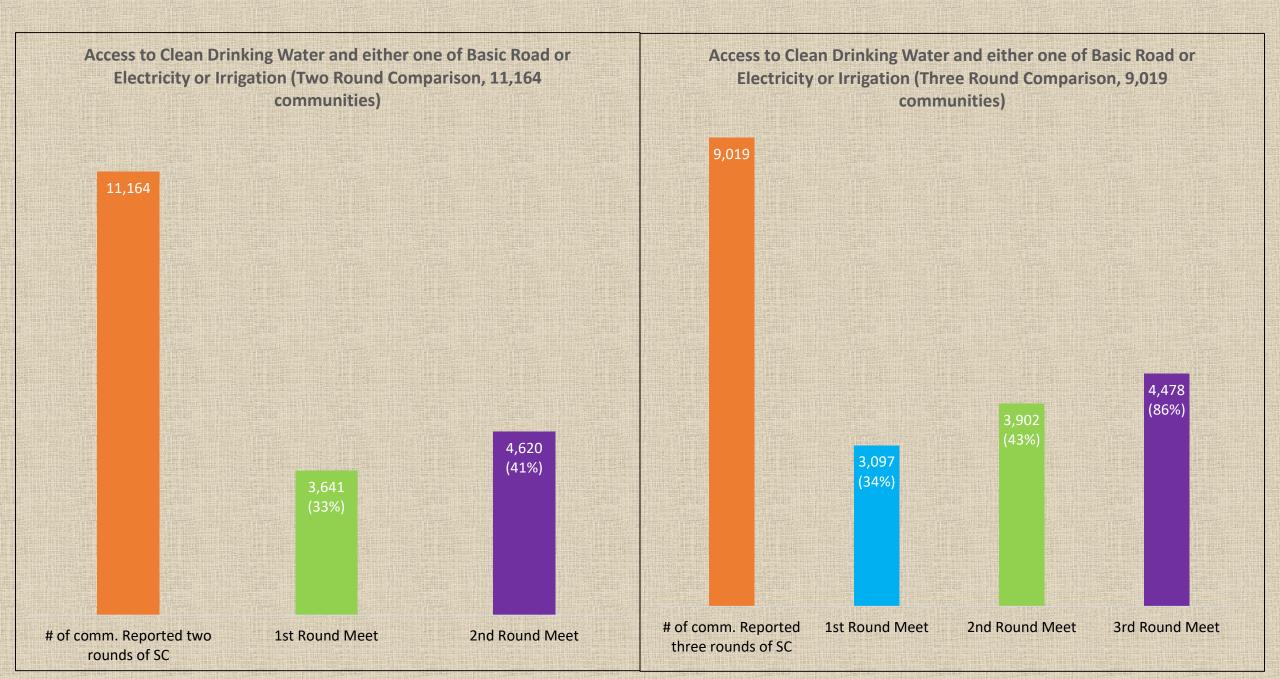
- 1. Are Health MSS clearly indicated at the information board at the basic health center?
- 2. Is the Basic Health Center open during the official time?
- 3. Does the Basic Health Center have one midwife, and one nurse?
- 4. Does the Basic Health Center provide immunizations?
- 5. Does the Basic Health Center provide family planning services?
- 6. Does the Basic Health Center provide services for any the following conditions?

  Diarrhea, Malaria, Antenatal Care, Tuberculosis Detection and Referral?

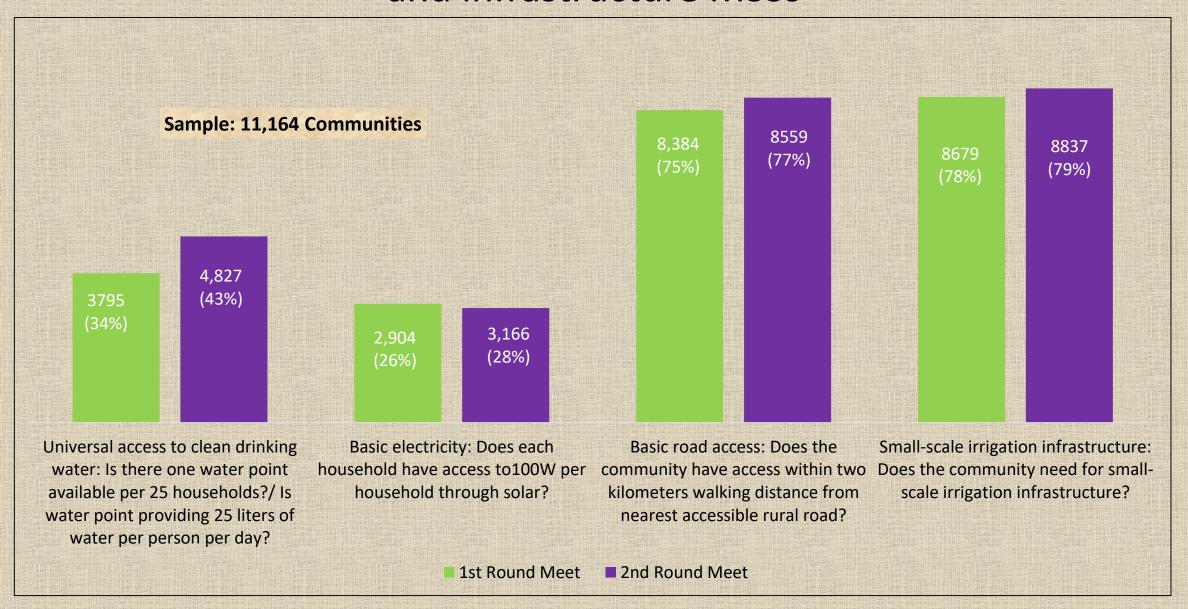
# Comprehensive Health Center Minimum Service Standards (MSSs)

- 1. Are Health MSS clearly indicated at the information board at the Comprehensive health Center?
- 2. Is the comprehensive Health Center open during the official time?
- 3. Does the Comprehensive Health Center have one doctor, one midwife and one nurse?
- 4. Does the Comprehensive Health Center provide pre, during, and post delivery services for pregnant women?
- 5. Does the Comprehensive Health Center provide immunizations?
- 6. Does the Comprehensive Health Center provide services for any of the following conditions? Diarrhea, Malaria, Tuberculosis Detection and Referral?

#### Overall comparison of the clean drinking water and one of the infrastructure MSSs



# Two periods comparison of communities access to clean drinking water and infrastructure MSSs



# **Education MSSs Results**

#### **Education MSSs comparison of three rounds (by Indicators)**

# of Schools Reported all three Rounds: 2640											
MSS Scorecard Round				Do teachers have at least grade 12 education?		the second secon		The state of the s		Do students have 36 hours of education in grade 7-12?	
1st Round			4 3								
	Meet	Not Meet	Meet	Not Meet	Meet	Not Meet	Meet	Not Meet	Meet	Not Meet	
2nd Round	74%	29%	95%	5%	97%	3%	97%	3%	90%	10%	
3rd Round	0170	1370	3070	470	3070	470	9070	470	3170		
	85%	15%	98%	2%	94%	6%	93%	7%	91%	9%	

# **Health MSSs Results**

#### **Overall Health MSS Status**

#### **Clinics/Communities reported Health MSSs**

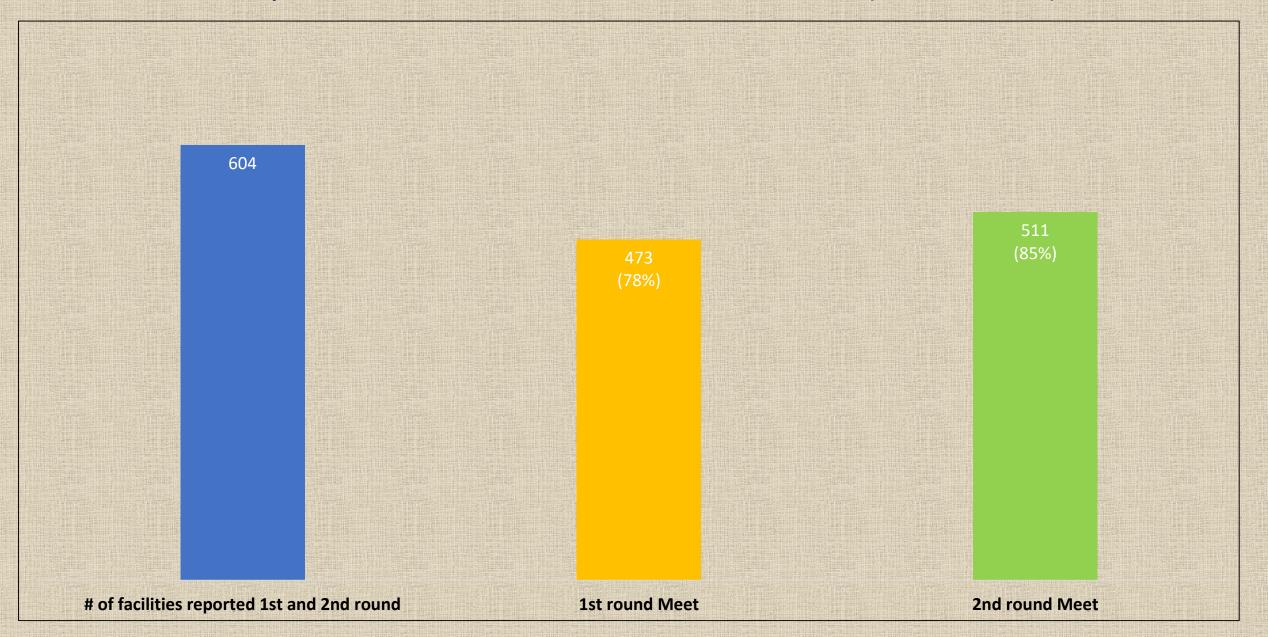
MSS Scorecard Rounds		Round 2, # of Comm. 9,754)	25 V 25 F 126 P 3 PH 1 PH 1 PH 1 PH 1 PH 1 PH 1	nd Round 9, # of Comm. 9,263)	Third Round (# of Facility: 533 # of Comm. 7,638)			
Nounds	MSS Meet	MSS Not Meet	MSS Meet	MSS Not Meet	MSS Meet	MSS Not Meet		
	(# and %)	(# and %)	(# and %)	(# and %)	(# and %)	(# and %)		
By Facility	508	136	514	95	455	78		
	(79%)	(21%)	(84%)	(14%)	(85%)	(15%)		
By Community	7,699	2,055	7,994	1,269	6,460	1178		
	(79%)	(21%)	(86%)	(14%)	(82%)	(18%)		

#### Overall Health MSSs Status by facility type

#### **Clinics/Communities reported Health MSSs**

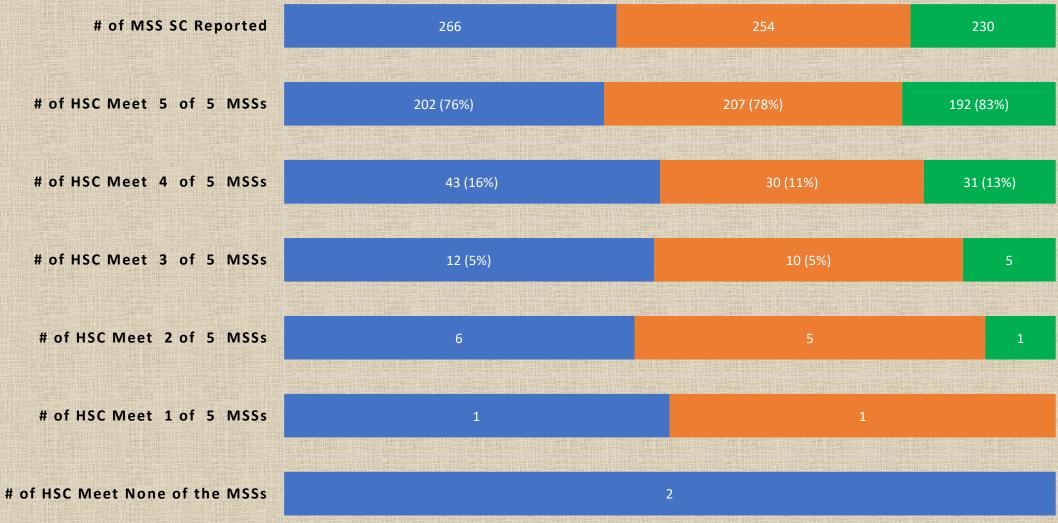
THE COUNTY OF THE PROPERTY OF THE PARTY OF T						
		Round C: 266, CHC: 110)		d Round C: 249, CHC: 106)		d Round HC: 212, CHC: 91)
MSS Scorecard	MSS Meet	MSS Not Meet	MSS Meet	MSS Not Meet	MSS Meet	MSS Not Meet
Rounds	(# and %)	(# and %)	(# and %)	(# and %)	(# and %)	(# and %)
Health Sub-	202	64	207	47	192	38
Center (HSC)	(76%)	(24%)	(81%)	(19%)	(83%)	(17%)
Basic Health	206	60	211	38	177	35
Center (BHC)	(77%)	(23%)	(85%)	(15%)	(83%)	(17%)
Comprehensive Health Center (CHC)	98 (89%)	12 (11%)	96 (91%)	10 (9%)	86 (94%)	5 (6%)

#### Comparison between same Health facilities (two rounds)



#### Health Sub-Center (HSC) MSS Status by Period

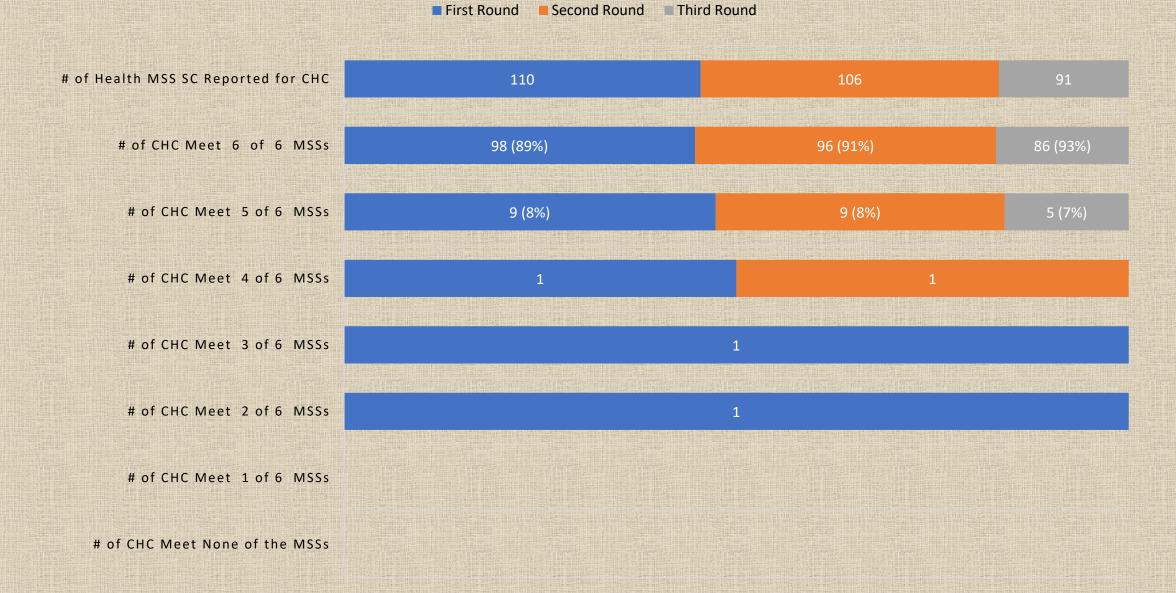




#### **Basic Health MSS Status by Period**

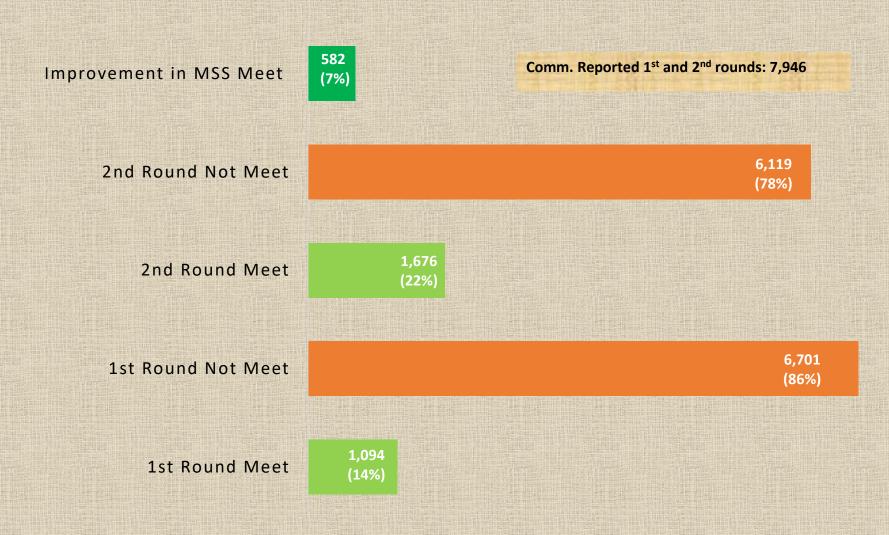


#### Comprehensive Health MSSs status by Period



# overall MSS status (Health, Education, water and infrastructure)

#### **Two Round Comparison**



# Health MSSs Poster (DCCMCC)

Health MSSs Poster (Health Sub Center)
Province:

FP Name:

District:

No	ealth Sub-Center(HSC) MSSs											
		HSC Name		No. of CDCs using this facility	Scorecard Period	Q1	Q2	Q3	Q4		Health MSSs Status	
	1				1							
					2							
					3							
					4							
					5							
101					6							
	2				1							
					2							
					3							
					4							
					5							
					6							

#### Health Sub-Center MSSs

Q1: Are Health MSS clearly indicated at the information board at the health sub-center?

Q2: Is the Health Sub-Center open during the official time?

Q3: Does the Health Sub-Center have one midwife?

Q4: Does the Health Sub-Center provide family planning?

Q5: Does the Health Sub-Center provide services for any of the following conditions? Diarrhea, Malaria, Antenatal Care, Tuberculosis Detection and Referral?

# **Education MSSs Poster (DCCMCC)**

#### **Education MSSs Poster**

Province: District: FP Name:

No.	School Name	School Type	School Code	No. of CDCs using this facility	Scorecard Period	Q1	Q2	Q3	Q4	Q5	Overall Edu. MSSs Status
					1						
					2						
					3						
					4						
					5						
1					6						
					1						
					2						
					3						
					4						
					5						
2					6						
					1						
					2						
					3						
					4						
					5						
3					6						

#### **Education MSSs**

- Q1: 1. Are Education MSS clearly posted at the school?
- Q2: 2. Do teachers have at least grade 12 education?
- Q3: 3. Do students have 24 hours per week of education in grade 1-3?
- Q4: 4. Do students have 30 hours of education in grade 4-6?
- Q5: 5. Do students have 36 hours of education in grade 7-12?