

The Feedback Trust Scottish Charity No. SC023568

Construction of the Akondromainty Health Centre in Madagascar

(FF 484-05)

Final report

July 2020

Feedback Madagascar/Ny Tanintsika (FBM/NT) –

The Eagle Foundation

Contents

Introd	uction	4
Proj	ect location	4
Calend	dar of achievements	6
Details	s on the project	8
1-	Preparation phase	8
2-	Building phase	10
3-	Post-construction phase	15
Gener	al description of the infrastructure:	
	t beneficiaries	
•	diture summary	
-	usion	
	dix 1: Technical acceptance of works document	
	dix 2: Attendance list at training of the CER Committee	
Appen	dix 3: Thank-you letters	.29
Appen	dix 4: Receipts of equipment	.31
Appen	dix 6: Photos showing the evolution of building work	.33
Appen	dix 7: Additional COVID-19 measures	.43
FBM-N Figure Ifanire Figure	1: Map locating Akondromainty in relation to the capital city Antananarivo and Fianarantsoa, where the NT office is located, and the centre of Ikongo district	4 5 e
	8/9/2019), and village	
Figure	5: Initial community meeting in Akondromainty; reading the convention & agreeing to its content 6: The 'ferry' crossing at Angado	8
Figure crossii	7: Challenges in accessing Akondromainty: treacherous bridges between Vohipeno & Ifanirea, canoe ng between Ifanirea & Akondroaminty, & boggy mountainous walk for the last stretch	10
_	8: The 4 Kings, heads of the different 'Tranobe' in Akondromainty area	
_	10: Transporting materials on foot to Akondromainty.	
Figure	11: The community will be improving water evacuation channels & planting grass around the Health	
right:	12: Efforts to enforce social distancing during the ceremony of the technical acceptance of work. Below The Mayor of Kalafotsy addressing participants in the presence of a representative from the Ikongo distributions.	
Figure	13: The football teams in Akondromainty delighted with their new kits.	13
	14: Members of the CER committee, the health centre head, the mayor, the representative of the district authorities, and representatives from the FBM-NT team	

Figure 15: Some of the team of builders and storekeeper outside the health centre	14
Figure 16: Training of members of the CER committee in the health centre.	15
Figure 17: The tool box	16
Figure 18: Akondromainty health centre & village's borehole	17
Figure 19: The front & back of the health centre	17
Figure 20: The maternity ward & adjoining shower	18
Figure 21: The protective door grid between the storeroom & the dispensary	18
Figure 22: The impluvium water tank & hand-washing station.	19
Figure 23: The down-pipe 'disaffection' system to prevent the first rains (which bring dirt from the roof) from	
entering the water tank	19
Figure 24: Sink in the delivery room	20
Figure 25: The external sanitation block (5 toilet compartments)	20
Figure 26: The female urinal	21
Figure 27: The outdoor shower block	21
Figure 28: The outdoor shower block	22
Figure 29: Gazebo design next to the health centre.	22
Figure 30: Health centre incinerator for safe waste disposal	23
Figure 31: Washbasin outside the health centre	23
Figure 32: Views of Akondromainty village	24
Figure 33: The district health authority representative & FBM-NT engineer at the entrance to Akondromainty	
nealth centre, with COVID-19 prevention measures visible	25
Figure 34: View of Akondromainty Health Centre from the village	26
Figure 35: Special travel authorisation document obtained from the regional Centre of Commandment anti-	
COVID19	43
Figure 36: 'Sanitary barriers' on the road (checking authorisation & temperature)	44

Introduction

The Eagle Foundation agreed to fund a total of £47,024 for the project to re-build the Akondromainty Health Centre level 2 ("CSB2") in the village of Akondromainty in Kalafotsy rural municipality, Ikongo District, Vatovavy Fitovinany Region of Madagascar. This involved the construction of a building measuring 18.2m x 10.3m x 4.8m with 7 rooms including a delivery room, a maternity ward, a sick ward, a consultation room, midwife/ nurse offices, pharmacy and treatment room, 2 indoor showers and a storeroom for medicines. This building is equipped with a rainwater catchment system for hand-washing by patients and which also conducts water to the delivery room. There is an additional sanitation block comprising 5 toilet compartments plus male and female urinals, 3 shower compartments and 2 gazebos for waiting rooms outside the health centre.

This project followed repeated requests for help from the people of Akondromainty, and the confirmed needs and community motivation assessment carried out by the Feedback Madagascar - Ny Tanintsika (FBM-NT) team. The project's objective is to reduce mortality and mortality rates through improving access to healthcare in this remote area where malaria and bilharzia are endemic.

The funding agreement with the Eagle Foundation, dated the 14th June 2019, was signed by the FBM UK administrator and the funds were received in the UK bank account on the 26th June 2019. This amounted to 210,453,792 MGA after transfer to Madagascar. The expected period of the project was from May to September 2019. However, plans were pushed back due to the later date of acceptance of the project and then there were delays linked to the mayoral electoral period (October – November 2019), the rainy season (December – March) and then the COVID-19 crisis (March onwards). The project was not fully completed until June 2020.

Project location

Akondromainty is a remote village in Kalafotsy rural municipality, in Ikongo District, Vatovavy Fitovinany Region of southeast Madagascar. Road travel to Akondromainty requires a 390 km trip from Fianarantsoa; 306 km to Vohipeno on the east coast, then 66 km on a secondary road to Ifanirea followed by an 18 km walk over mountainous terrain and involving a canoe river-crossing.



Figure 1: Map locating Akondromainty in relation to the capital city Antananarivo and Fianarantsoa, where the FBM-NT office is located, and the centre of Ikongo district.

Although there are times that four-wheel-drive vehicles have in the past managed to reach Akondromainty, the 'road' (carved out of the hillside by the local community) involves very steep ups and downs, and is inaccessible to trucks. There is also no longer a 'ferry' boat that used to enable vehicles to cross the river to get there.

Akondromainty Health Centre is located 104km from the district-level hospital and administrational centre, where its Doctor has to go for meetings and medicine supplies. The Kalafotsy area borders the biodiversity-rich rainforest which is part of the new protected area 'COFAV' and which is highly threatened from various anthropological pressures.



Figure 2: Map showing Akondromainty in relation to the district-level hospital in Ikongo, to the nearest road in Ifanirea, and to the coastal towns of Vohipeno and Manakara (via where the area is accessible by road).



Figure 3: Satellite image showing close-up of the site of Akondromainty Health Centre before the project (image dated 8/9/2019), and village.

Calendar of achievements

Activities	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June
Activities	2019	2019	2019	2019	2019	2019	2020	2020	2020	2020	2020	2020
Letter delivered to all stakeholders announcing the project's acceptance.	X											
Initial meeting and preparations with local authorities and community in		X	Χ									
Akondromainty concerning the project funding agreement, explanation of each												
stakeholder's role in the project, identification of storerooms.												
Training of members of the committee to organise & monitor works ("COST").			Χ									
Tender process for the first delivery of cement for the breezeblock-making and			Χ									
transporter.												
Recruitment of 2 storekeepers/community mobilisation agent for Ifanirea (half-way			Х									
storeroom) and Akondromainty.												
Drawing-up of a transport plan for the delivery of materials.			Х									
Materials delivery by truck from Fianarantsoa to Ifanirea via Manakara.				Χ	Х		Х	Х	Х	Х	Χ	Х
Transporting of materials from Ifanirea to Akondromainty on foot.				Х	Χ		Х	Χ	Χ	Χ	Χ	Χ
Contracting with the stone-breakers & cement breeze-block makers.				Х								
Identification of materials suppliers (cement, iron and other accessories).				Х	Х	Χ						
Monitoring of community contributions to the project and preparatory activities.					Χ	Χ						
Contracting with the builder team.						Χ						
Preparation of the land before building (levelling, clearing, etc.).					Χ	Х						
Foundation-laying ceremony (20/12/2019).						Χ						
Laying the foundations of the building.						Х	Х					
Christmas/New Year break (25/12/2019 – 10/1/2020)						Χ	Х					
Wall elevation & general building works.							Х	Х				
Monitoring trips by the technical team.						Χ		Χ		Χ	Χ	Χ
Laying the roofing.									Χ			
Building the ceilings: Laying the formwork lattice & plastering.									Χ	Х		
Door, window & protective grid installation.										Х		
Interior & exterior plastering.										Х	Х	
Tile laying.										Х	Х	
Sanitation works (toilets, rainwater catchment, shower) & building the gazebos.									Χ	Х	Х	
Completion of construction.											Х	
Technical acceptance of works & delivery of the keys (25 th May).				_			_				Х	_

Activities	July	August	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June
Activities	2019	2019	2019	2019	2019	2019	2020	2020	2020	2020	2020	2020
Training of the 'CER' (Maintenance & Repairs Committee) & provision of tool kit.											Χ	
Delivery of medical equipment.											X	X



Figure 4: Akondromainty Health Centre before (left) and (right) on completion.

Details on the project

1- Preparation phase

After receiving confirmation of funding for this project from the Eagle Foundation, an initial meeting was held with the community of Akondromainty so as to draw-up an action plan related to achievement of the beneficiary contributions and to select the members of the local Committee to organise and monitor works ("COST"). A training was held for them to fix the procedures and rules that would apply before, during and after the construction work.



Figure 5: Initial community meeting in Akondromainty; reading the convention & agreeing to its content.



A convention was signed between FBM-NT and the community, detailing each stakeholders' roles and responsibilities in the project. A work plan was developed for the delivery of materials to a half-way storeroom in Ifanirea (last point of delivery by truck) and the carrying of these materials from there to Akondromainty (17km or a 3 hours' walk each way involving crossing the Manambondro River by canoe), and to determine the date of the builders' start of work. During this meeting, subjects covered included the builders' accommodation, identification of a storeroom in Akondromainty, a plan for transporting materials on foot, and the rota to ensure the presence of 15 local labourers everyday throughout the duration of work.

At the FBM-NT office in Fianarantsoa, a transport plan for hardware delivery was drawn-up based on the timing of needs of the builders and availability and price of different materials in Manakara. Significant preparations required before the start of construction work included the procurement process, and the contracting of cement breeze-block makers, stone-breakers and builders. Two storekeepers were contracted – one for the mid-way storeroom in Ifanirea and the other for Akondromainty. Materials that had to be ordered from Fianarantsoa (and Antananarivo) were stored in Ny Tanintsika's regional office in Manakara before being transported to the storeroom Ifanirea.

The following diagram shows the different stages of delivery of materials from the FBM-NT office in Fianarantsoa to the project site in Akondromainty.

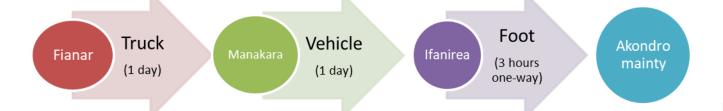




Figure 6: The 'ferry' crossing at Angado.





Figure 7: Challenges in accessing Akondromainty: treacherous bridges between Vohipeno & Ifanirea, canoe crossing between Ifanirea & Akondroaminty, & boggy mountainous walk for the last stretch.





2- Building phase

This project was late starting, particularly due to the difficulty of accessing the project site, as well as difficulties in carrying out work during the mayoral electoral period from October – November when there was a lot of campaigning going on, and large meetings were prohibited.

Building work started on the 21st December 2019 when the foundations-laying ceremony was held with the local community and the local and traditional authorities.

Building work was suspended for the Christmas and New Year holidays, and restarted on the 13th January 2020.

However, community members had been busy throughout transporting materials from Ifanirea to Akondromainty. After initial difficulties organising this, the traditional authorities (Kings) took charge – splitting responsibility across the 4 different 'Tranobe' (King's houses) in the area. This largely resolved issues related to community contributions to the project.



Figure 8: The 4 Kings, heads of the different 'Tranobe' in Akondromainty area.

Nonetheless, since the period coincided with the rainy season and the rising water-level of rivers, there were significant challenges in transporting materials both to Ifanirea (involving the crossing of over a dozen precarious bridges in addition to a manpowered 'ferry'), and on foot to Akondromainty. Certain delays ensued, impacting on the speed of building work.



Figure 9: Carrying materials by foot (left) & women collecting sand (right) for building work.





Figure 10: Transporting materials on foot to Akondromainty.

The COST members had the role of surveying work every day at site, recording events and controlling the movement of the stock of materials in the warehouse with the storekeeper, as well as the presence of local labourers. Community contributions also included some local materials such as building stones, gravel, sand and wood, and local labour.

The onset of the COVID-19 pandemic in Madagascar also caused some delays; initially because authorities stopped the movement of people including for the transport of materials to Akondromainty, and also due to vehicular travel restrictions to the area.

The technical acceptance of works ceremony was held on the 25th May 2020 with the relevant officials and local community - the representative of Ikongo District Hospital, the Mayor of the rural municipality of Kalafotsy, the traditional authorities, the Doctor (head of Akondromainty Health Centre), the local community, the builders and FBM-NT. After visiting the building (exterior and interior) as well as examining the rainwater catchment system, sanitation block and two gazebos, just two remarks were mentioned:

- That the community should finish certain tasks including; finishing touches to the palm roofing of one of the gazebos, digging a small ditch around the health centre to channel rainwater away, planting a lawn around the health centre (to help in-filtration of rainwater & lessen mud), planting anti-erosive vetiver plants on the slopes around the boundary of the Health Centre, improving access to the sanitation block and incinerator via steps down, and ensuring the path to the health centre allows for wheelchair access.
- That FBM-NT should re-solder some of the metal doors (due to damage caused during transport), deliver the remaining furniture/equipment (these have been achieved) and a metal ladder to access the impluvium rainwater tank.



Figure 11: The community will be improving water evacuation channels & planting grass around the Health Centre.

Various speeches were made to acknowledge the Eagle Foundation, FBM-NT, the builders, the COST members and everybody else who helped make the project a success. The keys to the health centre were officially handed over to the new owners. This was also an occasion to officially hand-over COVID-19-related materials such as the disinfection kits, hand-washing units and soap, and malaria medicine. The women's and men's football teams were also provided with new shirts/shorts and balls as a means of rewarding them for their hard work.



Figure 12: Efforts to enforce social distancing during the ceremony of the technical acceptance of work. Below right: The Mayor of Kalafotsy addressing participants in the presence of a representative from the Ikongo district health authorities.



Figure 13: The football teams in Akondromainty delighted with their new kits.



Figure 14: Members of the CER committee, the health centre head, the mayor, the representative of the district health authorities, and representatives from the FBM-NT team.



Figure 15: Some of the team of builders and storekeeper outside the health centre.

3- Post-construction phase

A training was held for 10 members of the CER (Maintenance & Repairs) Committee on the 25th May 2020, covering the following topics:

- What 'maintenance' of the health centre involves.
- What 'repairs' of the health centre might involve, and how to manage that.
- The roles and responsibilities of the CER Committee.
- The tool-box and its management.
- Record book and reporting requirements.
- Ways to raise money to finance any necessary maintenance / repairs.
- Workplan.



Figure 16: Training of members of the CER committee in the health centre.

A guarantee period of 2 months was fixed with the builders, after when they will carry out any corrections required to the building and its accessories.

Furniture and equipment provided to Akondromainty Health Centre is as follows:

Furniture	Number
Desk	02
Chair	10
Office cupboard	02
Noticeboard	01
Stools	02
Bedside tables	10
Bench	10

Furniture	Number
Metal delivery table	01
Steps for delivery table	02
Metal bed	10
Mattress with cover	10
Shelves (shelving)	02
Mosquito nets	20
Hygiene equipment:	
15 litre Bucket	08
Small Bowl	06
Rubbish bins	10
Large Bowl	04
Laundry brush	10
Metal jugs (scoopers)	10
Мор	01
Brooms	07
Floor cleaning products	03
Padlocks	27
Bed sheets	20
Hospital gowns	20
Rubbish bins	10
Pairs of curtains & curtain rails /	18
accessories	

The toolkit provided contains the following items:

- 1 pliers
- 1 universal pliers
- 1 hammer
- 2 different trowels
- 2 different screw-drivers
- 1 saw



Figure 17: The tool box.

As explained in the proposal, this health centre/village was already provided with a source of clean drinking water via the drilling of a borehole and its installation with a hand-pump in October 2018. This is still fully functional and remains the only source of potable water for the village.



Figure 18: Akondromainty health centre & village's borehole.

General description of the infrastructure:

The Akondromainty Health Centre building measures 18.20m x 10.3m with a height of 4.8m (ceiling height of 3.5m). The building is made of cement breeze-blocks, dimensions 15x20x40cm.

• Verandas on two sides of the building.





Figure 19: The front & back of the health centre.

An L-shaped hospital ward for the sick (with an attached shower), the Doctor's surgery, the midwife's
consultation room, a pharmacy, a treatment room, a delivery room and a maternity ward (with an
attached shower).



Figure 20: The maternity ward & adjoining shower.

- Stone foundations and cement breezeblock walls with a reinforced concrete structure.
- Cement rendering on inside and outside walls. Cyclone-proof tin roofing.
- 7 exterior metal doors with hooks to hold them open on the outside, and glass-paned interior doors painted with white oil paint. 3 inside wooden doors between rooms, and 2 doors to the shower rooms. In addition, an additional protective door grid between the storeroom and the dispensary.



Figure 21: The protective door grid between the storeroom & the dispensary.

- A total of 10 windows. Windows with glass panes, opening to the inside with metal security bars on the outside.
- Front and back guttering (integrated into the building design) with 4 down-pipes, and linking to a 8m³ water tank serving as a hand-washing station to the right side of the building between the toilets and the health centre to promote hand-washing at key moments. This is connected to 3 taps. This integrates a system to prevent the first rains (which brings the dirt from the roof) from entering the tank. The tank is located on the side between the toilets and the health centre to promote hand-washing at key moments. The tank is equipped with a locked manhole cover on the top to enable cleaning / maintenance as well as filling by hand during the dry season.



Figure 22: The impluvium water tank & hand-washing station.



Figure 23: The down-pipe 'disaffection' system to prevent the first rains (which bring dirt from the roof) from entering the water tank.

Installation of a sink in the delivery room, linked to the rainwater catchment tank.



Figure 24: Sink in the delivery room.

- Two-tone colouring (interior and exterior); for the exterior: dark grey oil paint at the base aligned to the lower part of the window (to protect from dirt) and water-based light grey exterior water paint higher-up. For the interior, two-tone oil paint; dark brown to a height of 1.5 metres, then white water paint to the ceiling. Cement ceilings painted with oil paint.
- Laying of floor tiles for all the rooms apart from the dispensary and the medicine storeroom, which
 have concrete flooring. Tiling is particularly important for hygiene in the delivery room and the
 treatment room.
- An outdoor sanitation block comprising five fly-proof, washable toilet compartments (1 for the sick ward, 1 for the maternity ward, 2 for outpatient use and 1 for health centre workers), with urinals on the posterior side.



Figure 25: The external sanitation block (5 toilet compartments).

Evacuation of urine from the urinal into the latrine pit, with an inclined urinal slab. Existence of ventilation and luminosity on both sides of the sanitary block. Installation of a pipe (PVC 60) from the pit to the top of the roof to reduce odour. The block was painted the same colour combination as the main health centre building. Eucalyptus wood door with aeration and luminosity space at the top, with single bolt inside and padlock on the outside door.

• Sheet metal roof covering the urinals (to prevent rain water from entering the pit). Indication for male and female urinals.



Figure 26: The female urinal.

 3 outdoor shower cubicles for bucket-showers, laid with tiles and with water outlet and ventilation at the rear. Corrugated iron roof and eucalyptus wood door with aeration and luminosity space at the top, with single bolt inside and padlock door outside. The showers were painted the same colour combination as the building.



Figure 27: The outdoor shower block.



Figure 28: The outdoor shower block.

• 2 gazebos were built to be used as waiting rooms or sheltered rest spots outside the health centre. These were made of local materials: « Ravinala » travellers' palm leaf roof (provided by the local community), eucalyptus wood frame and a concrete bench on 3 sides.



Figure 29: Gazebo design next to the health centre.

- A sign was placed outside the building with the name of the Akondromainty Health Centre, the name of the donor and partners, and two awareness-raising messages: « Fanana iombonana ka arovy sy kajio mba haharitra » (Look after communal property so that it lasts a long time) and « Ny fahasalamana no voalohan-karena » ("Health is the greatest wealth").
- An incinerator was built below the sanitation block to dispose of health centre waste in a safe manner.



Figure 30: Health centre incinerator for safe waste disposal.

An outdoor washbasin for clothes washing was built on the request of beneficiaries.



Figure 31: Washbasin outside the health centre.

Project beneficiaries

Direct beneficiaries are the people served by this health centre, currently numbering 10,989 divided into 9 neighbourhoods: Kalafotsy (2,399), Ambahaka (1,500), Voena (749), Ihazomena (1,310), Mahafiango (649), Akondromainty (1,434), Marozahitra (1,243), Ambalatenina (641) and Ambalavary (1,064). On average there are 457 monthly consultations.

Indirect beneficiaries are the numerous visiting traders/ seasonal workers in the area, who come mainly from the western side of the rainforest in the Ambohimahamasina area.



Figure 32: Views of Akondromainty village.



Expenditure summary

Budget line	Budget (£)	Funds received (MGA)	Expenditure (£)	Difference with amount received (£)	Explanation for difference
Building materials	22,745.05	101,793,929.58	20,471.40	2,273.54	Material quantities overestimated in budget, & significant savings on tiles.
Furniture & equipment	4,707.50	21,068,097.17	4,641.29	66.18	
Transport	6,185.00	27,680,548.27	5,661.17	523.80	
Labour	7,567.50	33,867,833.31	7,356.79	210.68	
Monitoring & evaluation	2,540.00	11,367,597.83	2,413.37	126.62	
Project management	3,279.19	14,675,785.86	3,202.10	77.07	
Total	47,024.24	210,453,792.02	43,746.12	3,277.88	



Figure 33: The district health authority representative & FBM-NT engineer at the entrance to Akondromainty health centre, with COVID-19 prevention measures visible.

Conclusion

This project was very challenging one – what with the logistical difficulties in transporting materials so far, and overlap with the electoral period, the rainy season and the onset of Coronavirus in Madagascar. Nonetheless, all obstacles were surmounted and the project was a huge success – yet again local communities demonstrating amazing determination, stamina and solidarity towards their goal of improving health.

The Health Centre's head was impatient to move into the new building, although the previous building continues to be used as a back-up for the sick and for storage – particularly since the district health authorities are responsible for moving their existing solar panels and fridge to the new building.

Frequentation of the Akondromainty Health Centre has been steadily increasing since the arrival of the health centre's new head in September 2017, particularly for diseases such as malaria and bilharzia which are highly prevalent in the area. However, provision of this new infrastructure significantly improves the quality of healthcare and treatment services, and is all the more important in the current COVID-19 crisis. Community ownership of the health centre is strong, particularly given the enormous efforts that were undertaken to complete it, and illustrated by the health centre head's suggestion to set a minimal charge for hospital use to go towards maintenance and repairs costs.

Thank-you Eagle Foundation for funding this project!



Figure 34: View of Akondromainty Health Centre from the village.

Appendix 1: Technical acceptance of works document



NY TANINTSIKA Lot II M 98 i Antsakaviro, Antananarivo 101 Tél : (00 261) (0) 34 17 274 45

BP 1345, Fianarantsoa 301 Tel : 75 512 43 Email : nt.fnr@moov.mg www.nytanintsika.org

	**
TRAVAUX DE CONSTRUCTION D'UN CSB II AKONDROMAINTY, CR DE KALAFOTSY, DISTRICT D'IKONGO , REGION VATOVAVY FITO VINANY	
PROCES-VERBAL DE RECEPTION PROVISOIRE	
L'an deux mille vingt, et le, mois de, nous, membres de la commission de réception de travaux, sommes rendu sur le chantier pour constaté l'achèvement des travaux de construction d'un CSBII à Akondromainty et de procéder à la réception provisoire de travaux cité en objet.	
Etalent présent: - DIDIER Ansolme Germain (Maire) - Madame PAMERON Sauvantha Elsa Aira DALMANY Tsiramy (Superviseur TN) - FAMOREEMARE MY She Advan (chefore)	
- LANGE AND	
réalisés en totalité et répondent dans l'ensemble aux exigences des contrats et des règles de l'art. Toutes les anomalies sur les travaux, citées lors de la réception techniques sont réparées.	
En effet nous prononçons la réception provisoire les dits travaux.	
En fois de quoi, nous avons dressé le présent procès- verbal pour servir et valoir ce que le droit.	
Fait a Akondromainty, CR KALAFOTSY le jour, mois et an que dessus.	
REPRESENTANT DES BENEFICIAIRES REPRESENTANT DE NY TANINTSIKA REPRESENTANT DU PRESTATAIRE	nant n
SOUTH AND Sermain	

Appendix 2: Attendance list at training of the CER Committee



NY TANINTSIKA Lot II M 98 i Antsakaviro, Antananarivo 101 Tél : (00 261) (0) 34 17 274 45

BP 1345, Fianarantsoa 301

Tel: 75 512 43 Email: nt.fnr@moov.mg

TRAVAUX DE CONSTRUCTION D'UN CSB II AKONDROMAINTY, CR DE KALAFOTSY, DISTRICT D'IKONGO, REGION VATOVAVY FITO VINANY

FICHES DES PRESENCES Contacts/Laharana 2020 (CSBII Ankondromainty CER Formation Emargements/ Fonctions/ Nom et Prénom/ Sonia téléphoniques No Andraikitra Anarana sy Fanampiny TANOTIECASTRACIANY
She ASWa
DIDIER ASSEMBLE GESTALIN 0348576623 chefe8Bi 51 0345267676 MAIRE 2 CAMERON 0341094074 CIR Ny Tantone 3 Samentha 0346055288 IN ADJOINT an RANDOSANTRINA h MAIRE Maxin BASS BANAHAZO SOUVENIRA Tresories 5 TOMBOTSONR 0343333833 lomarouna 9 Røger 0349550733 1 SARABA FY Bound Calle Mjoom pianataa 10 Jacquis Arman Berrefain 034933741 Sina BALAIAUX 034 60268 34 12

Appendix 3: Thank-you letters

DRSP : VATERALY FITOVINANY

CASP: IKONGO

ESBI : KONDROKMNTY
FORMATANY: KONDROMMNY

TARATASY FISADRANA NT/Feedback Hadagascar et Fondation Bougle

Tompoles ...!

Voninshites handy Tokonolona eto kondromainty izay Isolami Aton Lehiberines tobimerhase among tena no shazoanay mandofa ity taratasy ity ko aminaceo ONG NY TANINTSIKA ho fissorana sy Fankasitra hana analeo Hohon ny fanomezanareo anay my foto dra fitrasa lehi be (CSB) 12 ay naoriinareo eto amin'ny tokontaminary Enganie Andriamanitring fahasowane lemie no from 80 8 hitchy ancies ka ho ele velone Kou araka izany arej izahay roken olona dia manaika marina fa hanaja ny ptsipika rehetral noulaza ao anatiny pjanarahana ara-kasa midrindrioi ndrin ny mikas ka ny phoja bajana ny fotodra fitaasa mba haharitra. Raiso tou pok vy haja smambouinalutra lelibe atoletra anares ANOMEZAMPARANY Elle Dolva Réalisateur Adjoint de la Santé Diplomé d'Etat KOIDIER Anselme Germain

"Thank-you letter to NT/Feedback Madagascar & Eagle Foundation.

It is an honour for us the community here in Akondromainty, represented by the head of the health centre, to present our gratitude and thanks for your gift of this great infrastructure (health centre). May God bless and guide you and give you long life. We, the community, agree to respect all the conditions set out in the convention, particularly in relation to the maintenance of the health centre so that it brings benefits long into the future. Please accept of greatest respects."

Signed by the head of the health centre, the Kings and the Mayor of Kalafotsy.



MINISTERE DE LA SANTE PUBLIQUE

SECRETARIAT GENERAL

DIRECTION REGIONALE DE LA SANTE PUBLIQUE VATOVAVY FITOVINANY

SERVICE du DISTRICT de la SANTE PUBLIQUE IKONGO

Ikongo le : 26 Mai 2020

Lettre de remerciement

- Apres réception technique du CSB2 Akondromainty (7 salles, 2 salles pharmacies, 5WC, 3douches, hall d'attente, incinérateur, lavoir, pissoir,.....)
- Dotation produit Palu pour les CSB2 Ankondromainty, CSB2 Ankarimbelo, et CSB1 Faliarivo
- Dotation des matériels en matière de Réponse COVID-19 (bidons LMS, savon, produits de nettoyage et outils IEC aux CSB dans les communes (Ambohimisafy, Tolongoina, Manampatrana, Ambinanitromby, Maromiandra, Ambatofotsy, Ikongo, Ambolomadinika, Antodinga, Ankarimbelo et Kalafotsy)

Nous tenons à vous remercier et à vous féliciter votre apport et contribution pour améliorer l'accès universel aux offres de services et soins essentiels intégrés de qualité en vue d'un meilleur état de santé de la population et sa protection face aux éventuelles situations d'urgence sanitaire.

Dans l'attente d'une nouvelle collaboration

Très cordialement!

Le médecin Inspecteur

Specialis te en Sante Publique et Communautaire onn. 02 11 21 31 432 3499

30

Appendix 4: Receipts of equipment



NY TANINTSIKA
Lot IIM 98i Antsakaviro
Antananarivo 101
Lot 089/3606-02 Ivory Avaratra
BP 1345, Fianarantoa 301
Tel: 75 512 43
Email: nt.fnr@moov.mg

Realisateur Adjoint de la Sante Diplo

BON DE LIVRAISON

Date: 22/05/2020

Projet:

CSB ANKONDROMAINTY

DESIGNATION	Qté	Unité	Observation
Tableau noir	1	U	pour affichage
Seau 15 litre	8	U	
Cuvette GM	4	U	
Cuvette PM	6	U	
Moustiquaire	20	U	
Ba lai rasta	7		Kits desirfection wille
Serpillère	7	U	
Cire JEWEL	3	U	
Balai brosse	7	U	
Zinga inox	10	U	
Borosy coco	3	U	
Borosy lamba	10	U	
Tenaille	1	u	
Pince universelle	1	u	
Marteau	1	u	
Truelle langue de chat	1	u	
Truelle GM	1	u	KIT CER
Tournevis plat	1	u	KITCEN
Tournevis parker	1	u	
Scie egoine	1	u	
Cadenas	1	u	
Boîte à outils	1	u	
Drap	10	u	
Ankanjo mandry	20		
Rideau	36		
Housse	10		
Cadenas 45 mm	9		
Cadenas 55 mm	18		

Remettant		Recevant	
Porte rideau court	9		
Porte rideau long	9		
Support porte rideau	38	equivaut à 19 paire	
Bonhomme	18		
Corde rouleau 2 mm	1		

CAMORON. S.



Lot II M 98 i Antsakaviro
ANTANANARIVO
Près lot 089/3506-02 Ivory Avaratra
BP 1345, Fianarantsoa 301
Tel: 020 75 512 43
Email: nt.fnr@moov.mg

		Binair, mijii Sirot	
3/105120 BOND	E LIVRAISON	Projet: Gayle	CSBR (Manchell
Désignation	Unité	Nombre	Observation
Let metallique	AD	010	
Lit d'accombement	U	1	
nutelus une place	U	10	
marche a pred	U	02	
Tableau main (1m20x80)	U	01	
Tuyen PVC 40	Mail		
Coude 200	U	: 01	
Proubelle mois	U	ah	(courtre)
Pouble Violet	U	06	
Rideau + Abanjo mandry	Caston	67	Ridean 36
1 1		1	
*		1.	
			*
		· · · · · · · · · · · · · · · · · · ·	
	-	+	
	+		
•	-	-	•
	1	+	*
			A
		1	
		<u> </u>	
		Récevant	Alexant !!
Rell			(Verle
	. u	180.00	S O leavinge
Chanffeir	FNS	uffeur. 1. Hans kass	Rewent If
40		1. 9	
Though Thousand	. 80	The state of the s	
Manokara I fanere.		0343691	x875
Le Transporteur Donatien 41 Sometien		000000	
Donatien of Amotion			
Pr Bonn Well			

Appendix 6: Photos showing the evolution of building work



























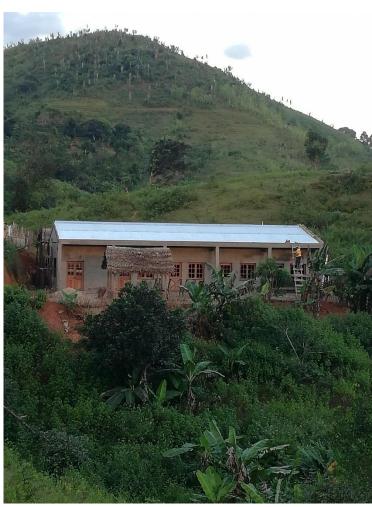




































Appendix 7: Additional COVID-19 measures



Figure 35: Special travel authorisation document obtained from the regional Centre of Commandment anti-COVID19.



Figure 36: 'Sanitary barriers' on the road (checking authorisation & temperature).

