Audit Of Medical Record Usaid Assist

Trade integration contributes substantially to economic development and poverty alleviation. In recent years much progress was made to liberalize the trade regime, but customs procedures are often still complex, costly and non-transparent. This situation leads to misallocation of resources. 'Customs Modernization Handbook' provides an overview of the key elements of a successful customs modernization strategy and draws lessons from a number of successful customs reforms as well as from customs reform projects that have been undertaken by the World Bank. It describes a number of key import procedures, that have proved particularly troublesome for customs administrations and traders, and provides practical guidelines to enhance their efficiency. The Handbook also reviews the appropriate legal framework for customs operations as well as strategies to combat corruption.

"An extensive collection of significant documents covering all major and minor issues and events regarding terrorism. Government reports, executive orders, speeches, court proceedings, and position papers are presented in full text reprint"--Oceana Website.

This report describes the current situation with regard to universal health coverage and global quality of care, and outlines the steps governments, health services and their workers, together with citizens and patients need to urgently take.

"This Circular establishes Federal policy regarding the performance of commercial activities," i.e., Federal policy on whether government agencies should produce goods and services in-house or contract them out to commercial sources. Cf. pp. 1-2.

Adopting electronic recording and reporting is not simply about choosing a piece of software: it is also about changing how people work. This is not a simple undertaking. This document introduces the key questions to be considered and illustrates what the questions, options and recommendations mean in practice by drawing on examples of recent experience from a variety of countries. It is an essential resource for all those planning to introduce electronic recording and reporting systems for TB care and control, or to enhance existing systems--Cover p. 4.

The adulteration and fraudulent manufacture of medicines is an old problem, vastly aggravated by modern manufacturing and trade. In the last decade, impotent antimicrobial drugs have compromised the treatment of many deadly diseases in poor countries. More recently, negligent production at a Massachusetts compounding pharmacy sickened hundreds of Americans. While the national drugs regulatory authority (hereafter, the regulatory authority) is responsible for the safety of a country's drug supply, no single country can entirely guarantee this today. The once common use of the term counterfeit to describe any drug that is not what it claims to be is at the heart of the argument. In a narrow, legal sense a counterfeit drug is one that infringes on a registered trademark. The lay meaning is much broader, including any drug made with intentional deceit. Some generic drug companies and civil society groups object to calling bad medicines counterfeit, seeing it as the deliberate conflation of public health and intellectual property concerns. Countering the Problem of Falsified and Substandard Drugs accepts the narrow meaning of counterfeit, and, because the nuances of trademark infringement must be dealt with by courts, case by case, the report does not discuss the problem of counterfeit medicines.

Most industries have plunged into data automation, but health care organizations have lagged in moving patients' medical records from paper to computers. In its first edition, this book presented a blueprint for introducing the computer-based patient record (CPR). The revised edition adds new information to the original book. One section describes recent developments, including the creation of a computer-based patient record institute. An international chapter highlights what is new in this still-emerging technology. An expert committee explores the potential of machine-readable CPRs to improve diagnostic and care decisions, provide a database for policymaking, and much more, addressing these key questions: Who uses patient records? What technology is available and what further research is necessary to meet users' needs? What should government, medical organizations, and others do to make the transition to CPRs? The volume also explores such issues as privacy and confidentiality, costs, the need for training, legal barriers to CPRs, and other key topics.

Identifies and describes specific government assistance opportunities such as loans, grants, counseling, and procurement contracts available under many agencies and programs.

Social justice is a matter of life and death. It affects the way people live, their consequent chance of illness, and their risk of premature death. We watch in wonder as life expectancy and good health continue to increase in parts of the world and in alarm as they fail to improve in others.

* Brief, readable field guide also suitable for classes in public health and development * Compelling case studies with best practices examples from Africa, Central Europe and South America Corruption is a serious problem for both rich and poor countries, threatening international development and eroding confidence in governments. In the health sector, corruption is literally a matter of life and death: facilities crumble when repair funds are embezzled; fake drugs flood the market with corrupt regulators managing supply, and doctors extorting under-the-table payments from patients fail to provide needed care. Most major development organizations have rewritten their anticorruption strategies in the last five years, hinting that reform is within reach. But these strategies pay little attention to incentives and capacity at the sector level. Those preparing to fight corruption in the health sector have very few resources to guide them until now. Anticorruption in the Health Sector brings practical experience to bear on anticorruption approaches tailored specifically to health. The contributors, all skilled practitioners, address the consequences of different types of corruption and show how agencies can more effectively address these challenges as an integral part of their development work. Both practitioner and classroom-friendly, this book finally addresses a neglected issue that has so much bearing on global health and governance.

Unlike the wars in Vietnam and Iraq, the US invasion of Afghanistan in 2001 had near-unanimous public support. At first, the goals were straightforward and clear: to defeat al-Qaeda and prevent a repeat of 9/11. Yet soon after the United States and its allies removed the Taliban from power, the mission veered off course and US officials lost sight of their original objectives Despite recent successes in Afghanistan -- increased economic growth, more student enrollments in schools, and better access to health care ¿ continuing violence and underdevelopment in

the provinces threaten to undermine the legitimacy of the gov¿t. In Oct. 2006 USAID/Afghanistan launched its Local Governance and Community Development Project in the southern and eastern provinces The project included four components: (1) supporting local public admin. and governance; (2) promoting community mobilization and development; (3) aiding local stability initiatives; and (4) providing expertise to support the reconstruction teams¿ mandate. This audit determines whether USAID/Afghanistan¿s Project was achieving planned results. A print on demand report.

The promotion of maternal health and mortality reduction is of worldwide importance, and constitutes a vital part of the UN Millennium Development Goals. The highest maternal mortality rates are in developing countries, where global and regional initiatives are needed to improve the systems and practices involved in maternal care and medical access. Taking a practical policy approach, this book covers the background and concepts underlying efforts to improve maternal and perinatal mortality, the current global situation and problems that prevent progress.

Based on careful analysis of burden of disease and the costs ofinterventions, this second edition of 'Disease Control Priorities in Developing Countries, 2nd edition' highlights achievable priorities; measures progresstoward providing efficient, equitable care; promotes cost-effectiveinterventions to targeted populations; and encourages integrated effortsto optimize health. Nearly 500 experts - scientists, epidemiologists, health economists,academicians, and public health practitioners - from around the worldcontributed to the data sources and methodologies, and identifiedchallenges and priorities, resulting in this integrated, comprehensivereference volume on the state of health in developing countries.

Disposition of Electronic Records (NARA Bulletin 99-05).Audit ReportUSAID/Laos National Health Development SectorImproving Health Care in Low- and Middle-Income CountriesA Case BookSpringer Nature

The U.S. Agency for International Development (USAID) and Department of State (State) provide democracy assistance for Cuba aimed at developing civil society and promoting freedom of information. Typical program beneficiaries include Cuban community leaders, independent journalists, women, youths, and marginalized groups. USAID receives the majority of funding allocated for this assistance, although State has received 32 percent of funding since 2004. In recent years, both USAID and State have provided more funding for program implementation to for-profit and nongovernmental organizations (NGO) with a worldwide or regional focus than to universities and to NGOs that focus only on Cuba. All types of implementing partners, but worldwide or regional organizations in particular, used subpartners to implement program activities under 21 of the 29 awards and contracts that GAO reviewed. USAID and State legal officials view the Cuba democracy program's authorizing legislation as allowing the agencies discretion in determining the types of activities that can be funded with program assistance. Agency officials added that the agencies ensure that program activities directly relate to democracy promotion as broadly illustrated in related program legislation. The officials stated that organizations are expected to work with agency program officers to determine what activities are permitted or appropriate. In addition, they said that program partners and subpartners are expected to spend U.S. government funds consistent with U.S. laws, and that requirements in primary award agreements generally flow down to any subpartners. USAID has improved its performance and financial monitoring of implementing partners' use of program funds by implementing new policies and hiring contractors to improve monitoring and evaluation and to conduct financial internal controls reviews, but GAO found gaps in State's financial monitoring. While GAO found some gaps in implementing partners' performance planning and reporting, both agencies are taking steps to improve performance monitoring. For financial monitoring, USAID performs financial internal controls reviews of its implementing partners with the assistance of an external auditor. Since 2008, USAID has used a risk-based approach to determine the coverage and frequency of the 30 reviews the auditor has conducted, which have identified weaknesses in implementing partners' financial management, procurement, and internal controls. However, because of resource constraints, State did not perform financial internal controls reviews for more than two-thirds of its implementing partners during fiscal years 2010 through 2012. State procured an external financial auditor in September 2012 that plans to review more than half of State's implementing partners, and has taken steps toward implementing a risk-based approach for scheduling these reviews. Federal regulations generally require agencies to approve the use of subpartners. GAO found that USAID issued specific guidance in 2011 to its implementing partners on requirements for subpartner approval. While State told GAO it has similar requirements, State's requirements are not clearly specified in its written guidance. As a result, State was not provided with the information it would have needed to approve at least 91 subawards and subcontracts that were obligated under eight awards. Why GAO Did This Study: Since 1996, Congress has appropriated $205 million to USAID and State to support democracy assistance for Cuba. Because of Cuban government restrictions, conditions in Cuba pose security risks to the implementing partners—primarily NGOs—and subpartners that provide U.S. assistance. For this report, GAO (1) identified current assistance, implementing partners, subpartners, and beneficiaries; (2) reviewed USAID's and State's efforts to implement the program in accordance with U.S. laws and regulations and to address program risks; and (3) examined USAID's and State's monitoring of the use of program funds. This report is a publicly releasable version of a Sensitive But Unclassified Report that GAO issued in December 2012. What GAO Recommends: GAO is recommending that State take steps to improve its financial monitoring of implementing partners and provide clear guidance for approving subpartners. State concurred with GAO's recommendations and cited steps they are taking to address them.

Foreign Assistance Programs

What does US aid "buy" in the Middle East? Drawing on extensive primary source research, this book examines the role and consequences of US aid to three countries in the Middle East. The author argues that the political survival strategies of incumbent leaders in Egypt, Israel, and Jordan shaped not only the type of aid that these countries received from the US, but also its developmental and geopolitical impact. Leaders who relied heavily on distributing selective benefits to their ruling coalitions were more likely to receive forms of US aid that complemented their distributive political economies and undermined the state's developmental capacity, which simultaneously rendered them more

dependent on US resources, and more likely to cede fragments of their sovereignty to their major donor. Non-distributive leaders, however, could reap the full benefits of highly discretionary and technologically sophisticated aid, incorporating it into developmental policies that rendered them progressively less dependent on Washington—and better able to say "no" when it was in their best interest.

Since 1995, 17 African countries have defied expeotations and have launched a remarkable, if little-noticed, tumaround, Emerging Africa describes this revitalization and why it is likely to continue. "Steve tosses out the stereotypes and unearths reality...A meticulous and fascinating account of sub-Saharan Africa's most successful economies."---Bono, lead singer of U2 and co-founder of ONE and (RED) "Steve Radelet's comprehensive analysis provides further grounds for optimism that improved macroeconomic management in a significant number of countries is producing tangible results, including resilience to recent shocks. It makes an important contribution to mounting evidence of sustainable economic improvements across the continent, while being realistic about the effort needed to tackle remaining challenges."---Antoinette Monsio Sayeh, former Minister of Finance of Liberia and Director, African Department, International Monetary Fund "Africa is too often used as a blunt weapon to score points in debates about hopeless poverty or desperate need. Radelet uncovers the national success stories that are lost in `the Africa debate,' He has done Africa and the citizens of these good performers a great favor."---Lord Mark Malloch-Brown, Monitor Group, former Minister of State, United Kingdom "African is in flux. Many countries have learned from past mistakes and now face huge new opportunities. Yet much of this has gone unnoticed. Radelet's important book will open your eyes to the new realities."---Paul Collier, Oxford University, author of The Bottom Billion

This book provides a practical guide to the design and implementation of health information systems in developing countries. Noting that most existing systems fail to deliver timely, reliable, and relevant information, the book responds to the urgent need to restructure systems and make them work as both a resource for routine decisions and a powerful tool for improving health services. With this need in mind, the authors draw on their extensive personal experiences to map out strategies, pinpoint common pitfalls, and guide readers through a host of conceptual and technical options. Information needs at all levels - from patient care to management of the national health system - are considered in this comprehensive guide. Recommended lines of action are specific to conditions seen in government-managed health systems in the developing world. In view of common constraints on time and resources, the book concentrates on strategies that do not require large resources, highly trained staff, or complex equipment. Throughout the book, case studies and numerous practical examples are used to explore problems and illustrate solutions. Details range from a list of weaknesses that plague most existing systems, through advice on when to introduce computers and how to choose appropriate software and hardware, to the hotly debated question of whether patient records should be kept by the patient or filed at the health unit. The book has fourteen chapters presented in four parts. Chapters in the first part, on information for decision-making, explain the potential role of health information as a managerial tool, consider the reasons why this potential is rarely realized, and propose general approaches for reform which have proved successful in several developing countries. Presentation of a six-step procedure for restructuring information systems, closely linked to an organizational model of health services, is followed by a practical discussion of the decision-making process. Reasons for the failure of most health information to influence decisions are also critically assessed. Against this background, the second and most extensive part provides a step-by-step guide to the restructuring of information systems aimed at improving the quality and relevance of data and ensuring their better use in planning and management. Steps covered include the identification of information needs and indicators, assessment of the existing system, and the collection of both routine and non-routine data using recommended procedures and instruments. Chapters also offer advice on procedures for data transmission and processing, and discuss the requirements of systems designed to collect population-based community information. Resource needs and technical tools are addressed in part three. A comprehensive overview of the resource base - from staff and training to the purchase and maintenance of equipment - is followed by chapters offering advice on the introduction of computerized systems in developing countries, and explaining the many applications of geographic information systems. Practical advice on how to restructure a health information system is provided in the final part, which considers how different interest groups can influence the design and implementation of a new system, and proposes various design options for overcoming specific problems. Experiences from several developing countries are used to illustrate strategies and designs in terms of those almost certain to fail and those that have the greatest chances of success

"An important tool for hospital administrators, clinic managers, and healthcare professionals working in limited-resource settings to develop their own uniform infection prevention policies and service delivery guidelines."

In 2015, building on the advances of the Millennium Development Goals, the United Nations adopted Sustainable Development Goals that include an explicit commitment to achieve universal health coverage by 2030. However, enormous gaps remain between what is achievable in human health and where global health stands today, and progress has been both incomplete and unevenly distributed. In order to meet this goal, a deliberate and comprehensive effort is needed to improve the quality of health care services globally. Crossing the Global Quality Chasm: Improving Health Care Worldwide focuses on one particular shortfall in health care affecting global populations: defects in the quality of care. This study reviews the available evidence on the quality of care worldwide and makes recommendations to improve health care quality globally while expanding access to preventive and therapeutic services, with a focus in low-resource areas. Crossing the Global Quality Chasm emphasizes the organization and delivery of safe and effective care at the patient/provider interface. This study explores issues of access to services and commodities, effectiveness, safety, efficiency, and equity. Focusing on front

line service delivery that can directly impact health outcomes for individuals and populations, this book will be an essential guide for key stakeholders, governments, donors, health systems, and others involved in health care.

This open access book is a collection of 12 case studies capturing decades of experience improving health care and outcomes in low- and middle-income countries. Each case study is written by healthcare managers and providers who have implemented health improvement projects using quality improvement methodology, with analysis from global health experts on the practical application of improvement methods. The book shows how frontline providers in health and social services can identify gaps in care, propose changes to address those gaps, and test the effectiveness of their changes in order to improve health processes and outcomes. The chapters feature cases that provide real-life examples of the challenges, solutions, and benefits of improving healthcare quality and clearly demonstrate for readers what quality improvement looks like in practice:Addressing Behavior Change in Maternal, Neonatal, and Child Health with Quality Improvement and Collaborative Learning Methods in GuatemalaHaiti's National HIV Quality Management Program and the Implementation of an Electronic Medical Record to Drive Improvement in Patient CareScaling Up a Quality Improvement Initiative: Lessons from Chamba District, IndiaPromoting Rational Use of Antibiotics in the Kyrgyz RepublicStrengthening Services for Most Vulnerable Children through Quality Improvement Approaches in a Community Setting: The Case of Bagamoyo District, TanzaniaImproving HIV Counselling and Testing in Tuberculosis Service Delivery in Ukraine: Profile of a Pilot Quality Improvement Team and Its Scale?Up JourneyImproving Health Care in Low- and Middle-Income Countries: A Case Book will find an engaged audience among healthcare providers and administrators implementing and managing improvement projects at Ministries of Health in low- to middle-income countries. The book also aims to be a useful reference for government donor agencies, their implementing partners, and other high-level decision makers, and can be used as a course text in schools of public health, public policy, medicine, and development. ACKNOWLEDGMENT:This work was conducted under the USAID Applying Science to Strengthen and Improve Systems (ASSIST) Project, USAID Award No. AID-OAA-A-12-00101, which is made possible by the generous support of the American people through the U.S. Agency for International Development (USAID). DISCLAIMER:The contents of this book are the sole responsibility of the Editor(s) and do not necessarily reflect the views of USAID or the United States Government. div=""^

The United States has long recognized that the nation's prosperity and security depend on how we address challenges of disasters, poverty, famine, and disease around the world. The U.S. Agency for International Development (USAID) has played a vital role in promoting U.S. national and international interests by advancing strategies for employing science, technology, and innovation to respond to global challenges. The focus by USAID on science, technology, and innovation is critical to improve development outcomes. At the core of this progress is the engagement of science institutions and other innovative enterprises and their commitment to work in partnership with USAID to research, test, and scale solutions. The Role of Science, Technology, Innovation, and Partnerships in the Future of USAID provides an assessment and advice on the current and future role for science, technology, and innovation in assistance programs at USAID and on the role of partnerships in the public and private sectors to expand impact. This report examines challenges and opportunities for USAID in expanding the utilization of science, technology, and innovation in development assistance; assesses how USAID has deployed science, technology, and innovation; and recommends priority areas for improvement going forward in partnership with others.

Copyright: 4618dcb8ba94a08fb46147fb05857215