



**KII-002: KEY INFORMANT INTERVIEW; DIRECTOR OF HEALTH/ COUNTY  
NUTRITION COORDINATOR (CNC)**

**County:** .....

**Date of interview:** .....

**Enumerator Name:** .....

**Enumerator Number:** .....

**INSTRUCTIONS:**

**Good morning/ afternoon..... The ministry of health both National and County, with support from partners is conducting a nutrition capacity assessment. You have been selected to participate in this assessment. The interview will take about 1 hour. The objective of this assessment is to determine capacity of this County, to deliver nutrition services. Your answers will be useful in documenting the best practices and identifying the areas that require improvement.**

**I am going to ask you some questions about nutrition capacity, please let me know if you need me to clarify any of my questions. Feel free to ask any questions you may have. Can I start now?**

**Time started:** .....

1. a) What are the key indicators for the department in this County?

		Verified Yes 1 No 0	Part of Staff appraisal Yes 1 No 0
1			
2			
3			
4			
5			
6			
7			
8			
9			

*(Probe further for specific indicators)*

2. Does this County hold any health and nutrition sector coordination forum? *(Fill out the table below)*

Forum	Does this County hold the following forums?  Yes – 1, No – 0	Frequency of meetings Never - 0, Annually - 1, Bi-Annually - 2, Quarterly - 3, Monthly – 4	Who are involved in this forum? <i>(Multiple responses possible – Tick all that apply)</i>					Does an operational TOR exist for each of the forums below: Yes-1 No-0
			1 - Govt	2 - NGOs	3 - Academia/Research Institutions	4 - CBOs	5 - Other (Specify)	
County Nutrition technical Forums (CNTF)								
Sub County Nutrition technical forums (SCNTF)								
Multisectoral Platforms (MSP)								
County Health Stakeholders Forum (CHSF)								
County Steering Group Forum (CSGF)								
Others (Specify.....)								

3. a) Has the county enforced Breast Milk Substitute (BMS) Act Yes – 1 No – 0

b) Have you done monitoring and evaluation of the BMS Act in the last 6 months?

Yes – 1 No – 0

4. a) Are the following guidelines being implemented?

I. Human resource for health Norms and standards guidelines for the health sector

Yes – 1 No – 0

II. Scheme of service for Nutritionists and dieticians

Yes – 1 No – 0

b) If Yes How? (*Probe for how they are used for decision making, evidence either qualitative or documentation e.g. staff establishment*)

III. Human resource for health Norms and standards guidelines for the health sector

IV. Scheme of service for Nutritionist and dietician

5. In the last financial year, have County Assembly health committee members attended the following forums?

		Attended Yes 1 No 0	If Yes, Specify type of session
1	Advocacy on Nutrition		
2	Planning and Budgeting forum for Nutrition		
3	Sensitization on Nutrition		
4	Nutrition coordination forums		
6	Nutrition Feedback forums		
7	Other (Specify) _____		
8			
9			

6. a) Has the county conducted a nutrition operational research (Health and Nutrition research eg Vitamin A supplementation in Integrated Community Case Management – ICCM, effectiveness of use of Community health volunteers in Nutrition service delivery etc) in the last 2 years? Yes-1 No-0

b) If No, Why? (*Tick all that apply*)

- i. Lack of technical expertise.....
- ii. Lack of finances.....
- iii. Others, Specify.....

c) If yes, how was the operational research used in decision making? (*Probe*)

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7. What informs budget allocation for the health sector activities?

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8. a) Does the county have a budget line for nutrition activities?      Yes-1    No-0

8b) If No, probe Why? \_\_\_\_\_

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9. (*Use the table below to complete the following*)

a) In the last 3 financial year (FY), what was the total budget for health (In Kenya shillings)?

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b) What was the County nutrition budget allocation (In Kenya shillings)?

c) What was the total County nutrition budget Utilization (In Kenya shillings)?

Year	Total Health allocation	Total Nutrition allocation	Total Nutrition utilization
Current FY			

If budget was not fully absorbed, what are the two main reasons for this?

1).....  
 .....

2).....  
 .....

d. Describe the trends in the past three financial years, in budget allocation for nutrition as a % of the total budget for health? (e.g. Increasing-2, remains the same-1, decreasing-0)  
*(This question need not be asked. Trend can be obtained from the figures)*

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10. What were the two **MAIN** nutrition expenditure from county budget in the previous financial year (\_\_\_\_\_)?

1).....  
 .....

2).....

.....  
 11. a) Is there an annual procurement plan that includes nutrition commodities Yes- 1 No -0

b) If yes in a), is the availability of the plan verified Yes 1 No- 0

c) Do you track the stocks? Yes-1 No-0

c) If yes, do you use the following tool to assess stock outs?

Tool	Tool Used Yes 1 No 0	Verified Yes 1 No 0
Logistics Management Information System (LMIS)		
MoH 713		
MoH 734		
Requisition orders		
Others, specify		

12. b) How often do you do supportive supervision at the following levels?

	Frequency ( <i>Circle one response</i> )	Does the support supervision include nutrition issues? Yes-1 No-0	Comments
County to Sub county Support Supervision	Monthly – 4 Quarterly – 3 Bi annually – 2 Annually – 1 Others, specify; .....		
County to Health facilities Support Supervision	Monthly – 4 Quarterly – 3 Bi annually – 2 Annually – 1 Others, specify; .....		
Sub county to Health facilities Support Supervision	Monthly – 4 Quarterly – 3 Bi annually – 2 Annually – 1 Others, specify; .....		
Sub County & Facility to Community Unit	Monthly – 4 Quarterly – 3 Bi annually – 2 Annually – 1 Others, specify; .....		

13. Which tool is used for support supervision?

i. MOH integrated support supervision... Yes - 1 No - 0.

ii. Others, specify .....

14. What informs prioritization of issues to focus on during support supervision? Yes 1 N – 0	
Data review and audit	
Emerging issues	
Surveillance reports	
Disease outbreaks	
Community feedback/Complains	
Other	

15. Fill out the table below to determine whether nutrition is integrated in community groups

	<b>Groups</b>	Is nutrition integrated Yes – 1 No - 0	<b>List the groups</b> <i>(Names)</i>	<b>Activities conducted</b>
1	CBOs			
2	FBOs			
3	Support Groups			
4	Others (Specify)			



16. What is the number of nutrition work force trained in the following MoH approved courses (*compute proportions*)

	<b>Training in MoH approved courses</b>	<b>A. Number of trainings conducted in the last 2.5 years</b>	<b>B. Number trained in the last two and a half years (verify-with standards)</b>	<b>C. Number that require training</b>	<b>D. Was there participation of pre service lecturers/tutors in this training? Yes-1,No-0</b>
1	Nutrition assessments (e.g. biochemical, anthropometric, clinical), Counseling and support				
2	Integrated Management of Acute Malnutrition (IMAM)				
3	Maternal Infant and Young Child Nutrition (MIYCN)				
4	Micronutrient (Vitamin A Supplementation/Iron and Folic Acid Supplementation training)				
5	Preterm and low birth weight babies nutrition				
6	Nutrition in Tuberculosis (TB)				
7	Nutrition in Renal (specific to nutrition cadre)				
8	Nutrition in Cancer (specific to nutrition cadre)				
9	Nutrition in Diabetes (specific nutrition cadre)				
10	Logistic Management Information System (LMIS)				
11	Health financing				

	<b>Training in MoH approved courses</b>	<b>A. Number of trainings conducted in the last 2.5 years</b>	<b>B. Number trained in the last two and a half years (verify-with standards)</b>	<b>C. Number that require training</b>	<b>D. Was there participation of pre service lecturers/ tutors in this training?  Yes-1,No-0</b>
12	District Health information Software (HIS)				
13	Nutrition in HIV (specific to nutrition cadre)				
14	Parenteral Nutrition				
15	Enteral Nutrition				
16	Data management				
17	Nutrition in critical care(specific to nutrition cadre)				
18	Nutrition in surgical care				
19	Senior Management Course				
20	Supervisory skills				
21	Strategic leadership and development program				
22	Coordination, linkages and networking				
23	Advocacy and communication				
24	Commodity management training				
25	Communication for development				

	<b>Training in MoH approved courses</b>	<b>A. Number of trainings conducted in the last 2.5 years</b>	<b>B. Number trained in the last two and a half years (verify-with standards)</b>	<b>C. Number that require training</b>	<b>D. Was there participation of pre service lecturers/ tutors in this training?  Yes-1,No-0</b>
26	Evidence based programming				
27	Nutrition in Emergencies				
28	Data for decision making				
29	Maternal Nutrition				
30	HINI training				
31	Others, Specify.....  .....				

17. Does the county have resources allocated to continuous professional development?

Yes-1 No-0

18. What strategies are in use for continuous professional development? (Fill the table below)

Strategy	Frequency Monthly - 1 Quarterly - 2 Bi annually - 3 Yearly - 4 Others - 5 Specify.....	Source of funding	Remarks
Continuous Medical Education (CMEs)			
On the Job Training and Mentorship			
Class-room training			
Others (specify)			

19. a) Does your County have a training committee? Yes-1 No-0

b) If Yes, who are the members of committee,

	Members	Yes 1 No 0
1	Director	
2	HR	
3	Admin	
4	Nursing officer	
5	Nutrition coordinator	
6	PHO	
7	Lab person	
8	COH	
9	Pharmacist	
10	Health Records	
11	Others (specify)	
12		

c) How often are the County Training committee meetings held? *(Tick one that applies)*

1. Monthly
2. Adhoc
3. Quarterly

d) How are the training needs identified and prioritized?

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20. a) Do nutritionists have job descriptions? Yes-1 No-0

b) If No why?

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21. Are there feedback mechanisms that address service delivery concerns between the following levels?

	Level	Tick all that apply
1	County executive/County assembly and CHMT	<ol style="list-style-type: none"> <li>1. Cabinet meetings</li> <li>2. County Health committee meetings</li> <li>3. County Assembly departmental briefs</li> <li>4. Others (specify)</li> </ol>
2	County Health Management Team (CHMT) and Sub-County Health Management Team (SCHMT)	<ol style="list-style-type: none"> <li>1. Health Stakeholders forums</li> <li>2. CNTFs</li> <li>3. CHMT meetings</li> <li>4. Suggestion box</li> <li>5. Others (specify)</li> </ol>
3	SCHMT and facility/health workers	<ol style="list-style-type: none"> <li>1. SCNTFs</li> <li>2. In-charges meetings</li> <li>3. Others (specify)</li> </ol>
4	S/CHMT, Health Facility and Community	<ol style="list-style-type: none"> <li>1. Health Facility Committee meetings</li> <li>2. Community health workers review meeting</li> <li>3. Community Health committees</li> <li>4. Community dialogue meetings</li> <li>5. Suggestion box</li> <li>6. Others (specify)</li> </ol>

5	Members of County Assembly and community	1. Community Participation Forums 2. Social Accountability reporting 3. Others (specify)
6	CHMT and Partners(Regulatory Bodies, Research Institutions, Non state actors and private entities	1. County Stake holders forum 2. County Steering Group (CSG) 3. CNTF 4. Others (specify)

22. Information on Nutrition guidelines and reporting tools (*Only for CNC*)

	<b>Protocols/guidelines</b>	Have you been sensitized on the following guidelines in the last 3 years. Yes-1 No-0	Have the guidelines been disseminated within the County Yes-1 No-0	Are the following guidelines available in the County? Yes-1 No-0
1	Maternal Infant and Young Child Nutrition (MIYCN) policy statement			
2	Integrated Management of Acute Malnutrition (IMAM) guidelines			
3	MIYCN Guideline			
4	Vitamin A Schedules			
5	Iron and Folic Acid supplementation (IFAS) policy schedule			
6	Deworming Schedule			
7	Micronutrient Powders (MNPs) operational guide			
	DHIS tools			
	Score cards			
8	Clinical and dietetics guidelines/Manual			
9	Diabetes Guideline			
10	Cancer guideline			
11	Diabetes register			
12	Others, Specify.....			

23. Is the Reproductive Maternal Neonatal and Child Health (RMNCH) Scorecard operationalized and utilized in your county?

2 = Yes, 1 = Partially, 0 = No

**Time stopped:** .....

**Assessment results (*tick one*):**

1. Completed

2. a) Incomplete,

b) State reason and action e.g date and time of revisit: ...

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