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1. Member List of the Survey Team

1-1 Basic Design Study Team (June 23 ~ July 17, 1997)

Team Leader	Mr. Kenji Suzuki	Grant Aid Division, Economic cooperation Bureau, Ministry of Foreign Affairs
Technical Advisor	Dr. Hiroshi Omae	International Medical Center of Japan
Technical Advisor	Dr. Atsuo Kakehi	National Institute of Health Service Management
Coordinator	Ms. Noriko Banba	Japan International Cooperation Agency
Project Manager	Mr. Masami Tanaka	Nikken Sekkei Ltd
Building Planner	Mr. Yasuyuki Nozaki	Nikken Sekkei Ltd
Facility Planner	Mr. Motoaki Murao	Nikken Sekkei Ltd
Equipment Planner	Mr. Fumihiko Fujita	Nikken Sekkei Ltd
Cost Planer	Mr. Shinji Miyoshi	Nikken Sekkei Ltd

1-2 Team for Consultation on Draft Basic Design Report (October 13 ~ 22, 1997)

Team Leader	Dr. Hiroshi Omae	International Medical Center of Japan
Coordinator	Mr. Norihiro Ikeda	Japan International Cooperation Agency
Project Manager	Mr. Masami Tanaka	Nikken Sekkei Ltd
Building Planner	Mr. Yasuyuki Nozaki	Nikken Sekkei Ltd
Equipment Planner	Mr. Fumihiko Fujita	Nikken Sekkei Ltd

2. Survey Schedule

2-1 Basic Design Survey

No.	Month/ Date	Day	Government Members	Consultant Members	Accommoda- tion
1	6/23	Mon.	Leave Tokyo for Manila Visits to Embassy of Japan and JICA Office in Manila		Manila
2	24	Tue.	Leave Manila for Baguio Courtesy call to Provincial Government of Benguet (PGB) and Municipality of La Trinidad, meeting with Benguet General Hospital (BeGH)		Baguio
3	25	Wed.	Investigation of existing BeGH Meeting with PGB and BeGH		Baguio
4	26	Thu.	Visit to Baguio General Hospital & Medical Center Visit to Tuba Rural Health Unit (RHU) and La Trinidad RHU		Baguio
5	27	Fri.	Meeting with PGB and BeGH, Discussion on Minutes		Baguio
6	28	Sat.	Signing of Minutes		Baguio
7	29	Sun.	Internal meeting Mr. Suzuki leaves Baguio for Manila		Baguio/Manila
8	30	Mon.	Meeting with PGB and BeGH, Visit to Atok District Hospital	Mr. Miyoshi leaves Tokyo for Manila	Baguio/Manila
9	7/1	Tue.	Meeting with PGB and BeGH	Mr. Miyoshi leaves Manila for Baguio	Baguio
10	2	Wed.	Mr. Suzuki leaves Manila for Tokyo, Other government members leave Baguio for Manila	Meeting with BeGH Investigation of construction material, investigation of boring test	Baguio/Manila
11	3	Thu.	Visit to Philippines General Hospital; Reporting to JICA Office and NEDA	Meeting with BeGH Investigation of construction material	Baguio/Manila
12	4	Fri.	Government Members return to Japan	Study of floor plan and equipment	Baguio
13	5	Sat.		Visit to St. Louis Hospital Review of previous discussions	Baguio
14	7/6	Sun.		Review of previous discussions	Baguio

15	7/7	Mon.		Meeting with PGB and BeGH	Baguio
16	8	Tue.		Meeting with PGB and BeGH Contract negotiation for boring test	Baguio
17	9	Wed.		Meeting with PGB and BeGH	Baguio
18	10	Thu.		Meeting with PGB and BeGH	Baguio
19	11	Fri.		Preparation of memorandum of discussion	Baguio
20	12	Sat.		Preparation of memorandum of discussions	Baguio
21	13	Sun.		Leave Baguio for Manila	Manila
22	14	Mon.		Investigation of construction materials and cost Investigation of equipment	Manila
23	15	Tue.		Investigations Visit to Philippine General Hospital	Manila
24	16	Wed.		Investigations of cost	Manila
25	17	Thu.		Reporting to JICA Office Return to Tokyo	

2-2 Consultation of Draft Basic Design Report

No.	Month/ Date	Day	Descriptions	Accomodation
1	10/13	Mon.	Leave Tokyo for Manila Visit to JICA Office	Manila
2	14	Tue.	Visit to NEDA, Dept. of Health; Visit to Philippine Children's Medical Center	Manila
3	15	Wed.	Leave Manila for Baguio; Meeting with PGB and BeGH	Baguio
4	16	Thu.	Meeting with PGB and BeGH	Baguio
5	17	Fri.	Meeting with PGB and BeGH Discussion on Minuets	Baguio
6	18	Sat.	Internal Meeting Preparation of memorandum of meetings	Baguio
7	19	Sun.	Preparation of memorandum of meeting	Baguio
8	20	Mon.	Meeting with PGB and BeGH Signing of Minutes	Baguio
9	21	Tue.	Leave Baguio for Manila Reporting to JICA Office	Manila
10	22	Wed.	Reporting to Embassy of Japan Return to Tokyo	

3. List of Party Concerned

3-1 Philippine Side

- | | | | |
|-----|---|---------------------------|--|
| (1) | Office of the President | Mr. Joseph M. Alabanza | Presidential Assistant |
| (2) | National Economic Development Agency (NEDA) | | |
| | | Ms. Cristina Santiago | Japan Desk
PIS, NEDA Central Office |
| | | Mr. Juan Ngalob | Regional Director
NEDA-CAR |
| | | Ms. Veronica Medina | Social Development Specialist
NEDA-CAR |
| | | Ms. Agie L. Abrinia | Social Development Specialist
NEDA-CAR |
| | | Mr. Jose H. Dado Jr. | Senior Economic Dev't Specialist,
NEDA-CAR |
| | | Mr. Gregorio B. Ariz III | Chief Economic Dev't Specialist,
Infrastructure Division,
NEDA-CAR |
| | | Ms. Junia Sayog | Researcher
NEDA-CAR |
| (3) | Department of Health | Dr. Jovencio Orduna | Regional Director
DOH-CAR |
| | | Dr. Nicholas Gordo Jr. | Medical Specialist IV |
| (4) | National Telecommunication Commission | | |
| | | Eng. Isabelo M. Cosalan | Director, CAR |
| (5) | Province of Benguet | | |
| | | Hon. Raul M. Molintas | Governor |
| | | Hon. Wasing D. Sacla | Vice-Governor |
| | | Hon. Victoria P. Alipit | Board Member |
| | | Hon. James M. Malaya | Board Member |
| | | Hon. Francisco Golingab | Board Member |
| | | Hon. Bial A. Palaez | Board Member |
| | | Hon. Samson Paran | Board Member |
| | | Hon. Jaime A. Galasgas | Board Member |
| | | Hon. Danio Bolisli | Board Member |
| | | Hon. Fernando Aritao | Board Member |
| | | Hon. Agosto P. Santos | Board Member |
| | | Hon. Domingo Bay-an | Board Member |
| | | Hon. Marciano T. Inso Sr. | Board Member |
| | | Hon. Limson Ogas | Board Member |
| | | Hon. Redentor Edoc | Board Member |
| | | Dr. Esteban Piok | Provincial Health Officer II |
| | | Ms. Teresita Fianza | Executive Assistant |
| | | Ms. Fred Puntawe | Executive Assistant |
| | | Mr. Michael Esteban | Executive Assistant |
| | | Ms. Clarita Prudencio | Tourism Officer |
| | | Mr. Alex Balangcod | Office of Planning & Development |
| | | Mr. Tuho Chapdian | Office of Planning & Development |
| | | Mr. Rene S. Tabdi | Civil Engineer |
| | | Mr. Bernardo S. Depago | Architect |
| | | Mr. Manuel A. Palasi Jr. | Sanitary Engineer |
| | | Mr. Laurence Cornel | General Service Officer |

(6)	La Trinidad Water District	Mr. Oliver L. Taule Hon. Edgar C. Mamanig	General Manager Engineer
(7)	Benguet General Hospital	Dr. Corazon Cabansag Dr. Norma C. Pacalso Dr. Felipe Baggao, Jr. Dr. Joseph Cabinta Dr. Susan Lachica Dr. Paz Camdas Dr. Alicia Altuna Dr. Isabelita Quiano Dr. Florida Aurellado Dr. Alejandra Gambito Dr. Lorenzo Agbanlog Dr. Warrent Lee L. Abad Mr. Robert Cirilo Ms. Mary Banguilat Ms. Adeline Lacsigen Ms. Elsie L. Mateo Ms. Lolita Oracion Ms. Asuncion A. Anod Ms. Laurenza Pulicay Ms. Elsie Diaz Ms. Wilhelmina Tacay Ms. Visitacion Saingan Ms. Yasmin Abing Ms. Juanita Piloy Ms. Erlinda Dulnuan Ms. Yolanda Baluscang Ms. Mercedes Jalbuena	Provincial Health Officer I Rural Health Physician Training Officer Head, Surgery Head, Medicine Head, Laboratory Head, Pediatrics Head Ob-Gyne Head, X-ray Head, Dental Head, Anesthesia Medicine Specialist, Surgery Surgeon Administrative Officer Pharmacist Medical Social Worker Chief Nurse Nurse Supervisor Nurse Supervisor Nurse II Central Supply Room Nurse Operating Room Nurse Operating room Nurse Dietary Nutritionist Management & Audit Analyst II Records Officer II Clerk I Medical Technologist
(8)	Municipalities		
	La Trinidad	Hon. Edna C. Tabanda	Mayor
	Kibungan	Hon. Alberto Mayamnes Hon. Agnawa B. Contada Mr. G. Tibangay	Mayor Vice Mayor Council Member
	Tublay	Hon. Joseph A. Cosente	Mayor
	Itogon	Hon. Cresencio Pacalso	Mayor
	Kabayan	Hon. Florencio Mencion	Mayor
	Bakun	Hon. Belino Sunien	Mayor
	Atok	Hon. Johnny Uy	Mayor
	Tuba	Hon. Blas Dalus Mr. Jerome Palaoag Ms. Priscilla Pagnas Ms. Aurelia Solano Mr. Renato Agpay Mr. Bonifacio Bayangan Mr. Dick Balting Ms. Gloria Juliet Paus Ms. Joemarie Romero	Vice Mayor Council Member Council Member Council Member Council Member Council Member Council Member Council Member Mayor's Office, Tuba Mayor's Office, Tuba

- | | | |
|---|--------------------------|----------------------------|
| (9) Baguio - Benguet Medical Assoc. | Dr. Francisco Hernandez | President |
| | Dr. Paz Camdas | Vice-President |
| | Dr. Jasmin Reyes-Igama | Officer |
| | Dr. Tedler Depaynos | Officer |
| | Dr. Renato Manalo | Officer |
| | Dr. Glorifino Juan | Officer |
| | Dr. Reynaldo Cariaga | Officer |
| (10) Baguio General Hospital | Dr. Manuel Factora | Medical Director |
| (11) St. Louis Univ. Hospital | Dr. Roberto Legaspi | Medical Director |
| (12) Atok District Hospital | Dr. Winston Yap | Chief of Hospital |
| | Ms. Edna C. Sebio | Adm. Officer II |
| | Ms. Virginia B. Saguidic | Nurse IV |
| (13) Abatan Emergency Hospital | Dr. Luisa Paran | Chief of Hospital |
| (14) Denis Molintas Municipal Hospital | Dr. Eduardo Calpito | Chief of Hospital |
| (15) Tuba Rural Health Unit | Dr. Lorigrace Bayla | Municipal Health Officer |
| | Ms. Edna Palasi | Nurse |
| (16) Benguet Electric Cooperatives Inc. | Mr. Gerards P. Venrosa | General Manager |
| | Mr. Vedasto Agosto | Manager, Engineering Dept. |
| (17) Philippine Long Distance Telephone Co. | Mr. Ben Lerma | Manager |
| | Mr. Hiroyuki Teshima | Outside Supervisor |
| (18) Consolidated Industrial Gases Inc. | Ms. Rowena C. Tabanda | General Manager |

3-2 Japanese Side

- | | | |
|---|----------------------|-----------------------------------|
| (1) Embassy of Japan | Dr. Hikaru Fukuda | Second Secretary |
| (2) Japan International Cooperation Agency, Philippine Office | Mr. Hiroshi Goto | Resident Representative |
| | Mr. Juro Chikaraishi | Deputy Resident Representative |
| | Mr. Masami Shukunobe | Assistant Resident Representative |
| | Mr. Akira Nakamura | Assistant Resident Representative |
| | Ms. Maki Nagai | Assistant Resident Representative |

4. Minutes of Discussion

MINUTES OF DISCUSSIONS
ON
BASIC DESIGN STUDY ON THE PROJECT
FOR URGENT UPGRADING & STRENGTHENING
OF HEALTH SYSTEM
FOR THE PROVINCE OF BENGUET AND CORDILLERA REGION

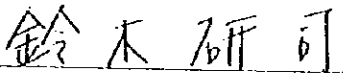
In response to the request of the Government of the Republic of the Philippines, the Government of Japan has decided to conduct a Basic Design Study on the Project for Urgent Upgrading & Strengthening of Health System for the Province of Benguet and Cordillera Region (hereinafter referred to as "the Project") and entrusted the study to the Japan International Cooperation Agency (JICA).

JICA sent to the Philippines a study team, headed by Mr. Kenji Suzuki, Grant Aid Division, Economic Cooperation Bureau, Ministry of Foreign Affairs from June 23 to July 17, 1997.

The team held discussions with the concerned officials of the Provincial Government of Benguet and conducted a field survey at the study area.

In the course of discussions and field survey, both parties have confirmed the main items described on the attached sheets. Based on the Minutes of Discussions, the team will proceed to further studies and prepare the Basic Design Study Report.


La Trinidad, June 28, 1997



Mr. Kenji Suzuki
Leader,
Basic Design Study Team,
JICA

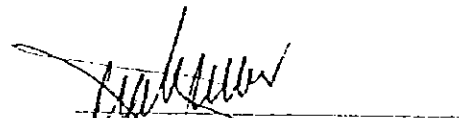


Mr. Raul Molintas
Governor,
Provincial Government of Benguet
The Republic of the Philippines



Mr. Juro Chikaraishi
Deputy Resident Representative,
JICA Philippine Office

Witness



Mr. Juan Ngalob
Regional Director,
NEDA - CAR

ATTACHMENT

1. The Objective of the Project

The objective of the project is to strengthen the medical services and educational/training activities through upgrading of the facility and equipment of the Benguet General Hospital.

2. The Project Site

The project site is the site of the present Benguet General Hospital located in La Trinidad, Benguet Province, Cordillera Administrative Region.

3. Responsible and Implementing Organization

- 1) Responsible organization for the Project is the Provincial Government of Benguet.
- 2) Implementing Organization for the Project is the Benguet General Hospital, Province of Benguet.

4. Items requested by the Philippine Side

After discussions with the Basic Design Study Team, the following items with the priority were finally requested by the Philippine side. (See Annex - I)

- 1) Construction of the new hospital complex.
- 2) Provision of new medical equipment.
- 3) Provisions of medical equipment for District Hospitals and Rural Health Units (R.H.U.) complimentary to the effectiveness of the project.

The study team has understood the necessity of the request, however, the final components of the Project will be decided after further studies.

5. Japan's Grant Aid System

The Philippine side has understood the system of Japanese Grant Aid explained by the study team. (See Annex - II)

6. Necessary measures to be undertaken by the Philippine side

The Provincial Government of Benguet will take the necessary measures in collaboration with relevant Agencies of the Government of the Philippines described in Annex - III for the smooth implementation of the Project, on condition that the Grant Aid by the Government of Japan is extended to the Project.

7. Schedule of the Study

- 1) The consultants will do further studies in the Philippines until July 17, 1997.
- 2) JICA will prepare the draft report on the Project in English and dispatch a mission to the Philippines to explain the contents of the draft report in around October, 1997

8. Monitoring

The Philippine side has the responsibility of monitoring progress of all phases of the Project such as allocation of funds, utilization of equipment purchase, distribution, quality control, maintenance and utilization of equipment, and manpower development and training.

9. Answer for the Questions

It is requested that reply to the Questions, which were presented to the Philippine side by the Study team on June 24, 1997, shall be submitted on July 11, 1997.

ANNEX - I

Items of the Final Request

1. Construction of the new hospital complex
 - (1) Outpatient services for the following departments
 - Medicine
 - Pediatrics
 - Surgery
 - Anesthesia
 - Obstetrics & Gynecology
 - Dental
 - E.E.N.T.
 - Orthopedic
 - Mental Health
 - (2) Nursing Unit
 - (3) Radiology, Laboratory and Pharmacy Departments
 - (4) Rehabilitation / Therapy Departments
 - (5) Surgical Suite
 - (6) Delivery Suite
 - (7) Central Sterilization Unit
 - (8) Nursery Unit
 - (9) ICU & CCU
 - (10) Emergency Department
 - (11) Administration Department
 - (12) Social Welfare Office
 - (13) Maintenance Department
 - (14) Dietary Service Department
 - (15) Training Center
 - (16) Center of Wellness
 - (17) Ancillary Rooms
2. Provision of equipment for the above listed medical services and related activities
 - (1) Principles of selection of equipment and list of equipment with priority as indicated below are attached hereto.
 - Priority A : Equipment which is judged to be indispensable to manage the hospital.
 - Priority B : Equipment of which necessity is high, but further assessment on operation and management is needed.
 - Priority C : Equipment which is not found to be appropriate to the activities of the hospital.
 - (2) The quantity of each equipment will be decided after further study.

Principle of Selection of Equipment

1) Basic priority principle

- (1) Basic equipment necessary for basic diagnostic activities.
- (2) Equipment in principle to be renewed for the existing equipment.
- (3) Equipment which can be dealt with easier and established technologies.
- (4) Equipment of which needs concerning diagnosis and treatment activities (the number of patients, the number of specimen) are fully confirmed and of which necessity and appropriateness are confirmed.
- (5) Equipment of which cost performance is high.
- (6) Equipment for which the Philippines can fully pay its operating and running costs.

2) Principle of deletion

- (1) Equipment which may be incompatible with related laws and regulations concerning drainage treatment, waste treatment and X ray in the Philippines and Japan.
- (2) Equipment and related equipment which use a radioactive isotope.
- (3) Equipment which uses materials which may cause environmental problem, such as Freon.

3) Technological principle

- (1) Selection of equipment which meets the functions and level of facilities.
- (2) Selection of equipment which can maintain the technological consistency and relevance to existing equipment and peripheral equipment.
- (3) Selection of equipment which can be used under the existing system (medical doctor, nurse and technician).
- (4) Determination of the quantity by avoiding the duplication of equipment in a hospital.
- (5) The equipment should not be redundantly provided by other supporting agency.

4) Other principle of deletion

- (1) Assistance of supplies and reagent by single source.
- (2) Equipment which can be procured locally and purchased with the budget of a hospital.
- (3) Equipment which is redundantly requested.
- (4) Equipment which is obtained after the request is submitted, or for which a budget measure is taken.
- (5) Equipment which is difficult to maintain after an assistance is provided because there is not any agent of the equipment.

ANNEX - II

Japan's Grant Aid

1. Japan's Grant Aid Procedures

The Japan's Grant Aid Program is executed through the following procedures.

- | | |
|----------------------|---|
| (1) Application | (Request made by a recipient country) |
| Study | (Basic Design Study conducted by JICA) |
| Appraisal & Approval | (Appraisal by the Government of Japan and approval by the Cabinet) |
| Implementation | (The Notes exchanged between the Government of Japan and the government the recipient country.) |

- (2) At the first step, the application or request for a Grant Aid project submitted by a recipient country is examined by the Government of Japan (the Ministry of Foreign Affairs) to determine whether or not it is eligible for Grant Aid.

If the request is deemed appropriate, the Government of Japan assigns JICA (Japan International Cooperation Agency) to conduct a study on the request.

At the second step, JICA conducts the study (Basic Design Study), using a Japanese consulting firm.

At the third step, the Government of Japan appraises the project to see whether or not it is suitable for Japan's Grant Aid program, based on the Basic Design Study report prepared by JICA, and the results are then submitted to the Cabinet for approval.

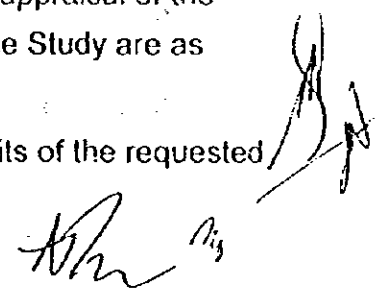
At the fourth step, the project, once approved by the Cabinet, becomes official with the Exchange of Notes signed by the Government of Japan and the recipient country.

2. Basic Design Study

(1) Content of the study

The aim of the Basic Design Study (hereinafter referred to as "the Study") conducted by JICA on a requested project (hereinafter referred to as "the Project") is to provide a basic document necessary for the appraisal of the Project by the Japanese Government. The contents of the Study are as follows:

- 1) Confirmation of the background, objectives, and benefits of the requested



Project and also institutional capacity of agencies concerned of the recipient country necessary for the Project's implementation.

- 2) Evaluation of the appropriateness of the Project to be implemented under the Grant Aid scheme from a technical, social and economic point of view.
- 3) Confirmation of items agreed on by both parties concerning the basic concept of the Project.
- 4) Preparation of a basic design of the Project
- 5) Estimation of costs of the Project

The contents of the original request are not necessarily approved in their initial form as the contents of the grant aid project. The basic design of the Project is confirmed considering the guidelines of Japan's Grant Aid scheme.

The Government of Japan requests the government of recipient country to take whatever measures are necessary to ensure its self-reliance in the implementation of the Project. Such measures must be guaranteed even though they may fall outside of the jurisdiction of the organization in the recipient country actually implementing the Project. Therefore, the implementation of the Project is confirmed by all relevant organizations of the recipient country through the Minutes of Discussions.

(2) Selection of Consultants

For smooth implementation for the Study, JICA uses a registered consultant firm. JICA selects a firm based on proposals submitted by interested firms. The firm selected carries out Basic Design Study and writes a report, based upon terms of reference set by JICA. The consulting firm used for the Study is recommended by JICA to the recipient country to also work on Project's implementation after the Exchange of Notes, in order to maintain technical consistency and also avoid any undue delay in implementation should the selection process be repeated.

3. Japan's Grant Aid Scheme

(1) What is Grant Aid?

The Grant Aid Program provides a recipient country with non-reimbursable funds to procure the facilities, equipment and services (engineering services and transportation of the products, etc.) for economic and social development of the country under principles in accordance with the relevant laws and regulations of Japan. Grant Aid is not supplied through the donation of

materials as such.

(2) Exchange of Note (E/N)

The Japan's Grant Aid is extended in accordance with the Notes exchanged by the two governments concerned, in which the objective of the project, period of execution, conditions and amount of the Grant Aid, etc., are confirmed.

(3) "The period of the Grant" means the one fiscal year which the Cabinet approves the Project for. Within the fiscal year, all procedures such as Exchange of Notes, concluding contracts with a consultant firm and contractors and financial payment to them must be completed.

However in case of delays in delivery, installation or construction due to unforeseen factors such as weather, the period of the grant aid can be further extended for a maximum of one fiscal year at most by mutual agreement between the two governments.

(4) The Grant is used properly and exclusively for the purchase of products. Under the Grant Aid, in principle, Japanese products and services including transport or those of the recipient country are to be purchased. When the two governments deem it necessary, grant aid may be used for the purchase of the products or services of the third countries. However the prime contractors, namely, consulting, contracting and procurement firms, are limited to "Japanese nationals". (The term "Japanese Nationals" means persons of Japanese nationality or Japanese corporations controlled by persons of Japanese nationality.)

(5) Necessity of the "Verification"

The government of the recipient country or its designated authority will conclude contracts in Japanese yen with Japanese nationals.

Those contracts shall be verified by the government of Japan. The "verification" is deemed necessary to secure accountability to Japanese taxpayers.

(6) Undertaking required of the government of recipient country

In the implementation of the Grant Aid project, the recipient country is required to undertake such necessary measures as the following:

- 1) To secure land necessary for the site of the Project and clear, level and

reclaim the land prior to commencement of the construction.

- 2) To provide facilities for the distribution of electricity, water supply and drainage and other incidental facilities around the site.
- 3) To ensure all the expenses and prompt execution for unloading, customs clearance at the port of disembarkation of the products purchased under the Grant Aid.
- 4) To exempt Japanese nationals from customs duties, internal taxes and other fiscal levies which will be imposed in the recipient country with respect to the supply of the products and services under the verified contracts.
- 5) To accord Japanese nationals whose services may be required in connection with the supply of the products and services under the verified contracts, such facilities as may be necessary for their entry into the recipient country and stay therein for the performance of their work.

(7) "Proper Use"

The recipient country is required to maintain and use the facilities constructed and equipment purchased under the Grant Aid properly and effectively and to assign staff necessary for the operation and maintenance as well as to bear all the expenses other than those covered by the Grant Aid.

(8) "Re-Export"

The products purchased under the Grant Aid should not be re-exported from the recipient country.

(9) Banking Arrangement (B/A)

- 1) The government of the recipient country or its designated authority should open an account in the name of government of the recipient country in an authorized foreign exchange bank in Japan (hereinafter referred to as "the Bank"). The Government of Japan will execute the Grant Aid by making payments in Japanese Yen to cover the obligations incurred by the government of the recipient country or its designated authority under the verified contracts.
- 2) The payment will be made when payment requests are presented by the Bank to the Government of Japan under an authorization to pay issued by the government of the recipient country or its designated authority.

ANNEX - III

Necessary measures to be taken by the Provincial Government of Benguet in collaboration with relevant Agencies of the Government of the Philippines.

1. To secure the land for the construction of building and facilities related to the Project.
2. To clear, level, and reclaim the site until March 1998.
3. To construct gates and fences around the site.
4. To provide facilities for the distribution of electricity, water supply, drainage to the site and other incidental infrastructures.
5. To allocate enough budget to operate and maintain the Project and to secure necessary number of the trained staff for the Project.
6. To bear the following commissions to the Japanese foreign exchange bank for the banking services based upon the Banking Arrangement.
 - Advising commission of Authorization to Pay.
 - Payment commission.
7. To arrange the exemption of taxes and to take necessary measures for customs clearance of materials and equipment brought for the Project at the port of disembarkation.
8. To accord Japanese nationals whose services may be required in connection with the supply of the products and the services under the verified contracts such facilities as may be necessary for their entry into the Republic of the Philippines and stay therein for the performance of their work.
9. To exempt Japanese nationals engaged in the Project from customs duties, internal tax, other fiscal levies and other administrative requirements which may be imposed in the Philippines with respect to the supply of the products and services under the verified contracts.
10. To maintain and use properly and effectively the facilities constructed and equipment provided under the Grant Aid, through recruitment of enough and qualified staff and allocation of sufficient budget for operation and maintenance.
11. To bear all the expenses, other than those to be borne by the Grant Aid, necessary for construction of the facilities as well as transportation and installation of the equipment.



Appendix - 2

Cost Estimation Borne by the Philippine Side

1. Land Reclamation	
- Reclamation and Leveling	P 6,000,000.00
- Retaining Wall	400,000.00
2. Removal of existing Building and Objects	150,000.00
3. Fence and Gate	500,000.00
4. Connection of Drainage	1,000,000.00
5. Lead-in of Electrical Power	100,000.00
6. Lead-in of Telephone Tracks	50,000.00
7. Lead-in of City Water	10,000.00
8. Furnitures for Administration Department	150,000.00
9. Installation and Testing of Communication System	400,000.00
10. Landscaping of Mini Park	990,000.000
11. Deep Well and Pump	300,000.00
12. Relocation of Existing Equipment of New Hospital	30,000.00
13. Modification of Existing Buildings	1,500,000.00
Total	P 11,580,000.00

MINUTES OF DISCUSSIONS
ON
BASIC DESIGN STUDY ON THE PROJECT
FOR URGENT UPGRADING & STRENGTHENING
OF HEALTH SYSTEM
FOR THE PROVINCE OF BENGUET

(CONSULTATION ON DRAFT REPORT)

In June 1997, the Japan International Cooperation Agency (JICA) dispatched the Basic Design Study Team on the Project for Urgent Upgrading & Strengthening of the Health System for the Province of Benguet and Cordillera Region (hereinafter referred to as "the Project") to the Philippines, and through discussions, field survey and examination of the results in Japan, has prepared the draft report of the study.

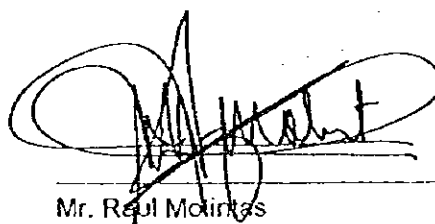
In order to explain and to consult the Philippine side on the components of the draft report, JICA sent to the Philippines a study team, which is headed by Dr. Hiroshi Omae, International Medical Center of Japan, Ministry of Health and Welfare from October 13 to October 22, 1997.

As a result of the discussions, both parties confirmed the main items described on the attached sheets. Based on those Minutes of Discussions, the team will complete the Basic Design Study Report.

La Trinidad, October 20, 1997

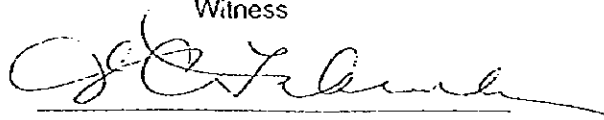
大前 比呂思

Dr. Hiroshi Omae
Leader,
Draft Report Explanation Team,
Japan International Cooperation Agency



Mr. Reul Morinas
Governor,
Provincial Government of Benguet
The Republic of the Philippines

Witness



Ms. Edna C. Tabanda
President,
Benguet Chapter of League of Municipal Mayors of
the Philippines

ATTACHMENT

1. Components of the Draft Report

The Philippine side has agreed and accepted in principle the components of the Draft Report proposed by the Team.

2. Japan's Grant Aid System

(1) The Philippine side has understood the system of Japanese Grant Aid explained by the Team. (See Annex - I)

(2) The Philippine side will take necessary measures, described in Annex II, for smooth implementation of the Project on condition that the Grant Aid assistance by the Government of Japan is extended to the Project.

3. Further Schedule

The team will make the final report in accordance with the confirmed items, and send it to the Philippine side in around December 1997.

4. Monitoring Report

In case Japan's Grant aid is executed, the Philippine side will monitor the status of the operation of the hospital as per Annex III and submit the report to the Embassy of Japan and JICA office in Manila annually.

5. Technical Cooperation

The Philippine side requested technical cooperation from the Government of Japan.

6. Additional Request

The Philippine side requested additional furniture and equipment which are necessary for the Project. (see. Annex IV)

Japan's Grant Aid

1. Japan's Grant Aid Procedures

The Japan's Grant Aid Program is executed through the following procedures.

- | | |
|----------------------|---|
| (1) Application | (Request made by a recipient country) |
| Study | (Basic Design Study conducted by JICA) |
| Appraisal & Approval | (Appraisal by the Government of Japan and approval by the Cabinet) |
| Implementation | (The Notes exchanged between the Government of Japan and the government the recipient country.) |

- (2) At the first step, the application or request for a Grant Aid project submitted by a recipient country is examined by the Government of Japan (the Ministry of Foreign Affairs) to determine whether or not it is eligible for Grant Aid.

If the request is deemed appropriate, the Government of Japan assigns JICA (Japan International Cooperation Agency) to conduct a study on the request.

At the second step, JICA conducts the study (Basic Design Study), using a Japanese consulting firm.

At the third step, the Government of Japan appraises the project to see whether or not it is suitable for Japan's Grant Aid program, based on the Basic Design Study report prepared by JICA, and the results are then submitted to the Cabinet for approval.

At the fourth step, the project, once approved by the Cabinet, becomes official with the Exchange of Notes signed by the Government of Japan and the recipient country.

2. Basic Design Study

(1) Content of the study

The aim of the Basic Design Study (hereinafter referred to as "the Study") conducted by JICA on a requested project (hereinafter referred to as "the Project") is to provide a basic document necessary for the appraisal of the Project by the Japanese Government. The contents of the Study are as follows:

- 1) Confirmation of the background, objectives, and benefits of the requested Project and also institutional capacity of agencies concerned of the recipient country necessary for the Project's implementation.
- 2) Evaluation of the appropriateness of the Project to be implemented under the Grant Aid scheme from a technical, social and economic point of view.
- 3) Confirmation of items agreed on by both parties concerning the basic concept of the Project.
- 4) Preparation of a basic design of the Project
- 5) Estimation of costs of the Project

The contents of the original request are not necessarily approved in their initial form as the contents of the grant aid project. The basic design of the Project is confirmed considering the guidelines of Japan's Grant Aid scheme.

The Government of Japan requests the government of recipient country to take whatever

measures are necessary to ensure its self-reliance in the implementation of the Project. Such measures must be guaranteed even though they may fall outside of the jurisdiction of the organization in the recipient country actually implementing the Project. Therefore, the implementation of the Project is confirmed by all relevant organizations of the recipient country through the Minutes of Discussions.

(2) Selection of Consultants

For smooth implementation for the Study, JICA uses a registered consultant firm. JICA selects a firm based on proposals submitted by interested firms. The firm selected carries out Basic Design Study and writes a report, based upon terms of reference set by JICA. The consulting firm used for the Study is recommended by JICA to the recipient country to also work on Project's implementation after the Exchange of Notes, in order to maintain technical consistency and also avoid any undue delay in implementation should the selection process be repeated.

3. Japan's Grant Aid Scheme

(1) What is Grant Aid?

The Grant Aid Program provides a recipient country with non-reimbursable funds to procure the facilities, equipment and services (engineering services and transportation of the products, etc.) for economic and social development of the country under principles in accordance with the relevant laws and regulations of Japan. Grant Aid is not supplied through the donation of materials as such.

(2) Exchange of Note (E/N)

The Japan's Grant Aid is extended in accordance with the Notes exchanged by the two governments concerned, in which the objective of the project, period of execution, conditions and amount of the Grant Aid, etc., are confirmed.

(3) "The period of the Grant" means the one fiscal year which the Cabinet approves the Project for. Within the fiscal year, all procedures such as Exchange of Notes, concluding contracts with a consultant firm and contractors and financial payment to them must be completed.

However in case of delays in delivery, installation or construction due to unforeseen factors such as weather, the period of the grant aid can be further extended for a maximum of one fiscal year at most by mutual agreement between the two governments.

(4) The Grant is used properly and exclusively for the purchase of products. Under the Grant Aid, in principle, Japanese products and services including transport or those of the recipient country are to be purchased. When the two governments deem it necessary, grant aid may be used for the purchase of the products or services of the third countries. However the prime contractors, namely, consulting, contracting and procurement firms, are limited to "Japanese nationals". (The term "Japanese Nationals" means persons of Japanese nationality or Japanese corporations controlled by persons of Japanese nationality.)

(5) Necessity of the "Verification"

The government of the recipient country or its designated authority will conclude contracts in Japanese yen with Japanese nationals.

Those contracts shall be verified by the government of Japan. The "verification" is deemed

necessary to secure accountability to Japanese taxpayers.

(6) Undertaking required of the government of recipient country

In the implementation of the Grant Aid project, the recipient country is required to undertake such necessary measures as the following:

- 1) To secure land necessary for the site of the Project and clear, level and reclaim the land prior to commencement of the construction.
- 2) To provide facilities for the distribution of electricity, water supply and drainage and other incidental facilities in and around the site.
- 3) To ensure all the expenses and prompt execution for unloading, customs clearance at the port of disembarkation and internal transportation of the products purchased under the Grant Aid.
- 4) To exempt Japanese nationals from customs duties, internal taxes and other fiscal levies which will be imposed in the recipient country with respect to the supply of the products and services under the verified contracts.
- 5) To accord Japanese nationals whose services may be required in connection with the supply of the products and services under the verified contracts, such facilities as may be necessary for their entry into the recipient country and stay therein for the performance of their work.

(7) "Proper Use"

The recipient country is required to maintain and use the facilities constructed and equipment purchased under the Grant Aid properly and effectively and to assign staff necessary for the operation and maintenance as well as to bear all the expenses other than those covered by the Grant Aid.

(8) "Re-Export"

The products purchased under the Grant Aid should not be re-exported from the recipient country.

(9) Banking Arrangement (B/A)

- 1) The government of the recipient country or its designated authority should open an account in the name of government of the recipient country in an authorized foreign exchange bank in Japan (hereinafter referred to as "the Bank"). The Government of Japan will execute the Grant Aid by making payments in Japanese Yen to cover the obligations incurred by the government of the recipient country or its designated authority under the verified contracts.
- 2) The payment will be made when payment requests are presented by the Bank to the Government of Japan under an authorization to pay issued by the government of the recipient country or its designated authority.

Annex II : Necessary measures to be taken by the Philippine side in case Japan's Grant Aid is executed.

1. To secure the site for the Project.
2. To clear, level and reclaim the site prior to commencement of the construction.
3. To undertake incidental outdoor works such as gardening, fencing and gates in and around the site.
4. To provide facilities for distribution of electricity, water supply, telephone, drainage, sewage and other incidental facilities to the Project site.
 - 1) Electricity distributing line to the site.
 - 2) City water distribution main to the site and/or supply of well water.
 - 3) Drainage main to the site.
 - 4) Telephone trunk line and the main distribution panel of building.
 - 5) General furniture such as curtains, tables, chairs and others.
5. To bear commissions to the Japanese foreign exchange bank for the banking services based upon Banking Arrangement.
6. To exempt taxes and to take necessary measures for customs clearance of the materials and equipment brought for the project at the port of disembarkation.
7. To accord Japanese Nationals whose service may required in connection with the supply of products and the services under the verified contract such facilities as may be necessary for their entry into the Philippines and stay therein for the performance of their work.
8. To maintain and use properly and effectively that the facilities constructed and equipment purchased under the Grant.
9. To bear all the expenses other than those to be borne by the Grant, necessary for construction of the facilities as well as for the transportation and the installation of the equipment.

Annex III : Monitoring Items

1. Operation of Hospital

(1) Financial Status

- Income
- Expenditure
- Appropriation from provincial government

(2) Number of Staff

- Medical doctors by department
- Consultants by department
- Nurses
- Paramedical staffs
- Others

(3) Clinical Services

- Number of outpatients by department
- Number of emergency patients
- Number of inpatients by department, average length of stay and bed occupancy rates
- Occupancy ratio of pay beds
- Number of operations by type
- Number of laboratory tests by type
- Ratio of patients by classification of payments

2. Status of Equipment

(1) Ambulance

- Distance traveled
- Number of mobilizations
- Mechanical troubles and repair cost

(2) Four-wheel ambulance

- Distance traveled
- Number of mobilizations and destinations
- Mechanical Troubles and repair cost

(3) Audio-visual car

- Distance traveled
- Number of mobilization, destination and activities
- Mechanical troubles and repair cost

(4) Ventilator (Neonatal)

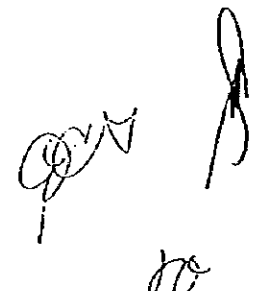
- Number of application
- Number of Ventilator in use
- Mechanical troubles and repair cost

- (5) Ventilator
 - Number of application
 - Number of ventilators in use
 - Mechanical Troubles and repair cost
- (6) Ultrasound Scanner
 - Number of tests
 - Mechanical troubles and repair cost
- (7) Anesthesia Apparatus
 - Number of applications
 - Number of apparatus in use
 - Status of the patients
 - Mechanical troubles and repair cost
- (8) Automatic Film Processor
 - Number of film processed
 - Mechanical troubles and repair cost
- (9) Biochemistry apparatus
 - Number of tests
 - Mechanical troubles and repair cost
- (10) X-ray IV System, 850mA
 - Number of tests
 - Mechanical troubles and repair cost
- (11) X-ray System, 500mA
 - Number of tests
 - Mechanical troubles and repair cost
- (12) Fiber Scope
 - Number of examination
 - Number of biopsy
 - Mechanical troubles and repair cost

Note: Give the number of days when the equipment was out of order for each mechanical troubles

ADDITIONAL FURNITURE

DEPARTMENT/SECTION	DESCRIPTION	Q'TY
CONSULTANT'S ROOM	DOCTOR'S TABLE	12
	DOCTOR'S CHAIR	12
	PATIENT'S CHAIR	12
CONSULTANT'S ROOM WAITING AREA	BENCH	17
OUT PATIENT CONSULTATION ROOM	DOCTOR'S TABLE	20
	DOCTOR'S CHAIR	20
	PATIENT'S CHAIR	18
CENTRAL TREATMENT ROOM	INJECTION TABLE FOR 6 PERSONS	2
	PATIENT'S CHAIR	6
OUT PATIENT WAITING AREA	BENCH	44
EMERGENCY ROOM	PATIENT'S CHAIR	5
	BENCH	3
LABORATORY	DOCTOR'S CHAIR	3
SOCIAL SERVICE	DOCTOR'S TABLE	2
	DOCTOR'S CHAIR	2
	PATIENT'S CHAIR	2
	FILING CABINET	1
	BENCH	1
X-RAY ROOM	BENCH	8
GENERAL WARD	PATIENT'S CHAIR	100
WARD TREATMENT ROOM	PATIENT'S CHAIR	4
TRAINING ROOM	WHITE BOARD, SMALL	3
	WHITE BOARD, LARGE	1
	LONG TABLE FOR LECTURER WITH SKIRTING	5
	LONG TABLE	10
	CHIAIR WITH MEMO TABE	116
	CHAIR	69
MEDICAL RECORD ROOM	SHELF	10
NURSERY ROOM	BENCH	2
	CABINET	2



EQUIPMENT FOR URGENCY

ITEM NO.	DEPARTMENT/SECTION	DESCRIPTION	Q'TY IN DRAFT REPORT	REQUESTED REVISION OF Q'TY
C-5-1	OUT PATIENT PEDIATRICS	EXAMINING TABLE	4	3

ADDITIONAL ITEM

C-5-17	OUT PATIENT PEDIATRICS	PATIENT BED WITH RAILS		2
C-5-18	OUT PATIENT PEDIATRICS	FOOT STEP, 2 STEPS		3
C-6-15	OUT PATIENT OB-GYNE	DOCTOR'S CHAIR FOR EXAMINING TABLE		2
L-1-26	DELIVERY ROOM	DOCTOR'S CHAIR FOR DELIVERY TABLE		2
N-6-27	NURSING UNIT NURSE STATION	EXAMINING TABLE		4
N-6-28	NURSING UNIT NURSE STATION	FOOT STEP, 2 STEPS		4

MAIN EQUIPME TN

ITEM NO.	DEPARTMENT/SECTION	DESCRIPTION	Q'TY IN DRAFT REPORT	REQUESTED REVISION OF Q'TY
A-1-7	EMERGENCY ROOM	INSTRUMENT CABINET	3	8
A-1-8	EMERGENCY ROOM	INSTRUMENT TABLE	3	8
A-1-18	EMERGENCY ROOM	STRETCHER WITH SIDERAILS	4	6
C-2-1	OUT PATIENT EENT	EXAMINING TABLE	1	0
C-2-2	OUT PATIENT EENT	EXAMINING LAMP	1	0
C-3-1	OUT PATIENT SURGERY	EXAMINING TABLE	3	5
C-3-2	OUT PATIENT SURGERY	EXAMINING LAMP	3	5
C-3-7	OUT PATIENT SURGERY	WASTE RECEPTACLE	2	5
C-4-1	OUT PATIENT MEDICINE	EXAMINING TABLE	5	3
C-4-2	OUT PATIENT MEDICINE	EXAMINING LAMP	5	3
C-4-8	OUT PATIENT MEDICINE	WASTE RECEPTACLE	2	3
C-5-8	OUT PATIENT PEDIATRICS	WASTE RECEPTACLE	2	4

ADDITIONAL ITEM

A-1-24	EMERGENCY ROOM	OPERATING LIGHT, MINOR COMBINATION		1
A-1-25	EMERGENCY ROOM	FOOT STEP, 2 STEPS		14
A-1-26	EMERGENCY ROOM	DRESSING CART		2
A-1-27	EMERGENCY ROOM	WASTE RECEPTACLE		3
A-1-28	EMERGENCY ROOM	WASHING BASIN		7
C-1-18	OUT PATIENT DENTAL	WASTE RECEPTACLE		2
C-1-19	OUT PATIENT DENTAL	SCREEN, DOBLE TYPE		1
C-2-29	OUT PATIENT EENT	WASTE RECEPTACLE		2
C-3-19	OUT PATIENT SURGERY	FOOT STEP, 2 STEPS		5
C-3-20	OUT PATIENT SURGERY	WEIGHING SCALE		1
C-4-21	OUT PATINET MEDICINE	ENDOSCOPIC CABINET		1
C-4-20	OUT PATINET MEDICINE	FOOT STEP, 2 STEPS		3
C-6-15	OUT PATIENT OB-GYNE	WASTE RECEPTACLE		4
C-6-16	OUT PATIENT OB-GYNE	FOOT STEP, 2 STEPS		2
C-6-17	OUT PATIENT OB-GYNE	WASHING BASIN		4
C-6-18	OUT PATIENT OB-GYNE	INSTRUMENT TABLE		4
Y-1-7	CONSULTANT'S ROOM MEDICINE	FOOT STEP, 2 STEPS		3
Y-1-8	CONSULTANT'S ROOM MEDICINE	WASTE RECEPTACE		3
Y-2-6	CONSULTANT'S ROOM SURGERY	FOOT STEP, 2 STEPS		2
Y-2-7	CONSULTANT'S ROOM SURGERY	WASTE RECEPTACE		2
Y-3-8	CONSULTANT'S ROOM PEDIATRIC	FOOT STEP, 2 STEPS		2
Y-3-9	CONSULTANT'S ROOM PEDIATRIC	WASTE RECEPTACE		2
Y-4-6	CONSULTANT'S ROOM OB-GYN	FOOT STEP, 2 STEPS		2
Y-4-7	CONSULTANT'S ROOM OB-GYN	WASTE RECEPTACE		2
Y-7-6	CONSULTANT'S ROOM ORTHOPEDIC	FOOT STEP, 2 STEPS		1
Y-7-7	CONSULTANT'S ROOM ORTHOPEDIC	WASTE RECEPTACE		1
Z-1-19	CENTRAL TREATMENT ROOM	EXAMINING TABLE		1
Z-1-20	CENTRAL TREATMENT ROOM	FOOT STEP, 2 STEPS		1
Z-1-21	CENTRAL TREATMENT ROOM	WASTE RECEPTACE		3
Z-1-21	CENTRAL TREATMENT ROOM	PATIENT BED		1

5. Hospital Standard Requirements

Republic of the Philippines
Department of Health
BUREAU OF MEDICAL SERVICES
M a n i l a

HOSPITAL STANDARD REQUIREMENTS FOR PHYSICAL FACILITIES

SPACE & PROGRAM REQUIREMENTS	AREA REQUIREMENT IN SQUARE METERS				REMARKS
	25-50 BEDS	51-150 BEDS	151-250 BEDS	250 + BEDS	
I. Administration Department	(135.5)	(392.4)	(579.9)	(613.2)	
a. Lobby w/ info. center	24.6	37.7	66.6	66.6	
b. Business Office w/ Cashier's cubicle and result	30.8	56.6	88.8	88.8	
c. Admitting Office		18.9	22.2	22.2	
d. Medical Records Room	12.3	18.9	44.4	44.4	
e. Accounting Office		37.7	44.4	44.4	
f. Hospital Administrator's Office w/ toilet facilities	18.5	28.3	44.4	44.4	
g. Hosp. Director's Office w/ anti-roo, for secretary's space & waiting & toilet facilities	36.9	37.7	66.6	66.6	
h. Conference, Library & Lounge	56.6	56.6	66.6	88.8	
i. Social Service		24.5	33.3	44.4	
j. Basic Health Facilities		37.7	44.4	44.4	
k. Staff Toilet (male & female)	12.3	18.9	36.0	36.0	
l. PBX & Telephone booths		18.9	22.2	22.2	
II. OUT-PATIENT Department	(97.5)	(206.1)	(461.6)	(926.3)	
a. Waiting area w/ reception counter screening cubicle & OPD record cubicle	30.0	56.6	100.0	155.5	
b. Consultation & exam. rooms	37.0	75.5	88.8	88.8	
c. Consultant Doctors Offices w/ exam. cubicle & toilet facilities			133.2	222.0	
d. Treatment room		12.2	14.3	14.8	
e. Immunization Room & Utility		22.2	22.2	22.2	
f. Minor Operating Room		18.9	22.2	22.2	
g. Toilet facilities (public male and female)	18.5	18.9	44.4	44.4	
h. Physical therapy					
h.1 Office				22.2	
h.2 Examination room				18.5	
h.3 Treatment cubicles				38.9	
h.4 Exercise Room				88.8	
h.5 Storage cubicle				22.2	
h.6 Whirlpool Area				22.2	
h.7 Hydro Therapy				44.4	
h.8 Toilet facilities				22.2	
h.9 Waiting area				30.0	
h.10 Utility Room				11.1	
i. Dental	12.0	24.0	36.0	36.0	
III. Emergency Room	(37.0)	(85.1)	(106.4)	(154.6)	
a. Space for emergency tables		28.3	40.0	78.0	
b. Doctor's on Duty room w/ T & B facilities		18.9	22.2	22.2	
c. Reception counter w/ emergency record cubicle		10.0	10.0	10.0	
d. Emergency room equip. storage		18.9	22.2	22.2	
e. Waiting Area		9.0	12.0	22.2	
IV. Ancillary Services	(74.0)	(98.0)	(160.6)	(407.4)	
A. Radiology Dept.					
a.1 X-ray room		28.3	44.4	66.6	
a.2 Dark room	37.0	4.3	16.0	15.0	
a.3 Control Area		3.0	6.0	9.0	
a.4 Toilet Facilities		2.7	5.4	8.1	
a.5 Radiologist Office w/ film illuminations	18.5	18.9	22.2	29.4	

SPACE AND PROGRAM REQUIREMENTS	AREA REQUIREMENT IN SQUARE METERS				REMARKS
	25-50 BEDS	51-150 BEDS	151-250 BEDS	250 + BEDS	
a.6 Film file & storage room	18.5	18.9	22.2	33.3	
a.7 Dressing cubicle		53.0	6.0	9.0	
a.8 Waiting area w/ reception table & record cubicle		18.9	44.4	66.6	
a.9 Therapeutics:					
a.9.1 Therapeutic X-ray w/ control				22.2	
a.9.2 Restroom w/ dressing cubicle				22.2	
a.9.3 Cobalt room				52.5	
a.9.4 Scanner				92.9	
a.9.5 Receiving & waiting				21.0	
B. Laboratory Department	(18.5)	(94.4)	(197.9)	(396.9)	
B.1 Office		18.9	22.2	22.2	
B.2 Blood Doning Room w/ECG & EMB		18.9	22.2	22.2	
B.3 Hematology			22.2	22.2	
B.4 Urinalysis & Biochemistry			22.2	22.2	
B.5 Bacteriology & Serology			22.2	22.2	
B.6 Histology		37.7	22.2	22.2	
B.7 Glass washing & sterilizing			22.2	22.2	
B.8 Specimen toilet			2.3	2.3	
B.9 Examination & Test			9.0	9.0	
B.10 Pathologist Office			9.0	9.0	
B.11 Technician's locker room w/ toilet facilities		18.9	22.2	22.2	
B.12 Research Laboratory				199.0	
C. Pharmacy Department	(18.5)	(37.5)	(47.7)	(62.0)	
C.1 Drug Storage		11.1	18.0	21.0	
C.2 Pharmacist's Office		7.5	7.5	7.5	
C.3 Dispensing Area		18.9	22.2	33.5	
V. SURGICAL SUITE:	(175.9)	(290.8)	(518.6)	(636.8)	
a. Major Operating Rooms	25.0	28.3	108.0	144.0	
b. Minor Operating Rooms		18.9	44.4	44.4	
c. Recovery Room	18.5	28.3	44.4	66.6	
d. Sub-sterilizing station	6.7	18.5	22.2	33.3	
e. Scrub-up	2.5	18.5	22.2	33.3	
f. Clean-up	2.2	18.9	22.2	22.2	
g. Surgical Supervisor's cubicle	12.0	12.2	14.4	14.4	
h. Sterile Instrument & supply storage	12.0	12.2	14.4	14.4	
i. Anesthesiologist cubicle w/ Anesth. storage space	12.0	12.2	14.4	14.4	
j. Central Sterilizing & Supply					
j.1 Work Area		18.9	22.2	30.0	
j.2 Sterilizing Area	55.5	18.9	22.2	30.0	
j.3 Sterile Supply Storage		18.9	22.2	44.4	
k. Janitor's closet	3.6	3.0	2.7	2.7	
l. Stretcher's nook	2.4	2.0	8.0	8.0	
m. Doctor's Locker room/toilet & bath facilities w/ doctor's lounge (male & female)				18.5	
m.1 Locker rooms		22.2	22.2	22.2	
m.2 Toilet & bath		11.1	11.1	11.1	
m.3 Lounge		11.1	11.1	11.1	
n. Nurses locker room w/ toilet & bath facilities					
n.1 Locker room		11.1	11.1	11.1	
n.2 Lounge			11.1	11.1	
n.3 Toilet & bath		5.6	5.6	5.6	
o. Fracture Room w/ plaster & split closet					
o.1 Fracture			22.2	22.2	

SPACE AND PROGRAM REQUIREMENTS	AREA REQUIREMENTS IN SQUARE METERS				REMARKS
	25-50 BEDS	51-150 BEDS	151-250 BEDS	250 + BEDS	
o.2 Plaster closet			4.8	4.8	
o.3 Splint closet			7.2	7.2	
p. Cystoscopy Room w/ toilet			22.2	22.2	
q. Dark room			6.1	6.1	
VI. Delivery Suite	(50.7)	(56.6)	(258.5)	(339.2)	
a. Delivery Rooms	25.0	28.3	60.0	90.0	
b. Labor rooms w/ toilet facilities	25.7	28.3	66.6	88.88	
c. Sub-sterilizing station			12.0	24.0	
d. Scrub-up area			6.0	6.0	
e. Clean-up			12.0	12.0	
f. Nurse station ster. & non-ster. supply station			12.0	12.0	
g. Doctor's locker room w/ toilet & bath facilities & lounge (male & female)					
g.1 Locker rooms			22.2	22.2	
g.2 Lounge			11.1	11.1	
g.3 toilet & bath			11.1	11.1	
h. Nurses locker room w/ toilet & bath facilities & lounge					
h.1 Locker room			11.1	16.5	
h.2 Lounge				11.1	
h.3 Toilet & bath			5.6	5.6	
i. Sterile instrument storage			14.4	14.4	
j. Anesthesia storage			14.4	14.4	
VII. Nursery	(55.0)	(101.0)	(163.2)	(253.2)	
a. Common Corridor	3.4	4.8	21.0	21.0	
b. Wall baby Nursery					
b.1 Nursery	24.5	37.7	44.4	88.8	
b.2 Pre-mature babies cubicle		9.0	11.1	22.2	
b.3 Ante-room	5.1	7.4	12.0	24.0	
b.4 Work cubicle	6.0	8.8	12.0	24.0	
b.5 Formula preparation cubicle	6.0	88.8	10.5	21.0	
c. Observation Nursery					
c.1 Nursery	6.0	11.1	22.2	22.2	
c.2 Ante-room	4.0	7.4	12.0	12.0	
c.3 Work cubicle		6.0	9.0	9.0	
c.4 Formula preparation cubicle			9.0	9.0	
VIII. Nursing Unit:	(259.1)	(1598.5)	(2509.2)	(5781.5)	
a. Nursing Directress		37.7	44.4	44.4	
b. Nurse Station w/ space for Head Nurse, Table, charting counter, medicine prep. counter, Nurse counter & Medicine cabinet	27.8	84.9	180.0	360.0	
b.1 Clean Utility		26.6	44.4	88.8	
b.2 Dirty Utility		26.6	44.4	88.8	
b.3 Nurse toilet		11.3	18.7	37.5	
c. Ward Area					
c.1 Private ward w/ toilet bath facilities & closet	55.5	320.8	333.0	666.0	
c.2 Semi-private (2-beds) w/ toilet & bath facilities	55.5	283.1	310.8	555.0	
c.3 5-bed ward w/ toilet facilities	83.3	566.0	888.0	2664.0	
c.4 Isolation rooms w/ toilet facilities	18.5	56.6	222.0	444.0	
c.5 Janitor's closet		7.2	12.0	24.0	
c.6 Linen closets		36.7	72.0	144.0	
c.7 Dirty linen disposal w/ laundry chute		18.9	14.0	14.0	

SPACE AND PROGRAM REQUIREMENTS	AREA REQUIREMENT IN SQUARE METERS				REMARKS
	25-50 BEDS	51-150 BEDS	151-250 BEDS	250 + BEDS	
c.8 Treatment Rooms		36.7	111.0	222.0	
c.9 Pantry		56.6	166.5	333.0	
c.10 Storage & Utility rooms		18.5	28.8	96.0	
IX. Dietary Service & Staff Dining	(146.0)	(267.4)	(375.6)	(419.4)	
a. Delivery receiving area & vestibule	18.5	10.0	11.18	11.1	
b. Dry storage(for non-perishable items)		13.9	22.2	22.2	
c. Space for cold storage		21.6	21.6	21.6	
d. Food assembly area	4.3	9.0	12.0	12.0	
e. Food preparation area	18.5	11.1	22.2	33.0	
f. Cooking area	18.5	11.1	22.2	33.3	
g. Baking Area			11.1	11.1	
h. Patient's food service area	18.5	14.8	22.2	22.2	
i. China wares, silver wares, utensils & other kitchen equipments. storage area		11.1	22.2	22.2	
j. Diswashing cubicle	6.0	12.2	11.1	11.1	
k. Garbage disposal cubicle	3.4	9.0	9.0	9.0	
l. Food truck & can washing cubicle		12.2	11.1	11.1	
m. Food truck station area		12.0	22.2	22.2	
n. Diet Kitchen	12.0	12.0	11.1	11.1	
o. Dietitian's Office	9.3	8.0	11.1	11.1	
p. Help locker room w/ toilet & bath facilities		18.9	33.3	44.4	
q. Helps quarters		18.9	33.3	44.4	
r. Staff dining hall	37.0	56.6	66.6	66.6	
X. Morgue & Autopsy	(32.0)	(58.0)	(58.0)	(58.0)	
a. Receiving & releasing vestibule		18.0	18.0	18.0	
b. Morgue w/ freezers		20.0	20.0	20.0	
c. Autopsy room		20.0	20.0	20.0	
XI. Maintenance and Storage		(130.0)	(451.6)	(610.6)	
a. Bulk Storage		70.0	100.0	155.4	
b. Dead records storage		40.0	44.6	66.6	
c. Furniture storage		70.0	80.0	111.0	
d. Maintenance Office w/ furniture repair shop		100.0	150.0	177.6	
e. Pharmacy drug stock room		90.0	80.0	100.0	
XII. Laundry & Housekeeping			(294.5)	(323.9)	
a. Office receiving			22.2	22.2	
b. Sorting area			22.2	22.2	
c. Laundry supervisors cubicle			10.5	10.5	
d. Laundry supplies storeroom			14.0	14.0	
e. Washing & rinsing			42.0	42.0	
f. Drying area			42.0	42.0	
g. Pressing area			33.0	33.0	
h. Shakeout & folding area			33.0	42.0	
i. Central Linon;					
i.1 Housekeeping area			22.2	33.0	
i.2 Issue area			9.0	9.0	
XIII. Quarters & Staff Residence		(3642.0)	(5186.3)	(6296.8)	
a. Doctors Residence		840.0	1400.0	1400.0	
a.1 Quarters		200.0	300.0	399.0	
b. Nursing Directress & Assistant Residence		200.0	252.0	252.0	

SPACE AND PROGRAM REQUIREMENTS	AREA REQUIREMENTS IN SQUARE METERS:				REMARKS
	25-50 BEDS	51-150 BEDS	151-250 BEDS	250 + BEDS	
c. Nurse Supervisors & Nurses Dormitory	:	:	:	:	:
	:	1000.0	1523.7	1697.3	:
d. Attendants Dormitory	:	1400.00	1910.6	2547.5	:
XIV. Motor Pool:	:	:	(380.4)	(380.8)	:
a. Motor pool Office	:	:	33.0	33.0	:
b. Work Area	:	:	44.0	44.4	:
c. Space for repair work	:	:	111.0	111.0	:
d. Space for washing & greasing rock	:	:	111.0	111.0	:
e. Tools & supplies storeroom	:	:	14.8	14.8	:
f. Drivers quarter	:	:	:	:	:
XV. Family Planning Clinic	:	(100.0)	(150.0)	(200.0)	:
	:	:	:	:	:
	:	:	:	:	:

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6. Education and training Plan

Program	Term	No. of Participants	No. of Course/Yr.
A. Program for Health Workers			
1. Basic Family Planing Training	3 w	20	1
2. Basic-Comprehensive Family planning Training	3 w	20	1
3. Training for Family Planning Counselors	1 w	30	2
4. Management of the Young Child with Pneumonia	3 d	25	1
5. Management of Diarrhea	3 d	25	1
6. Basic Skills on Expanded Program of Immunization	3 d	25	1
7. Cold Chain Management	3 d	30	1
8. Nutrition Training	5 d	25	1
9. Training of Implementors on Phil. Cancer Control Program	5 d	35	1
10. Training on Pesticide Poisoning Management	2 d	50	1
11. AIDS/STD Orientation	2 d	30	1
12. Lactation Management	3 d		
13. Disaster Preparedness Training	5 d	50	1
14. Training for Implementors of NCVDCDP	3 d	50	1
15. MCH (Safe Motherhood)	1 d	20	1
B. Student Affiliates			
1. Orientation Course for Nursing Clinical Instructors	2 w	10	1
2. Admitting/ER/OB for BSN 3	3 d	12	20
3. OB Ward/Nursery for BSN 3	3 d	12	24
4. DR/OR/Surgery /Pediatrics/Medical for BSN 3	15 d	12	6
5. Delivery Room for BSN 4	3 d	12	24
6. DR/OR/Surgery Pediatrics/Medical for BSN 4	15 d	12	6
7. Pediatrics/Medicine/E.R. for BSN 2	3 d	12	6
8. Labor Room/Delivery Room for Midwifery	30 d	15	6
9. OB Ward/Nursery for Midwifery	30 d	15	6
10. Underfive Clinic for Midwifery	30 d	15	6
11. Nursing Aide Course	400 hr	12	1
12. Pharmacy Students	160 hr	6	1
13. Physical Therapy Interns	1 mo	3-5	1
14. Pulmonary Therapy Interns	1 mo	7-10	1
C. Health Education and Advocacy for Community (Community Health Service)			
1. Basic Course	5 d	30	2
2. ADIDS/STD Awareness	1 d	15	4
3. ARI Program for Care Givers	1 d	15	4
4. CDD Program for Care Givers	1 d	15	4
5. VSC Orientation for BHW	1 d	100	2
D. Community Health Service			
1. Monitoring			
2. Coordination			
3. Supervision			
4. Outreach			

7. Staffing Plan

FIVE YEAR PROGRAM FOR HIRING PROPOSED POSITIONS

POSITIONS	ACTUAL	1999	2000	2001	2002	2003	TOTAL
A - 1 ADMINISTRATION							
PHO II	(1)						
Chief of Hospital	(1)						
Hospital Administrative Officer	(1)						
Hospital Records Officer II	(1)						
Personnel Officer			1				1
Budget Officer		1					1
Accountant		1					1
Cashier	(1)		1				1
Supply Officer	(1)						
Bookkeeper	(1)						
Storekeeper	(1)						
Accounting Clerk				1	1		2
Stenographer						1	1
Clerks	(3)			2	1	2	5
Store Aide					1		1
Management & Audit Analyst	(1)						
Sub-total	(12)	2	2	3	3	3	13
A - 2 TRAINING/RESEARCH & COMMUNITY SERVICE							
Training Officer	(1)						
Training Coordinator				1			1
Research Coordinator					1		1
Computer Programmer		1					1
Data Encoder	(1)		1				1
Nurse III	(1)						
Nurse II	(1)						
Nutritionist-Dietitian II	(1)						
Sanitation Inspector IV	(1)						
Sanitation Inspector II	(1)						
Sub-total	(7)	1	1	1	1		4
B. MEDICAL SERVICES							
Chief of Clinics				1			1
1. Department of Surgery							
Department Head	(1)						
Medical Specialist	(1)				1	1	2
Resident Physician	(3)	1	1	1	1	1	5
Visiting Consultant			<2>				
2. Department of Ear, Eyes, Nose and Throat							
Department Head				1			1
Medical Specialist		1					1
Resident Physician				1	1	1	3
Visiting Consultant			<2>				
3. Department of Orthopedics							
Department Head				1			1
Medical Specialist		1					1
Resident Physician				1	1	1	3
Physical Therapist			1				1
Physical Therapist Aide				1			1
Visiting Consultant			<1>				
4. Department of Medicine							
Department Head - (MS)	(1)						
Visiting Consultant			<3>				
Resident Physician	(4)		1	1	1	1	4
5. Department of OB-Gyne							
Department Head (MS)	(1)						
Visiting Consultant			<2>				
Resident Physician	(4)		1	1	1	1	4
6. Department of Pediatrics							
Department Head (MS)	(1)						
Visiting Consultant			<2>				
Resident Physician	(3)	1	1	1	1	1	5
Sub-total	(19)	4	5	10	7	7	33

Note: Number of personnel is for permanent personnel and Visiting Consultants in < > are not included.

FIVE YEAR PROGRAM FOR HIRING PROPOSED POSITIONS

POSITIONS	ACTUAL	1999	2000	2001	2002	2003	TOTAL
B-1. MEDICAL ANCILLARY SERVICES							
1. Department of Anesthesia							
Department Head - (MS)	(1)						
Medical Specialist (visiting)**							
Resident Physician	(2)		1				1
2. Department of Laboratory							
Department Head - (MS)		1					1
Medical Specialist (visiting)**							
Resident Physician (OIC)	(1)						
Medical Technologist	(2)	1	1				2
Medical Laboratory Technician	(2)				1	1	2
Laboratory Aide	(2)						
3. Department of Radiology							
Department Head - (MS)	(1)						
Medical Specialist			1				1
Senior Resident Physician	(1)						
Medical Radiologic Technologist III	(1)						
Medical Radiologic Technologist II	(1)	1					1
Medical Radiation Aide				1	1		2
4. Dental Service							
Supervising Dentist							
Dentist	(1)			1			1
Dental Aide	(2)				1		1
5. Pharmacy Service							
Supervising Pharmacist	(1)		1				1
Pharmacist	(1)			1		1	2
Pharmacy Aide	(1)			1			1
6. Medical Records Service							
Medical Records Officer I			1				1
Statistician			1				1
Medical Records Librarian						1	1
Clerks	(1)	1		1	1	1	4
7. Medical Social Service							
Social Worker Officer II		1					1
Medical Social Worker	(1)		1		1		2
Sub-total	(22)	5	7	5	5	4	26
C. NURSING SERVICE							
Chief Nurse	(1)						
Assistant Chief Nurse		1					1
1. Ward Services							
Supervising Nurse	(3)	1	1	1			3
Nurses	(27)	2	2	2	4	4	14
Nursing Attendant	(16)				2	2	4
2. Operating Room Service							
Supervising OR Nurse	(1)						
OR Nurses	(3)	1	1	1	1	1	5
Nursing Attendants		1	1	1			3
3. Delivery OB and Nursing Service							
Nurses	(1)	1	1	1	1	2	6
Nursing Attendants	(1)	1	1	1	1	1	5
4. Out Patient and Emergency Room Service							
Supervising Nurse							
Nurses	(3)				1	1	2
Nursing Attendants	(2)						
5. Central Supply							
Nurses	(1)				1		1
Nursing Attendants	(1)					1	1
6. Intensive Care Unit/Coronary Care Unit							
Nurses		2	2	2			6
Nursing Attendants		1	1	1			3
Sub-total	(60)	11	10	10	11	12	54
D. DIETITICS SERVICES							
Dietician	(1)					1	1
Food Service Supervisor	(1)						
Cook	(2)				2	1	3
Food Service Worker	(4)	2	1	1			4
Sub-total	(8)	2	1	1	2	2	8

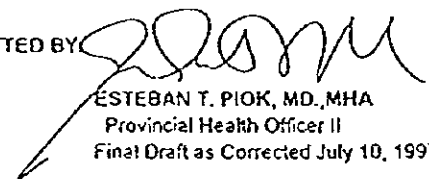
FIVE YEAR PROGRAM FOR HIRING PROPOSED POSITIONS

POSITIONS	ACTUAL	1999	2000	2001	2002	2003	TOTAL
E. ENGINEERING SERVICES							
Engineer III, Department Head	(1)						
1. Housekeeping Service							
Dormitory Manager						1	1
Security Guard (agency)	(3)	1	1				2
Seamstress	(2)						
Laundry Worker	(4)			1	1		2
Institution Worker	(10)	2	2	2	2	2	10
Janitors	(2)			1	1	1	3
2. Maintenance Services							
Medical Equipment Maintenance Technician				1			1
Building Maintenance Man	(1)			1			1
Electrician	(1)		1				1
Plumber					1		1
Carpenter-Painter	(1)			1			1
Groundsman-Gardener	(2)						
Communication and Equipment Operator	(1)						
Boiler Man			1				1
3. Motor Service							
Automotive Mechanic	(1)						
Driver	(3)		1				1
Sub-total	(32)	3	5	7	5	5	25
SUMMARY							
	ACTUAL						
A-1 Administration	(12)	2	2	3	3	3	13
A-2 Training/Research and Community Health Service	(7)	1	1	1	1		4
B Medical Service	(19)	4	5	10	7	7	33
B-1 Medical Ancillary Service	(22)	5	7	5	5	4	26
C Nursing Service	(60)	11	10	10	11	12	54
D Dietetics Service	(8)	2	1	1	2	2	8
E Engineering	(32)	3	5	7	5	5	25
Grand Total	(160)	28	31	37	34	33	163

*Local Performance Program (DOH-LGU Partnership)

** Private Practitioners

SUBMITTED BY


 ESTEBAN T. PLOK, MD., MHA
 Provincial Health Officer II
 Final Draft as Corrected July 10, 1997

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14. HOSPITAL WASTE MANAGEMENT ACTION PLAN
15. DENR ADMINISTRATIVE ORDER NO. 34, NO. 35 DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES

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