ガーナ共和国 母子保健医療サービス向上プロジェクト 運営指導調査団報告書

平成11年12月

国際協力事業団 医療協力部

医協二 J R 99 - 30

序 文

ガーナ共和国母子保健医療サービス向上プロジェクトは、同国の保健医療従事者の現職研修制度の構築・強化を目標に、1997年6月1日から5年間の予定で実施されています。

プロジェクト活動内容のうち、計画策定が遅れていた母子保健分野の今後の計画について、カウンターパートと協議し、プロジェクトデザインマトリックス(PDM)の修正を行うことを目標に、国際協力事業団は、1999年10月29日から11月7日まで、東京大学大学院国際保健計画学教室教授 梅内拓生氏を団長とする運営指導調査団を派遣しました。

本報告書は、本調査団が実施した調査および協議の内容と結果を取りまとめたものです。ここに、本件調査にあたりご協力をいただきました調査団員および関係各位に対して、深甚なる謝意を表しますとともに、今後とも本件技術協力の成功のために、一層のご指導、ご鞭撻をお願い申し上げます。

平成11年12月

国際協力事業団 医療協力部長 遠藤 明

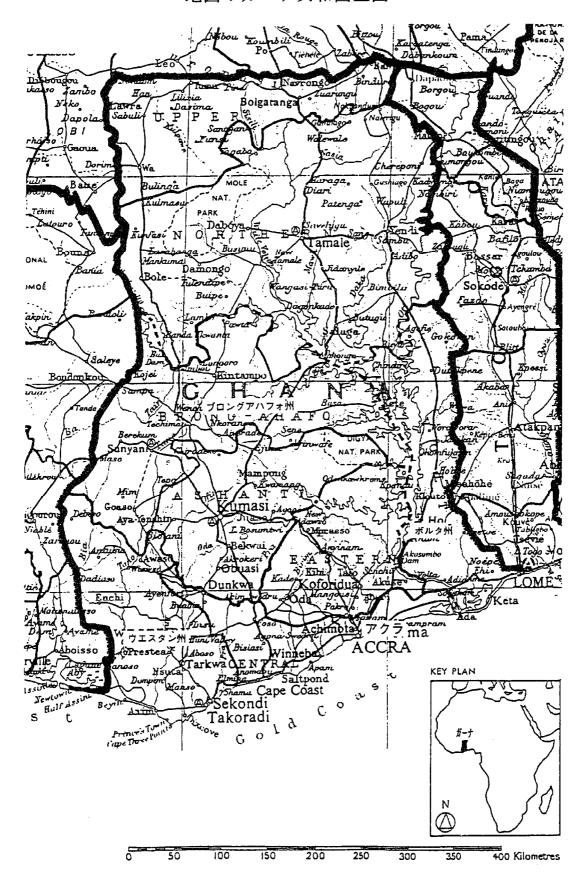


写真 1 カウンターパートとの協議



写真2 ミニッツ署名・交換

地図:ガーナ共和国全国



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1. 運営指導調査団派遣

1-1 調査団派遣の経緯と目的

1997年6月から実施している本プロジェクトでは、ガーナ共和国(以下、ガーナ)における保健医療従事者の質の向上のため、保健省における人材養成計画の見直しおよび現職研修(In-Service Training: IST)に対する協力を行っている。

本プロジェクトにおいては、ガーナ側ニーズに柔軟に対応するため、活動の詳細計画は、プロジェクト開始後、日本人専門家とカウンターパートとの間で決定していくという方針をとったが、母子保健分野の長期専門家の派遣が当初計画より遅れたこと等により、同分野の計画策定に遅れが生じ、プロジェクトデザインマトリックス(Project Design Matrix: PDM)内容に具体性に欠ける部分が残っていた。また、1999年2度にわたり母子保健短期専門家が派遣された結果、同分野の課題や他の活動との関係が明らかになった。

このため、プロジェクト関係者との協議により、母子保健分野の今後の活動計画について確認を行い、PDMの修正を行うことを目的に、本調査団が派遣された。

1 - 2 調査団の構成

担 当 氏 名 所 属

団長 総 括 梅内 拓生 東京大学大学院国際保健計画学教室教授

団員 母子保健 竹村 昌彦 大阪府立母子保健総合医療センター産科医長

団員 協力計画 山田 晶子 国際協力事業団医療協力部医療協力第二課職員

1 - 3 調査日程

日順	月日	曜日	移動および業務
1	10月30日	土	アクラ着(LH564)
			日本人専門家と打合せ
2	10月31日	П	資料整理
			日本人専門家およびJICAガーナ事務所友成所員と対処方針について打合せ
3	11月1日	月	JICAガーナ事務所表敬
			日本人専門家および友成所員と対処方針について打合せ
			在ガーナ日本国大使館表敬
4	11月2日	火	日本人専門家および友成所員と対処方針について打合せ
5	11月3日	水	カウンターパートとミニッツ案協議
6	11月4日	木	カウンターパートとミニッツ案協議および作成
7	11月5日	金	合同委員会、ミニッツ署名・交換
			JICAガーナ事務所への報告
			山田団員、野口記念医学研究所感染症対策プロジェクト専門家との打合せ
			アクラ発(SR265)

1 - 4 主要面談者

(1) ガーナ側関係者

Dr. A. Issaka-Tinorgah	Acting Director, Medical Services Division, MOH
Dr. Jennifer-Jane Aisha Brown-Aryee	External Aid Coordinator, Policy Planning,
	Monitoring and Evaluation Division, MOH
Dr. Henrietta Odoi-Agyarko	Head, MCH & FP Unit, Public Health Division,
	MOH
Ms. Rejoice Nutakor	Programme Officer, Adolecent Health, MCH & FP
	Unit, Public Health Division, MOH
Dr. Ken Sagoe	Acting Director, Human Resource Development
	Division, MOH
Mr. Said Al-Hussein	Head, Training Unit, Human Resource
	Development Division, MOH
Mr. Symon N. Koku	In-Service Training Coordinator, Human
	Resource Development Division, MOH

Mr. Seth Acquah Fellowship & Postgraduate Programme

Coordinator, Human Resource Development

Division, MOH

Mr. Stephen Ntow Senior Officer, Training Unit, Human Resource

Development Division, MOH

Mr. Prince Boni Head, Planning & Information Unit, Human

Resource Development Division, MOH

Dr. Godwin Y. Afenyedu Deputy Regional Director, Western Region

Ms. Theodora Okyere Regional Training Coordinator, Brong-Ahafo

Region

Ms. Ellen Sarpong-Akorsah Regional Training Coordinator, Volta Region

Mr. Matthias Pinto Assistant Training Coordinator, Volta Region

Ms. Esther Anyidoho Regional Training Coordinator, Western

Region

Dr. Henry A. Holdbrook-Smith Chief Executive, Korle-Bu Teaching Hospital

Ms. Agnes M. Batsa Head, Bilateral Economic Relations Unit,

Ministry of Finance

(2) 日本側関係者

伊藤 庄亮 在ガーナ日本国大使館特命全権大使

田中 一成 在ガーナ日本国大使館一等書記官

橋本 宣幸 在ガーナ日本国大使館専門調査員

鍋屋 史朗 JICAガーナ事務所所長

友成 晋也 JICAガーナ事務所所員

Mr. Matthew Dally JICAガーナ事務所

Assistant Programme Officer

秋葉 敏夫 プロジェクト長期専門家

吉岡 弘隆 プロジェクト長期専門家

相賀 裕嗣 プロジェクト長期専門家

石川 みどり プロジェクト短期専門家

Ms. Fiakeye Pamela プロジェクトAdministrative Secretary

2.要約

過去2年5カ月の活動によって、ガーナ保健省によるIST活動の概況は把握された。しかし、本プロジェクト活動の中心であるISTのコンピュータ化については、ISTの分類方法が未だ決定されていないため、活動が遅れていることが明らかとなった。このため、本調査団では、母子保健分野にかかる協議に先立ち、ISTのコンピュータ化の今後の計画について協議を行うこととした。

協議によって、保健省人材養成局(Human Resource Development Division: HRDD)がIST分類方法を1999年12月末までに決定し、これに基づくISTのコンピュータシステムを2000年6月までに始動することが合意された。また、母子保健分野のISTについては、すでに保健省公衆衛生局家族計画・母子保健課(MCH&FP Unit, Public Health Division: MCH)が行っている活動を、同課とHRDDとの連携により、プロジェクトの枠内で実施することが合意された。PDMの母子保健分野内容の具体化については、「成果」に同分野の内容を追加するにとどまり、「指標」や「活動」は、今後専門家とカウンターパートにて決定することとなった。

協議最終日に開催されたプロジェクト合同委員会にて、右内容を記載したミニッツの署名・交換が行われた。

3.協議内容

3-1 現職研修管理システムのコンピュータ化について

(1) Needs and Baseline Survey(NBS)およびブロングアハフォ州IST実施報告の レビュー

日本人専門家との打合せにより、IST分類方法の決定について、専門家がカウンターパートに提案した方法が却下される一方、カウンターパートからの代替案の提示もないため、結論の出ない状態が続いていることが明らかになった。ここで決定される分類方法が以後の活動の基礎となるにもかかわらず、決定作業が中断しているため、プロジェクト活動の進捗が妨げられている。こうした状況を生んだ原因のひとつとして、カウンターパートの本プロジェクトに対する参加意欲が低下していることが考えられた。この状況を改善するため、本プロジェクトがプロジェクト・サイト3州で行ったNBSの結果、および、州から提出されたIST実施報告書結果について、改めてカウンターパートと協議し、これらの活動の意義をカウンターパートに気づかせることを試みた。

NBSによると、3州のうちではブロングアハフォ州におけるIST受講者の割合が最も高く(56.50%)、ウエスタン州(45.80%)、ボルタ州(39.50%)がそれに続いていた。この3州間の違いが生じる原因等について、3州の研修担当者およびHRDD担当者と協議した。

また、3州のうち、HRDDにIST実施報告が提出されているのは、ブロングアハフォ州のみであった。その報告により、同州の13の郡のうち、7郡のみでISTが実施されており、残り6郡では行われていないという郡による差が明らかになった。また、実施された20回のISTのうち、9回が政府資金、11回がドナー資金で行われていた。右結果についても協議を行い、カウンターパートに、これらの活動結果を今後の計画策定に活用する可能性を提示したところ、カウンターパートは強い関心を示した。

(2) ISTのコンピュータ化の現状

プロジェクト・サイト3州すべてでコンピュータの設置は完了しているが、いずれの州でもIST情報をコンピュータに入力する作業は行われていない。この入力作業のためのトレーニングは、プロジェクトが今後早急に取り組むべき課題であることが確認された。

3-2 母子保健分野の今後の活動について

(1) HRDDとMCHとの連携

協議により、保健省で母子保健分野の活動を担当しているMCHが、同省の中で最も活発な活動を行っていること、および、コンピュータを使った研修システムがすでに機能していることがわかった。また、同省の人材養成活動全体を担当するHRDDとMCHとの役割分担を再確認し、本プロジェクトにおいてHRDDが実施するISTにMCHの行っている母子保健分野のISTを含めることを決定した。また、今後派遣される母子保健分野長期専門家について、HRDDにあわせてMCHもカウンターパートとすることが決定した。

(2) Ridge Hospital視察

竹村団員が、Greater Accra州の州病院であるRidge Hospitalを視察した。

この病院は産科として約60のベッドを有し、月に約200の分娩を扱う施設である。産婦 人科医10人が診療にあたっているとのことであった。州病院として多数の搬送症例を扱 うために、帝王切開率は15~20%とかなりの高率である。

入院期間は正常産で分娩後24時間、帝王切開で約10日間である。正常産における産褥入院期間は、必要性からというよりは、分娩数と病床数の関係から決められている。医師の認識でも十分な期間ではないということだが、産褥経過や、黄疸をはじめとする新生児のフォローアップについては、退院前の褥婦に対する教育と、分娩後2週間および4週間目の産褥外来によって対処しているということであった。

産褥外来の受診率に関しては明確な数字が得られなかったが、未受診者への連絡など 適切な処置がとられるのであれば、有効に機能するシステムとなっていると考えられる。

婦人科および合併症妊婦のための病棟では、病室数が不足しており、廊下も一部がベッドを設置するスペースとして使用されている。

分娩のための病棟では、パルトグラムを使用して分娩のactive managementを行っている。しかし、パルトグラムに記入されるべき産婦および胎児のモニタリング情報が十分に収集されている印象は得られなかった。分娩監視装置(胎児心音、子宮収縮記録装置)が1台しか稼動していないこともその理由であろうが、それ以前の古典的な方法によっても、右の情報収集に改善の余地が見受けられる。スタッフからは、分娩監視装置の充実が必要であるという訴えがあったが、単に機器の補充をするだけでは状況は改善されないという印象を受けた。

分娩室には分娩台が2台設置されている。帝王切開のための手術室は隣に配置され、 麻酔科医も24時間体制で待機しており、緊急の場合20分ないし1時間で帝王切開を開始 できる。これは、このクラスの施設として、日本の現状と照らしてもよい水準にあると 考えられる。

ただし、新生児の蘇生のためのスペースと準備は、十分な配慮がなされているとは思えない。高価な設備がなくてもヒーターや白熱灯によって行い得る新生児の保温について、このレベルの病院であれば考慮されていて当然だと考えるが、その配慮がない。高性能のクベース2台を所有しているが、少なくとも見学した時点では使用中ではなく、また、直ちに使用可能となるための準備がされているようにも思えなかった。取り扱い分娩数から考えて、クベースが1台も使用されていないのは、たまたまそのような新生児がいなかったというよりも、有効に活用されていない可能性が高いと考える。新生児を産科医が診るのか小児科医が扱うのかという問題を含めて、新生児の管理に関して、向上の余地が大きく残されていると見受けられた。日本においても多くの病院で抱える課題であるが、分娩室は非常に無機質で寒々とした印象であり、産婦が分娩に対してポジティブなイメージをもてるような改善が可能と感じた。

同様のいわゆる病棟の環境整備については、他の部分でも改善の余地は大きくあり、 スタッフの意識の改革によるわずかな努力で、患者が受ける病棟の印象を大きく改善で きる状況である。

3-3 プロジェクトの将来計画

主な内容は下記のとおりである。

- (1) ISTの情報フォーマット(計画・モニタリング用)が、1999年12月末までに決定される。
- (2) 2000年6月までに、3州においてすべてのIST情報がコンピュータに入力され、 HRDDに報告される。
- (3) 2000年7月までに、HRDDは入手した3州のIST情報を分析し、結果を3州にフィードバックする。
- (4) 3州は、1999年の年次報告を2000年1月までに発表する。
- (5) 3州は、2000年の活動計画を2000年1月までに発表する。
- (6) MCHの進んだ経験がHRDDのIST情報システムに入れられる。

3 - 4 PDMの修正

本協議では、プロジェクトの目標および成果の確認を行うに止め、指標および活動等PDMの他の項目については、今後のプロジェクト活動を通じて決定することとした。(ミニッツANNEX 3 参照)



附属 資料

ミニッツ



MINITUES OF DISCUSSIONS ON THE PROJECT FOR THE IMPLEMENTAION OF THE MATERNAL AND CHILD HEALTH IN-SERVICE TRAINING SYSTEM AND PROGRAM BETWEEN THE JAPANESE CONSULTATION TEAM AND MINISTRY OF HEALTH OF THE GOVERNMENT OF REPUBLIC OF GHANA

The Japanese Consultation Team (hereinafter referred to as "the Team") organized by the Japan International Cooperation Agency (hereinafter referred to as "JICA") and headed by Prof. Takusei UMENAI, visited Republic of Ghana from 30th October to 05th November 1999 for the purpose of reviewing and discussing the detailed implementation plan from 1999 to 2002 of the "Project for the Improvement of Maternal and Child Health In-Service Training System and Program" (hereinafter referred to as "the Project").

During its stay in Ghana, the Team exchanged views and had a series of discussion with the Ghanaian authorities concerned regarding the activities and implementation of the Project.

As a result of the discussions, both Japanese and Ghanaian sides agreed upon the issues referred to in the document attached hereto.

ACCRA, 05th November 1999

Prof. Takusei UMENAI

Leader

Consultation Team

Japan International Cooperation Agency

Japan

Dr. A. Issaka TINORGAH

Acting Director

Medical Services

Ministry of Health

Republic of Ghana

Witnessed by : Mrs. Agnes M. BATSA

Head, Bilateral Economic Relations Unit

Ministry of Finance

Republic of Ghana



MINUTES OF DISCUSSIONS

1. SUMMARY

The Project started on 01 June 1997 with a five-year cooperation period for the purpose of establishing the system for structured In-Service Training (hereinafter "IST") for the health workers in Ghana.

In accordance with the Record of Discussions (hereinafter referred to as "R/D") signed by both Japanese and Ghanaian sides on 22 January 1997, JICA has dispatched three long-term and six short-term experts to Ghana, and also has taken necessary measures to implement the Project in collaboration with Human Resource Development Division (hereinafter "HRDD"), Ministry of Health, Ghana.

Both sides reviewed the activities undertaken so far for the Project. Based upon the common recognition of the present status of the Project, both sides, thus, confirmed the continuous cooperation between the Japanese and Ghanaian governments for the progress of the Project.yy



OB

2. REVIEW OF ACTIVITIES IN JFY 1997 (JUNE 1997 - MARCH 1998)

The following activities were undertaken for the Project by Japanese and Ghanaian sides, respectively (see Annex 1).

2.1 Activities undertaken by Japanese side

2.1.1 Dispatch of the Japanese experts

The following Japanese experts were assigned:

Name of Experts	Expertise Field	Mission Period
Long-term expert(s)		
1) Kijo DEURA, Dr.	Team Leader	23 Jun 1997 = 22 Jun 1999
2) Hirotaka YOSHIOKA, Mr.	Project Coordinator	23 Jun 1997 - 22 Jun 2000 *
3) Hirotsugu AIGA, Mr.	Public Health	20 Jul 1997 - 19 Jul 2000 *

Mission period was extended for one year in June 1999.

2.1.2 Dispatch of the Japanese mission team(s)

The Consultation Team organized by Japanese side and headed by Dr. Yohichi SAKAKIHARA visited Ghana from 09 to 19 November 1997 for the purpose of discussing the detailed implementation plan 1997-2002 for the Project. Through a series of discussions with the Ghanaian side, the implementation plan 1997-1998 was agreed. Minutes of Discussion was signed between Japanese and Ghanaian sides.

2.1.3 Training of Ghanaian counterparts in Japan

The following counterparts were dispatched to Japan as trainees:

Name of Counterparts	Training Field	Training Period
1) Symon N, KOKU, Mr.	Public Health	01 Dec 1997 - 14 Dec 1997
2) Delanyo Y. DOVLO, Dr.	Public Health	25 Jan 1998 - 08 Feb 1998

2.1.4 Provision of machinery and equipment

The machinery, equipment, and other materials (hereinafter referred to as "Equipment") necessary for the implementation of the Project were discussed and itemized. The equipment provision plan was developed and agreed upon among HRDD/MOH and each Regional Health Administration (hereinafter referred to as "RHA") of the focusing regions². Thus, the equipment for HRDD and RHAs was provided.

2.1.5 Rehabilitation of Regional Training Centers (RTCs)

For rehabilitating the Regional Training Centers (hereinafter referred to as "RTCs") in the focusing regions, Japanese side provided the technical and financial supports. The proposals of rehabilitation submitted by each RHA were carefully assessed. The contracts of rehabilitation of RTCs were signed between JICA, the contractors and the consultants on 30 March 1998.

The three focusing regions consist of Volta region (VR), Western region (WR), and Brong-Ahafo region (BAR).





Japanese fiscal year (JFY) starts in 01st April and ends in 31st March.

2.1.6 Operation and Maintenance (O&M) cost supplement

In principle, Ghanaian side takes responsibility for operation and maintenance (hereinafter referred to as "O&M") cost for the project implementation and equipment provided. Japanese side, however, covered a part of O&M cost due to the budgetary constraints in Ghanaian side.

2.2 Activities undertaken by Ghanaian side

2.2.1 Project office offer

An office room equipped with a desk and a chair was assigned exclusively to the Japanese experts as a project office. Additionally, one Japanese expert shared another office room with one of the Ghanaian counterparts.

2.2.2 Counterpart identification

The following staffs of MOH were identified as counterparts of the Japanese experts:

	Counterpart Title	Name
1)	Director, HRDD	Delanyo Y. DOVLO, Dr.
2)	Deputy Director, HRDD	Ken SAGOE, Dr.
3)	Head, Training Unit, HRDD	Said Al-HUSSEIN, Mr,
4)	IST Coordinator, Training Unit, HRDD	Symon N. KOKU, Mr.
5)	Regional Director, VR	Frank, NYONATOR, Dr.
6)	Regional Director, WR	Ernest HANSON, Dr.
7)	Regional Director, BAR	Kofi ASARE, Dr.
8)	Regional Training Coordinator, VR	Ellen SARPONG-AKORSAH, Ms.
9)	Regional Training Coordinator, WR	Esther ANYIDOHO, Ms.
10)	Regional Training Coordinator, BAR	Theodora OKYERE, Ms.

2.2.3 Operation and Maintenance (O&M) cost allocation

O&M cost such as water supply and electricity in the project office was covered by Ghanaian side allocation from June 1997 to March 1998.



2.3 Activities undertaken by both sides

2.3.1 Rapid needs assessment

In order to roughly estimate the IST needs, the rapid needs assessment was conducted in the focusing regions jointly by Japanese and Ghanaian sides as follows:

Target region	Date
1) Brong-Ahafo Region (BAR)	10 Aug 1997 - 13 Aug 1997
2) Volta Region (VR)	02 Sep 1997 = 03 Sep 1997
3) Western Region (WR)	18 Aug 1997 - 20 Aug 1997

2.3.2 Regular meetings

Monthly Regular Meeting in HRDD/MOH was basically held for smoother implementation of the Project.



H

2.3.3 Needs and Baseline Survey (NBS)

In order to propose a better designed IST system, the Needs and Baseline Survey (hereinafter "NBS") was proposed. The outline of the NBS was discussed and agreed.

2.3.4 Seminar on the Structured IST

The regional seminars were held in the focusing regions to discuss and share the ideas on national IST Policy. The objectives of the seminars were to appraise the Project and to strengthen national and intra-regional collaboration with the districts and in the development and implementation of IST system.





3. REVIEW OF ACTIVITIES IN JFY 1998 (APRIL 1998 – MARCH 1999)

The following activities were undertaken for the Project by Japanese and Ghanaian sides, respectively (see Annex 1).

3.1 Activities undertaken by Japanese side

3.1.1 Dispatch of the Japanese experts

The following Japanese experts were assigned:

Name of Experts	Expertise Field	Mission Period
Long-term expert(s)		
1) Kijo DEURA, Dr.	Team Leader	23 Jun 1997 - 22 Jun 1999
2) Hirotaka YOSHIOKA, Mr.	Project Coordinator	23 Jun 1997 - 22 Jun 2000 *
3) Hirotsugu AIGA, Mr.	Public Health	20 Jul 1997 - 19 Jul 2000 *
Short-term expert(s)		
4) Masami WATANABE, Mr.	System Engineering **	01 Jun 1998 - 30 Nov 1998
5) Ritsuko NAKATA, Ms.	Nursing Education	18 Jul 1998 - 16 Aug 1998
6) Emiko SUZUI, Ms.	MCH	16 Feb 1999 - 30 Mar 1999

- * The mission period was extended for one year in June 1999.
- ** The mission of "System Engineering" expert was: (i) to set up a computer network system within HRDD; (ii) to link it up with the focusing regions; and (iii) to transfer the skills to Ghanaian counterparts.

3.1.2 Dispatch of the Japanese mission team(s)

The Consultation Team organized by Japanese side and headed by Prof. Takusei UMENAI visited Ghana from 16 to 24 October 1998 for the purpose of monitoring the progress of the Project and advising on it. Through a series of discussions with the Ghanaian side, the Project Designed Matrix (PDM) and Tentative Plan of Implementation (TSI) were revised and agreed upon. Minutes of Discussion was signed between Japanese and Ghanaian sides.

3.1.3 Training of Ghanaian counterparts in Japan

The following counterparts were dispatched to Japan as trainees:

	Name of Counterparts	Training Field	Training Period
1)	Frank NYONATOR, Dr.	Public Health	23 Aug 1998 - 05 Sep 1998
2)	Said AL-HUSSEIN, Mr.	Community Health	25 Oct 1998 - 22 Nov 1998
3)	Esther ANYIDOHO, Ms.	Community Health	25 Oct 1998 - 22 Nov 1998
4)	Ellen SARPONG-AKORSAH, Ms.	Community Health	28 Mar 1999 - 25 Apr 1999
5)	Theodora OKYERE, Ms.	Community Health	28 Mar 1999 - 25 Apr 1999

3.1.4 Provision of machinery and equipment

Ghanaian side requested Japanese side to provide the equipment necessary for the implementation of the Project. The equipment was provided to HRDD and each RHA of the focusing regions in principle, when rehabilitation of the RTC was completed (see Annex 2).

3.1.5 Rehabilitation of Regional Training Centers (RTCs)

Rehabilitation of the RTCs started on 01 April 1998. The works in the focusing regions were completed on 21 March 1999. The



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progress of the works were carefully monitored by Japanese side by participating in monthly site meetings. The cost for the rehabilitation (total: USD 195,483) was funded by Japanese side.

3.1.6 Operation and Maintenance (O&M) cost supplement

Continuously since JFY 1997, Japanese side has been covering a part of O&M cost for the project implementation. "Budget for Middle-Level Trainees Training Program" was secured for carrying out the Training of Trainers (hereinafter referred to "TOT) courses.

3.2 Activities undertaken by Ghanaian side

3.2.1 Project office offer

An office room equipped with a desk and a chair was assigned exclusively to the Japanese experts as a project office. Additionally, one long-term and three short-term Japanese experts shared two other office rooms with the Ghanaian counterparts.

3.2.2 Counterpart identification

The following staffs of MOH were identified as counterparts of the Japanese experts:

Counterpart Title	Name
1) Director, HRDD	Delanyo Y. DOVLO, Dr.
2) Deputy Director, HRDD	Ken SAGOE, Dr.
3) Head, Training Unit, HRDD	Said Al-HUSSEIN, Mr.
4) IST Coordinator, Training Unit, HRDD	Symon N. KOKU, Mr.
5) IST Coordinator, Training Unit, HRDD	May OSAE-ADDAE, Ms.
6) Senior officer, Training Unit, HRDD	Stephan NTOW, Mr.
7) Head, Planing & Information Unit, HRDD	Prince BONI, Mr.
8) Senior Officer, Planing & Info. Unit, HRDD	Stephen DARKO, Mr.
9) Senior Officer, Planing & Info. Unit, HRDD	Franacis Victor EKEY, Mr.
10) Senior Officer, Planing & Info. Unit, HRDD	Charles ACQUAH, Mr.
11) Regional Director, VR	Frank NYONATOR, Dr.
12) Regional Director, WR	Mohammed IBRAHIM, Dr.
13) Regional Director, BAR	Kofi ASARE, Dr.
14) Regional Training Coordinator, VR	Ellen SARPONG-AKORSAH, Ms.
15) Regional Training Coordinator, WR	Esther ANYIDOHO, Ms.
16) Regional Training Coordinator, BAR	Theodora OKYERE, Ms.

3.2.3 Operation and Maintenance (O&M) cost allocation

 ${\rm O\&M}$ cost such as water supply and electricity in the project office was covered by Ghanaian side allocation from June 1998 to March 1999.

To ensure the smoother implementation of the Project, "Middle-Level Trainees Training Programs" which supports the skill strengthening of the trainees were carried out. The cost for these programs was fully sponsored by JICA in the initial JFY, i.e. JFY 1998. Ghanaian side in principle will finance 20% of the total cost in the following JFY, i.e. JFY 1999.





3.3 Activities undertaken by both sides

3.3.1 Needs and Baseline Survey (NBS)

For the purpose of developing an appropriate IST system, the NBS was conducted in the form of self-administered questionnaire census targeting both health workers and health facilities in the focusing regions. The questionnaire forms were developed jointly by HRDD, RHAs of the focusing regions, JICA, and German Development Cooperation (GTZ). After statistical analysis of data collected, the results of the NBS were presented in the form of report.

3.3.2 Development of IST Information System

For the purpose of monitoring the progress of IST coverage, the "IST Information System" was tentatively developed and pre-tested in the focusing regions. The report forms were developed through working group approach to build consensus. The database for the "IST Information System" was designed by using software "Microsoft ACCESS" that would enable us to search the suitable participant candidates for the IST programme. To get IST coordinators at both regional and district level familiar with the system, a training programme on how to fill out the forms were held in each focusing region.

3.3.3 Local computer network in HRDD

Local computer network system was set up in HRDD by using Windows NT software. The HRDD staffs had access to the printers.

3.3.4 Regular meetings

Weekly regular meeting was held among the staffs of Training Unit and the Japanese Project Team. The progress of project activities were reported and monitored on daily basis in the meetings.

3.3.5 Middle-Level Trainees Training Programme

"Middle-Level Trainees Training Programme" was planned after careful discussion for action plan 1998. Two programmes were implemented, i.e. "IST Information System Training" (see "3.3.2") and "Reproductive Health Curriculum Development Workshop".





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4. REVIEW AND PLAN OF ACTIVITIES IN JFY 1999 (APRIL 1999 – MARCH 2000)

The following activities are undertaken for the Project by Japanese and Ghanaian sides, respectively (see Annex 1).

4.1 Activities to be undertaken by Japanese side

4.1.1 Dispatch of the Japanese experts

The following Japanese experts are/will be assigned:

Name of Experts	Expertise Field	Mission Period
Long-term expert(s)		
1) Kijo DEURA, Dr.	Team Leader	23 Jun 1997 - 22 Jun 1999
2) Toshio AKIBA, Dr.	Team Leader	12 Jun 1999 - 11 Jun 2000
3) Hirotaka YOSHIOKA, Mr.	Project Coordinator	23 Jun 1997 - 22 Jun 2000 *
4) Hirotsugu AIGA, Mr.	Public Health	20 Jul 1997 - 19 Jul 2000 *
5) Toshiko OSHITA, Ms.	MCH 1	11 Nov 1999 - 10 Nov 2000
6) (not identified yet)	System Engineering**	(not determined yet)
Short-term expert(s)		
7) Midori ISHIKAWA, Ms.	Nutrition	01 Apr 1999 - 28 Feb 2000***
8) Masami WATANABE, Mr.	System Engineering†	08 Apr 1999 - 07 Oct 1999
9) Emiko SUZUI, Ms.	MCH	22 Jul 1999 - 05 Sep 1999
10) (not identified yet)	Financial Analysistt	(not determined yet) †††

- * The mission period was extended for one year in June 1999.
- ** TOR for "System Engineering" long-term expert includes: (i) to review and finalize
 "IST Information System" presently under pretest; (ii) to operationalize "IST
 Information System" in the focusing regions; (iii) to develop a manual for "IST
 Information System" (iv) to monitor "IST Information System"; and (v) to transfer
 the above-related skills to the counterparts including general computer operation.
- *** The mission period was extended for five months in September 1999.
- † TOR for "System Engineering" short-expert included: (i) to set up a computer network system in HRDD; (ii) to set up a computer and its related accessories in the RTCs; (iii) to transfer the above-related skills to counterparts; and (iv) to conduct preparatory works for operationalizing "IST Information System" and each RHA of three focusing regions.
- TOR for "Financial Analysis" short-expert included: (i) to develop the criteria for selecting a more cost-efficient IST mode, i.e. "Mobile Outreach IST" or "Conventional IST"; and (ii) to develop O&M guidelines for RTC that ensures financial sustainability of the RTCs.
- To maximize the use of the local human resources available, a local Ghanaian consultant will be employed as an in-house consultant in stead of dispatching a Japanese expert.

4.1.2 Dispatch of the Japanese mission team(s)

Mr. Kimio FUJITA, President of JICA, visited the RHA of WR on 13 July 1999. Having exchanged his views on the Project with Dr. M. Ibrahim, Regional Director of WR, the President expressed appreciation for their cordial acceptance.

The Consultation Team headed by Prof. Takusei UMENAI is delegated from 30 October to 05 November 1999. Through a series of discussions with the Ghanaian side, the scope of works for the Project has been clearly defined.

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4.1.3 Training of Ghanaian counterparts in Japan

The following counterparts are dispatched as trainees:

Name of Counterparts	Training Field	Training Period
1) Stephen DARKO, Mr.	PC Application Design	03 Aug 1999 - 29 Nov 1999
2) Mohammed IBRAHIM, Dr.	Community Health	29 Oct 1999 - 08 Dec 1999
3) May OSAE-ADDAE, Ms.	Community Health	29 Oct 1999 - 08 Dec 1999

4.1.4 Provision of machinery and equipment

Ghanaian side requested Japanese side to provide the equipment necessary for the implementation of the Project. Provision of equipment is presently under process (see Annex 2).

4.1.5 Rehabilitation of Regional Training Centers (RTCs)

The joint commissioning of three rehabilitated RTCs were officially held in Ho of VR on September 1999.

4.1.6 Operation and Maintenance (O&M) cost supplement

Continuously since JFY 1997, Japanese side has been prepared to cover a part of O&M cost for the implementation of the Project. Additionally, Japanese side will cover 80% of total cost of the "Middle-Level Trainees Training Program" that will accommodate some workshops and the training courses.

4.2 Activities to be undertaken by Ghanaian side

4.2.1 Project office offer

An office room equipped with a desk and a chair was assigned exclusively to the Japanese experts as a project office. Additionally, some Japanese experts shared two other office rooms with the Ghanaian counterparts.

4.2.2 Counterpart identification

The counterparts are identified among the staffs of MOH as follows:

	Counterpart Title	Name
1)	Acting Director, HRDD	Ken SAGOE, Dr.
2)	Head, Training Unit, HRDD	Said AL-HUSSEIN, Mr.
3)	IST Coordinator, Training Unit, HRDD	Symon N. KOKU, Mr.
4)	IST Coordinator, Training Unit, HRDD	May OSAE-ADDAE, Ms.
5)	Fellowship Coordinator, Training Unit, HRDD	Seth AQUAH, Mr.
6)	Senior officer, Training Unit, HRDD	Stephen NTOW, Mr.
7)	Head, Planing & Info. Unit, HRDD	Prince BONI, Mr.
8)	Senior Officer, Planing & Info. Unit, HRDD	Stephen DARKO, Mr.
9)	Head, MCH Unit, PHD	Henrietta Odoi-Agyako, Dr.
10)	Regional Director, VR	Frank NYONATOR, Dr.
11)	Regional Director, WR	Mohammed IBRAHIM, Dr.
12)	Regional Director, BAR	Kofi ASARE, Dr.
13)	Regional Training Coordinator, VR	Ellen SARPONG-AKORSAH, Ms.
14)	Regional Training Coordinator, WR	Esther ANYIDOHO, Ms.
15)	Regional Training Coordinator, BAR	Theodora OKYERE, Ms.





4.2.3 Operation and Maintenance (O&M) cost allocation

Japanese side requested Ghanaian side, either fully or partially, to cover O&M cost including per diem for field trip of Ghanaian counterparts. Ghanaian side agreed to allocate the budget for the Project as much as possible. Additionally, Ghanaian side will cover 20% of total cost of the "Middle-Level Trainees Training Program" that will accommodate some workshops and the training courses.

4.3 Activities to be undertaken by both sides

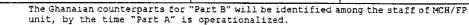
4.3.1 Overall framework of the Project

The scope of the Project was re-designed to be composed of two parts, i.e. "Part A: development and operationalization of system for structured IST"; and "Part B: IST programme in MCH through TOT". Furthermore, "Part A" consists of five major components; i.e. "(A1) IST Information System"; "(A2) IST Learning Guidelines"; "(A3) IST Logbook"; "(A4) IST Environmental Settings"; and "(A5) IST Monitoring and Evaluation". (see Annex 3)

4.3.2 Joint task force arrangement

To realize the project purpose within the defined cooperation period, the following joint task force arrangement was set up for the Project and was agreed upon between Japanese and Ghanaian sides:

C Water wasters assessed	T	Ob 1 1
Major project component	Japanese side	Ghanaian side
	experts	MOH/HQ*
Overall project management	Toshio AKIBA, Dr.	Ken SAGOE, Dr.
	,	·
Part A: System for structured IST		
(A1) IST Information System	(System Engineering)	Prince BONI, Mr.
(AI) 131 Informacion bystem	(placew Fudingering)	
		Stephen DARKO, Mr.
(A2) IST Learning Guidelines	Hirotsugu AIGA, Mr.	Said AL-HUSSEIN, Mr.
(A2) ISI Dearning darderines	Toshiko OSHITA, Ms.	
	TOSHIKO OSHIIM, MS.	Symon N. KOKU, Mr.
(30) 700 7	m his ograms w	
(A3) IST Logbook	Toshiko OSHITA, Ms.	Said AL-HUSSEIN, Mr.
	Hirotsugu AIGA, Mr.	May OSAE-ADDAE, Ms.
 (A4) IST Environmental Settings	Hirotaka YOSHIOKA, Mr.	Van CACOE D-
(A4) 131 Environmental Sectings	HILOCAKA IOSHIONA, Mr.	Ken SAGOE, Dr.
		Seth AQUAH, Mr.
(A5) IST Monitoring and	Hirotsugu AIGA, Mr.	Said AL-HUSSEIN, Mr.
Evaluation		
Evaluacion	Midori ISHIKAWA, Ms.	Stephen NTOW, Mr.
Part B: IST in MCH through TOT	Toshiko OSHITA, Ms.	Henrietta Odoi-Agyako,
AND CONTRACTOR OF THE PROPERTY	Tobilita, Ms.	Dr.
		Dr.



^{**} The Ghanaian counterparts of RHAs support all the above-mentioned activities at the field level.

4.3.3 IST Information System (Part A1)

The results of pretest of IST Information System will be reviewed by interviewing with staff in charge of the System at both regional and district level. Then, the System will be modified for further improvement and be finalized.





An official classification of IST courses, an important basis for "IST Information System" 4 , needs to be urgently developed. The basic framework of the classification is scheduled to be developed by December 1999 5 .

By using the classification, "IST Information System" will be operationalized in the focusing regions in the following schedule:

Step	Activity	Time schedule
0	An official classification of IST courses is developed.	Dec 1999
1	Entering of IST information into computer database is fully operationalized and the computerized information is delivered to HRDD	Jun 2000
2	HRDD starts providing the feedback to 3 RHAs.	Jul 2000
3	3 RHAs present IST results of 1999 by using the classification.	Jan 2000
4	3 RHAs present IST plan of 2000 by using the classification.	Jan 2000

4.3.4 IST Learning Guidelines (Part A2)

An "Official Classification of IST Courses" is indispensable for developing the system for structured IST. The Project has currently been preparing the proposal for its development.

4.3.5 IST Logbook (Part A3)

By reviewing some examples of training logbooks for health workers, the basic concept of "IST Logbook" will be discussed and proposed. Additionally, its prototype will be developed.

4.3.6 IST Environmental Settings (Part A4)

The O&M guidelines for RTC that ensures financial sustainability of the RTCs will be developed. The criteria for selecting a more cost-efficient IST mode, i.e. "Mobile Outreach IST" or "Conventional IST" will be proposed.

4.3.7 IST Monitoring and Evaluation (Part A5)

"IST Monitoring and Evaluation" is composed of three major approaches: i.e. (i) routine M&E; (ii) "Census I, II" for measuring results of the Project; and (iii) "Sampling Survey I, II" for measuring effectiveness and impact.

As a baseline data "Census I", Needs and Baseline Survey (NBS) was conducted in 1998. The final report of the NBS was prepared and adopted jointly by the HRDD, the RHAs of the focusing regions, JICA, and GTZ. Having been printed, copies of the report were distributed to other MOH divisions, other RHAs, health partners, and other medical or health related organizations. Simultaneously, the official presentations were made both for other MOH divisions and for the health partners in June and July 1999, respectively.

For the purpose of comparing the results of the NBS with the survey in 2002, a newly develoloped classification will be converted into the one used for the NBS.





An official classification of IST courses will be applied not only to "IST Information System" but to "IST Learning Guidelines" and "IST Logbook".

The framework of the "Sampling Survey" for measuring effectiveness and impact of the Project is presently under development. By using this framework, a baseline data "Sampling Survey I" in the focusing regions will be conducted.

4.3.8 IST programme in MCH (Part B)

Technical collaboration will be extended to MCH/FP Unit, Public Health Division, within the framework of the Project.

4.3.9 Regular meetings

For the purpose of sharing the progress status of the Project, bi-weekly regular meeting is intended to hold among the Japanese experts, Training Unit, and Planning & Information Unit, HRDD.

4.3.10 Computer system setting up in HRDD and focusing regions

Local computer network system has been extended to most offices in HRDD by using Windows NT software. Thus, most HRDD staffs have access to the IST-Database and the printers. A computer and its various accessories were/will be equipped and set up in the RTCs of the focusing regions.





5. PROJECT DESIGN MATRIX (PDM)

According to the present status of the progress and other conditions of the Project, both sides agreed to modify and revise the Project Design Matrix (see Annex 3).

6. OTHER IMPORTANT ISSUES

8.1 Local cost sharing

In principle, Ghanaian side takes responsibility for O&M cost for the project implementation. Japanese side has, however, been covering a part of O&M cost due to the present budgetary constraints in Ghanaian side. The budget for "Middle-Level Trainees Training Program" will be funded by Japanese side from JFY 1998 to 2002. The amount of the budget from Japanese side will be reduced by 20% per annum. Japanese side, therefore, requested to Ghanaian side to cover the part to be reduced. Ghanaian side agreed to secure the budget for the program.

8.2 Provision of appropriate office space

The more the Project is progressing, the more materials such as documents and equipment are in the Project office. Therefore, the Project office needs a larger space to accommodate the above materials. Given this situation, both sides repeatedly re-agreed to take necessary measures to procure appropriate office space for the Project.

8.3 Korle-Bu Teaching Hospital

The main purpose of the Project is to develop the sustainable IST system for structured IST, which consists of: (A1) IST Information System; (A2) IST Learning Guidelines; and (A3) IST Logbook. Although Korle-Bu Teaching Hospital was designed as a project site, how Korle-Bu Teaching Hospital can contribute to those areas has not been very clear.

The Project would appreciate their appropriate and concrete idea for the project components and then would consider and explore the possibilities of collaboration with the Hospital.

8.4 Ghana Health Service (GHS)

Ghana Health Service (GHS), a executing agency responsible for health care service delivery, is organized and established in January 1998. Both sides agreed to continue the joint implementation of the Project even though the situation of GHS changes in the future.

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Major Activities from JFY 1997 to 1999 Annex 1

Provision of Machinery and Equipment from JFY 1997 to 1999 Annex 2

Project purpose and output Annex 3





MAJOR ACTIVITIES FOR JFY 1997

JAPANESE SIDE	GHANAIAN SIDE
a) Dispatch of the Japanese Expert Long Term Expert: Kijo Deura,: Chief Advisor, 23/6/97-22/6/99 Hirotaka Yoshioka: Project Coordinator 23/6/97-22/6/99 Hirotsugu Aiga: Pubic Health, 20/7/97-19/7/99 Short Term Expert (not dispatched) b) Training of Ghanaian Counterpart in Japan Symon N. Koku, Mr. Public Health 1/12/97-14/12/97 Delanyo Y. DoVRo, Dr. Public Health, 25/1/98-8/2/98 c) Provision of Machinery and Equipment Two four-wheel-drive vehicles to HRDD/MOH Provision of other Equipment to HRDD/MOH and three regions were provided. d) Financial support to rehabilitation of Regional Training Centers was planned and contracted g) Set-up of the project office f) Operation and Maintenance Cost Support for the Project g) Survey for NGO activities in Health Sector in Ghana h) Survey for other donors' activities and Exchange Opinions i) Consultation mission team from 09 to 19 Nov 1997 and M/D was signed	a) Project Office Offer One office room of HRDD Sharing another office room with Ghanaian counterpart b) Counterpart Identification Director, HRDD (Delanyo, Y. Dovlo, Dr.) Deputy Director, HRDD (Ken Sagoe, Dr.) Head, Training Unit, HRDD (Said Al-Hussein, Mr.) In-Service Training Coordinator, HRDD (Symon N. Koku, Mr.) In-Service Training Coordinator, HRDD (May Osae-Addae, Ms.) Regional Director (BAR) (Koti Asarc, Dr.) Regional Director (WR) (Frank Nyanator, Dr.) Regional Director (WR) (Ernest Hanson, Dr.) Regional Training Coordinator (BAR), (Theodora Okyere, Ms.) Regional Training Coordinator (WR) (Esther Anyidoho, Ms.) c) Operation and Maintenance Cost Allocation (Electricity and water supply for the project office)
JAPANESE AN	D GHANAIAN SIDES

a) Rapid Needs Assessment of In-Service Training

Brong Ahaho Region 10/8/97-13/8/97

Western Region

18/8/97-20/8/97

Volta Region

2/9/97-3/9/97

b) Survey and hearing for rehabilitation plan of training center for 3 regions and Korle-Bu Teaching

- c) BARseline Survey for In-Service Training Plan Comprehensive survey of present In-Service Training and training needs was discussed.
- d) Plan of organizing working group and seminar for In-Service Training
- e) Bi-weekly regular meeting for the project
- f) Participation to workshop and working group related to In-Service Training
- g) Seminar on the Structured In-Service Training in 3 regions
- h) First Joint Coordinating Committee







MAJOR ACTIVITIES FOR JFY 1998

JAPANESE SIDE	GHANAIAN SIDE
a) Dispatch of the Japanese Expert	a) Project Office Offer
Long Term Expert:	One office room of HRDD
 Kijo Deura, : Chief Advisor ,23/6/97-22/6/99 	Sharing another office room with Ghanaian
 Hirotaka Yoshioka: Project Coordinator 	counterpart
23/6/97-22/6/99	b) Counterpart Identification
 Hirotsugu Aiga: Pubic Health, 20/7/97-19/7/99 	 Director, HRDD (Delanyo Y. Dovlo, Dr.)
Short Term Expert	 Deputy Director, HRDD (Ken Sagoe, Dr.)
 Masami Watanabe: System Engineering 	 Head, Training Unit, HRDD (Said Al-Hussein,
 Ritsuko Nakata: Nursing & Midwifery Education 	Mr.)
	 In-Service Training Coordinator, HRDD (Symon
b) Training of Ghanaian Counterpart in Japan	N. Koku, Mr.)
Frank Nyonator, Dr.	 In-Service Training Coordinator, HRDD (May
Public Health 1/12/97-14/12/97	Osae-Addae, Ms.)
 Said Al-Hussein, Mr. 	Senior Officer, HRDD (Stephen Ntow, Mr.)
Community Health , 25/10/98-22/11/98	 Head, Information Unit/HRDD (Prince Boni, Mr.)
 Esther Anvidoho, Ms. 	 Senior Officer, HRDD (Stephen Darko, Mr.)
Community Health, 25/10/98-22/11/98	Senior Officer, HRDD (Francis Victor Ekey, Mr.)
 Ellen Şarpong-Akorsah, Ms. 	Senior Officer, HRDD (Charles Acquah, Mr.)
Community Health, February 1999	Regional Director (BAR) (Kofi Asare, Dr.)
Theodra Okyere, Ms.	Regional Director (VR) (Frank Nyanator, Dr.)
Community Health, February 1999	Regional Director (WR) (Mohammed Ibrahim, Dr.)
a) Provision of Machinery and Equipment	 Regional Training Coordinator (BAR) (Theodora
 Provision of other Equipment to HRDD/MOH and 	Okycrc, Ms.)
three regions are provided.	 Regional Training Coordinator (VR) (Ellen
b) Rehabilitation of Regional Training Centers was /will	Sarpong-Akorsah, Ms.)
be completed	Regional Training Coordinator (WR) (Esther
c) Operation and Maintenance Cost Support for the	Anvidoho, Ms.)
Project	c) Operation and Maintenance Cost Allocation
f) Consultation mission team from 16 to 24 October 1998 and M/D was signed	(Electricity and water supply for the project office)
	D GHANAIAN SIDES

- a) Needs and BARseline Survey of In-Service Training in 3 regions
- b) Working Group Activities Working Group for Training Information System Working Group for the Structured In-Service Training Program/Curriculum
- c) Regular meeting Weekly HIST-Project Unit meeting Monthly HRDD staff and JICA team joint meeting
- Development of Training Information System In-Service Training Database
- Setting up computer network in HRDD
- Review of the training curriculum/manuals and teaching materials related to In-Service Training
- g) Middle-level trainees training program
- h) Second Joint Coordinating Committee





MAJOR ACTIVITIES FOR JFY 1999

JAPANESE AND GHANAIAN SIDES

- a) Presentation of the results of Needs and BARseline Survey of In-Service Training in MOH and Health Partner Meeting
- b) Regular weekly HIST-Project Unit meeting
- c) Development of In-Service Training System
 - c)-1. Strengthening In-Service Training information system in HRDD and three regions
- d) Setting up computer network in HRDD
- e) Provision and setting up computers for three regions
- f) Conducting middle-level trainees training program
- g) Third Joint Coordinating Committee





Provision of Machinery & Equipment JFY 1997-1999

#	Items	Specification	Number of Provided				led	Fiscal Year	Delivery
			HRDD	BAR	٧R	WR	Total		
1	4WD Vehicles	NISSAN Patrol	2				2	JFY1997	completed
2	4WD Vehicles	TOYOTA Landcruiser		1	1	- 1	3	JFY1997	completed
,	Dhan Caru Machina	(Mobile Training Center) CANON NP6035 Feeder, 20bin Sorter	1			1	1	JFY1997	completed
3	Photo Copy Machine Color TV	SONY 25inch Multi-System	1	1	1	1	3	JFY1997	completed
5	Video Tape Recorder	SONY 4Hads Multi-System		1	1	1	3	JFY1997 JFY1997	completed
6	Potable Generator	YAMAHA 650VA	 	1	1	1	3	JFY1997	completed
7	Human Body Models	Teeth	 	1	1	1 1	3	JF11997 JFY1997	completed
<u> </u> -	Human Body Models	Ear		1	1	1	3	JFY1997	completed
 -		Brain	-	1	1	1	3	JFY1997	completed
 -		Muscle and Skeleton		1	1	1	3	JFY1997	completed
\vdash		Embryo in Womb		1	1	1	3	JFY1997	completed
⊩		Heart with Veins (large size)		1	1	1	3	JFY1997	completed
 		Heart with Veins (small size)		1	1	1	3	JFY1997	completed
-		Full Head in Pieces		1	1	1	3	JFY1997	completed
-		Head in Sagital Plane		1	1	1	3	JFY1997	completed
}		Torso with Organs		1	1	1	3	JFY1997	completed
		Tongue and Teeth	 	1	1	1	3	JFY1997	completed
		Mouth and Teeth		1	1	1	3	JFY1997	completed
		Teeth		1	1	1	3	JFY1997	completed
-		Throat		1	1	1	3	JFY1997	completed
-		Skin		1	1	1	3	JFY1997	completed
8	Wall Charts	Human body, Muscles		1	1	1	3	JFY1997	completed
F	11 444 5144 15	Blood Circulatory, Heart and It's bessels	-	1	1	1	3	JFY1997	completed
\vdash		Stages of Moltosis Cell Division		1	1	1	3	JFY1997	completed
		Human Skeletal and Bones of the Skull		1	1	1	3	JFY1997	completed
-		General Zoology Vertebrate Mammals		1	1	1	3	JFY1997	completed
╟─		Human Olfactory, Visual, Taste Organs		1	1	1	3	JFY1997	completed
		Human Respiratory System and Oral Cavity and Teeth		1	1	1	3	JFY1997	completed
\vdash		Human Visual, Hearing, Sense of Touch		1	1	1	3	JFY1997	completed
 		Human Nervous System		1	1	1	3	JFY1997	completed
9	Health Education	Aids Race Against Time	1	1	1	1	4	JFY1997	completed
	VideoTapes	Aids Life at Stake	1	1	1	1	4	JFY1997	completed
-	•	Breaking the Silence	1	1	1	1	4	JFY1997	completed
		Challenges	1	1	1	1	4	JFY1997	completed
		Clean Hands	1	1	1	1	4	JFY1997	completed
		Clean Teeth	1	1	1	1	4	JFY1997	completed
-		Consequences	1	1	1	1	4	JFY1997	completed
-		Developing Strategies	1	1	1	1	4	JFY1997	completed

B



#	Items	Specification	Number of Provided			led	Fiscal Year	Delivery	
			HRDD	BAR	VR	WR	Total		
		Paces of Aids	1	1	1	1	4	JFY1997	completed
		Faces of Aids	1	1	1	1	4	JFY1997	completed
		Facilitation	1	1	1	1	4	JFY1997	completed
		Images of HIV	1	1	1	I	4	JFY1997	completed
		Just a Little Smoke	1	1	1	1	4	JFY1997	completed
		Karate Kids	1	1	1	1	4	JFY1997	completed
		Men of Ndolera	1	1	1	1	4	JFY1997	completed
		More Time	1	1	1	1	4	JFY1997	completed
•		Put Yourself in Her Shoes	1	1	1	1	4	JFY1997	completed
-		Side by Side	1	1	1	1	4	JFY1997	completed
		Special Drink	1	1	1	1	4	JFY1997	completed
		Whom Do I Turn to ?	1	l	l	1	4	JFY1997	completed
9	Server Computer	Compaq Proliant 1600	2				2	JFY1997	completed
		17inch V50 SVGA Color Monitor	2				2	JFY1997	completed
		33.6KHz Fax Modem	2				2	JFY1997	completed
		CD ROM Drive	2				2	JFY1997	completed
		Keyboard with Mouse	2				2	JFY1997	completed
10	UPS	APC Smart UPS 1.4KVA	2				2	JFY1997	completed
11	Client Computer	Compaq Deskpro 2000GT	4				4	JFY1997	completed
		17inch V50 SVGA Color Monitor	4				4	JFY1997	completed
		Keyboard with Mouse	4				4	JFY1997	completed
12	UPS	APC Smart UPS 650VA	4				4	JFY1997	completed
13	Color Printer	Hewlett Packard DESKJET 890CCI	2				2	JFY1997	completed
14	Laser Printer	Hewlett Packard LASERJET 5N	2				2	JFY1997	completed
15	Scanner	Hewlett Packard SCANJET 5	1				l	JFY1997	completed
16	Soft Ware	Novell Intra Netware 4.11(10 User)	2				2	JFY1997	completed
		Micro Office 97 Professional	10				10	JFY1997	completed
17	Personal Computer	Compaq Deskpro 2000GT		1	1	1	3	JFY1998	completed
		17inch V50 SVGA Color Monitor		1	1	1	3	JFY1998	completed
		Keyboard with mouse		1	1	1	3	JFY1998	completed
_		UPS 650VA		1	1	1	3	JFY1998	completed
18	Soft ware	Windows NT	1				1	JFY1998	completed
		SPSS	1				1	JFY1998	completed
		Microsoft Office 97		1	1	1	3	JFY1998	completed
	Copy machine	B/W high speed with sorter and feeder		1	1	1	3	JFY1998	completed
20	Back-up Generator	5.5KVA		1	1	1	3	JFY1998	completed
21	Air Condition	2.0 HP 240V 3000W		2	2	2	6	JFY1998	completed
22	Type writer	Electric	1	1	1	1	4	JFY1998	completed
23	OHP		1	1	1	1	4	JFY1998	completed
24	Screen Set	Wall type, Portable	1	1	1	1	4	JFY1998	completed
25	Slide Projector	50 Pictures cassette	1	1	1	i	4	JFY1998	completed
26	Tape recorder	Handytype	2	2	2	2	8	JFY1998	completed
27	Video set	VHS Video Camera	1	1	1	1	4	JFY1998	completed



#	Items	Specification	Number of Provided					Fiscal Year	Delivery
			HRDD	BAR	VR	WR	Total		
		VHS Video Taperecorder	1	1	1	l	4	JFY1998	completed
28	Multi Projector		1	1	1	1	4	JFY1998	completed
29	Visual Projector		1	1	1	1	4	JFY1998	completed
30	Lecture Desk		<u> </u>	1	1	1	3	JFY1998	completed
31	Address Audio set		ļ	1	1	1	3	JFY1998	completed
32	White Board		1	1	1	1	4	JFY1998	completed
33	Flip Chart Stand		 	2	2	2	6	JFY1998	completed
ii .	Binding Machine		1	1	1	1	4	JFY1998	completed
35	Reference Book Set	Trulab Educacion	1	1	1	1	4	JFY1998	completed
11	Video Tapes Set	Health Education Resuscitation	1	1	1	1	4	JFY1998	completed
37	Human Model Surgical Operation Tool	Training Tool for Medical Assistant	1	1	1	1	3	JFY1998	completed
38	Model (Mamma)	Medical Examination training	 -	1	1	1	3	JFY1998 JFY1998	completed completed
11	Model (Internal Organs)	1	<u> </u>	1	1	1	3	JFY1998	completed
41	Wall Chart Set	14peace/set	 	1	1	1	3	JFY1998	completed
42	Simulator	Neonate	-	1	1	1	3	JFY1998	completed
43	Simulator	Adult	 	1	1	1	3	JFY1998	completed
44	Simulator	Childbirth (Pelvis Model with Baby head)	┼──	1	1	1	3	JFY1998	completed
45	Chair	Trainee Chair with Table	-	30	60	30	120	JFY1998	completed
46	Computer	Laptop type	1	1	1	1	4	JFY1999	not completed
10	Compater	CD Drive	1	1	1	1	4	JFY1999	not completed
\vdash		FD Drive	1	1	1	1	4	JFY1999	not completed
		AC Adapter	1	1	1	1	4	JFY1999	not completed
		Spair Buttery	1	1	1	1	4	JFY1999	not completed
-		Modem	1	1	1	ī	4	JFY1999	not completed
		Windows 95 Preinstalled	l	1	1	1	4	JFY1999	not completed
47	Fax machine		1	1	1	1	3	JFY1999	not completed
48	Photo Camera	Auto Focus	I	1	1	1	4	JFY1999	not completed
49	Health Check Unit	Height Measure for Adult		1	1	1	3	JFY1999	not completed
		Height Measure for Baby		1	1	1	3	JFY1999	not completed
		Scale for Adult		1	1	1	3	JFY1999	not completed
		Scale for Baby		1	1	1	3	JFY1999	not completed
		Measure		1	1	1	3	JFY1999	not completed
L		Eyesight Test KIt	L	1	1	1	3	JFY1999	not completed
		Audiometer		1	1	1	3	JFY1999	not completed
50	Diagnosis Kit	Otoscope		15	15	15	45	JFY1999	not completed
		Nasoscope		15	15	15	45	JFY1999	not completed
		Depresser (tongue)		15	15	15	45	JFY1999	not completed
		Dental Mirror		15	15	15	45	JFY1999	not completed
		Percussion Hammer	1	15	15	15	45	JFY1999	not completed
		Torch Light With Depresser		15	15	15	45	JFY1999	not completed
11	Boiling Sterilizer	Using LP Gas		2	2	2	6	JFY1999	not completed
52	DiagnosisTorch Light	For Ear, Eye, Nose		2	2	2	6	JFY1999	not completed



#	Items	Specification	Number of Provided				Fiscal Year	Delivery	
			HRDD	BAR	VR	WR	Total		
53	Sonic Aid	Head hone, LED indicator		2	2	2	6	JFY1999	not completed
54	Stethoscope	W Type		50	50	50	150	JFY1999	not completed
55	B/P Apparatus	Witn Stethoscope	ŀ	15	15	15	45	JFY1999	not completed
56	Gynaecological Bed			1	1	1	3	JFY1999	not completed
57	TV & Video Deck	20 inch TV, 4 Head VCR		ł	1	1	3	JFY1999	not completed
58	Refrigerator	200 L		1	1	1	3	JFY1999	not completed
59	Deep Freezer	400L		1	1	1	3	JFY1999	not completed
60	Airconditoner	Slit type		2	2	2	6	JFY1999	not completed
61	Back-Up Generator	100 KVA	1				1	JFY1999	not completed
62	Back-Up Generator	25KVA		1	1	1	3	JFY1999	not completed
63	4WD Vehicle		1				1	JFY1999	not completed





Project Purpose and Output

Project Purpose

Establishment and implementation of structured IST system in three focusing regions which is replicable nationwide.

Output

- l Needs of IST identified in three regions.
- 2 "IST Information System" established in three focussing regions, which is replicable nationwide.
- 3 "IST Logbook" introduced in three focussing regions, which is replicable nationwide and used in three regions.
- 4 "IST Learning Guidelines" established in three focussing regions, which is replicable nationwide.
- IST environment settings in three RTCs are fulfilled to the set level of function.
- Monitoring and evaluation (M&E) for the IST systems established and implemented in three focussing regions, which are replicable nationwide.
- 7 MCH components are fully involved in the IST system.

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