

## **Chapter 3 Project Evaluation and Recommendations**

## Chapter 3 Project Evaluation and Recommendations

### 3-1 Project Effect

Implementation of this Project will benefit the residents of the north coastal area of about 350,000, the medical service population of which constitutes about 80% of the total population of Suriname. This Project, by upgrading the medical facilities that provide maternal-and-child health services, is expected to bring the following benefits:

(1) Direct Effect		
Present Status and Problems	Solutions to be Provided by the Project	Effects / Improvement
<p>Provision of mother-and-child health care is difficult due to a shortage of medical facilities and underdeveloped infrastructure.</p> <p>People living in local areas are especially deprived of reproductive health care services that support healthy pregnancy, delivery, and child growth. To rectify the situation, upgrading of medical facilities is urgently needed.</p>	<p>1) Japanese Assistance</p> <ul style="list-style-type: none"> <li>• Procurement / renewal of medical equipment</li> <li>• Soft Component Program</li> </ul> <p>2) Surinamese Government</p> <ul style="list-style-type: none"> <li>• Upgrading of clinics and other medical infrastructure</li> <li>• Technical training of medical personnel</li> </ul>	<p>Upgrading of medical infrastructure and training of medical staff will improve the quality and quantity of mother-and-child health care services.</p> <ol style="list-style-type: none"> <li>1) Increase in the number of deliveries</li> <li>2) Increase in the number of prenatal examinations</li> <li>3) Increase in the number of referrals from clinics to hospitals</li> <li>4) Improvement of the infant and maternal mortality rates</li> </ol>
(2) Indirect Effect		
<ul style="list-style-type: none"> <li>• Enhancement of the reliability of medical facilities</li> <li>Improved medical services of the target facilities, especially the local clinics, will help the local residents build confidence in health care providers.</li> </ul> <hr style="border-top: 1px dashed black;"/> <ul style="list-style-type: none"> <li>• Elevating the awareness of the beneficiaries</li> <li>Upgraded medical equipment will promote the sense of responsibility among the local residents that medical expenses are to be borne by the beneficiaries.</li> </ul>		

### 3-2 Recommendations

To improve the functionality of each target facility, their overall medical activities, including the operations/management of facilities, contents of medical services provided by each clinical department, fostering of medical staff, and coordination with other medical facilities, need to be improved in a systemic manner to achieve the maximum result. To facilitate the effective improvement of the service functions of the target facilities, the Surinamese side needs to sincerely work on the following issues and suggestions.

### **(1) Operation and Maintenance of the Equipment**

Daily inspection by the operator is essential for the effective utilization of the equipment to be procured. For precision instruments that need servicing by specialists or equipment that requires regular replenishment of consumable items, each medical facility should enter into a service agreement with the local agent of the equipment manufacturer to ensure their proper maintenance and uninterrupted supply of expendables. While the Project plans to strengthen and support the operation and maintenance system of each medical facility by implementing the Soft Component Program, it is important for each facility to designate personnel in charge of controlling the documentation related to the equipment, such as maintenance manual, operation manual, circuit diagram, and a list of serial number, for ensuring efficient coordination with outside service providers and effective utilization of the equipment.

### **(2) Sufficient Appropriations**

Although the maintenance cost of the equipment to be procured has been confirmed to be within the affordable range, it is desirable to create a contingency fund at each medical facility so that unexpected breakage, etc. can be coped with swiftly without suspending the medical activities.

### **(3) Fostering of Medical Professionals**

Implementation of this Project includes technical training of Surinamese medical professionals, especially the general practitioners, nurses, and laboratory technicians of the clinics, to teach them basic procedures of obstetric assistance and neonatal care, such as diagnosis of pregnant women using an ultrasound device. This type of training should not be limited to those working for the target facilities of this Project, but should also be provided to the health workers of other clinics nation-wide on a continuous basis to promote the mother-and-child health in Suriname.

### **(4) Introduction and Utilization of Proper Assessment System**

In addition to the procurement of medical equipment, this Project plans to implement the Soft Component Program to establish a system for the operation and maintenance of the equipment, for which important economic indicators and medical statistical techniques will be discussed with and taught to the personnel of the target facilities to assess the operational status of not only the equipment but also the entire organizations. Examples of such indicators include the bed occupancy rate, average number of patients per day, outpatient/inpatient ratio, number of patients per physician per day, and average medical fees collected per patient per day. These indices will be compiled during the project implementation period so that the data will be available for periodic assessment after the completion of the Project, which will be essential for continual improvement of

the operational efficiency and the quality of medical services of the target facilities. Full utilization of such operation/maintenance system by each site will also lead to the significant enhancement of the mother-and-child health care services, as intended by the Project.

The MOH is gradually transferring its authority to individual hospitals and clinics. Thus, not only MOH but also the individual staff members of the target medical facilities should share the sense of responsibility for the sound administrative/financial management of medical institutions and further improvement of mother-and-child health.

## **Appendices**

**Member List of the Study Team****Basic Design Study**

1. Motoyuki UEGAKI  
Leader  
Deputy Director, Office of Technical Coordination  
and Examination, Grant Aid Management  
Department, JICA
2. Tamotsu NOZAKI  
Chief Consultant  
Fujita Planning Co., Ltd.
3. Hiroshi NAITO  
Equipment Planner I  
Fujita Planning Co., Ltd.
4. Yoichi SUGIURA  
Equipment Planner II  
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5. Nobuyuki SUGAWARA  
Facility Planner I  
Fujita Planning Co., Ltd.
6. Yasuo Horigome  
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7. Fumihiko FUJITA  
Cost and Procurement Planner  
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**Explanation of Draft Basic Design**

1. Tetuso YABE  
Team Leader  
Senior Assistant to the Managing Director  
Grant Aid Management Department, JICA
2. Kenya YOSHINO  
Program Coordinator  
Second Project Management Division,  
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3. Tamotsu NOZAKI  
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Fujita Planning Co., Ltd.

## Study Schedule (Basic Design Study)

## Appendix 2-1

No.	Date	Team Leader / JICA	Chief / Consultant	Equipment Planner 1	Facility Planner 2	Facility Planner 1	Equipment Planner 2	Cost & Procurement Planner
1	23-Feb Sun		Lv. Narita	Houston 17:05(CO 006)	Houston 15:55(CO 1890)	Av. Miami 19:18		
2	24-Feb Mon			Lv. Miami 13:10(PY5484)	Curacao	Paramaribo 21:30		
3	25-Feb Tue		Meeting with Donor agencies (Embassy of the Netherlands, UNFPA)	Meeting with EOJ, MOH, MOH, Donor agencies (Stichting Lobi, IDB)				
4	26-Feb Wed			Site survey ( s Lands Hospital, Paramaribo University Hospital)				
5	27-Feb Thu		Site survey ( s Lands Hospital)		Wonoredjo Clinic			
6	28-Feb Fri		s Lands Hospital		Lelydorp Clinic			
7	1-Mar Sat			Team meeting				
8	2-Mar Sun		Paramaribo	Nickerie, Team meeting		Team meeting		
9	2-Mar Mon		Nickerie Regional Hospital		Kuwarasan Clinic			
10	4-Mar Tue		Nickerie Regional Hospital		Albina Regional Hospital			
11	5-Mar Wed		Nickerie Regional Hospital, Nickerie	Paramaribo, MOH		Tijgerkreek Clinic		Lv. Narita Av. Miami
12	6-Mar Thu		Central Laboratory, MOH			Derde Rijkweg Clinic		Lv. Miami Av. Paramaribo
13	7-Mar Fri		RGD, Lelydorp		Central Laboratory			Procurement Survey
14	8-Mar Sat			Team meeting				Procurement Survey
15	9-Mar Sun	Lv. Narita Av. Miami				Team meeting		
16	10-Mar Mon	Lv. Miami Av. Paramaribo	Meeting with MOH, GMTD		Central Laboratory / additional study			Procurement Survey
17	11-Mar Tue	Meeting with EOJ, MOH, MOFA, Embassy of the Netherlands, PAHO	Meeting with MOH (equipment)	Wonoredjo, Koewarasan		Lv. Paramaribo Av. Miami, meeting with equipment' agents		Procurement Survey
18	12-Mar Wed	Visit Paramaribo University Hosp, Derde Rijkweg, Lelydorp	Meeting with MOH (equipment)	Derde Rijkweg, Tijgerkreek		Lv. Miami		Procurement Survey
19	13-Mar Thu	Visit 's Lands Hospital, Central Laboratory, discussion on M/D, EOJ	Meeting with MOH (equipment)			Av. Narita		Procurement Survey
20	14-Mar Fri		Discussion on M/D					Procurement Survey
21	15-Mar Sat		Additional survey					Procurement Survey
22	16-Mar Sun		Team meeting					Team meeting
23	17-Mar Mon		Signing on M/D, Report to EOJ					Procurement Survey
24	18-Mar Tue	Lv. Paramaribo 07:30(PY5477) Miami Los Angeles	Lv. Paramaribo 07:30(PY5477) meeting with equipment' agents	Av. Miami 11:55,				Lv. Paramaribo Av. Miami
25	19-Mar Wed	Lv. Los Angeles	Lv. Miami Houston					Lv. Miami
26	20-Mar Thu	Av. Narita	Av. Narita					Av. Narita

## Study Schedule (Explanation of Draft Basic Design)

## Appendix 2-2

No.	Date	JICA	Chief Consultant	Equipment Planner 1 / Facility Planner 1	Cost & Procurement Planner
1	26-May Sun		Lv. Narita 12:00 (JL 006)	New York (11:30)	
2	27-May Mon		Lv. New York 09:30 (AA1165)	Miami 14:10 (PY5484)	Paramaribo (21:30)
3	28-May Tue		Meeting with EOJ, Meeting with Ministry of Health (MOH) (Explanation of Draft Basic Design)		
4	29-May Wed		Meeting with MOH & Health Facilities (Explanation of Draft Basic Design)		
5	30-May Thu		Discussion on Minutes of Discussion (M/D) with MOH		
6	31-May Fri		Meeting with MOH	Survey on Health Facility (Nickerie)	
7	1-Jun Sat		Meeting within the BD Team Members, Survey on Health Facility		
8	2-Jun Sun		Meeting within the BD Team Members		
9	3-Jun Mon		Signing on M/D, Report to Embassy of Japan, Suriname		
10	4-Jun Tue	Lv. Paramaribo Miami Los Angeles	Meeting with MOH	Meeting with MOH & 'sLands Hosp. on Technical Aspects for Equipment	Procurement Survey
11	5-Jun Wed	Lv. Los Angeles	Add. Survey	Meeting with MOH & RGD on Technical Aspects for Equipment	Procurement Survey
12	6-Jun Thu	Av. Narita	Report to MOH, Embassy of Japan, Suriname		
13	7-Jun Fri		Lv. Paramaribo	Miami	New York
14	8-Jun Sat		Lv. New York		
15	9-Jun Sun		Av. Narita		



## List of Parties Concerned in Suriname

- (1) Ministry of Health**  
 Dr. Mohamed Rakieb Khudabux Minister of Health  
 Dr. Rinia Codfried - Kranenburg Director of Health  
 Mr. Manodj Hindori Project Coordinator
- (2) Regional Health Services (RGD), Ministry of Health**  
 Ms. Maaltie Ashim-Sardjoe Director  
 Dr. Rozenblad Clifton Director for Administration  
 Ms. Abdoelaziz Irma Director for Nursing  
 Ms. Groonooogst S. Nurse  
 Ms. Ramdhani S. Nurse
- (3) Ministry of Foreign Affairs**  
 Ms. Maria Elisabeth LEVENS Minister for Foreign Affairs
- (4) Netherlands Embassy**  
 Mr. Peter Le Poole Deputy Minister  
 Ms. Nensy Banddhoe Gender Advisor
- (5) Inter-American Development Bank, IDB**  
 Mr. Marcelo Perez Alvard Consultant
- (6) UNFPA**  
 Dr. Sonja Caffè Consultant
- (7) Pan American Health Organization, PAHO**  
 Mr. Adrianus (Ton) Vlugman Representative  
 Mr. Primmath Ritoe EPI Specialist
- (8) Stichting Lobi**  
 Mr. Antoon Grunberg Director
- (9) Academic Hospital Paramaribo**  
 Mr. Edgar S.M.A. Joemmankhan Deputy Director  
 Mr. Girjasinch Medical Director  
 Mr. Maynard Iwana Manager for Maintenance Department  
 Dr. Carlos Van Lierop Gynaecologist  
 Dr. Prem Goerdin Gynaecologist
- (10) GMTD**  
 Mr. N.V. Luchthavenbeheer Director
- (11) EBS N.V. Energiebedrijven Suriname**  
 Mr. Wim J. Sendar Director for Electrical Department
- (12) Elgawa Technical Trading & Contracting Company**  
 Mr. Michael J. Kopinsky President
- (13) 'sLands Hospital**  
 Dr. Cynthia N. Rozenblad Director  
 Ms. Beerensteyn-Smith, J. Director for Nursing Department  
 Ms. Danielle Sngé Manager for Administration

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Dr. Nannan Panday-Gopisingh  
Dr. R. Hofwijk  
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Mr. Ramjatan, R.

Surgeon  
Gynaecologist  
Gynaecologist  
Internal Medicine  
MCH Advisor  
Radiography Specialist  
Newborn Section  
Manager for Medical Record

**(14) Nieckerie Regional Hospital**

Mr. Otto DeWanchand  
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Dr. Akos Bodo  
Dr. Nanja Braafheid  
Dr. Rudi Chan  
Mr. Dipoikromo Kasijan  
Dr. A. Goerdin  
Dr. L. Mungra  
Mr. Mildred Laiji  
Mr. Karijo Ruoi

Director, Regional Coordinator  
Surgeon  
Gynaecologist  
Paediatrician  
Radiological Specialist  
Laboratory Technician  
Urologist  
Doctor for Pharmacy  
Specialist for Pharmacy  
Technician, Maintenance Department

**(15) Central Laboratory**

Ms. Tjon Kon Fat  
Ms. Fung A. Foek  
Mr. Dayonand Panchoe

Director  
Staff for Chemical Department  
Staff for Parasitological Department

**(16) Wonoredjo Clinic**

Dr. Sewaratan John R.  
Dr. G.J. Vishnudatt Huisarts  
Ms. Pinas Corinde Selma  
Ms. Jeroe Rnnie

Director, Regional Coordinator  
General Practitioner  
Midwife  
Nurse

**(17) Lelydorp Clinic**

Dr. S.S. Baboe-Kalpo

General Practitioner

**(18) Koewarasan Clinic**

Dr. Mahabir S.  
Dr. Madarie R.L.  
Mrs. Gangadin S.  
Ms. Rogstamkhan-Bipat S.

General Practitioner  
General Practitioner  
Midwife  
Nurse

**(19) Tijgerkreek Clinic**

Dr. Soekhoe A  
Ms. Semmoh U

General Practitioner  
Midwife

**(20) Derde Rijkweg Clinic**

Dr. Helen Aikman  
Dr. Reza Sadi

General Practitioner  
General Practitioner

**(21) Albina Hospital**

Dr. Wangsawirana Albert  
Dr. Rozenblad Clifton  
Mr. Sewaratan John

General Practitioner  
General Practitioner  
Regional Coordinator

**(22) Embassy of Japan, Suriname**

Akira Nagai  
Tomoyuki Aoyama  
Yoshie Ichinohe

Special Ambassador  
Third Secretary  
Special Assistant

MINUTES OF DISCUSSIONS  
ON THE BASIC DESIGN STUDY  
ON THE PROJECT FOR IMPROVEMENT OF BASIC MEDICAL EQUIPMENT  
FOR MOTHER AND CHILD HEALTH CARE FACILITIES  
IN THE REPUBLIC OF SURINAME

In response to a request from the Government of the Republic of Suriname (hereinafter referred to as "Suriname"), the Government of Japan decided to conduct a Basic Design Study (hereinafter referred to as "the Study") on the Project for Improvement of Basic Medical Equipment for Mother and Child Health Care Facilities (hereinafter referred to as "the Project") and entrusted the Study to the Japan International Cooperation Agency (hereinafter referred to as "JICA").

JICA sent to Suriname the Basic Design Study Team (hereinafter referred to as "the Team"), which is headed by Motoyuki Uegaki, Deputy Director, Office of Technical Coordination and Examination, and is scheduled to stay in the country from February 24 to March 18, 2003.

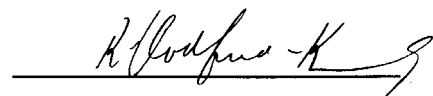
The Team held discussions with the officials concerned of the Government of Suriname and conducted a field survey at the study area.

As a result of discussions and field survey, both sides confirmed the main items described on the attached sheets. The Team will proceed to further works and prepare the Basic Design Study Report.

Paramaribo, March 17, 2003



Mr. Motoyuki Uegaki  
Leader, Basic Design Study Team  
Japan International Cooperation Agency  
Japan



Dr. Rina Codfried - Kranenburg  
Director of Health  
Ministry of Health  
Republic of Suriname

## Attachment

### 1. Components of the Draft Report

The Government of Suriname agreed on and accepted in principle the components of the draft report explained by the Team. The agreed list of equipment is attached as Annex-1.

### 2. Japan's Grant Aid scheme

2-1. The Suriname side understood the Japan's Grant Aid Scheme explained by the Team as described in Annex-2.

2-2. The Suriname side will take necessary measures as described in Annex-3 for smooth implementation of the Project as a condition for the Japanese Grant Aid to be implemented.

### 3. Schedule of the Study

JICA will complete the final report in accordance with the confirmed item and send it to the Government of Suriname by the beginning of September 2003.

### 4. Other relevant issues

4-1. Both sides agreed that if other project is executed and/or planned with other donors related to the Project, the Ministry of Health should timely coordinate and share information to avoid duplication.

4-2. The Suriname side agreed to secure and allocate enough budget to use and maintain the equipment procured under the Grant Aid project properly and effectively.

4-3. The Suriname side agreed to carry out periodical monitoring of utilization of the equipment procured under the Grant Aid project and to notify the result to the Japanese side.

4-4. The Team requested a renovation of the clinics as described in Annex-4 and of the X-ray room at 'sLands Hospital and Nickerie Regional Hospital.

The Suriname side promised to complete the renovation of the clinics and the hospitals by the end of July 2004. The Suriname side shall report the progress of the renovation to the Japanese side.

4-5. The Team made comments on the draft of technical training plan targeting the medical staff of the project sites submitted by the Suriname side on April 24, 2003.

Taking the comments into account, the Suriname side promised to prepare more detailed training plans by the end of June 2003.

The Suriname side shall execute the training before the equipment procured under the Project is delivered at the sites and shall report its result to the Japanese side.

4-6. The Team proposed the Soft Component Program aiming the smooth operation of the



equipment to be procured under the Project. The Suriname side shall arrange suitable personnel and secure the budget necessary for the implementation of the Soft Component Program.

4-7. The Suriname side requested the manual of equipment to be written in Dutch language as much as possible. The Japanese side promised to convey the request to the Government of Japan.

4-8. The Team recommended to strengthen the technical transfer from the Academic Hospital Paramaribo to the Project sites.

4-9. Both sides agreed that the name of the Project would change from "The Project for Improvement of Basic Medical Equipment for Mother and Child Health Care Facilities" to "The Project for Improvement of Basic Medical Equipment for Mother and Child Health".

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## Annex-1(1)

## List of Medical Equipment

## (1) 'sLands Hospital

No.	Department	Name of Equipment	Q'ty
1	Ob/Gyn	Gynecological Examination Table	2
2		Gynecological Examination Unit	2
3		Cardio Tocograph	1
4		Ultrasound Diagnostic Equipment	1
5	Delivery	Examination Light	3
6		Delivery Table	6
7		Infant Care Unit	1
8		Infant Warmer	3
9		Vacuum Extractor	1
10		Doppler Fetus Detector	3
11	Nursery	Phototherapy Unit	3
12		Bilirubin Meter, Skin Type	1
13		Pulse Oximeter	2
14	Operation Room	Operating Table	3
15		Anesthesia Apparatus	1
16		Electrosurgical Unit	2
17		Patient Monitor	1
18	ICU	Bedside Monitor	2
19		Defibrillator	1
20	Sterilization	High Pressure Steam Sterilizer	2
21		High Pressure Steam Sterilizer, Table Top Type	1
22	X-ray · Ultrasound	Fluoroscopic X-ray Diagnostic Equipment	1
23		Automatic X-ray Film Processor	1
24		Ultrasound Diagnostic Equipment (Color Doppler)	1
25		Mobile X-ray Diagnostic Equipment	1
26	Laboratory	Automatic Chemistry Analyzer	1
27		Binocular Microscope	3
28		Centrifuge, Table Top Type	1

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## Annex-1(2)

## (2) Nickerie Regional Hospital

No.	Department	Name of Equipment	Q'ty
1	Emergency	Resuscitator for Neonatal and Adult	2
2		Electrocardiograph	1
3		Defibrillator	1
4	Delivery	Examination Light	1
5		Colposcope	1
6		Suction Unit	1
7		Doppler Fetus Detector	1
8	Nursery	Infant Warmer	1
9		Infant Incubator	3
10		Phototherapy Unit	1
11		Bilirubin Meter, Skin Type	1
12		Pulse Oxymeter	2
13	Operation Room	Anesthetic Apparatus	2
14		Pulse Oxymeter	2
15		Laparoscope	1
16		Gastro-intestinal Fiberscope	1
17		Operating Table	1
18		Patient Monitor	1
19		Electrosurgical Unit	2
20	Sterilization	High Pressure Steam Sterilizer	1
21	X-ray · Ultrasound	Fluoroscopic X-ray Diagnostic Equipment	1
22		Automatic X-ray Film Processor	1
23		Ultrasound Diagnostic Equipment	1
24		Mobile X-ray Diagnostic Equipment	1
25	Laboratory	Water Distilling Equipment	1
26		Centrifuge, Table Top Type	1
27		Hematocrit Centrifuge	1
28		Automatic Blood Cell Counter	1
29		Differential Leucocyte Counter	1
30		Spectrophotometer	1
31		Binocular Microscope	1
32	Pharmacy	Water Distilling Equipment	1



## Annex-1(3)

## (3) Clinics

No.	Department	Name of Equipment	A	B	C	D	E	Q'ty
1	Outpatient	Weighing Scale, Adult	1	1	1	1	1	5
2		Stethoscope, Dual Type	1	1	1	1	1	5
3		Sphygmomanometer	1	1	1	1	1	5
4		Diagnostic Set	1	1	1	1	1	5
5		Small Operating Instrument Set	2	2	2	2	2	10
6		Electrocardiograph	1	1	1	1	1	5
7		Examination Light	1	1	1	1	1	5
8		Sterilizer, Table Top Type	1	1	1	1	1	5
9	Delivery	Weighing Scale, Infant	1	1	1	1	1	5
10		Resuscitator	1	1	1	1	1	5
11		Delivery Table	1	1	1	1	1	5
12		Suction Unit	1	1	1	1	1	5
13		Doppler Fetus Detector	1	1	1	1	1	5
14		Examination Light	1	1	1	1	1	5
15	Nursery	Infant Incubator	1	1	1	1	1	5
16		Infant Warmer	1	1	1	1	1	5
17		Phototherapy Unit	1	1	1	1	1	5
18		Bilirubin Meter, Skin Type	1	1	1	1	1	5
19	Ultrasound	Ultrasound Diagnostic Equipment (Portable)	1	1	1	1	1	5
20	Laboratory	Binocular Microscope	1	1	1	1	1	5
21		Refrigerator	1	1	1	1	1	5
22		Drying Oven	1	1	1	1	1	5
23		Test Tube Mixer	1	1	1	1	1	5
24		Differential Leucocyte Counter	1	1	1	1	1	5
25		Bilirubin Analyzer	1	1	1	1	1	5
26		Spectrophotometer	1	1	1	1	1	5
27		Centrifuge, Table Top	1	1	1	1	1	5
28		Hematocrit Centrifuge	1	1	1	1	1	5
29		Water Distilling Equipment	1	1	1	1	1	5

A: Wonoredjo Clinic, B: Lelydorp Clinic, C: Derde Rijweg Clinic, D: Tijgerkreek Clinic, E: Koewarasan Clinic

## JAPAN'S GRANT AID SCHEME

### 1. Japan's Grant Aid Scheme

The Grant Aid scheme 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. The Grant Aid is not supplied through the donation of materials as such.

### 2. Grant Aid Procedure

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

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 Cabinet)
Determination of Implementation	(The Notes exchanged between the Governments of Japan and the recipient country)

Firstly, 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 the Grant Aid. If the request is deemed appropriate, the Government of Japan assigns JICA to conduct a study on the request.

Secondly, JICA conducts the study (Basic Design Study), using (a) Japanese consulting firm(s).

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

Fourthly, the project, once approved by the Cabinet, becomes official with the Exchange of Notes (E/N) signed by the Governments of Japan and the recipient country.

Finally, for the implementation of the project, JICA assists the recipient country in such matters as preparing tenders, contracts and so on.

### 3. Basic Design Study

#### 1) Contents 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 Government of Japan. The contents of the Study

are as follows:

- 1) Confirmation of the background, objectives and benefits of the 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 the technical, social and economic points 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; and
- 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 the 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 through 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 the smooth implementation of the Study, JICA uses (a) registered consulting firm(s). JICA selects (a) firm(s) based on proposals submitted by interested firms. The selected firm(s) carry out a Basic Design Study and prepares a report based upon the terms of reference set by JICA.

The consulting firm(s) used for the Study is(are) recommended by JICA to the recipient country to also work on the Project's implementation after the Exchange of Notes, in order to maintain technical consistency.

**4. Japan's Grant Aid Scheme**

(1) Exchange of Notes (E/N)

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

- (2) "The period of the Grant" means the one fiscal year which the Cabinet approves the project for. Within the fiscal year, all procedure such as exchanging of the Notes, concluding contracts with (a) consulting firm(s) and (a) contractor(s) and final 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.

- (3) Under the Grant, 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, the Grant Aid may be used for the purchase of the products or services of a third country.

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.)

- (4) Necessity of "Verification"

The Government of the recipient country or its designated authority will conclude contracts denominated in Japanese yen with Japanese nationals. Those contracts shall be verified by the Government of Japan. This "Verification" is deemed necessary to secure accountability of Japanese taxpayers.

- (5) Undertakings required to the Government of the recipient country

1) To secure land necessary for the construction of the Project and to clear the site.

2) To provide facilities for distribution of electricity, water supply and drainage and other incidental facilities outside the site.

3) To ensure prompt unloading and customs clearance at ports of disembarkation in the recipient country and internal transportation therein of the products purchased under the Grant Aid.

4) To secure buildings prior to the procurement in case the installation of the equipment.

5) To exempt Japanese nationals from customs duties, internal taxes and fiscal levies which may be imposed in the recipient country with respect to the supply of the products and services under the verified contracts.

6) To accord Japanese nationals whose services may be required in connection with the supply of the products and services under the verified contracts such as facilities as may be necessary for their entry into the recipient country and stay therein for the performance of their work.

7) To ensure that the products purchased under the Grant Aid be maintained and used properly and effectively for the Project.

- (6) "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 the necessary staff for operation and maintenance of them as well as to bear all the expenses other than those covered by the Grant Aid.

- (7) "Re-export"  
The products purchased under the Grant Aid shall not be re-exported from the recipient country.
- (8) Banking Arrangement (B/A)  
1) The Government of the recipient country or its designated authority should open an account in the name of the 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 payments will be made when payment requests are presented by the Bank to the Government of Japan under an Authorization to Pay (A/P) issued by the Government of recipient country or its designated authority.
- (9) Authorization to Pay (A/P)  
The Government of the recipient country should bear an advising commission of an Authorization to Pay and payment commissions to the Bank.



### Major Undertakings to be taken by Each Government

NO	Items	To be covered by Grant Aid	To be covered by Recipient side
1	To bear the following commissions to a bank of Japan for the banking services based upon the B/A		
	1) Advising commission of A/P		●
	2) Payment commission		●
2	To ensure prompt unloading and customs clearance at the port of disembarkation in recipient country		
	1) Marine(Air) transportation of the products from Japan to the recipient country	●	
	2) Tax exemption and custom clearance of the products at the port of disembarkation		●
	3) Internal transportation from the port of disembarkation to the project site	●	
3	To accord Japanese nationals whose services may be required in connection with the supply of the products and the services under the verified contract such facilities as may be necessary for their entry into the recipient country and stay therein for the performance of their work		●
4	To exempt Japanese nationals from customs duties, internal taxes and other fiscal levies which may be imposed in the recipient country with respect to the supply of the products and services under the verified contract		●
5	To maintain and use properly and effectively the facilities constructed and equipment provided under the Grant Aid		●
6	To bear all the expenses, other than those to be borne by the Grant Aid, necessary for the transportation and installation of the equipment		●

Annex-4

Renovation Works for 5 Clinics

Name of the Clinic	Roof Repairing Work	Site Drainage for Flood	Safety Burglar Bar	Electrical Work for Equipment
Wonoredjo	○	○		○
Lelydrop			○	○
Derde Rijweg	○	○	○	○
Tijgerkreek	○	○		○
Koewarasan			○	○

This list shows minimum requirements from Japanese side.

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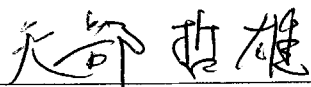
**MINUTES OF DISCUSSIONS  
ON THE BASIC DESIGN STUDY ON THE PROJECT FOR  
IMPROVEMENT OF BASIC MEDICAL EQUIPMENT  
FOR MOTHER AND CHILD HEALTH  
IN THE REPUBLIC OF SURINAME  
(EXPLANATION ON DRAFT REPORT)**

In February 2003, the Japan International Cooperation Agency (hereinafter referred to as "JICA") dispatched a Basic Design Study Team on the Project for Improvement of Basic Medical Equipment for Mother and Child Health (hereinafter referred to as "the Project") to the Republic of Suriname (hereinafter referred to as "Suriname"), and through discussion, field survey, and technical examination of the results in Japan, JICA prepared a draft report of the study.

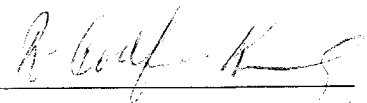
In order to explain and to consult the Suriname on the components of the draft report, JICA sent to Suriname the Draft Report Explanation Team (hereinafter referred to as "the Team"), which is headed by Mr. Tetsuo Yabe, Senior Assistant to the Managing Director, Grant Aid Management Department, JICA, and is scheduled to stay in Suriname from May 26 to June 6, 2003.

As a result of discussions, both parties confirmed the main items described on the attached sheets.

Paramaribo, June 2, 2003



Mr. Tetsuo Yabe  
Leader, Draft Report Explanation Team  
Japan International Cooperation Agency  
Japan



Dr. Rina Codfried - Kranenburg  
Director of Health  
Ministry of Health  
Republic of Suriname



## Attachment

### 1. Objective of the Project

The objective of the Project is to revitalize the diagnostic and treatment functions for the maternal and child health care at the health care facilities that are selected by the Ministry of Health through the procurement of proper basic medical equipment.

### 2. Proposed Project sites

The sites of the Proposed Project are as follows:

'sLands Hospital, Nickerie Regional Hospital, Central Laboratory, Wonoredjo Clinic, Lelydorp Clinic, Derde Rijweg Clinic, Koewarasan Clinic, and Tijgerkreek Clinic.

### 3. Responsible and Implementing Agency

Both the Responsible and Implementing Agency is the Ministry of Health.

### 4. Items requested by the Government of Suriname

After discussions with the Team, the items described in Annex-1 were formulated.

JICA will assess the appropriateness through the further study in Japan and will present to Suriname side the draft final items at the explanation of the draft final report.

### 5. Japan's Grant Aid Scheme

5-1. The Suriname side understands the Japan's Grant Aid Scheme explained by the Team, as described in Annex-2.

5-2. The Suriname side will take the necessary measures, as described in Annex-3 for smooth implementation of the Project, as a condition for the Japanese Grant Aid to be implemented.

### 6. Schedule of the Study

6-1. JICA will prepare the draft final report in English and dispatch a study team in order to explain its contents around May 2003.

6-2. In case that the contents of the report is accepted in principle by the Government of Suriname, JICA will complete the final report and send it to the Government of Suriname by September 2003.

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7. Other relevant issues

7-1. Both sides agreed that if other project is executed and/or planned with other donors related to the Project, the Ministry of Health should timely coordinate and share information to avoid duplication.

7-2. The Suriname side agreed to secure and allocate enough budgets to use and maintain the equipment procured under the Grant Aid project properly and effectively.

7-3. The Suriname side agreed to carry out periodical monitoring of utilization of the equipment procured under the Grant Aid project and to notify the result to the Japanese side.

7-4. The Team realized that activity of the central laboratory does not directory focus on maternal and child health care.

Consequently, it should be careful to include the equipment for the central laboratory in the project component.

This matter will be discussed with persons concerned based on a result of analysis in Japan.

7-5. The Team explained that the renovation of some parts of the health care facilities, such as roof, floor and electric facilities, was necessary in order to ensure the proper usage of the equipment procured under the Grant Aid project.

The Suriname side understood the necessity of the renovation, and promised to complete its work before the equipment will be installed.

The Team will present to the Suriname side the renovation plan including its estimate and time schedule of the renovation at the time of the explanation of the draft final report.

7-6. The Team requested the Suriname side to establish a training course targeting medical staff, such as doctors, for polishing their diagnostic and treatment skills so that the effect of the Project could be maximized.

The Team also requested the Suriname side to prepare a concrete training plan and present it to the Japanese side at the time of the explanation of the draft final report.

7-7. The Suriname side pointed out that there was a great need for technical training by Japanese expert so that operation and maintenance skill of medical staff in health care facilities could be improved and sustained.

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Requested equipment by the Suriname side

Annex-1 (1)

Con. No.	Dept.	No.	Equipment	Qty	Priority
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A = 1<sup>st</sup> priority / Essential equipment for maternal and child health care

B = 2<sup>nd</sup> priority / Necessary to study

**'sLands Hospital**

1	Gyn. & Obs.	1-3-2	Clinical examination table for gynaecology	2	A
2		1-3-3	Gynaecological examining unit	2	A
3		1-3-5	Cardio tocograph	1	A
4		1-3-6	Ultrasound system, color doppler	1	B
5	Delivery	1-4-1	Examination light	3	A
6		1-4-2	Obstetric delivery table	6	A
7		1-4-4	Infant care unit	1	A
8		1-4-8	Infant warmer	3	A
9		1-4-15	Vacuum extractor	1	A
10		1-4-17	Fetal doppler	3	A
11	New Born Nursery	1-5-7	Phototherapy unit	3	A
12		1-5-8	Bilirubin meter, skin type	1	B
13		Add	Pulse oximeter	2	A
14	Operating Theatre	1-6-1	Operating table, with gynecology use	3	A
15		1-6-2	Anesthesia apparatus with ventilator	1	A
16		1-6-6	Electro surgical unit	2	A
17		Add	Patient monitor for anesthesia apparatus	1	A
18	ICU	1-7-1	Bedside monitor	2	A
19		1-7-7	Defibrillator	1	A
20	CSSD	1-8-1	High pressure steam sterilizer	2	A
21		1-6-5	High pressure steam sterilizer, table-top type	1	A
22	X-ray	1-9-1	Fluorography Diagnostic X-ray unit with wall bucky stand	1	B
23		1-9-4	Automatic X-ray film processor	1	A
24		1-9-23	Ultrasound system, color doppler	1	B
25		Add	Mobile X-ray machine	1	A
26	Clinical Laboratory	1-10-11	Automatic chemistry analyzer	1	A
27		Add	Binocular microscope	3	A
28		Add	Centrifuge, table-top	1	A

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Requested equipment by the Suriname side

Annex-1 (2)

Con. No.	Dept.	No.	Equipment	Q'ty	Priority
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A = 1<sup>st</sup> priority / Essential equipment for maternal and child health care

B = 2<sup>nd</sup> priority / Necessary to study

**Nickerie Regional Hospital**

1	Emergency	1-1-1	Resuscitator for neonate and adult	2	A
2		1-1-2	Electrocardiograph	1	A
3		1-1-3	Defibrillator	1	B
4	Delivery	1-4-1	Examination light	1	A
5		1-4-13	Stereo colposcope	1	A
6		1-4-16	Suction pump	1	A
7		1-4-17	Fetal doppler	1	A
8	New Born Nursery	1-5-1	Infant warmer	1	A
9		1-5-6	Infant incubator	3	A
10		1-5-7	Phototherapy unit	1	A
11		1-5-8	Bilirubin meter, skin type	1	B
12		Add	Pulse oximeter	2	A
13	Operating Theatre	1-6-2	Anesthesia apparatus with ventilator	2	A
14		1-6-9	Pulse oximeter	2	A
15		1-6-12	Laparoscope system with video	1	B
16		1-6-13	Gastroendoscope system with video	1	B
17		1-4-2	Operating table, with gynecology use	1	A
18		Add	Patient monitor for anesthesia apparatus	1	A
19		Add	Electro surgical unit	2	A
20	CSSD	1-8-1	High pressure steam sterilizer	1	A
21	X-ray	1-9-1	Fluorography Diagnostic X-ray unit with wall bucky stand	1	B
22		1-9-4	Automatic X-ray film processor	1	B
23		1-9-23	Ultrasound system	1	A
24		Add	Mobile X-ray machine	1	A
25	Clinical Laboratory	1-10-1	Automatic distillator	1	A
26		1-10-2	Centrifuge, Table-top	1	A
27		1-10-3	Micro hematocrit centrifuge	1	A
28		1-10-5	Blood cell counter	1	A
29		1-10-6	Differential leucocyte counter	1	A
30		1-10-7	Clinical spectrophotometer	1	A
31		1-10-9	Binocular microscope	1	A
32	Pharmacy	1-14-9	Automatic distillator	1	A

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Requested equipment by the Suriname side

Annex-1 (3)

Con. No.	Dept.	No.	Equipment	Qty	Priority
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A = 1<sup>st</sup> priority / Essential equipment for maternal and child health care

B = 2<sup>nd</sup> priority / Necessary to study

**Central Laboratory**

1	Chemistry Dept.	2-1-4	Centrifuge, table-top	1	B
2		2-1-6	Automatic distillator	1	B
3		2-1-10	Top loading balance	1	B
4	Microbiology Dept.	2-4-1	Refrigerator	1	B
5		2-4-4	Binocular microscope	1	A
6		2-4-5	Binocular microscope with full automatic photomicrographic system	1	B
7		2-4-6	CO2 incubator	1	B
8		2-4-7	High pressure steam sterilizer	1	B
9		2-4-8	Top loading balance	1	B
10		2-4-11	Freezer	1	B
11		2-4-12	Biosafety cabinet, class II	1	B
12	Washing Room	2-7-1	High pressure steam sterilizer	1	A
13		2-7-2	Drying oven	1	B
14		2-7-4	Ultrasonic cleaner	1	B
15		2-7-7	Glassware washer/dryer	1	B

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Requested equipment by the Suriname side

Annex-1 (4)

Con. No.	Dept.	No.	Equipment	Qty	Pri.	Qty	Pri.	Qty	Pri.	Qty	Pri.	Qty	Pri.	Total Qty
				A	B	C	D	E						

A = 1<sup>st</sup> priority / Essential equipment for maternal and child health care

B = 2<sup>nd</sup> priority / Necessary to study

Five Clinics

1	Outpatient	3-1-1	Weighing scale, adult	1	A	1	A	1	A	1	A	1	A	5
2		3-1-5	Stethoscope, dual type	1	B	1	B	1	B	1	B	1	B	5
3		3-1-6	Sphygmomanometer	1	A	1	A	1	A	1	A	1	A	5
4		3-1-7	Diagnostic set	1	B	1	B	1	B	1	B	1	B	5
5		3-1-11	Small operating instrument set	2	A	2	B	2	B	2	B	2	B	10
6		3-1-13	Electrocardiograph	1	B	1	B	1	B	1	B	1	B	5
7		Add	Examination light	1	B	1	B	1	A	1	A	1	A	5
8		Add	High pressure steam sterilizer, table-top type	1	B	1	B	1	A	1	A	1	B	5
9	Labor, Delivery	3-3-1	Weighing scale, infant	1	A	1	A	1	A	1	A	1	A	5
10		3-3-5	Resuscitator for neonate and adult	1	A	1	A	1	B	1	B	1	B	5
11		3-3-6	Obstetric delivery table	1	A	1	B	1	B	1	A	1	A	5
12		3-3-9	Suction pump	1	A	1	B	1	B	1	B	1	B	5
13		3-3-10	Fetal doppler	1	B	1	B	1	B	1	B	1	B	5
14		3-3-12	Examination light	1	B	1	B	1	A	1	A	1	A	5
15	Nursery	3-4-1	Infant incubator	1	B	1	B	1	B	1	B	1	B	5
16		3-4-2	Infant warmer	1	B	1	B	1	B	1	B	1	B	5
17		3-4-3	Phototherapy unit	1	B	1	B	1	B	1	B	1	B	5
18		3-4-5	Bilirubin meter, skin type	1	B	1	B	1	B	1	B	1	B	5
19	X-ray & Ultrasound	3-6-6	Ultrasound system, portable type	1	B	1	B	1	B	1	B	1	B	5
20	Laboratory	3-7-1	Binocular microscope	1	A	1	A	1	A	1	A	1	B	5
21		3-7-2	Refrigerator	1	A	1	A	1	A	1	A	1	A	5
22		3-7-4	Drying oven	1	A	1	B	1	A	1	A	1	A	5
23		3-7-7	Mixer, for test tube	1	B	1	B	1	B	1	B	1	B	5
24		3-7-9	Differential leucocyte counter	1	B	1	B	1	B	1	B	1	B	5
25		3-7-11	Bilirubin analyzer, small type	1	B	1	B	1	B	1	B	1	B	5
26		3-7-12	Spectrophotometer, simple type	1	B	1	B	1	B	1	B	1	B	5
27		3-7-15	Centrifuge, table-top	1	A	1	A	1	A	1	B	1	B	5
28		3-7-16	Micro hematocrit centrifuge	1	B	1	B	1	B	1	B	1	B	5
29		3-7-17	Automatic distillator, small type	1	B	1	B	1	B	1	B	1	B	5

A: Wonoredjo, B: Lelydorp, C: Derde Rijkweg, D: Tijgerkreek, E: Koewarasan

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## Japan's Grant Aid Scheme

### 1. Japan's Grant Aid System

The Grant Aid scheme 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. The Grant Aid is not supplied through the donation of materials as such.

### 2. Grant Aid Procedures

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

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 Cabinet)
Determination of Implementation	(The Notes exchanged between the Governments of Japan and the recipient country)

Firstly, 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 the 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.

Secondly, JICA conducts the study (Basic Design Study), using (a) Japanese consulting firm(s).

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

Fourthly, the project, once approved by the Cabinet, becomes official with the Exchange of Notes (E/N) signed by the Governments of Japan and the recipient country.

Finally, for the smooth implementation of the project, JICA assists the recipient country in such matters as preparing tenders, contracts and so on.

### 3. Basic Design Study

#### (1) Contents of the Study

The aim of the Basic Design Study (hereafter referred to as "the Study"), conducted by JICA on a requested project (hereafter referred to as "the Project") is to provide a basic document

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necessary for the appraisal of the Project by the Government of Japan. 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 upon by both parties concerning the basic concept of the Project.
- 4) Preparation of a Basic Design of the Project
- 5) Estimation of cost 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 the 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 of the Study, JICA uses (a) registered consulting firm(s). JICA selects (a) firm(s) based on proposals submitted by interested firms. The firm(s) selected carry(ies) out a Basic Design Study and write(s) a report, based upon terms of reference set by JICA.

The consulting firm(s) used for the Study is(are) recommended by JICA to the recipient country to also work on the Project's implementation after the Exchange of Notes, in order to maintain technical consistency.

#### 4. Japan's Grant Aid Scheme

##### (1) Exchange of Notes (E/N)

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

- (2) "The period of the Grant Aid" means the one fiscal year, which the Cabinet approves the Project for. Within the fiscal year, all procedures such as exchanging of the Notes, concluding contracts with (a) consulting firm(s) and (a) contractor(s) and final payment to them must be completed.

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However, in case of delays in delivery, installation or construction due to unforeseen factors such as natural disaster, 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.

- (3) 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, the Grant Aid may be used for the purchase of the products or services of a third country.

However, the prime contractors, namely, consulting, constructing 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.)

- (4) Necessity of "Verification"

The Government of recipient country or its designated authority will conclude contracts denominated 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.

- (5) Undertakings required to the Government of the 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 sites of the Project and to 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 sites,
- 3) To secure buildings prior to the procurement in case the installation of the equipment,
- 4) 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,
- 5) 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,
- 6) 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.

- (6) "Proper Use"

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

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those covered by the Grant Aid.

(7) "Re-export"

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

(8) Banking Arrangements (B/A)

1) The Government of the recipient country or its designated authority should open an account in the name of the Government of the recipient country in a 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 payments will be made when payment requests are presented by the Bank to the Government of Japan under an Authorization to Pay (A/P) issued by the Government of the recipient country or its designated authority.

(9) Authorization to Pay (A/P)

The Government of the recipient country should bear an advising commission of an Authorization to Pay and payment commissions to the Bank.

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## Annex-3

## Major Undertakings to be taken by Each Government

No.	Items	To be covered by Grant Aid	To be covered by Recipient Side
1	To bear the following commissions to the Japanese bank for the banking services based upon the B/A 1) Advising commission of A/P 2) Payment commission		● ●
2	To ensure prompt unloading and customs clearance at port of disembarkation in recipient country 1) Marine (Air) transportation of the products from Japan to the recipient 2) Tax exemption and custom clearance of the products at the port of disembarkation 3) Internal transportation from the port of disembarkation to the project site	●  ●	 ● ●
3	To accord Japanese nationals, whose services may be required in connection with the supply of the products and the services under the verified contract, such facilities as may be necessary for their entry into the recipient country and stay therein for the performance of their work		●
4	To exempt Japanese nationals from customs duties, internal taxes and other fiscal levies which may be imposed in the recipient country with respect to the supply of the products and services under the verified contracts		●
5	To maintain and use properly and effectively the facilities constructed and equipment provided under the Grant		●
6	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 installation of the equipment		●

(B/A: Banking Arrangement, A/P: Authorization to pay)




## Appendix-5

### Other Relevant Data

No.	Title of Books	Publish by	Publish date	Original or Copy
1	Annual Report of the Chief Medical Officer, Year 2000	Ministry of health (MOH)		Copy
2	Suriname Multiple Indicator Cluster Survey 2000	Government of Suriname & UNICEF	March, 2001	Original
3	Child Indicators Monitoring System, Suriname	UNICEF	September, 2001	Copy
4	Situation Analysis in Children	UNICEF		Copy
5	Support for Health Sector Reform, Semi-Annual Progress Report 8 (May-November,2002)	MOH & IDB	November, 2002	Copy
6	Health Sector Reform in Suriname	MOH & IDB	February, 2003	Original
7	Support for Health Sector Reform, National Health Accouts	Management Sciences for Health (MSH)	June, 2002	Copy