

**MINUTES OF MEETING OF THE PREPARATORY STUDY OF
THE TECHNICAL COOPERATION PROJECT FOR
IMPROVEMENT OF HEALTH INFRASTRUCTURE MANAGEMENT
IN THE REPUBLIC OF UGANDA**

Japan International Cooperation Agency (hereinafter referred to as “JICA”) dispatched the Preparatory Study Team (hereinafter referred to as “the Team”), headed by Dr. Akira Hashizume, to the Republic of Uganda (hereinafter referred to as “Uganda”) from October 22 to November 17, 2005 for the purpose of discussing the framework of the requested project entitled “the Technical Cooperation Project for Improvement of Health Infrastructure Development and Management” which, after mutual consultation, was renamed as “the Technical Cooperation Project for Improvement of Health Infrastructure Management” (hereinafter referred to as “the Project”).

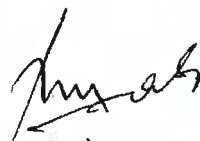
During its stay in Uganda, the Team conducted field surveys and had a series of discussions on the Project with the authorities and stakeholders in Uganda.

As a result, the Team and the Uganda authorities concerned reached common understanding concerning the matters referred to in the document attached hereto.

Kampala, November 16, 2005



Dr. Akira Hashizume
Leader
Preparatory Study Team
Japan International Cooperation Agency
Japan



Dr. Sam Zaramba
For: Permanent Secretary
Ministry of Health
Republic of Uganda

The Attached Document

1 Background of the Project

The Health Infrastructure Division (hereinafter referred to as "HID") under the Department of Clinical Services of the Ministry of Health (hereinafter referred to as "MOH") is responsible for health infrastructure. This comprises of buildings, medical and hospital equipment, communication facilities as well as ambulatory services and other transportation facilities which serve in delivering health services and technology for the people.

There are eight medical equipment maintenance workshops in the country. The central workshop at Wabigalo serves the central region and is a referral workshop as well as a training centre for hospital technicians/artisans. The medical workshops have provided limited services over the period of implementing The First Health Sector Strategic Plan (HSSP I) due to inadequate funds and capacity of the technicians and engineers to maintain and manage the infrastructure.

Remarkable achievements made through the HSSP I in developing infrastructure at the lower levels has resulted in increased accessibility to a health facility within 5km walking distance. This improved from 49% in 2000 to 72% in 2004 mainly due to construction of new Health Centres. Consolidation and upgrading of Health Centres have led to improved health services coverage. The Second Health Sector Strategic Plan (HSSP II) has emphasized that improvement of capacity of health infrastructure management and maintenance is crucial to consolidate functionality of health facilities and sustainable maintenance mechanism.

JICA's most recent support was strengthening delivery of health care services for intensive care and diagnostic imaging to the Department of Radiology at Mulago Hospital and also support for strengthening the referral system in Soroti region in the districts of Soroti, Katakwi and Kaberamaido. The current project is the rehabilitation and equipping of five hospitals and health units in the eastern region of Uganda in Mbale, Bugiri, Busia and Tororo districts.

According to the above mentioned background, the Government of Uganda requested the Government of Japan for a project targeting improvement of health infrastructure management in Uganda. The Government of Japan accepted the request and JICA, as the implementing agency of Japanese technical cooperation, dispatched the Team to discuss the proposed plan and work out a framework of the technical cooperation.

2 Issues to be addressed

The difficulties of health infrastructure management in Uganda were identified through the Project Cycle Management (PCM) workshop held on 4 November 2005. The key findings are mainly linked to the financial, technical and referral aspects of HID and

the central/regional workshops. Accordingly, the project should focus on improvement of technical and management skills of HID and the central/regional workshops.

HSSP II clearly states that at least 5% of the annual non wage recurrent budget should be allocated and used for maintenance of infrastructure at health facility. Thus, the financial issue shall be considered as part of the mandate of HID. The referral issue shall be done by strengthening the function of the central workshop. The improvement of the technical capacity and management skills is expected to be achieved through problem oriented planning and training.

In addition, the project title was agreed to be renamed because the project focuses on the improvement of management aspects rather than infrastructure development.

3 Tentative Framework of the Project

Based on the result of the discussions, considering funding and technical feasibility, a tentative framework of the project is worked out as follows. It is subject to modifications through further discussions and evaluation before it is finalized.

(1) Title of the Project

Project for Improvement of Health Infrastructure Management in Uganda

(2) Target Groups

1. HID engineers and technicians
2. The central/regional workshops technicians and artisans

(3) Duration of the Project

Three (3) years from 2006

(4) Master Plan of the Project

1) Overall Goal

An efficient and cost effective health infrastructure management mechanism is established in Uganda.

2) Project Purpose

The capacity of the HID and the central/regional workshops to manage health infrastructure and maintain medical equipment is strengthened.

3) Outputs

- I. Problem oriented planning is developed and implemented by HID.
- II. The referral function of the central workshop is strengthened.
- III. Capacity of the regional workshops is strengthened to carry out medical equipment

maintenance and provide technical advice to users.

4) Major Activities

I. Problem oriented planning is developed and implemented by HID.

I-1 Health infrastructure inventory management mechanism strengthening

I-1-1 Reviewing existing data

I-1-2 Collecting additional data

I-1-3 Updating health infrastructure inventory

I-2 Planning for improvement of the current situation

I-2-1 Planning for training

I-2-2 Planning for development of guidelines and IEC materials

I-2-3 Planning for procurement for re-tooling for the regional workshops

I-2-4 Planning for problem oriented supervision

I-3 Implementation of plan

I-3-1 Conducting training

I-3-2 Developing the guidelines and IEC materials

I-3-3 Implementing problem oriented supervision

II. The referral function of the central workshop is strengthened.

II-1 Analysing situation

II-2 Identifying the needs of technical improvement

II-3 Participating in the technical training

III. Capacity of the regional workshops is strengthened to carry out medical equipment maintenance and provide technical advice to users.

III-1 Analysing situation

III-2 Identifying the needs of technical improvement

III-3 Participating in the technical training

III-4 Improving and sustaining the maintenance recording system

III-5 Analysing the frequent causes of medical equipment break down

III-6 Providing technical advice to the hospital and district technicians

5) Inputs

The Government of Uganda

i) Salary and allowances for counterpart staff

ii) Office space for JICA experts/Project

iii) Project Implementation Unit (PIU) cost

(telephone, internet/e-mail, water, electricity etc.)

- iv) One operational vehicle for implementation of project activities in the field

JICA

- i) Experts for medical equipment management and maintenance
- ii) Vehicle for project operation (equipped to be usable as the mobile workshop vehicle)
- iii) Retooling and equipping of Wabigalo workshop and seven(7) other regional maintenance workshops with basic tools and equipment
- iv) Training for target group
- v) Operational costs for project activities except mandatory activities of HID

4.Implementing Structure of the Project

HID is the responsible organization of the Project. To implement the Project activities, a Project Implementation Unit (PIU) shall be put in place consisting of:

- (1) Project Director: Assistant Commissioner (Health Infrastructure)
- (2) Project Manager: Senior Engineer/Medical Equipment
- (3) Assistant Project Manager: Assistant Workshop Manager, Central
- (4)Managers of the regional workshops
- (5) JICA Experts

5.Joint Coordinating Committee of the Project

A Joint Coordinating Committee (JCC) will be organized to review the plans and achievements of the Project. The members of the committee will consist of the following officers.

- 1) Chairperson: Commissioner for Health Services(Clinical Service)
- 2) PIU Members and Senior Engineer/Mechanical
- 3) Commissioners for Planning and Nursing, and Assistant Commissioner for Human Resource Development
- 4) Resident Representative of JICA UGANDA Office
- 5) Observer:
 - Representative of the Embassy of Japan
 - Other personnel invited by the Chairperson

Project Manager will be the secretary of JCC

6. Way forward

- 1) The authorities concerned in the Government of Uganda and JICA will continue to discuss and finalize the Project Design Matrix (PDM) and the Plan of Operations (PO).
- 2) The ex-ante evaluation is to be approved by the vice president of JICA Head Quarters.
- 3) The Record of Discussions is to be signed by Permanent Secretary of MOH and Resident Representative of JICA UGANDA Office.

End

ANNEX 1 : Tentative Project Design Matrix (PDM)

ANNEX 2 : Tentative Plan of Operations (PO)

ANNEX 3 : The list whom the Team met

ANNEX 1.

TENTATIVE PROJECT DESIGN MATRIX (PDM)

Project Title: Improvement of Health Infrastructure Management in the Republic of Uganda

Term of Cooperation: Three (3) years from 2006

Target Group: HID and regional medical equipment maintenance workshops

1. HID engineers and technicians

2. Central/Regional workshops technicians and artisans

Project Design Matrix(PDM)			
Narrative Summary	Verifiable Indicators	Means of Verification	Important Assumptions
<p>Overall Goal: An efficient and cost effective health infrastructure management mechanism is established in Uganda.</p>	<ol style="list-style-type: none"> 1. No. of major break downs of health infrastructure 2. Waiting time for repair work to be done 3. % of functional health infrastructure 4. Annual maintenance cost compared to the initial capital cost 	<ol style="list-style-type: none"> 1.&2. Quarterly regional workshop Reports 3. Annual inventory analysis reports for each region 4-1. Budget performance Reports for health facilities 4-2. Financial monitoring and management reports 	

Project Design Matrix(PDM)

Narrative Summary	Verifiable Indicators	Means of Verification	Important Assumptions
<p>Project Purpose: The capacity of the Health Infrastructure Division (HID) and central/regional medical equipment maintenance workshops to manage health infrastructure and maintain medical equipment is strengthened.</p>	<ol style="list-style-type: none"> 1. No. of major breakdowns of medical equipments 2. Waiting time for repair work to be done 3. % of functional medical equipment 4. Annual maintenance cost compared to the initial capital cost 	<ol style="list-style-type: none"> 1.&2. Quarterly regional workshop Reports 3. Annual inventory analysis reports for each region 4-1. Budget performance Reports for health facilities 4-2. Financial monitoring and management reports 	<ol style="list-style-type: none"> 1. Five(5)% of annual budget allocated for the maintenance work 2. Financing mechanisms are properly operated
<p>Outputs 1. Problem oriented planning is developed and implemented by HID.</p>	<ol style="list-style-type: none"> 1-1. Frequency of up dating existing data 1-2. No. of IEC materials prepared 1-3.No. of training manuals 1-4.No. of trainings conducted 1-5. No. of participants trained 1-6. No. of regional workshop committee meetings held 	<ol style="list-style-type: none"> 1. Annual health sector performance report 1-1. Annual inventory analysis reports for each region 1-2. Annual performance report 1-3&4&5. Training report 1-6. Minutes of Regional workshop committee meetings 	

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Project Design Matrix(PDM)

Narrative Summary	Verifiable Indicators	Means of Verification	Important Assumptions
<p>2. The referral function of the central workshop is strengthened.</p> <p>3. Capacity of regional workshops is strengthened to carry out medical equipment maintenance and provide technical advice to users.</p>	<p>2-1.No. of Situation analysis reports produced</p> <p>2-2. No. of referral cases</p> <p>3-1. No. of action plans drawn from break down reports</p> <p>3-2. No. of remedial actions taking by RWs</p>	<p>2-1. Situation analysis report</p> <p>2-2. HID performance report</p> <p>3-1. Annual work plan</p> <p>3-2.Regional workshops maintenance reports</p>	
<p>I. Problem oriented planning is developed and implemented by HID.</p> <p>I-1 Strengthening Health infrastructure inventory management mechanism</p> <p>I-1-1 Reviewing existing data</p> <p>I-1-2 Collecting additional data</p> <p>I-1-3 Updating health infrastructure inventory</p> <p>I-2 Developing appropriate planning for improvement of the current situation</p> <p>I-2-1 Planning for training</p> <p>I-2-2 Planning for development of guidelines and IEC materials</p> <p>I-2-3 Planning for Trainers Training for medical equipment users</p> <p>I-2-4 Planning for procurement for re-tooling for the RWs</p>	<p>Inputs</p> <p>(1) GoU</p> <p>i) Salary and allowances for counterpart staff</p> <p>ii) Office space for JICA experts/Project</p> <p>iii) Project Implementation Unit(PIU) cost (telephone, internet/e-mail, water, electricity etc.)</p> <p>iv) One operational vehicle for implementation of project activities in the field</p> <p>(2) JICA</p> <p>i) Experts for medical equipment management and maintenance</p> <p>ii) Vehicle for project operation (equipped to be usable as the mobile workshop vehicle)</p> <p>iii) Retooling and equipping of Wabigalo workshop and seven(7)</p>		

Project Design Matrix(PDM)			
Narrative Summary	Verifiable Indicators	Means of Verification	Important Assumptions
<p>I-2-5 Planning for problem oriented supervision</p> <p>I-3 Implementation of plan</p> <p>I-3-1 Conducting training</p> <p>I-3-2 Developing the guidelines and IEC materials</p> <p>I-3-3 Implementing problem oriented supervision</p> <p>II. The referral function of the central workshop is strengthened.</p> <p>II-1 Analysing situation</p> <p>II-2 Identifying the needs of technical improvement</p> <p>II-3 Participating in the technical training</p> <p>III. Capacity of the regional workshops is strengthened to carry out medical equipment maintenance and provide technical advice to users.</p> <p>III-1 Analysing situation</p> <p>III-2 Identifying the needs of technical improvement</p> <p>III-3 Participating in the technical training</p> <p>III-4 Improving and sustaining the maintenance recording system</p> <p>III-5 Analysing the frequent causes of medical equipment break down</p> <p>III-6 Providing technical advice to the hospital and district technicians</p>	<p>other regional maintenance workshops with basic tools and equipment</p> <p>iv) Training for target group</p> <p>v) Operational costs for project activities except mandatory activities of HID</p>		

Jim

Yes

ANNEX 2.

TENTATIVE PLAN OF OPERATION

Project name: *Improvement of Health Infrastructure Management in the Republic of Uganda.*

Project Purpose: *To develop the capacity of HID/MoH and regional medical equipment maintenance workshops to manage health infrastructure and maintenance medical equipment.*

Output	Activity	2006				2007				2008				2009				Responsible Person	
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4		
Quarterly term																			
0.Set up the Project Implementation Unit(PIU)	0-1. Project space formulation (furnish)		x																HID
	0-2. Procurement of equipment for PIU office		x																HID
I. Problem oriented planning is developed and implemented by HID.	I-1 Strengthening health infrastructure inventory management mechanism																		
	I-1-1 Reviewing existing data		xxx																HID
	I-1-1-1 Assessing the problems with current data and inventory		xxx																HID
	I-1-2 Collecting additional data																		
	I-1-2-1 Reviewing existing data collection tools and prepare appropriate tools for data collection and management		xxx																HID
	I-1-2-2 Developing data management mechanism		x x	x															HID
	I-1-2-3 Procuring equipments to set up at RW's for the new health infrastructure inventory management and monitoring mechanism (basic PC and soft wears and printer in case they already have them, it should be operationalised)			x															HID

Output	Activity	2006				2007				2008				2009				Responsible Person				
		Quarterly term				Quarterly term				Quarterly term				Quarterly term								
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4					
I. Problem oriented planning is developed and implemented by HID.	I-1-2-4 Developing training modules and materials for inventory management		xx	x																		HID
	I-1-2-5 Conducting training for inventory management for HID staff and selected regional workshop staff			x																		HID
	I-1-2-6 Carrying out health infrastructure inventory data collection in hospitals and health centres				x																	RWS
	I-1-3 Updating health infrastructure inventory																					
	I-1-3-1 Carrying out support supervision for data collection and inventory update			x			x	x	x		x	x	x		x	x	x		x	x	x	HID
	I-2 Developing appropriate planning for improvement of the current situation																					
	I-2-1 Planning for training		x												x							HRD/HID
	I-2-2 Planning for development of guidelines and IEC materials										xxx											HPE/HID
	I-2-3 Planning for Trainers training for medical equipment users																					
	I-2-4 Planning for procurement for re-tooling the RWs											xx										HRD/HID
I-2-4-1 Carrying out inventory taking in regional workshops and prepare list of required tools		xx																			RWS	

*HRD: Human Resource Division

*HPE: Health Promotion and Education

Output	Activity	2006				2007				2008				2009				Responsible Person		
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4			
I. Problem oriented planning is developed and implemented by HID.	I-3-1-6 Conducting TOT for medical equipment users																		HID/JICA	
	I-3-1-7 Carrying out monitoring and evaluation of the training and performance of the technicians and workshops				x		x	x	x		x	x	x	x					HRD/HID	
	I-3-1-8 Preparing quarterly and annual progress reports				x		x	x	x		x	x	x	x					HID	
	I-3-2 Developing the guidelines and IEC material																			
	I-3-2-1 Developing proposals for improved health infrastructure standards, specifications and guidelines										xx									HID/ NACME
	I-3-2-2 Conducting a consensus meeting with key stakeholders on the new proposed health infrastructure standards and guidelines											x								HID
	I-3-2-3 Producing and disseminate the new standards and guidelines on health infrastructure management and maintenance																			HRD/HID
	I-3-2-4 Producing and disseminating IEC materials																			HPE
	I-3-3 Implementing problem oriented supervision																			HID

ANNEX 3.

The list whom the Team met

The Health Infrastructure Division, Ministry of Health

Dr. Sam Zaramba, Director Health Services
Dr. Amandua Jacinto, Commissioner for Health Service (Clinical Service)
Mr. S.S.B.Wanda, Assistant Commissioner for Health Service (Health Infrastructure)
Mr. John Tumwesigye, Senior Engineer
Mr. Sitra Mulepo, Senior Engineer

Mbale District

Dr Abwaimo Francis, Director of District Health Service, Mbale district health office
Dr Makoba Genald, Medical Superintendent, Mbale Regional Referral Hospital
Mr. Olaunah Emmanuel: Hospital administrator, Mbale Regional Referral Hospital
Mr. Prosper Kaggwa, Manager of Mbale Regional Maintenance Workshop
Mr. Absolom Emudu, Technician, Mbale Regional Maintenance Workshop
Mr. Oriebo Lowrence, Technician, Mbale Regional Maintenance Workshop
Mr. Eladu Andrew, Technician, Mbale Regional Maintenance Workshop

Soroti District

Dr Nicholas Okwana, Director of District Health Service, Soroti district health office
Dr Bernard Odu, Medical Superintendent, Soroti Regional Referral Hospital
Mr Makonbe Willy, Manager of Soroti Regional Workshop
Mr. Odoch Francis, Technician, Soroti Regional Workshop

Mulago National Hospital

Mr. Edward.Kataaha, Senior Hospital Engineer, Department of Workshop

Bududa General Hospital

Dr Wamasebu Gideon Simiyu, Medical Superintendent
Mr. Steven Wabuteya, Technician

Bugobero Health Centre IV

Dr Wamakale Fread, Clinical Officer

Nakawa Vocational Training Institute

Mr. Tszinde Abisi, Principal
Mr. Omoo Francis, Head of Electric Section

Uganda Technical College Elgon (Mbale)

Mr. Ojilong Charles, Principle
Mr. Jeromy Adutu, IT section

Joint Medical Store

Mr. Andrew Waswa, Operational Manager

Mild May Hospital

Ms. Margaret Mawanda, Public Relations Manager
Mr. James Esagala, Site Manager
Mr. Herbert Scewakambo, Technician

Local dealer for medical equipment

Mr. Okech Bob Opio, Manager, Hospital & Scientific Division, Achelis (Uganda) Ltd.
Mr. Byakagaba Geoffrey, Support Engineer, Achelis (Uganda) Ltd.
Ms. Pease Kangye, Administrator, Sino Africa Medicine & Health Ltd.
Mr. Opio Martin, Manager, Fairway medical systems Ltd.

MS-Uganda (NGO from Denmark)

Mr. Risak Nur, Technical Information Advisor

The staff in Embassies

Mr. Marc Denys, Counselor for international cooperation, Embassy of Belgium
Mr. Klas Rasmusson, First secretary, Embassy of Sweden
Mr. Claes Ortendahl, Senior health system analyst, Advisor to Swedish Embassy

RECORD OF DISCUSSIONS
BETWEEN
JAPAN INTERNATIONAL COOPERATION AGENCY
AND
AUTHORITIES CONCERNED OF THE GOVERNMENT OF
THE REPUBLIC OF UGANDA
ON JAPANESE TECHNICAL COOPERATION PROJECT FOR
IMPROVEMENT OF HEALTH INFRASTRUCTURE MANAGEMENT

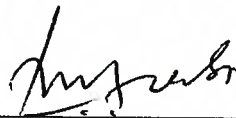
Japan International Cooperation Agency (hereinafter referred to as "JICA") exchanged views and had a series of discussions with the Uganda authorities concerned with respect to desirable measures to be taken by JICA and Uganda Government for the successful implementation of the above-mentioned Project.

As a result of the discussions, and in accordance with the provisions of the Agreement on Technical Cooperation between the Government of Japan and the Government of the Republic of Uganda, signed in Kampala on 8th December, 2005 (hereinafter referred to as "the Agreement"), JICA and Uganda authorities concerned agreed on the matters referred to in the document attached hereto.

Kampala, 4th April, 2006



Mr. Takehiro Susaki
Resident Representative
JICA Uganda Office
Japan International Cooperation Agency



Dr. Sam Zaramba
For: Permanent Secretary
Ministry of Health
The Republic of Uganda

THE ATTACHED DOCUMENT

I. COOPERATION BETWEEN JICA AND UGANDA GOVERNMENT

1. The Government of the Republic of Uganda will implement the Project for Improvement of Health Infrastructure Management (hereinafter referred to as "the Project") in cooperation with JICA.
2. The Project will be implemented in accordance with the Master Plan which is given in Annex I.

II. MEASURES TO BE TAKEN BY JICA

In accordance with the laws and regulations in force in Japan and the provisions of Article III of the Agreement, JICA, as the executing agency for technical cooperation by the Government of JAPAN, will take, at its own expense, the following measures according to the normal procedures of its technical cooperation scheme.

1. DISPATCH OF JAPANESE EXPERTS

JICA will provide the services of the Japanese experts as listed in Annex II. The provision of Article V of the Agreement will be applied to the above-mentioned experts.

2. PROVISION OF MACHINERY AND EQUIPMENT

JICA will provide such machinery, equipment and other materials (hereinafter referred to as "the Equipment") necessary for the implementation of the Project as listed in Annex III. The provision of Article VII of the Agreement will be applied to the Equipment.

III. MEASURES TO BE TAKEN BY THE GOVERNMENT OF THE REPUBLIC OF UGANDA

1. The Government of the Republic of Uganda will take necessary measures to ensure that the self-reliant operation of the Project will be sustained during and after the period of Japanese technical cooperation, through full and active involvement in the Project by all related authorities, beneficiary groups and institutions.

2. The Government of the Republic of Uganda will ensure that the technologies and knowledge acquired by the Uganda nationals as a result of the Japanese technical cooperation will contribute to the economic and social development of the Republic of Uganda.
3. In accordance with the provisions of Article V of the Agreement, the Government of the Republic of Uganda will grant in the Republic of Uganda privileges, exemptions and benefits to the Japanese experts referred to in II-1 above and their families.
4. In accordance with the provisions of Article VII of the Agreement, the Government of the Republic of Uganda will take the measures necessary to receive and use the Equipment provided by JICA under II-2 above and equipment, machinery and materials carried in by the Japanese experts referred to in II-1 above.
5. In accordance with the provision of Article V of the Agreement, the Government of the Republic of Uganda will provide the services of Uganda counterpart personnel and administrative personnel as listed in Annex IV.
6. In accordance with the provision of Article V of the Agreement, the Government of the Republic of Uganda will provide the buildings and facilities as listed in Annex V.
7. In accordance with the laws and regulations in force in the Republic of Uganda, the Government of the Republic of Uganda will take necessary measures to supply or replace at its own expense machinery, equipment, instruments, vehicles, tools, spare parts and any other materials necessary for the implementation of the Project other than the Equipment provided by JICA under II-2 above.
8. In accordance with the laws and regulations in force in the Republic of Uganda, the Government of the Republic of Uganda will take necessary measures to meet the running expenses necessary for the implementation of the Project.



IV. ADMINISTRATION OF THE PROJECT

1. Assistant Commissioner (Health Infrastructure), as the Project Director, will bear overall responsibility for the administration and implementation of the Project.
2. Senior Engineer/Medical Equipment, as the Project Manager, will be responsible for the managerial and technical matters of the Project.
3. The Japanese experts will provide necessary recommendations and advice to the Project Director and the Project Manager on any matters pertaining to the implementation of the Project.
4. The Japanese experts will give necessary technical guidance and advice to Uganda counterpart personnel on technical matters pertaining to the implementation of the Project.
5. For the effective and successful implementation of technical cooperation for the Project, a Joint Coordinating Committee will be established whose functions and composition are described in Annex VI.

V. JOINT EVALUATION

Evaluation of the Project will be conducted jointly by JICA and the Uganda authorities concerned, at the middle and during the last six months of the cooperation term in order to examine the level of achievement.

VI. CLAIMS AGAINST JAPANESE EXPERTS

In accordance with the provision of Article VI of the Agreement, the Government of the Republic of Uganda undertakes to bear claims, if any arises, against the Japanese experts engaged in technical cooperation for the Project resulting from, occurring in the course of, or otherwise connected with the discharge of their official functions in the Republic of Uganda except for those arising from the willful misconduct or gross negligence of the Japanese experts.

VII. MUTUAL CONSULTATION

There will be mutual consultation between JICA and Uganda Government on any major issues arising from, or in connection with this Attached Document.

VIII. MEASURES TO PROMOTE UNDERSTANDING OF AND SUPPORT FOR THE PROJECT

For the purpose of promoting support for the Project among the people of the Republic of Uganda, the Government of the Republic of Uganda will take appropriate measures to make the Project widely known to the people of the Republic of Uganda.

IX. TERM OF COOPERATION

The duration of the technical cooperation for the Project under this Attached Document will be three(3) years from June,1,2006.

- ANNEX I MASTER PLAN
- ANNEX II LIST OF JAPANESE EXPERTS
- ANNEX III LIST OF MACHINERY AND EQUIPMENT
- ANNEX IV LIST OF UGANDA COUNTERPART AND ADMINISTRATIVE
PERSONNEL
- ANNEX V LIST OF BUILDINGS AND FACILITIES
- ANNEX VI JOINT COORDINATING COMMITTEE



MASTER PLAN

1. OBJECTIVES OF THE PROJECT

(1) Overall Goal

An efficient and cost effective health infrastructure management mechanism is established in the Republic of Uganda.

(2) Project Purpose

The capacity of the Health Infrastructure Division(HID) and the central/regional workshops to manage health infrastructure and maintain medical equipment is strengthened.

2. OUTPUTS OF THE PROJECT

- I. Problem oriented planning is developed and implemented by HID.
- II. The referral function of the central workshop is strengthened.
- III. Capacity of the regional workshops is strengthened to carry out medical equipment maintenance and provide technical advice to users

3. ACTIVITIES OF THE PROJECT

I. Problem oriented planning is developed and implemented by HID.

I-1 Health infrastructure inventory management mechanism strengthening

I-1-1 Reviewing existing data

I-1-2 Collecting additional data

I-1-3 Up dating health infrastructure inventory

I-2 Planning for improvement of the current situation

I-2-1 Planning for training

I-2-2 Planning for development of guidelines and IEC materials

I-2-3 Planning for procurement for re-tooling for the regional workshops

I-2-4 Planning for problem oriented supervision

I-3 Implementation of plan

I-3-1 Conducting training

I-3-2 Developing the guidelines and IEC materials

I-3-3 Implementing problem oriented supervision

II. The referral function of the central workshop is strengthened.

II-1 Analysing situation

II-2 Identifying the needs of technical improvement

II-3 Participating in the technical training

III. Capacity of the regional workshops is strengthened to carry out medical equipment maintenance and provide technical advice to users.

III-1 Analysing situation

III-2 Identifying the needs of technical improvement

III-3 Participating in the technical training

III-4 Improving and sustaining the maintenance recording system

III-5 Analysing the frequent causes of medical equipment break down

III-6 Providing technical advice to the hospital and district technicians

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LIST OF JAPANESE EXPERTS

1. Long-term Expert

(1)Coordinator/Equipment Information Management

2.Short-term Experts

(1)Expert for inventory management and data collection

(2)Experts for planning training courses

(3)Expert for developing guidelines and IEC materials

(4)Other experts mutually agreed upon as necessary



LIST OF MACHINERY AND EQUIPMENT

1. Equipment for HID and Central/Regional workshops
2. Other equipment mutually agreed upon as necessary



LIST OF UGANDA COUNTERPART AND ADMINISTRATIVE PERSONNEL

1. Commissioner for Health Services (Clinical Services)
2. Assistant Commissioner (Health Infrastructure)
3. Senior Engineer / medical Equipment
4. Assistant Workshop Manager, Central
5. Managers of Regional workshops
6. Other personnel mutually agreed upon as necessary



ANNEX V

LIST OF LAND, BUILDING AND FACILITIES

1. Land, buildings and facilities necessary for the Project
2. Office spaces and facilities necessary for the Japanese experts
3. Rooms and spaces necessary for installation and storage of the equipment
4. Other facilities mutually agreed upon as necessary

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JOINT COORDINATING COMMITTEE

1. Functions

The Joint Coordinating Committee will be held at least once a year and whenever necessity arises. Its functions are as follows:

- (1) To formulate the annual work plan of the Project;
- (2) To review the progress of the annual work plan;
- (3) To review and exchange opinions on major issues that may arise during the implementation of the Project;
- (4) To discuss any other issue(s) pertinent to the smooth implementation of the Project.

2. Members

- (1) Chairperson: Commissioner for Health Services(Clinical Service)
- (2) Members of Department of Clinical Services
 - 1)Assistant Commissioner (Health Infrastructure)
 - 2)Senior Engineer/Medical Equipment
 - 3)Assistant Workshop Manager, Central
 - 4)Managers of the regional workshops
 - 5)Senior Engineer/Mechanical
 - 6)Commissioners for Planning and Nursing, and Assistant Commissioner for Human Resource Development
- (3) Members of JICA
 - 1)Representative(s) of JICA Uganda Office
 - 2)Japanese experts
 - 3)Other personnel concerned, to be assigned by JICA, if necessary

Note: Official(s) of the Japanese Embassy in Uganda and others may attend at the Joint Coordinating Committee meeting as observer(s).



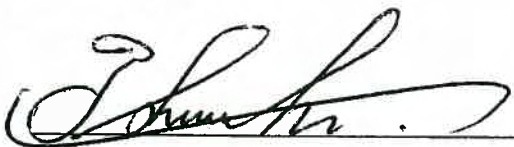
4. 実施協議議事録 (M/M)

MINUTES OF MEETINGS
BETWEEN
JAPAN INTERNATIONAL COOPERATION AGENCY
AND
THE AUTHORITIES CONCERNED OF THE GOVERNMENT OF
THE REPUBLIC OF UGANDA

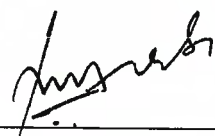
Japan International Cooperation Agency (hereinafter referred to as "JICA"), through its JICA Uganda Office, exchanged views and had a series of discussions with the authorities of the Republic of Uganda (hereinafter referred to as "Uganda") with respect to desirable measures to be taken by JICA and the Government of Uganda for the successful implementation of the Project for Improvement of Health Infrastructure Management (hereinafter referred to as "the Project").

As a result of the discussions, JICA Uganda Office and the Uganda authorities concerned agreed upon the matters referred to in the document attached hereto. This document is related to the Record of Discussions on the Project signed on the same date by JICA and the Uganda authorities concerned.

Kampala, 4^h April , 2006



Mr. Takehiro Susaki
Resident Representative
JICA Uganda Office
Japan International Cooperation Agency



Dr. Sam Zaramba
For: Permanent Secretary
Ministry of Health
The Republic of Uganda

THE ATTACHED DOCUMENT

1. PROJECT DESIGN MATRIX

The Project Design Matrix (hereinafter referred to as "PDM") was elaborated through discussions between JICA and the Uganda authorities concerned. JICA and the Uganda authorities concerned agreed to recognize PDM as an important tool for project management, and the basis of monitoring and evaluation of the Project. The PDM will be utilized by both sides throughout the implementation of the Project.

The PDM will be subject to change within the framework of the Record of Discussions when the necessity arises in the course of implementation of the Project with the mutual consultation of both sides.

The PDM is attached in ANNEX 1.

2. PLAN OF OPERATION

The Plan of Operation (hereinafter referred to as "PO") has been formulated based on the discussions between JICA and the Uganda authorities concerned, on the conditions that the necessary budget will be allocated for the implementation of the Project by JICA and the Uganda authorities concerned. The schedule will be subject to change within the framework of the Record of Discussions when necessity arises in the course of implementation of the Project with mutual consultation of JICA and the Uganda authorities concerned.

The PO is attached in ANNEX 2.

ANNEX1 PDM

ANNEX2 PO



ANNEX 1.

PROJECT DESIGN MATRIX (PDM)

Project Title: Improvement of Health Infrastructure Management in the Republic of Uganda

Term of Cooperation: Three (3) years from 2006

Target Group: HID and regional medical equipment maintenance workshops

1. HID engineers and technicians
2. Central/Regional workshops technicians and artisans

Project Design Matrix(PDM)

Narrative Summary	Verifiable Indicators	Means of Verification	Important Assumptions
<p>Overall Goal: An efficient and cost effective health infrastructure management mechanism is established in Uganda.</p>	<ol style="list-style-type: none"> 1. No. of major break downs of health infrastructure 2. Waiting time for repair work to be done 3. % of functional health infrastructure 4. Annual maintenance cost compared to the initial capital cost 	<ol style="list-style-type: none"> 1.&2. Quarterly regional workshop Reports 3. Annual inventory analysis reports for each region 4-1. Budget performance Reports for health facilities 4-2. Financial monitoring and management reports 	

Project Design Matrix(PDM)

Narrative Summary	Verifiable Indicators	Means of Verification	Important Assumptions
<p>Project Purpose: The capacity of the Health Infrastructure Division (HID) and central/regional medical equipment maintenance workshops to manage health infrastructure and maintain medical equipment is strengthened.</p>	<ol style="list-style-type: none"> 1. No. of major breakdowns of medical equipments 2. Waiting time for repair work to be done 3. % of functional medical equipment 4. Annual maintenance cost compared to the initial capital cost 	<ol style="list-style-type: none"> 1.&2. Quarterly regional workshop Reports 3. Annual inventory analysis reports for each region 4-1. Budget performance Reports for health facilities 4-2. Financial monitoring and management reports 	<ol style="list-style-type: none"> 1. Five(5)% of annual budget allocated for the maintenance work 2. Financing mechanisms are properly operated
<p>Outputs 1. Problem oriented planning is developed and implemented by HID.</p>	<ol style="list-style-type: none"> 1-1. Frequency of up dating existing data 1-2. No. of IEC materials prepared 1-3. No. of training manuals 1-4. No. of trainings conducted 1-5. No. of participants trained 1-6. No. of regional workshop committee meetings held 	<ol style="list-style-type: none"> 1. Annual health sector performance report 1-1. Annual inventory analysis reports for each region 1-2. Annual performance report 1-3&4&5. Training report 1-6. Minutes of Regional workshop committee meetings 	

Project Design Matrix(PDM)

Narrative Summary	Verifiable Indicators	Means of Verification	Important Assumptions
<p>2. The referral function of the central workshop is strengthened.</p> <p>3. Capacity of regional workshops is strengthened to carry out medical equipment maintenance and provide technical advice to users.</p>	<p>2-1. No. of Situation analysis reports produced</p> <p>2-2. No. of referral cases</p> <p>3-1. No. of action plans drawn from break down reports</p> <p>3-2. No. of remedial actions taking by RWs</p>	<p>2-1. Situation analysis report</p> <p>2-2. HID performance report</p> <p>3-1. Annual work plan</p> <p>3-2. Regional workshops maintenance reports</p>	
<p>1. Problem oriented planning is developed and implemented by HID.</p> <p>I-1 Strengthening Health infrastructure inventory management mechanism</p> <p>I-1-1 Reviewing existing data</p> <p>I-1-2 Collecting additional data</p> <p>I-1-3 Up dating health infrastructure inventory</p> <p>I-2 Developing appropriate planning for improvement of the current situation</p> <p>I-2-1 Planning for training</p> <p>I-2-2 Planning for development of guidelines and IEC materials</p> <p>I-2-3 Planning for Trainers Training for medical equipment users</p> <p>I-2-4 Planning for procurement for re-tooling for the RWs</p>	<p>Inputs</p> <p>(1) GoU</p> <p>i) Salary and allowances for counterpart staff</p> <p>ii) Office space for JICA experts/Project</p> <p>iii) Project Implementation Unit(PIU) cost (telephone, internet/e-mail, water, electricity etc.)</p> <p>iv) One operational vehicle for implementation of project activities in the field</p> <p>(2) JICA</p> <p>i) Experts for medical equipment management and maintenance</p> <p>ii) Vehicle for project operation (equipped to be usable as the mobile workshop vehicle)</p> <p>iii) Retooling and equipping of Wabigalo workshop and seven(7)</p>		



Project Design Matrix(PDM)

Narrative Summary	Verifiable Indicators	Means of Verification	Important Assumptions
<p>I-2-5 Planning for problem oriented supervision I-3 Implementation of plan I-3-1 Conducting training I-3-2 Developing the guidelines and IEC materials I-3-3 Implementing problem oriented supervision</p> <p>II. The referral function of the central workshop is strengthened. II-1 Analysing situation II-2 Identifying the needs of technical improvement II-3 Participating in the technical training</p> <p>III. Capacity of the regional workshops is strengthened to carry out medical equipment maintenance and provide technical advice to users. III-1 Analysing situation III-2 Identifying the needs of technical improvement III-3 Participating in the technical training III-4 Improving and sustaining the maintenance recording system III-5 Analysing the frequent causes of medical equipment break down III-6 Providing technical advice to the hospital and district technicians</p>	<p>other regional maintenance workshops with basic tools and equipment iv) Training for target group v) Operational costs for project activities except mandatory activities of HMD</p>		

ANNEX 2.

PLAN OF OPERATION

Project name: *Improvement of Health Infrastructure Management in the Republic of Uganda.*

Project Purpose: *To develop the capacity of HHD, MoH and regional medical equipment maintenance workshops to manage health infrastructure and maintenance medical equipment.*

Output	Activity	2006				2007				2008				2009				Responsible Person					
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4						
Quarterly term	0-1. Project space formulation (furnish)	1																					
		X																			HHD		
Implementation Unit(PIU)	0-2. Procurement of equipment for PIU office		X																		HHD		
I. Problem oriented planning is developed and implemented by HHD.	I-1 Strengthening health infrastructure inventory management mechanism																						
		I-1-1 Reviewing existing data		XXX																		HHD	
		I-1-1-1 Assessing the problems with current data and inventory		XXX																			HHD
		I-1-2 Collecting additional data																					
HHD	I-1-2-1 Reviewing existing data collection tools and prepare appropriate tools for data collection and management		XXX																			HHD	
		I-1-2-2 Developing data management mechanism		X X	X																		HHD
		I-1-2-3 Procuring equipments to set up at RHs for the new health infrastructure inventory management and monitoring mechanism (basic PC and soft wears and printer in case they already have them, it should be operationalised)				X																	HHD

Output	Activity	2006				2007				2008				2009				Responsible Person	
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4		
I. Problem oriented planning is developed and implemented by HID.	I-1-2-4 Developing training modules and materials for inventory management	1	XX	X														HID	
																			HID
	I-1-2-5 Conducting training for inventory management for HID staff and selected regional workshop staff				X														HID
																			RWS
	I-1-2-6 Carrying out health infrastructure inventory data collection in hospitals and health centres				X														RWS
I-1-3 Up dating health infrastructure inventory																			
I-1-3-1 Carrying out support supervision for data collection and inventory update				X														HID	
I-2 Developing appropriate planning for improvement of the current situation																			
	I-2-1 Planning for training		X					X										HRD/HID	
	I-2-2 Planning for development of guidelines and IEC materials								XXX										HPE/HID
																			HRD/HID
I-2-3 Planning for Trainers training for medical equipment users																			
I-2-4 Planning for procurement for re-tooling the RWS																			
I-2-4-1 Carrying out inventory taking in regional workshops and prepare list of required tools		XX																RWS	

*HRD: Human Resource Division

*HPE: Health Promotion and Education

*NACME: National Advisory Committee on Medical Equipment

Output	Activity	2006				2007				2008				2009				Responsible Person				
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4					
I. Problem oriented planning is developed and implemented by HID.	I-2-4-2 Procuring and re-equipping regional workshops with required tools and equipment			X																HID/JICA		
	I-2-5 Planning for problem oriented supervision				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	HID	
	I-3 Implementation of plan																					
	I-3-1-1 Conducting training needs assessment for technicians and engineers at the HID and regional workshops																					HRD/ HID
I-3-1-2 Reviewing current training curriculum and develop an appropriate training curriculum for equipment maintenance technicians																						HRD/HID
I-3-1-3 Preparing training manual for equipment maintenance and management																						HID
I-3-1-4 Conducting in house training for HID and RH's' technicians to strength their skills and referral function capacities																						HRD/HID/ JICA
I-3-1-5 Conducting advanced training courses for engineers and selected technicians																						HID/JICA

Output	Activity	2006				2007				2008				2009				Responsible Person	
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4		
II. The referral function of the central workshop is strengthened.	II-1 Analysing situation		xxx															CWS/HID	
		II-2 Identifying the needs of technical improvement			xxx														CWS/HID
	II-3 Participating in the technical training				x														CWS
		II-1 Analysing situation		xxx															RWS/HID
	III. Capacity of the regional workshops is strengthened to carry out medical equipment maintenance and provide technical advice to users.	III-2 Identifying the needs of technical improvement			xxx														RWS/HID
			III-3 Participating in the technical training			x													
III-4 Improving and sustaining the maintenance recording system				xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	RWS/HID
Final evaluation	1. Preparation for final evaluation	III-5 Analysing frequent causes of medical equipment break down	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	RWS/HID	
		III-6 Providing technical advice to the hospital and district technicians	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	RWS/HID
	2. Final evaluation																	HID	
																		JCC	