

付 属 資 料

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1. 第二次事前評価調査日程

日時	官団員				宿泊地
	団長 (事務所長)	EPI (小林)	協力計画 (井田)	コンサル団員	
7月2日				保健医療・PCM	
7月3日		日本発、イスラマバード着 (PK853 14:00-21:05) ・ JICAにて打合せ ・ NIH表敬 ・ QCL C/PとPDM打合せ ・ AFPサーベイランス C/P 打合せ	日本発、イスラマバード着 (PK853 14:00-21:05) ・ JICAにて打合せ ・ NIH表敬 ・ QCL C/PとPDM打合せ ・ AFPサーベイランス C/P 打合せ	日本発、イスラマバード着 (PK853 14:00-21:05) ・ JICAにて打合せ ・ NIH表敬 ・ QCL C/PとPDM打合せ ・ AFPサーベイランス C/P 打合せ	イスラマバード
7月4日	火	・ JICAにて打合せ	・ ペルシヤワールへ移動 (午前) ・ NWFP・郡関係者 (FP・PHC 含む) 打合せ (午後) ・ UNICEF打合せ (午後)	・ ペルシヤワールへ移動 (午前) ・ NWFP・郡関係者 (FP・PHC 含む) 打合せ (午後) ・ UNICEF打合せ (午後)	イスラマバード
7月5日	水		・ ペルシヤワールへ移動 (午前) ・ NWFP・郡関係者 (FP・PHC 含む) 打合せ (午後) ・ UNICEF打合せ (午後)	・ ペルシヤワールへ移動 (午前) ・ NWFP・郡関係者 (FP・PHC 含む) 打合せ (午後) ・ UNICEF打合せ (午後)	ペシヤワール
7月6日	木	・ 開会式出席	PCMワークショップ	PCMワークショップ	ペシヤワール
7月7日	金		PCMワークショップ (午前中) スワットへ移動 (午後) ・ スワットにてLHWへの聞き取り調査 (午前) ・ イスラマバードへ移動 (午後)	PCMワークショップ (午前中) スワットへ移動 (午後) ・ スワットにてLHWへの聞き取り調査 (午前) ・ イスラマバードへ移動 (午後)	スワット
7月8日	土		・ スワットにてLHWへの聞き取り調査 (午前) ・ イスラマバードへ移動 (午後)	・ スワットにてLHWへの聞き取り調査 (午前) ・ イスラマバードへ移動 (午後)	イスラマバード
7月9日	日		資料読み込み及び整理	資料読み込み及び整理	イスラマバード
7月10日	月	・ PCMワークショップの結果についてブリーフィング	・ UNICEF協議 ・ WHO協議 ・ M/M案作成 ・ M/M案について関係者協議 (NIH・QCL・AFP・NWFP)	・ UNICEF協議 ・ WHO協議 ・ M/M案作成 ・ M/M案について関係者協議 (NIH・QCL・AFP・NWFP)	イスラマバード
7月11日	火		・ M/M案へ署名交換 ・ JICAパキスタン事務所へ報告 ・ 在パキスタン日本国大使館へ報告	・ M/M案へ署名交換 ・ JICAパキスタン事務所へ報告 ・ 在パキスタン日本国大使館へ報告	イスラマバード
7月12日	水	・ M/M案へ署名交換	・ M/M案へ署名交換 ・ JICAパキスタン事務所へ報告 ・ 在パキスタン日本国大使館へ報告	・ M/M案へ署名交換 ・ JICAパキスタン事務所へ報告 ・ 在パキスタン日本国大使館へ報告	イスラマバード

7月13日	木		イスラマバード発	イスラマバード発	PDMの指標及びびデータ源 に関し調査	イスラマバード
7月14日	金		日本着	日本着	PDMの指標及びびデータ源 に関し調査	イスラマバード
7月15日	土				PDMの指標及びびデータ源 に関し調査	イスラマバード
7月16日	日				PDM最終案、事前評価表案、 プロドク案等作成	イスラマバード
7月17日	月				PDM最終案、事前評価表案、 プロドク案等作成	イスラマバード
7月18日	火				PDM最終案、事前評価表案、 プロドク案等作成	イスラマバード
7月19日	水				関係者と案について協議	イスラマバード
7月20日	木				関係者と案について協議	イスラマバード
7月21日	金				JICAパキスタン事務所へ報告	イスラマバード
7月22日	土				イスラマバード発	
7月23日	日				日本着	

**MINUTES OF MEETINGS
BETWEEN THE JAPANESE PREPARATORY STUDY TEAM
AND
THE AUTHORITIES CONCERNED OF THE GOVERNMENT OF
THE ISLAMIC REPUBLIC OF PAKISTAN
ON THE JAPANESE TECHNICAL COOPERATION
FOR
EPI/POLIO CONTROL PROJECT**

The Japanese Preparatory Study Team (hereinafter referred to as “the Team”), organized by the Japan International Cooperation Agency (hereinafter referred to as “JICA”) and headed by Dr. Akira HASHIZUME visited the Islamic Republic of Pakistan (hereinafter referred to as “Pakistan”) for 21-25 March, 2006, in order to assess the validity of the project application submitted by Pakistan, and also to work out the framework of the technical cooperation for “EPI/Polio Control Project (hereinafter referred to as “the Project”).

During its stay in Pakistan, the Team had series of discussions with the authorities of the Islamic Republic of Pakistan on the measures to be taken by both parties for successful implementation of the above-mentioned project.

As a result of the discussions, both parties have agreed to record the matters in the documents attached hereto. Both parties will convey the contents of the Minutes of Meetings to their respective governments.

Islamabad, 25 March, 2006

橋爪 章

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

Hazrat Masaud Mian

Mr. Hazrat Masaud Mian
25.03.2006
Additional Secretary Health
(Acting Secretary Health), NWFP
Islamic Republic of Pakistan

Kayser Ali Shah

Mr. Kayser Ali Shah
Joint Secretary (F&D), Ministry of Health
Islamic Republic of Pakistan

Najma Siddiqi

Ms. Najma Siddiqi
Joint Secretary, Economic Affairs Division
Islamic Republic of Pakistan

The Attached Document

1. The Outline of the Project

Both parties agreed to the outline of the Project (See Annex).

2. Key Issues Discussed

Both parties agreed that the Project is needed, and the proposed framework of the Project is appropriate. Following issues were also discussed.

(1) Discussion Point

- Both Pakistani and Japanese sides agreed that the equipment to be procured for this project needs to be further specified, based on the outline of the Project, as well as JICA's regulation that excludes consumables from its technical cooperation.
- QCL Component will focus on the vaccines produced during the period of the Project.

(2) Selection of the Project Sites

Both parties agreed on selecting the Project sites as follows.

1. EPI Component at Federal level: EPI, National Institute of Health (NIH)
2. EPI Component at Provincial level: Buner, Shangla and Swat Districts, North Western Frontier Province (NWFP).
3. Quality Control Laboratory (QCL) Component: QCL, NIH

(3) Assignment of the Project Counterparts

The Team requested Pakistani authorities to allocate necessary project counterparts corresponding to each site and component, in accordance with the Project plan, and the Pakistani authorities agreed.

3. Steps to be Taken for Implementation of the Project

Based on this Minutes of Meetings, the JICA office in Pakistan will discuss and formulate the detailed design of the Project with Pakistani counterparts, including Project Design Matrix (PDM), Plan of Operation, Project Documents, and other documents required to formulate the Project. The JICA office in Pakistan will organize Project Cycle Management (PCM) workshop(s) involving all the concerned stakeholders, as part of such processes.

Annex: The Outline of the Project

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The Outline of the Project

1. Project Title

EPI/Polio Control Project

2. Implementing Agency

- ✧ Quality Control Laboratory (QCL), NIH: QCL Component
- ✧ EPI, National Institute of Health (NIH): EPI Component at Federal level
- ✧ Health Department, North Western Frontier Province (NWFP): EPI Component at Provincial level

3. Basic Outline of the Project**(1) Overall Goal**

Reduce mortality and morbidity due to EPI target vaccine-preventable diseases.

(2) Project Purpose

Enhance capacity to deliver quality EPI services at Federal and Provincial levels.

(3) Outputs

- 1) Strengthen EPI disease surveillance using AFP surveillance system.
- 2) Strengthen management of EPI services in target districts in NWFP.
- 3) Enhance quality control capacity of QCL/NIH

(4) Major Project Activities

- 1) Strengthen EPI disease surveillance using AFP surveillance system.
 - Training in country on strengthening AFP surveillance and integrating EPI diseases to AFP surveillance.
 - Development of guidelines/tools
- 2) Strengthen management of EPI services in target districts
 - Integrate EPI service delivery to Lady Health Worker Programme.
 - Enhance EPI logistics management through:
 - Development of Standard Operation Procedure;
 - Monitoring and supervision; and
 - Training
 - Improve the monitoring and reporting system of EPI activities, including the EPI coverage.
- 3) Enhance quality control capacity of QCL/NIH
 - Training in Japan and Pakistan

(5) Beneficiaries

1) Direct Beneficiaries:

- Government staff involved in the management and delivery of EPI services in the target province and districts
- Government officials involved in QCL activities

2) Indirect Beneficiaries:

- Children under the age of 5
- Women of child bearing age

(6) Inputs from the Recipient Government

- Concerned Government officials as the counterpart personnel and project staff
- Office space, furniture, facilities and utility charges required for management of the Project
- Administrative and operational costs
- Other land, buildings and facilities necessary for the implementation of the Project

(7) Input from the Japanese Government

- Expert(s) (technical, managerial and coordination)
- Equipment
- Training of project personnel in Japan and within Pakistan

(8) Project Implementation Mechanism

The Project will establish the Joint Coordination Committee (JCC). The JCC will monitor project activities, approve the annual plan developed by the Project Implementation Committees (PICs), and make major decisions for the Project.

PICs will be established at Federal and Provincial levels with a function of developing an annual plan and monitoring the progress of the Project every quarter.

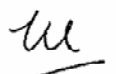
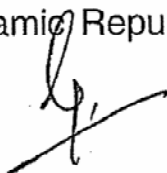
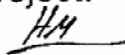
Details of the implementation plan will be decided in due course.

4. Project Duration

The duration of the Project is 5 years. The Project should be initiated as early as possible.

5. Security Conditions

The Government of the Islamic Republic of Pakistan will ensure the security required for the Project.



**MINUTES OF MEETINGS
BETWEEN THE JAPANESE PREPARATORY STUDY TEAM (2)
AND
THE AUTHORITIES CONCERNED OF THE GOVERNMENT OF
THE ISLAMIC REPUBLIC OF PAKISTAN
ON JAPANESE TECHNICAL COOPERATION
FOR
EPI/POLIO CONTROL PROJECT**

The Japanese Preparatory Study Team (2) (hereinafter referred to as "the Team"), organized by the Japan International Cooperation Agency (hereinafter referred to as "JICA") and headed by Mr. Takao KAIBARA, Resident Representative of JICA Pakistan Office, visited the Islamic Republic of Pakistan (hereinafter referred to as "Pakistan") during 3-13 July, 2006, in order to formulate the framework of the "EPI/Polio Control Project (hereinafter referred to as "the Project") with the Pakistani authorities.

During the visit in Pakistan, the Team had series of discussions with the authorities of Pakistan (Ministry of Health) and with other relevant stakeholders on the strategy and contents of the Project.

As a result of the discussions, the authorities of Pakistan and the Team have agreed to record the matters in the document attached hereto. Both parties will convey the contents of the Minutes of Meetings to their respective governments.

Islamabad, 12 July, 2006



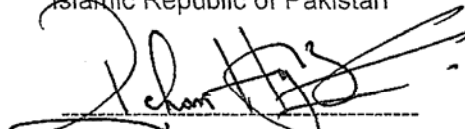
Mr. Takao KAIBARA
Leader, Preparatory Study Team
Japan International Cooperation Agency



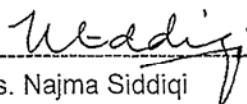
Mr. Muhammad Younis Javed
Additional Secretary (DEV), NWFP
Islamic Republic of Pakistan



Mrs. Saira Karim
Sr. Joint Secretary (F&D), Ministry of Health
Islamic Republic of Pakistan



Dr. Rehan Abdul Hafeez
National Program Manager EPI
Islamic Republic of Pakistan



Ms. Najma Siddiqi
Joint Secretary, Economic Affairs Division
Islamic Republic of Pakistan

The Attached Document

1. The Outline of the Project

Both parties agreed to the outline of the Project (See Annex).

2. Key Issues Discussed

Both parties agreed that the Project is needed, and the proposed framework of the Project is appropriate. Following issues were also discussed.

(1) Integration of Lady Health Workers in Expanded Programme on Immunization (EPI) service delivery

- Both Pakistani and Japanese sides agreed that the component on strengthening the routine EPI services in Buner, Shangla and Swat districts of North West Frontier Province (NWFP), in consultation with provincial government (NWFP) will focus on the expansion of EPI services at the community level. This will involve training and integration of Lady Health Workers (LHWs) into the EPI service delivery. The Project will expand the approach of NWFP and UNICEF to these districts, currently implemented as part of "Immunization Plus" and "Reach Every District (RED) Programme".
- As proposed by NWFP and UNICEF Peshawar Office, JICA will carry out "Immunization Plus" activities in Swat district, except for the Polio Campaigns. UNICEF Peshawar and JICA, in consultation with NWFP Government relevant authorities, will develop a mechanism to ensure a smooth transition and coordination of on-going activities.
- The relevant authorities of Pakistan and the Team agreed that the concerned authorities of the Pakistani government will ensure smooth communication and coordination between EPI and National Programme for Family Planning and Primary Health Care (National Programme) at federal, provincial and district levels, for successful implementation of the Project.

(2) Management of the Project

The concerned authorities of Pakistan and the Team agreed that Project Director and Project Manager are to be designated as follows:

Project Director: EPI National Manager, National Institute of Health
Project Director will supervise the entire Project.

Project Manager: Deputy Director EPI, NWFP

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Project Manager will focus on and will oversee the routine EPI component in NWFP.

For the successful implementation of the Project, Pakistani and Japanese sides will share the responsibility of allocating necessary resources for the Project, including personnel, budget and equipment, in line with the PC1.

The Pakistani authorities and the Team agreed to establish a Joint Coordination Committee (JCC) and Project Implementation Committee (PIC) for the Project with the following composition/functions:

(a) Joint Coordination Committee

Functions:

- Will be held as part of EPI Quarterly Review Meeting.
- Coordinates the activities relevant to the Project.
- Monitors and Evaluates the progress of the Project, and decides on the direction of the Project implementation.

Composition:

Chairperson to be designated.

Proposed members:

- ✓ ED/NIH
- ✓ EPI National Manager, NIH
- ✓ National Programme, Federal
- ✓ Officer-In-Charge, QCL, NIH
- ✓ National Surveillance Cell
- ✓ Deputy Director EPI, NWFP
- ✓ National Programme, NWFP
- ✓ JICA
- ✓ Embassy of Japan (Designated Guest)

(b) Project Implementation Committee

Functions:

- Discusses the matters related to the component of routine EPI services in NWFP.
- Meets monthly.

Compositions:

Chairperson to be designated.

Proposed members:

- ✓ Deputy Director EPI, NWFP
- ✓ Programme Analyst EPI, NWFP
- ✓ National Programme Coordinator, NWFP

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Handwritten signatures and initials in black ink, including a large signature on the left, a circled 'A' in the middle, and the number '3' and other initials on the right.

- ✓ EDO Health (three districts)
- ✓ EPI Coordinators(three districts)
- ✓ UNICEF
- ✓ WHO
- ✓ JICA

(3) Assigning of Japanese Experts

JICA will dispatch the following experts who will be based in Pakistan and jointly implement the Project with the Pakistani authorities.

Chief Advisor:

Chief Advisor will provide necessary technical advice to the Pakistani counterparts concerned, regarding the overall operations of the project.

Project Coordinator:

Project Coordinator will monitor the implementation of the project.

For other relevant areas, QCL and EPI disease surveillance, short-term experts or consultants would be assigned with prior consultation with Ministry of Health.

3. Measures to be Taken

- Based on these Minutes of Meetings, JICA will formulate a draft Project Design Matrix (PDM), Summary of Ex-ante Evaluation, Plan of Operations, Project Document, and other documents required for finalizing the Project framework, in consultation with the Pakistani authorities. Record of Discussion will be prepared, based on these documents, for the Project to commence at the earliest.
- The JICA Pakistan office will organize a meeting of EPI, National Programme and JICA (both HQs and Country Office) at the earliest, to formalize the mode of operation for these programmes at federal and provincial levels, in this particular Project.
- The timing of taking over the Immunization Plus activities in Swat district should be discussed among UNICEF, JICA and NWFP officials concerned.

Annex1: The Outline of the Project

Annex2: Draft PDM

Annex3: List of Participants in the Meeting

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Annex1: The Outline of the Project

1. Project Title

EPI/Polio Control Project

2. Basic Outline of the Project

(1)Overall Goal

Morbidity due to EPI-targeted vaccine-preventable diseases is reduced in the target districts.

(2)Project Purpose

Children under the age of two are vaccinated in the target districts.

(3)Outputs

- 1) EPI services are properly provided in the target districts.
- 2) Parents ensure their children to be vaccinated in the target districts.
- 3) EPI disease surveillance including using AFP surveillance system is strengthened.
- 4) Quality control capacity of QCL/NIH is enhanced.

(4)Target Group


Children under the age of two in the target districts

(5)Beneficiaries

Children under the age of two years (routine EPI immunization)

Children under the age of five years (Polio vaccination)

Pregnant women (TT)

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Annex 2: Draft PDM

PDM₀
 Project Name : EPI/Polio Control Project in Pakistan
 Target Area : 3 districts (Buner, Shangla, and Swat) in North West Frontier Province (NWFP)
 Target Group : Children under the age of two in the target districts
 Date : July 12, 2006
 Version : No. 0

Project Period : 5 years

Narrative Summary	Objectively Verifiable Indicators	Means of Verification	Important Assumptions
<p>Overall Goal Morbidity due to EPI-targeted vaccine-preventable diseases is reduced in the target districts.</p>			
<p>Project Purpose Children under the age of two are vaccinated in the target districts.</p>			
<p>Outputs 1. EPI services are properly provided in the target districts. 2. Parents ensure their children to be vaccinated in the target districts. 3. EPI disease surveillance including using AFP surveillance system is strengthened. 4. Quality control capacity of QCL/NIH is enhanced.</p>			
<p>Activities</p>	<p>Inputs Japanese side 1. Personnel • Long-term experts Chief Advisor/EPI Project Coordinator • Short-term experts QCL EPI diseases surveillance As required 2. Training of project personnel in Japan and Pakistan 3. Equipment</p>	<p>Pakistani side 1. Personnel Project Director Project Manager Counterparts, etc. 2. Provision of the project office and facilities necessary for the implementation of the project 3. Others Administrative and operational costs Running costs for electricity, water, etc.</p>	<p>Pre-conditions</p>

Annex3: List of Participants in the Meeting

Government of Pakistan

Mrs. Saira Karim
Sr. Joint Secretary (F&D), Ministry of Health

Dr. Fahim Arshad Malik
Deputy Director General (P&D1), Ministry of Health

Dr. Rehan Abdul Hafeez
National Program Manager, EPI

Mr. Muhammad Younis Javed
Additional Secretary (DEV), NWFP

Mr. Qadir Bux Abbasi
Deputy Director Monitoring and Evaluation EPI, NIH

JICA

Mr. Takao KAIBARA,
Leader, Preparatory Study Team/Representative of JICA Pakistan Office

Dr. Makoto KOBAYASHI
EPI Specialist, Preparatory Study Team

Ms. Akiko IDA
MCH Specialist/Cooperation Planning, Preparatory Study Team

Mr. Takaaki HIRAKAWA
Evaluation/Analysis Specialist, Preparatory Study Team

Mr. Mitsunobu INABA
Deputy Representative, JICA Pakistan Office

Mr. Sohail AHMED
Senior Programme Officer, JICA Pakistan Office

Handwritten signatures and initials in black ink. There are several distinct marks, including a large stylized 'S' at the top, a signature that looks like 'S. Karim', and other initials like 'M', 'A', and 'U'.