

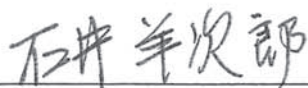
MINUTES OF MEETINGS  
BETWEEN THE JAPANESE MID-TERM EVALUATION TEAM  
AND  
THE AUTHORITIES CONCERNED OF  
THE GOVERNMENT OF THE KINGDOM OF CAMBODIA  
ON THE JAPANESE TECHNICAL COOPERATION PROJECT  
FOR HUMAN RESOURCE DEVELOPMENT OF CO-MEDICALS

The Japanese Mid-term Evaluation Team (hereinafter referred to as “the Team”), organized by the Japan International Cooperation Agency (hereinafter referred to as “JICA”) and headed by Mr. Yojiro ISHII, visited the kingdom of Cambodia from 5 February to 19 February, 2007. The purpose of the Team was to evaluate the achievements made so far in the project, and to make the mid-term evaluation for the project for human resource development of Co-medicals (hereinafter referred to as “the Project”).

During its stay, both the Team and authorities concerned of the Kingdom of Cambodia (hereinafter referred to as “both sides”) had a series of discussions and exchanged views on the Project. Both sides jointly monitored the activities and evaluated the achievements based on the Project Design Matrix (hereafter referred to as “PDM”).

As a result of the discussions, both sides agreed upon the matters referred to in the Joint Mid –Term Evaluation Report of the Project attached hereto and the revision of the PDM version2 (log frame) as endorsed by JCC (Joint Coordinating Committee Meeting) on 16 February, 2007.

Phnom Penh, 19 February, 2007



**Mr. Yojiro Ishii**

Leader

The Mid-Term Evaluation Team

Japan International Cooperation Agency

Japan



**Prof. Eng Huot**

Secretary of State for Health

Ministry of Health

Kingdom of Cambodia

Joint Mid-term Evaluation Report  
of the Project for  
Human Resource Development of Co-medicals  
in the Kingdom of Cambodia

February 16, 2007

7-1

5

## Abbreviation

ACC:	Accreditation Committee of Cambodia
CPA	Complementary Package of Activities
C/P:	Counterparts
EOJ:	Embassy of Japan
EQ:	Evaluation Question
GAS:	Guideline for Accrediting School
HSP:	Health Sector Strategic Plan
HSSP:	Health Sector Supporting Project
JCC:	Joint Coordination Committee
JICA:	Japan International Cooperation Agency
JOCV:	Japan Overseas Cooperation Volunteers
LT:	Laboratory Technologist
M/M:	Minute of Meeting
MOH:	Ministry of Health
NHEB:	National Health Education Board
PCC:	Project Counterpart Committee
PCM:	Project Cycle Management
PDM:	Project Design Matrix
PO:	Plan of Operation
PT:	Physiotherapist
R/D:	Record of Discussions
RN:	Registered Nurse
RT:	Radiological Technologist
SAC:	School Approval Criteria
SRN:	State Registered Nurse
TOT:	Training of Trainers
TSMC:	Technical School for Medical Care
WG:	Working Group

y.f

cb

## Table of Contents

1. OUTLINES OF THE MID-TERM EVALUATION.....	4
1.1 Background of the Evaluation .....	4
1.2 Objectives of the Evaluation .....	4
1.3 Members of the Evaluation Team.....	4
1.4 Methodology of the Evaluation .....	5
2. OUTLINE OF THE PROJECT .....	6
3. PERFORMANCE OF THE PROJECT (from Sep. 2003 to Jan. 2007).....	7
3.1 Inputs.....	7
3.2 Achievements .....	8
3.3 Implementation Process .....	9
4. EVALUATION RESULT BASED ON FIVE CRITERIA .....	10
4.1 Relevance:.....	10
4.2 Effectiveness:.....	10
4.3 Efficiency: .....	11
4.4 Impact:.....	11
4.5 Sustainability:.....	11
4.6 Promoting Factor .....	12
4.7 Inhibiting Factors .....	12
4.8 Conclusion .....	12
5. RECOMMENDATIONS.....	12
5.1 To the Ministry of Health .....	12
5.2 To Japanese side .....	13
5.3 To the project.....	13
ANNEX.....	13

## 1. OUTLINES OF THE MID-TERM EVALUATION

### 1.1 Background of the Evaluation

Japan International Cooperation Agency (JICA) has been collaborating with the Ministry of Health (MOH) of the Royal Government of Cambodia (hereinafter referred to as "Cambodia") in the implementation of the Project for Human Resource Development of Co-Medicals (hereinafter referred to as "the Project") with the aim of improving the pre-service training for the four co-medical professions in TSMC (Technical School for Medical Care) and 4RTCs (Regional Training Centers). The Project was launched on 15 September 2003, and will be completed on 14 September 2008.

The purpose of the Project is "Public co-medical schools are able to appropriately provide basic education of SRN(State Registered Nurse), LT(Laboratory Technologist), PT (Physiotherapist), and RT (Radiological Technologist) following with the MOH Human Resource Policy."

The Project includes the following activities in the operational task: promoting teaching skills for the academic staff at the five target schools, developing school approval criteria and guidelines for accrediting school, revising curricula and syllabi, providing educational materials, as well as improving school management of TSMC.

After the Project began, two consultation teams were dispatched to Cambodia in December 2004 and May 2005. By those two consultations, the scope of the project activities was clarified, and PDM (Project Design Matrix) as well as PO (Plan of Operations) were revised with Cambodian counterparts.

### 1.2 Objectives of the Evaluation

- (1) To review the progress of the Project and evaluate the achievements in accordance with the five evaluation criteria (relevance, effectiveness, efficiency, impact, and sustainability);
- (2) To consider the necessary actions to be taken and to make recommendations;
- (3) To revise the PDM and PO, if necessary; and
- (4) To summarize the result of the study in a joint evaluation report.

### 1.3 Members of the Evaluation Team

#### Japanese side

	Name	Designation	Position, Organization
1	Mr. Yojiro ISHII	Team Leader	Group Director, Health Group, Human Development Department, JICA
2	Professor Kunihiro MIMURA	Laboratory Technology	Professor, Division of Clinical Laboratory Science Department of Environmental Security System Faculty of Risk and Crisis Management Chiba Institute of Science
3	Ms. Akiko ENDO	Evaluation Planning	Associate Expert, Health Personnel Development Team, Health Group, Human Development Department, JICA
4	Ms. Shuichi Suzuki	Evaluation Analysis	Fujita Planning Co., LTD

#### Cambodian side

	Name	Position, Organization
1	H.E. Prof. Eng Huot	Secretary of State, Ministry of Health
2	Ms. Keat Phuong	Director, Human Resource Development Department, Ministry of Health
3	Dr. Huy Sovath	Director, Technical School for Medical Care

#### 1.4 Methodology of the Evaluation

##### (1) Joint Evaluation

The Evaluation Team was composed of four members from Japanese side and three members from Cambodian side and evaluates the Project based on the "JICA Guideline for Project Evaluation" guided by the five evaluation criteria enumerated below (3).

##### (2) Process of the Evaluation

- 1) To set up evaluation questions (hereinafter called EQ). EQ is the question which should be identified in the evaluation and researched for evaluation based on the five evaluation criteria. These are selected and described in an "Evaluation Grid".
- 2) To describe required information, date and how to collect the information and data. These are also selected and described in the "Evaluation Grid".
- 3) To collect several information and data according to the Evaluation Grid. Some data which were collectable in Japan were compiled in the Evaluation Grid before arriving at the project site.

Collected data and information are followings:

Literature data: Project Plan and Project Progress Reports

Interview: C/P, Japanese Experts, MOH, UHS, TSMC, Section Chief of TSMC and 4 RTCs, Calmette Hospital and Soviet-Khmer Friendship Hospital

Questionnaires: RTC (x4) Students, Teachers

- 4) To compare the plan of the Project and achievements of the Project based on the Five Evaluation Criteria which are described in 1.5 (3).
- 5) To consider the result of comparison according to the Five Evaluation Criteria.
- 6) To conclude the result of evaluation according to the purpose of the Evaluation
- 7) To draw the recommendations and lessons learned

##### (3) Five Evaluation criteria

###### A) Relevance

Relevance refers to the validity of the Project purpose and the Overall Goal in connection with the development policy of Cambodia in the target sector and assistance policy of Japan as well as the needs of target groups and stakeholders at the time of the Evaluation

###### B) Effectiveness

Effectiveness refers to the extent to which the Project purpose will be achieved as planned through the activities in the Project (not by external factors), and examines the attainment of the Project purpose, relationship between the Project purpose and Outputs, and influence of external factors (including Important Assumptions).

###### C) Efficiency

Efficiency refers to the productivity of the implementation process and examines to what extent the Inputs had been converted into the Outputs, and whether timing of the input as well as output is appropriate in light of the Project progress/ planning/ implementation/ expected timeframe

###### D) Impact

Impact refers to direct, indirect positive and negative influences caused by implementation of the Project, including the extent to which the overall goal will be attained.

## E) Sustainability

Sustainability refers to the extent to which the benefits generated by the Project will be able to be sustained after the termination of the Project, and examines fundamental elements to sustain the benefits (ex. Organization, Finance, Human resource).

### (4) Review of the PDM

Most of the cooperation projects by JICA use PDM as a main tool to identify the project outline. PDM describes the plan of the project if PDM was developed under appropriate order. In the course of the planning and implementation of the project, revisions can be made to PDM and agreed upon by the both parties concerned. In this evaluation, the current PDM1 (revised on 20<sup>th</sup> May 2005) is used as the plan of the project.

## 2. OUTLINE OF THE PROJECT

The Royal Government of Cambodia requested the Government of Japan for the technical cooperation to enhance the co-medical education system. In response to the request, the Government of Japan and the Royal Government of Cambodia signed the Record of Discussion (Here in after called R/D) on March 27<sup>th</sup> 2003 for the Project for Human Resource Development of Co-Medicals. The Project was commenced in September 2003 for five years and is planned to be terminated in September 2008. At the time of the mid-term evaluation, two long term experts (Chief Adviser and Coordinator) are dispatched to the Project.

The Project purpose is “Public co-medical schools are able to appropriately provide basic education of SRN, LT, PT and RT following with the MOH HR Policy”.

Overall Goal (a purpose which will be attained after the completion of the project) is “Qualified co-medicals (SRN, LT, RT, PT), capable of performing defined tasks, are graduated from public and private schools, and MOH employment status is improved”.

Outputs of the Project are designated as follows.

- (1) "School approval criteria" and "Guidelines for accrediting school" for SRN, LT, PT and RT courses are developed and executed. Client-oriented nursing practice teaching is introduced in a model hospital.
- (2) Curricula and syllabi for SRN, LT, RT and PT are developed/revised or suggested according to the School approval criteria and Guidelines for accrediting school, and approved by MOH as standards for the country.
- (3) Educational materials for SRN, LT, RT and PT courses are developed / provided / suggested according to revised / developed curricula and syllabi.
- (4) Capacity of SRN, LT, RT and PT teachers are upgraded.
- (5) SRN, PT, LT and RT courses with developed, revised or suggested curricula and syllabi are implemented.
- (6) School management of the TSMC is improved.
- (7) The project activities (output 1-6) are monitored and reviewed by JCC, PCC and the project implementers.

### 3. PERFORMANCE OF THE PROJECT (from Sep. 2003 to Jan. 2007)

#### 3.1 Inputs

##### 3.1.1 Japanese Side

Long-term Experts	Person	M/M
Chief Advisor	2	41
Coordinator	3	44
Co-medical Education	1	12
Total	6	97
Short-term Experts	Person	M/M
Radiographer Education	4	31
Organization Strengthening	1	0.5
School Management	3	2.5
Project Management / Nursing Education	2	4
Nursing (SAC / Guideline)	1	1
Nursing Training Planning	2	5
Laboratory Technology (Curriculum)	1	1
Laboratory Technology (Educational material / Training plan)	1	1.5
Laboratory Technology (SAC / Guideline)	1	1
Physiotherapy Education (Training plan / Regulation)	1	1
Physiotherapy Education (Training implementation)	1	1
Total	18	49.5

Training in Japan	Attends.	From	To	Months	M/M
Human Resource Development	2	31/3/2004	16/4/2004	0.5	1
School Management	2	31/3/2004	16/4/2004	0.5	1
Human Resource Development	2	9/2/2005	4/3/2005	1	2
School Management	1	9/2/2005	25/2/2005	0.5	0.5
Laboratory Technology	1	5/2/2005	10/3/2005	1	1
Nursing Education	2	25/5/2005	20/6/2005	1	2
Laboratory Technology	1	20/5/2006	20/6/2006	1	1
Laboratory Technology	1	9/1/2006	12/3/2006	2	2
Nursing (Maternal and child health)	2	8/5/2006	10/6/2006	1	2
Physiotherapy Education	2	21/5/2006	18/6/2006	1	2
Total	16		Total	9.5	14.5

Third country training	Attends.	From	To	Months	M/M
Training in Thailand					
X-ray	3	22/2/2005	24/12/2005	10	30
Training in Malaysia					
Nursing Tutors	5	30/11/2003	20/12/2003	0.6	3
Nursing Tutors	5	23/9/2004	13/10/2004	0.6	3
Nursing Tutors	5	17/8/2005	7/9/2005	0.6	3
Total	18				39



Echo training	Attends.	From	To	Months	M/M
Nursing	28	14/8/2006	1/9/2006	0.6	16.8

Equipment	Year	JPY 1,000	US\$
Vehicle	2003		59,000
Practical Training Equipment	2004	14,749	
Office Equipment	2004		50,689
Practical Training Equipment	2005	19,154	
Office Equipment	2005		22,225
Practical Training Equipment	2006	3,043	
Office Equipment	2006		72,003
	Total	36,945	203,197

#### Local Expenses (US\$)

2003	56,034
2004	52,577
2005	165,739
2006	136,655
Total	411,005

#### 3.1.2 Cambodian Side

Counterparts	Persons
Human Resource Development	11
Nursing	17
Radiological Technology	5
School Management	1
Laboratory Technology	3
Physiotherapy	2
Total	39

#### Local Expenses (US\$)

X-ray course (4 month)	1,590
------------------------	-------

### 3.2 Achievements

#### 3.2.1 Project purpose

Indicator: School approval criteria (SAC) and guideline for accrediting school are established and followed to maintain the quality of education.

Achievement: SAC is on the approval process.

Indicator: Each course is implemented as planned in accordance with the curricula and the syllabi.

Achievement: Newly established Radiological Technology course was commenced in the academic year 2006 / 2007 and three-year Laboratory Technology course was newly commenced in the same academic year. Nursing course and Physiotherapy course will be commenced in academic year 2007/2008.

- Indicators: Existing teachers are equipped with skills and knowledge according to school approval criteria requirements.
- Achievement: SAC has not been approved yet. Hence it is difficult to verify this indicator.
- Indicators: The School Management of TSMC is improved.
- Achievement: Four improvement committees were established at the beginning of the Project. In the course of the Project implementation, the activities of three improvement committees were absorbed into routine administration works. Currently, only Planning committee is working.

### 3.2.2 Outputs

In the Project PDM, there are seven outputs and each output consists of several subjects such as Radiological Technology, Nursing, Laboratory and Physiotherapy. Achievement of Outputs is described on ANNEX 1.

### 3.3 Implementation Process

#### (1) Joint Coordination Committee (JCC) and Project Counterpart Committee (PCC)

JCC meetings were held twice on 9<sup>th</sup> December 2003 and on 27<sup>th</sup> Sep. 2005. PCC meetings which were organized to confirm and to share the project progress were held eight times. The dates of the committee meetings are as follows.

1. 24<sup>th</sup> May 2004
2. 20<sup>th</sup> July 2004
3. 28<sup>th</sup> June 2005
4. 27<sup>th</sup> Sep. 2005
5. 25-26 Jan. 2006
6. 10-11 May 2006
7. 3-5 Oct. 2006
8. 7-9 Feb. 2007

#### (2) Working group (WG)

Working groups were established to develop SAC and curriculum of four courses individually. Numbers of the meeting are as follows.

		2003	2004	2005	2006	2007
RT	SAC		5	10	1	
	Curriculum Advisory				3	
	Curriculum				10	
LT	Curriculum			5	21	6
RN	SAC				8	1
PT	Curriculum			5	14	3

#### (3) National Health Education Board (NHEB)

In order to facilitate the approval process, Delphi<sup>1</sup> method was used instead of setting up NHEB.

#### (4) Improvement Committees

Four improvement committees were established. Three of them were dissolved and functions of three committees were transferred to regular offices as their routine tasks.

<sup>1</sup> Delphi method is a tool to collect opinions from key informant in rotation.

47

16

Planning committee is still working on the development of the budget requirement and to monitor the process.

	(2004/4 )
Finance Monitoring Committee	8
Planning Committee	2
Information System Improvement Committee	3
School Discipline Committee	4

*(5) Training course*

	Attends.	From	To	Days	Months
Library Management	13	14/1/2005	15/1/2005	2	
Library Management	8	30/5/2005	3/6/2005	5	
Library Management	10	25/7/2005	29/7/2005	5	
Laboratory Equipment	10	20/3/2006	21/3/2006	2	
Physiotherapy	10	7/8/2006	15/8/2006	9	
Nursing Equipment	15	21/2/2006	22/2/2006	2	
Nursing	23	21/10/2006	27/10/2006	7	
X-ray	25	2/11/2004	3/5/2005		6
X-ray	25	3/5/2005	3/11/2005		6
X-ray	25	4/11/2005	7/3/2006		4
X-ray	25	2/10/2006	Feb-07 (under implementation)		4

**4. EVALUATION RESULT BASED ON FIVE CRITERIA**

**4.1 Relevance:**

The Project's relevance remains high in terms of the national policies of Cambodia and JICA Country Strategy for Japan's Official Development Assistance to Cambodia.

- (1) This Project is implemented under "Health Sector Strategic Plan 2003-2007" and "Health Workforce Development Plan (HWDP) 1996-2003 / 2006-2015" which included the importance of producing enough number of qualified health workforces to meet the needs of health services of the country.
- (2) The project direction is consistent with the JICA Country Strategy to Cambodia, which addresses strengthening "Health Sector" is one of the priority areas.
- (3) Japan's health sector support in Cambodia is widely recognized and highly appreciated.

Relevance of the Project to the needs of the beneficiaries, however, may not be high. Because employment condition for graduates of TSMC and 4 RTCs seems not favorable in light of the fact that their job opportunities in public health facilities are limited especially for laboratory technologists and physiotherapists.

**4.2 Effectiveness:**

The level of effectiveness of the Project was adequate at the time of the evaluation, but would require further improvement in the remaining project period.

Since SAC was upgraded from "Prakas (ministerial ordinance)" to "Anukret (sub decree)", strict enforcement will be ensured. Anukret is able to create an environment where

41

education is conducted under collaboration among various ministries.

At the same time, as the approving Anukret requires a number of procedures, this might be a cause for delay in the progress of the Project.

The Indicators of Project purpose are not measurable. In an ideal situation, TSMC and 4 RTCs should implement co-medical education based on the developed curriculum under SAC and Guideline for Accrediting School (GAS). However, it is difficult to measure the attainment of the Project Purpose because the Project term will be ended before the students complete the three-year courses based on the new curriculum.

How the attainment of each Output contributes to the Project purpose is ambiguous because the achievement levels of Outputs vary among the training institutes (TSMC and 4 RTCs) and professions (Nursing, Radiological Technology, Laboratory Technology and Physiotherapy).

#### 4.3 Efficiency:

The expected outputs are too broad compared to the planned inputs; the activities cover wide-ranging items such as establishment of regulations, capacity building of teachers and improvement of school management. Additionally, the large number of the implementing organizations (MOH, TSMC and 4 RTCs) and the targeted professions (Nursing, Radiological Technology, Laboratory Technology and Physiotherapy) attributed to diluting the inputs of the Project.

As for the Output 6, improvement of the school management, issues which were planned to be addressed by the Project activities should have been limited to those which are under jurisdiction of the TSMC.

#### 4.4 Impact:

##### *(1) Expectation of the achievement of the Overall Goal*

Indicator: Both public and private schools are going to follow the regulation of MOH.

The public training institutes should follow the regulation. At the present, there are a few private training institutes for co-medicals and they should also follow the regulation. A concrete measure how to enforce the regulation on those co-medical training intuitions needs to be explored.

Indicator: Passing rate of the first trial of graduation examination for public and private co-medical schools are increased.

Since SAC assumes implementation of a national examination, it will become possible to verify this Indicator after such an examination is conducted.

Indicator: Employment of graduates is increased.

Since the attainment of the Project purpose does not directly contribute to increasing the number of employment of graduates, it may be difficult to identify that increase of the number of employment is one of the "Impact" brought by achievement of the Project Purpose.

##### *(2) The other positive impacts*

SAC were expanded to cover not only four professions but also other medical professions such as doctor, dentist and pharmacist.

#### 4.5 Sustainability:

It seems that effective mechanism to sustain the Project outcomes is not established yet.

For example, how to develop an auditing system for the enforcement of SAC and

GAS has not been determined.

It is also uncertain that how capacity of teachers will be maintained and upgraded properly after the completion of the Project.

#### 4.6 Promoting Factor

- (1) *Good partnership* created by the co-working project style between Cambodian officials concerned to the Project and JICA Experts smoothed the Project implementation process.

#### 4.7 Inhibiting Factors

##### (1) *Ambiguity of project design*

Even though the project design was revised to be applicable one by the consultation survey in 2005, the design still has ambiguity in terms of Indicators of PDM. Therefore, it is difficult for the Project to decide on its concrete activities. In addition, since Indicators are not measurable and unclear, the baseline data was not obtained at the beginning of the project.

##### (2) *Broad coverage of the Project activities*

The project range is too wide to be covered by one JICA technical cooperation project. Therefore some project activities only deal with the surface of the outputs. In addition, the Inputs of the project are similar amount to a typical JICA technical cooperation project although the scale of the Project is larger.

##### (3) *Inconsistency in understanding on certain terms by Japanese side and Cambodian side*

There was a gap between Japanese side and Cambodian side in terms of understanding the definitions such as “curriculum” and “syllabus”. Thus, the Project has to spend much time to make consensus regarding the activities.

#### 4.8 Conclusion

In order to ensure the quality of health service in Cambodia, it is important to establish regulations for co-medical education. Hence, the Project involved developing SAC and GAS and they will become the first regulations for Cambodia to clarify the requirements set by the government for co-medical education. Upgrading status of SAC from Prakas to Anukret enables co-medical education to improve.

The establishment of SAC, GAS and the standard curricula will be achieved by the end of the Project in spite of the limited “Inputs”. On the other hand, it is uncertain whether skills of the teachers in TSMC and 4 RTCs are fulfilled or not.

The Project covers the wide range of activities and it seems to be difficult to fully achieve the Project purpose within the remaining period. In addition, some Indicators in current PDM are not measurable. Considering the changes of the circumstances, the PDM needs to be revised to specify the attainment level of the objectives and to fix verifiable indicators. Revised points compared to PDM 1 are described in ANNEX 3 and revised PDM (log frame) is described in ANNEX 2.

## 5. RECOMMENDATIONS

### 5.1 To the Ministry of Health

- (1) The Project has been one of the driving forces for “Health Workforce Development Plan (HWDP) 1996-2003 / 2006-2015”. Hence, the Ministry of Health should recognize importance of the Project and support organizations which conduct health related human

resource developments.

- (2) Since there is no regular system to enhance the skill of the teachers in TSMC and 4 RTCs, the Ministry of Health should establish sustainable system for training and monitoring.
- (3) To ensure the compliance of SAC and GAS, it should be considered to establish a school inspection system.

#### 5.2 To Japanese side

JICA should support the Project in a properly coordinated manner together with other JICA cooperation projects in Cambodia. So that JICA's support will create larger impact on strengthening and widening the health care services to the people. Such holistic and systematic approach of cooperation will also contribute to avoid the harmful effects of vertical programs.

#### 5.3 To the project

- (1) The "Activities" of PDM2 should be amended to reflect the revised "Outputs" of revised log frame (PDM2) and approved by JCC. The PO also should be amended accordingly.
- (2) The information of Indicators in revised log frame (PDM2) should be collected timely and appropriately
- (3) The Project needs to provide necessary technical advice regarding health related human resource development as well as implementation of the above mentioned recommendation to MOH.

#### ANNEX

ANNEX 1: Achievement of Outputs

ANNEX 2: Revised version of PDM (PDM ver.2)

ANNEX 3: Changes in the PDM

ANNEX 4: Evaluation Grid

ANNEX 5: Evaluation Mission Schedule

ANNEX 6: List of Stakeholders Consulted by the Evaluation Mission

Outputs	X-ray (RT)	Laboratory (LT)	Nursing (RN)	Physiotherapy (PT)	Others
Output1: "School approval criteria" and "Guideline for accrediting school" are approved by MOH as Prakas. (Prakas is smaller than sub decree and can be modified according to situation and MOH needs)	SAC has been enforced as PRAKAS.				
Guideline for accrediting school	SAC for all Medical professionals were submitted the final draft to Council of Ministers. First draft of guideline was made. However, this draft should be modified according to SAC as Sub-Decree.		The RN Guidelines as "the standard for Health training" is in progress and other WGs will follow its format.		
Output2: Curricula and syllabi are developed/ revised and approved by MOH as standards for the country.	Curriculum outline is being developed.	Curriculum outline is being developed.	It is out of the scope in P.O. but in the scope of PDM.	PT curriculum has been being developed to be converted into the credit system. (It is out of the scope in P.O. but in the scope of PDM.)	
Syllabi	Developing syllabus is still ongoing.	Developing syllabus is still ongoing.	It is out of the scope in P.O. but in the scope of PDM.	It is out of the scope in P.O. but in the scope of PDM.	
Output3: Educational materials are developed/ provided to support the implementation of SRN, LT, RT and PT courses.	Khmer text for RT was partly developed	Khmer text of LT is not done.	Teaching materials for Nurse and PT is out of scope in PO. but in the scope of PDM.	Teaching materials for Nurse and PT is out of scope in PO. but in the scope of PDM.	
Library					Training for Librarian was conducted for three times and reference books are partly provided to library of TSMC and 4 RTCs.
Output4: Capacity of teachers for SRN, LT, RT and PT courses are upgraded	Training courses were conducted but capacity of teachers are not measured.				
Output5: Educational plan is implemented to 80% based on Developed or Revised curriculum and syllabi.	Developing educational plan based on the curriculum is still on going.	Developing educational plan based on the curriculum is still on going.	It will be implemented after the development of curriculum.	It will be implemented after the development of curriculum.	
Output6: The Improvement committees and Monitoring check list for school management at the TSMC are established.					Planning committee is working and developing monitoring sheet is ongoing.
Output7: Annually JCC and quarterly PCC meetings conducted regularly. Project progress report is developed and disseminated to JCC and PCC members for project management.					JCC and PCC are conducted regularly.

## Project Name: Human Resource Development of Co-medicals PDM2 (log frame)

Duration: Sept. 2003 - Sept. 2008

Ver.2

## Project Area: Cambodia

Direct target group: TSMC and 4 RTCs staff (School managers, teaching staffs (internal and external) and administrative staff)

Indirect target group: State Registered Nurse (SRN), Laboratory Technician (LT), Radiological Technologist (RT), Physiotherapist (PT) courses students and clients of health institutions (facilities)

Date: 2007/2/16

Narrative Summary	Objectively Verifiable Indicators	Means of Verification	Important Assumption
<p><b>Overall Goal</b></p> <p>Public and private co-medical schools are able to produce graduates who are capable to perform as qualified co-medicals (SRN, LT, RT, PT) and MoH employment status is improved.</p>	<p>"Public and private co-medical schools follow the regulations which established by output 1.</p> <p>Passing rate of the first trial of graduation examination for public and private co-medical schools are increased.</p> <p>Employment of graduates is increased.</p>	<p>HRD monitoring report</p> <p>HRD examination result reports</p> <p>Personnel Department recruitment report</p>	<p>a) National Health Policy is not changed.</p>
<p><b>Project Purpose</b></p> <p>TSMC and 4 RTCs are able to provide appropriate education of SRN, LT, PT and RT based on the national co-medical education standard.</p>	<p><b>Educations in TSMC and 4 RTCs are implemented according to Educational plan based on Developed or Revised curriculum and syllabi.</b></p>	<p>Weekly report</p>	
<p>Output 1. "School approval criteria" and "Guidelines for accrediting school" for SRN, LT, PT and RT courses are developed and executed.</p>	<p>"School approval criteria" is approved by MoH as Anukret and "Guideline for accrediting school" is approved by MoH as Prakas. (Prakas is smaller than sub decree and can be modified according to situation and MoH needs)</p>	<p>School approval criteria and guideline for accrediting school</p>	<p>f) Dispense of salary, equipments and consumables from UHS and MOH are improved, or at least not worsened. g) Sufficient teaching staff are allocated for Radiology Technician course. h) TSMC does not become a private school. i) Admission of the students is decided by regulated measure and the number of admitted students does not exceed regulated maximum number.</p>
<p>Output 2. Curricula and syllabi for LT, RT and PT are developed/revised or suggested according to the School approval criteria and Guidelines for accrediting school, and approved by MoH as standards for the country.</p>	<p>Curricula and syllabi are developed/revised and approved by MoH as standards for the country.</p>	<p>Curricula and syllabus for each course</p>	
<p>Output 3. Educational materials for LT, RT and PT courses are developed/provided/suggested according to revised/developed curricula and syllabi.</p>	<p>Curriculum guidelines are developed for LT, RT and PT courses.</p>	<p>Curriculum Guidelines</p>	
<p>Output 4. Capacity of SRN, LT, RT and PT teachers are upgraded.</p>	<p>Provided books by the project were fully utilized to making curriculum guidelines .</p>	<p>Reference of Curriculum Guidelines</p>	
<p>Output 5. Delete</p>	<p>Scores of post test are higher than scores of pre-test at each training of trainers.</p> <p>The teachers who attended the training courses become more confident in their teaching activities.</p> <p>Delete</p>	<p>Result of training.</p> <p>Self evaluation test</p> <p>Delete</p>	
<p>Output 6. School management of the TSMC is improved.</p>	<p>The activities of Planning committee are monitored with the check list for school management at the TSMC.</p>	<p>Monitoring report</p>	
<p>Output 7. The project activities ( output 1-6) are monitored and reviewed by JCC, PCC and the project implementers.</p>	<p>Annually JCC and quarterly PCC meetings conducted regularly.</p> <p>Project progress report is developed and disseminated to JCC and PCC members for project management.</p>	<p>JCC and PCC meeting reports</p>	



### Changes in the PDM

PDM version 1	→	PDM version 2
<p><b>Overall Goal:</b></p> <p>Qualified co-medicals (SRN, LT, RT, PT), capable of performing defined tasks, are graduated from public and private schools, and MoH employment status is improved.</p>		<p><b>Overall Goal:</b></p> <p>Public and private co-medical schools are able to produce graduates who are competent to perform as qualified co-medicals (SRN, LT, RT, PT) and MOH employment status is improved.</p>
<p><b>Project Purpose:</b></p> <p>Public co-medical schools are able to appropriately provide basic education of SRN, LT, PT and RT following with the MoH HR policy.</p>		<p><b>Project Purpose:</b></p> <p>TSMC and 4 RTCs are able to provide appropriate education of SRN, LT, PT and RT based on the national co-medical education standard.</p>
<p><b>Output2:</b></p> <p>Curricula and syllabi for SRN, LT, RT and PT are developed/revised or suggested according to the School approval criteria and Guidelines for accrediting school, and approved by MoH as standards for the country.</p>		<p><b>Output2:</b></p> <p>Curricula and syllabi for LT, RT and PT are developed/revised or suggested according to the School approval criteria and Guidelines for accrediting school, and approved by MOH as standards for the country.</p>
<p><b>Output3:</b></p> <p>Educational materials for SRN, LT, RT and PT courses are developed/provided/suggested according to revised/developed curricula and syllabi.</p>		<p><b>Output3:</b></p> <p>Educational materials for LT, RT and PT courses are developed/provided/suggested according to revised/developed curricula and syllabi.</p>
<p><b>Output 5:</b></p> <p>SRN, PT, LT and RT courses with developed, revised or suggested curricula and syllabi are implemented</p>		<p><b>Output 5: Delete ⇒ Indicator of Project Purpose</b></p>
<b>Indicators</b>		
<p><b>Project Purpose:</b></p> <ol style="list-style-type: none"> <li>1. School approval criteria and guideline for accrediting school are established and followed to maintain the quality of education.</li> <li>2. Each course is implemented as planned in accordance with the curricula and the syllabi.</li> <li>3. Existing teachers are equipped with skills and knowledge according to school approval criteria requirements.</li> <li>4. The School Management of TSMC is improved.</li> </ol>		<p><b>Project Purpose:</b></p> <p>Education in TSMC and 4 RTCs is implemented according to Educational plan based on Developed or Revised curriculum and syllabi.</p>

PDM version 1	➔	PDM version 2
<p><b>Output 1:</b> "School approval criteria "and "Guidelines for accrediting school " for SRN, LT, PT and RT courses are developed and executed.</p> <p><b>Indicators:</b></p> <ol style="list-style-type: none"> <li>"School approval criteria" and "Guideline for accrediting school" are approved by MoH as Prakas (Prakas is smaller than sub decree and can be modified according to situation and MoH needs)</li> <li>Monitoring and evaluation checklists related to School Approval Criteria &amp; Guidelines for accrediting school are established for each course.</li> </ol>		<p><b>Output 1:</b> "School approval criteria" and "Guidelines for accrediting school" for LT, PT and RT courses are developed and executed.</p> <p><b>Indicators:</b></p> <ol style="list-style-type: none"> <li>School approval criteria is approved by MOH as Anukret and "Guideline for accrediting school" is approved by MOH as Prakas (Prakas is smaller than sub decree and can be modified according to situation and MOH needs)</li> </ol>
<p><b>Output3:</b> Educational materials for SRN, LT, RT and PT courses are developed/provided/suggested according to revised/developed curricula and syllabi.</p> <p><b>Indicators:</b></p> <ol style="list-style-type: none"> <li>Curricula and syllabi are developed / revised and approved by MoH as standards for the country.</li> <li>Educational materials are developed/provided to support the implementation of SRN, LT, RT and PT courses</li> </ol>		<p><b>Output3:</b> Educational materials for LT, RT and PT courses are developed/provided/suggested according to revised/developed curricula and syllabi.</p> <p><b>Indicators:</b></p> <ol style="list-style-type: none"> <li>Curriculum guidelines are developed for LT, RT and PT courses.</li> <li>Provided books by the project were fully utilized to making curriculum guidelines</li> </ol>
<p><b>Output 4:</b> Capacity of SRN, LT, RT and PT teachers are upgraded</p> <p><b>Indicators:</b></p> <ol style="list-style-type: none"> <li>Capacity of teachers for SRN, LT, RT and PT courses are upgraded</li> </ol>		<p><b>Output 4:</b> Capacity of SRN, LT, RT and PT teachers are upgraded</p> <p><b>Indicators:</b></p> <ol style="list-style-type: none"> <li>Scores of post test are higher than scores of pre-test at each training of trainers.</li> <li>The teachers who attended the training courses become more confident in their teaching activities.</li> </ol>
<p><b>Output 6:</b> School management of the TSMC is improved</p> <p><b>Indicators:</b></p> <p>The Improvement committees and Monitoring check list for school management at the TSMC are established.</p>		<p><b>Output 6:</b> School management of the TSMC is improved</p> <p><b>Indicators:</b></p> <p>The activities of Planning committee are monitored with the check list for school management at the TSMC.</p>

Note:

It is confirmed that "the Guidelines" is used as the same meaning as "the Curriculum Guidelines" and the evaluation mission team concluded "the Curriculum Guidelines", as an educational material in the project. It should be developed based on the developed / revised curriculum. Since nursing curriculum has been developed by a working group at the Human Resource Development Dept. in MOH with HSSP (Health Sector Support Project) financial

41

16

## Evaluation Grid

Evaluation Questions		
Evaluation Criteria	Sub-question	
Relevance	<p>Main Question</p> <p>Does the project match the needs of the co-medical education policy in Cambodia?</p> <p>Does the project match the needs of health facility?</p> <p>Does the project match the demands of graduates from secondary school?</p> <p>Does the project match the needs of the students in RTC and TSMC?</p> <p>Is the project consist with JICA country program?</p>	<p>Is there any policy paper which was written the necessity of the improvement of co-medical education?</p> <p>Does MOH promote improvement of co-medical education except the project?</p> <p>Is demand of co-medicals in health facility high?</p> <p>Do health facilities want to employ the graduates of RTC or TSMC?</p> <p>Do graduates from secondary school want to become a co-medical worker?</p>
	<p>Was the selected target group appropriate to improve co-medical workers skill?</p>	<p>Are RTC and TSMC proper actors to improve co-medical education in Cambodia?</p>
	<p>Is there much advantage to support in the field by Japan?</p>	<p>Is Japanese presence high in the field of improvement of co-medical education?</p> <p>Does Japan have enough skill and experience to support co-medical education in Cambodia?</p>
	<p>Are Indicators of Project purpose attained milestones ?</p>	<p>School approval criteria and guideline for accrediting school are established and followed to maintain the quality of education</p> <p>Each course is implemented as planned in accordance with the curricula and the syllabi.</p> <p>Existing teachers are equipped with skills and knowledge according to school approval criteria requirements.</p> <p>The School Management of TSMC is improved.</p>

## Evaluation Grid

Evaluation Questions	
Evaluation Criteria	Main Question
Effectiveness	<p>Is the indicator of the project purpose describe the attained status of the project purpose properly?</p>
	<p>Do any important assumptions affect the achievement of the project purpose?</p>
	<p>Sub-question</p> <p>What is difference between "School approval criteria and guideline for accrediting school are established and followed to maintain the quality of education" and Indicator of Output1 "School approval criteria" and "Guideline for accrediting school" are approved?</p> <p>What is difference between "Each course is implemented as planned in accordance with the curricula and the syllabi." and Indicator of Output5 "Educational plan is implemented to 80% based on Developed or Revised curriculum and syllabi"?</p> <p>What is difference between "Existing teachers are equipped with skills and knowledge according to school approval criteria requirements." and Indicator of Output4 "Capacity of teachers for SRN, LT, RT and PT courses are upgraded"?</p> <p>What is difference between "The School Management of TSMC is improved." and Output6 "School management of the TSMC is improved"?</p> <p>f) Dispense of salary, equipments and consumables from UHS and MOH are improved, or at least not worsened.</p> <p>g) Sufficient teaching staff are allocated for Radiology Technician course.</p> <p>h) TSMC does not become a private school</p> <p>i) Admission of the students is decided by regulated measure and the number of admitted students does not exceed regulated maximum number.</p> <p>Output1: "School approval criteria" and "Guideline for accrediting school" are approved by MOH as Prakas (Prakas is smaller than sub decree and can be modified according to situation and MOH needs)</p>

## Evaluation Grid

Evaluation Questions	
Evaluation Criteria	Main Question
Efficiency	<p>Sub-question</p> <p>Output2:Curricula and syllabi are developed/ revised and approved by MOH as standards for the country</p> <p>Output3:Educational materials are developed/provided to support the implementation of SRN, LT, RT and PT courses</p> <p>Output4 :Capacity of teachers for SRN, LT, RT and PT courses are upgraded</p> <p>Output5:Educational plan is implemented to 80% based on Developed or Revised curriculum and syllabi</p> <p>Output6:The Improvement committees and Monitoring check list for school management at the TSMC are established.</p> <p>Output7: Annually JCC and quarterly PCC meetings conducted regularly. Project progress report is developed and disseminated to JCC and PCC members for project management</p>
	Is Indicators of each Output attained at prospected level at mid-term evaluation ?
	Are there any Promoting factors or Inhibiting factors for attainment of Outputs
	(Output3) How will quality of " Teaching materials" be confirmed?
	(Output 4 ) How will improvement of teacher's skill be confirmed?
	(Outputs5) How will "Educational plan is implemented to 80% based on Developed or Revised curriculum and syllabi " be confirmed ?
	(Outputs6) How will "School management of the TSMC is improved " be confirmed by "The Improvement committees and Monitoring check list for school management at the TSMC are established. "?
Are activities of working groups sufficient to produce Output 1?	

## Evaluation Grid

Evaluation Questions		
Evaluation Criteria	Sub-question	
Efficiency	Are the activities sufficient to produce Outputs?	Are activities of NHEB sufficient to produce Outputs?
		Are activities of Improvement Committees sufficient to produce Outputs?
		Was each training course effective to acquire the proper skill?
		Is input sufficient to produce Outputs?
		Is there no waste cost?
Impact	Are Inputs sufficient to produce Outputs? (Equipment, Training in Japan, short-term experts, local expenses and other expenses by Cambodia side)	Is timing of Input appropriate?
		Do Inputs contribute to attain the project purpose directly?
		Is quality of Input appropriately?
	Does the project pay attention for efficient project management?	
	Is the project going to stimulate to the educational output with students of each school ?	
Impact	Is the overall goal going to be achieved ?	Are both public and private schools going to follow the regulation of MOH ?
		Is the allocation of co-medicals at MOH going to be improved ?
		b) The regulations are applied for all co-medical schools.
		c) Graduates have sufficient employment opportunities of public and private health facilities.
	Do any important assumptions affect the achievement of the Overall goal?	d) Defined tasks for co-medicals are not changed. e) The level of graduate examination is not changed.

## Evaluation Grid

Evaluation Criteria	Evaluation Questions	
	Main Question	Sub-question
	Were there any positive or negative impacts besides Overall goal? (Social, Cultural, Economical, Technical, Political, Environmental and other aspects)	
	Will developed School Approval Criteria and Guideline for accrediting school be utilized after the completion of the project?	
	Will developed curriculum and Syllabus be utilized after the completion of the project?	
Sustainability	Whether will teachers keep their teaching skill properly and each institute secure enough skilled teachers ?	
	Will TSMC and RTC implement the activities regarding co-medical education properly/continuously ? (Financial, Political, Human resource, Technical and other aspects)	
	Will MOH continue to promote improvement of co-medical education?	

## Mid-Term Evaluation Study Schedule

	Date&Day	Mr.Shuichi Suzuki	Mr.Yojiro Ishi Prof. Kunihiro Mimura Ms.Akiko Endo
1	5/Feb (Mon)	Leave Tokyo 18:45	
2	6/Feb (Tue)	Arrival at PNP 9:05 Internal Meeting with Japanese experts	
3	7/Feb (Wed)	PCC/Collecting information Interview	
4	8/Feb (Thu)	PCC/Collecting information Interview	
5	9/Feb (Fri)	PCC/Collecting information Interview	
6	10/Feb (Sat)	Analyzing collected information	
7	11/Feb (Sun)	Analyzing collected information	
8	12/Feb (Mon)	Visiting Khmer-Soviet Friendship Hospital Visiting Calmette Hospital Analyzing collected information Preparation for briefing and discussion Internal Meeting	Leave Tokyo 10:55 Arrival at PNP 19:30  Internal Meeting
9	13/Feb (Tue)	Internal Meeting among Japanese side Meeting at JICA Cambodian office Meeting with Japanese experts Courtesy call on MoH (Dr. Eng Huot, Ms. Ket Poug ) Visiting University of Health Science Visiting and discussion with GTZ	
10	14/Feb (Wed)	Visiting TSMC Discussion with Project team Drafting M/M· JER	
11	15/Feb (Thu)	Discussion with C/P (Ms. Ket Poug, TSMC Director & other related members ) Drafting M/M· JER	
12	16/Feb (Fri)	Submission of M/M· JER draft Joint Coordination Committee	
13	17/Feb (Sat)	Visiting TSMC Laboratory (Professor Mimura) Meeting with LT dept staff members and Japanese short term expert Revising M/M· JER	
14	18/Feb (Sun)	Study summation Finalizing M/M· JER	
15	19/Feb (Mon)	Submission of final version of M/M· JER Signing of M/M· JER Report to JICA Cambodian office Meeting with other JICA project members and JICA officers Report to Embassy of Japan  Leave PNP 20:40	
16	20/Feb (Tue)	Arrival at Tokyo 7:15	

41

16



## List of Stakeholders Consolidated by the Evaluation Mission

### (1) The Japanese side

- |                        |   |
|------------------------|---|
| 1. Dr. Junko Date      | Chief Advisor                               |
| 2. Mr. Masanori Oikawa | Project Coordinator                         |
| 3. Mr. Yoshizo Sasaki  | Project Short-term Expert (X-ray education) |
| 4. Ms. Shoko Sato      | Project Formulation Adviser (Health Sector) |
- JICA Cambodia Office

### (2) The Cambodian side

#### <Ministry of Health Headquarters>

- |                    |  |
|--------------------|--|
| 1. Prof.Eng Huot   | Secretary of State for Health                |
| 2. Ms. Keat Phuong | Director of Human Resource Development Dept. |

#### <The University of Health Science >

- |                     |             |
|---------------------|-------------|
| 1. Dr. Sophal Oum   | Rector      |
| 2. Dr. Khath Sophal | Vice Rector |

#### < Technical School for Medical Care >

- |                           |                                |
|---------------------------|--------------------------------|
| 1. Dr. Huy Sovath         | Director                       |
| 2. Ms. UK Kalyan          | Chief of Laboratory Section    |
| 3. Mr. Tann Ngy           | Chief of Radiology Section     |
| 4. Mr. Hay Sundy          | Chief of Physiotherapy Section |
| 5. Mr. Khieng Chan Rithea | Chief of Nursing Section       |

#### < Regional Training Center >

- |                       |   |
|-----------------------|---|
| 1. Mr. Chan Kim Heang | Deputy Director, Stung Treng RTC                  |
| 2. Mr. Chan Vann      | Chief of Technical Section, Stung Treng RTC       |
| 3. Mr. Math Bun Thon  | Director, Kampot                                  |
| 4. Ms. Chun Yutheavy  | Chief of Technical Section, Kampot                |
| 5. Ms. San Phallin    | Deputy Director, Battanban RTC                    |
| 6. Mr. Sin Kunthea    | Vice Chief of Technical Section, Battanban RTC    |
| 7. Mr. Kim Born An    | Director, Kampong Cham RTC                        |
| 8. Mr. Khun Kokma     | Vice Chief of Technical Section, Kampong Cham RTC |

#### <Khmer Soviet Friendship Hospital>

- |                     |          |
|---------------------|----------|
| 1. Dr. Y Tuoh Seang | Director |
|---------------------|----------|

#### <Calmmete Hospital>

- |                   |                           |
|-------------------|---------------------------|
| 1. Dr. Chheang RA | Deputy Director           |
| 2. Dr. Or Wanda   | Chief of Radiology        |
| 3. Mr. Phok kin   | Radiological Technologist |

#### < GTZ >

- |                      |                     |
|----------------------|---------------------|
| 1. Ms. Ann Erpelding | Program Coordinator |
|----------------------|---------------------|

4/1