3. 討議議事録 (R/D)、協議議事録 (M/M) (プロジェクト・ドキュメント (英文>含む)

RECORD OF DISCUSSIONS BETWEEN THE JAPAN INTERNATIONAL COOPERATION AGENCY AND AUTHORITIES CONCERNED OF THE GOVERNMENT OF THE LAO PEOPLE'S DEMOCRATIC REPUBLIC ON JAPANESE TECHNICAL COOPERATION FOR THE PROJECT FOR MEDICAL EDUCATION AND RESEARCH FOR THE SETTHATHIRATH HOSPITAL

The Japan International Cooperation Agency (hereinafter referred to as "JICA") exchanged views and had a series of discussions with the Lao authorities concerned with respect to desirable measures to be taken by JICA and the Government of the Lao People's Democratic Republic (hereinafter referred to as "Lao P.D.R.") 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 Lao P.D.R., signed in Tokyo on December 12, 2003 (hereinafter referred to as "the Agreement"), JICA and Lao authorities concerned agreed on the matters referred to in the document attached hereto.

Vientiane City, October 8, 2007

Mr. Hiroaki Takashima

Resident Representative

Laos Office

Japan International Cooperation Agency

Mrs. Chanthanom MANODHAM

Director of Cabinet

Ministry of Health

Lao People's Democratic Republic

Assoc Prof. De Som Ock Kingsada

Setthathirath Hospital

Ministry of Health

Lao People's Democratic Republic

THE ATTACHED DOCUMENT

I. COOPERATION BETWEEN JICA AND THE GOVERNMENT OF THE LAO P.D.R.

- 1. The Government of the Lao P.D.R. will implement the Project for Medical Education and Research for the Setthathirath Hospital (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 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.

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.

3. TRAINING OF THE LAO PERSONNEL IN JAPAN

JICA will receive the Lao personnel connected with the Project for technical training in Japan.

III. MEASURES TO BE TAKEN BY THE GOVERNMENT OF THE LAO P.D.R.

1. The Government of the Lao P.D.R. 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.

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- 2. The Government of the Lao P.D.R. will ensure that the technologies and knowledge acquired by the Lao nationals as a result of the Japanese technical cooperation will contribute to the economic and social development of the Lao P.D.R.
- 3. In accordance with the provisions of Article V of the Agreement, the Government of the Lao P.D.R. will grant in the Lao P.D.R. 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 Lao P.D.R. 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. The Government of the Lao P.D.R. will take necessary measures to ensure that the knowledge and experience acquired by the Lao personnel from technical training in Japan will be utilized effectively in the implementation of the Project.
- In accordance with the provision of Article V of the Agreement, the Government of the Lao P.D.R. will provide the services of Lao counterpart personnel and administrative personnel as listed in Annex IV.
- 7. In accordance with the provision of Article V of the Agreement, the Government of the Lao P.D.R. will provide the buildings and facilities as listed in Annex V.
- 8. In accordance with the laws and regulations in force in the Lao P.D.R., the Government of the Lao P.D.R. 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.
- In accordance with the laws and regulations in force in the Lao P.D.R., the Government of
 the Lao P.D.R. will take necessary measures to meet the running expenses necessary for the
 implementation of the Project.

IV. ADMINISTRATION OF THE PROJECT

1. Dean of the University of Health Sciences, as the Project Director, will bear overall responsibility for the administration and implementation of the Project.

- 2. Director of the Setthathirath Hospital, as the Deputy Project Director, will assist the Project Director for the administration and implementation of the Project.
- 3. Deputy Director of the Setthathirath Hospital (in charge of medical education), as the Project Manager, will be responsible for the managerial and technical matters of the Project.
- 4. The Japanese Chief Advisor will provide necessary recommendations and advice to the Project Director and the Project Manager on any matters pertaining to the implementation of the Project.
- 5. The Japanese experts will give necessary technical guidance and advice to Lao counterpart personnel on technical matters pertaining to the implementation of the Project.
- 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 Lao 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 Lao P.D.R. 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 Lao P.D.R. 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 the Government of the Lao P.D.R. on any major issues arising from, or in connection with this Attached Document.

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

For the purpose of promoting support for the Project among the people of the Lao P.D.R., the Government of the Lao P.D.R. will take appropriate measures to make the Project widely known to the people of the Lao P.D.R..

IX. TERM OF COOPERATION

The duration of the technical cooperation for the Project under this Attached Document will be three years from the date of the first dispatch of the Japanese expert(s). The date of the first dispatch of the Japanese expert(s) is expected to be December 1, 2007, but it will be informed later on.

ANNEX I MASTER PLAN

ANNEX II LIST OF JAPANESE EXPERTS

ANNEX III LIST OF MACHINERY AND EQUIPMENT

ANNEX IV LIST OF LAO COUNTERPART AND ADMINISTRATIVE PERSONNEL

ANNEX V LIST OF BUILDINGS AND FACILITIES

ANNEX VI JOINT COORDINATING COMMITTEE

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ANNEX I MASTER PLAN

1. Super Goal

Skills, knowledge, and attitudes of medical doctors in the whole country are improved.

2. Overall Goal

Quality of clinical training for medical doctors in the Lao P.D.R. is improved.

3. Project Purpose

Quality of undergraduate clinical training and early postgraduate clinical training for those who graduated from the Department of Medicine, the University of Health Sciences within two years at the Setthathirath Hospital is improved.

3. Outputs

- (1) Knowledge and know-how on clinical training of the Setthathirath Hospital as a teaching hospital is expanded.
- (2) The training management system is improved at the Setthathirath Hospital.
- (3) Capacities of trainers of clinical training for medical students/doctors are strengthened.

4. Activities

- (1-1) Conduct baseline survey on clinical training for medical students/doctors.
- (1-2) Conduct training for evidence-based medicine in the fields of clinical pathology, pathognomy, symptomatology, etc. for trainers of clinical training in consideration of systematic clinical case presentations.
- (1-3) Improve medical records from a viewpoint of follow-up/compiling of clinical cases.
- (1-4) Compile clinical cases systematically for evidence-based medicine.
- (1-5) Implement case conferences of clinical cases for trainees.
- (1-6) Prepare learning materials for case presentations/references for trainees.
- (2-1) Develop concepts/philosophy of clinical training from a viewpoint of medical education at the Setthathirath Hospital.
- (2-2) Establish a new committee in charge of clinical training.
- (2-3) Hold monthly meetings for clinical training.
- (2-4) Document process, experiences, outcomes, and lessons learned of the clinical training for medical doctors at the Setthathirath Hospital.
- (2-5) Hold seminars of clinical training in collaboration with four teaching hospitals, the Ministry of Health and the University of Health Sciences.
- (2-6) Arrange external audit.

- (3-1) Draw up the programs and curriculums of training of trainers (TOT).
- (3-2) Prepare teaching materials for TOT.
- (3-3) Conduct TOT for medical doctors working for four (4) teaching hospitals and provincial hospitals in the areas of pedagogy, problem-based learning clinical training, clinical presentations, training management by team approach and teaching system, self-learning, etc.
- (3-4) Set up the monitoring criteria for trainers of clinical training.
- (3-5) Monitor and evaluate trainers of clinical training.

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ANNEX II LIST OF JAPANESE EXPERTS

- 1. Experts in charge of the following field;
- (1) Chief Advisor
- (2) Medical Education
- (3) Pedagogy
- (4) Evidence Based Medicine
- (5) Epidemiology
- (6) Internal Medicine
- (7) Emergency
- (8) Medical Record Management
- (9) Clinical Pathology
- (10) Clinical Laboratory
- (11) Training Management and Evaluation

Note: The number of experts will be smaller than the number of above-mentioned fields, because some experts will be in charge of several fields. At the moment, such envisaged examples are as follows;

- Chief Advisor/Evidence Based Medicine/Epidemiology
- Medical Education/Pedagogy
- 2. Other experts in the fields mutually agreed upon

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ANNEX III LIST OF MACHINERY AND EQUIPMENT

- 1. Equipment for Medical Education
- 2. Equipment for Clinical Medicine for Educational Purposes

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ANNEX IV LIST OF LAO COUNTERPART AND ADMINISTRATIVE PERSONNEL

- 1. Project Director: Dean of the University of Health Sciences
- 2. Deputy Project Director: Director of the Setthathirath Hospital
- 3. Project Manager: Deputy Director of the Setthathirath Hospital (in charge of medical education)
- 4. Counterpart Personnel other than the above:
 - Departments of Medical Affairs, Internal Medicine, Surgery, Obstetrics and Gynecology, Pediatrics, Laboratory, Statistics, Gastro, etc. at the Setthathirath Hospital
 - Department of Medicine, the University of Health Sciences
- 5. Administrative personnel: Department of General Affairs at the Setthathirath Hospital

Note: The Ministry of Health, the University of Health Science, the National Institute of Public Health, Mahosot Hospital, Mittaphab Hospital, Mother and Child Hospital will work as collaborating organizations connected with the Project.

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ANNEX V LIST OF BUILDINGS AND FACILITIES

- 1. Sufficient space for the implementation of the Project
- 2. Offices and other necessary facilities for the Japanese experts
- 3. Utilities such as electricity, gas, and water, sewage systems, telephones and furniture necessary for the activities of the Project
- 4. Other facilities mutually agreed upon as needed

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ANNEX VI JOINT COORDINATING COMMITTEE

1. Functions

The Joint Coordinating Committee will meet at least once a year and whenever necessity arises, in order to fulfill the following functions.

- 1) To formulate annual work plan of the Project.
- 2) To review the overall progress of the Project and achievement of the technical cooperation.
- 3) To exchange views on major issues arising from or in connection with the implementation of the Project.

2. Composition

1) Chairperson:

Dean of the University of Health Sciences

2) Lao Member:

- Ministry of Health: Cabinet, Department of Curative, Department of Organization and Personnel, Department of Planning and Budgeting,
- University of Health Science
- Setthathirath Hospital: Director, Deputy Directors, Chief of General Affairs, Medical Affairs, Internal Medicine, Surgery, Obstetrics and Gynecology, Pediatrics, Laboratory, Statistics, Gastro, etc.
- National Institute of Public Health
- Mahosot Hospital, Mittaphab Hospital, Mother and Child Hospital

3) Japanese Member:

Japanese Experts assigned to the Project Resident Representative of JICA

4) Observer:

Representative of the Embassy of Japan Other personnel invited by the Chairperson

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MINUTES OF MEETING BETWEEN THE JAPAN INTERNATIONAL COOPERATION AGENCY AND AUTHORITIES CONCERNED OF THE GOVERNMENT OF THE LAO PEOPLE'S DEMOCRATIC REPUBLIC ON JAPANESE TECHNICAL COOPERATION PROJECT FOR MEDICAL EDUCATION AND RESEARCH FOR THE SETTHATHIRATH HOSPITAL

The Japan International Cooperation Agency had a series of discussions with the Lao authorities concerned for the purpose of working out the details of the technical cooperation Project for Medical Education and Research for the Setthathirath Hospital (hereinafter referred to as "the Project").

As a result of discussions, both sides reached common understandings concerning the details of the Project as written in the document attached hereto. This document is related to the Record of Discussions for the Project.

Mr. Hiroaki Takashima

Resident Representative

Laos Office

Japan International Cooperation Agency

Japan

Vientiane City, October 8, 2007

Mrs. Chanthanom MANODHAM

Director of Cabinet

Ministry of Health

Lao People's Democratic Republic

Assoc. Prof. Di Som Ock Kingsada

Director

Setthathirath Hospital

Ministry of Health

Lao People's Democratic Republic

THE ATTACHED DOCUMENT

1. PROJECT DESIGN MATRIX

The Project Design Matrix (hereinafter referred to as "PDM") was elaborated through discussion by the JICA and the Lao authorities concerned. Both sides agreed to recognize PDM as the implementation 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 is shown in Annex I.

The PDM will be subject to change within the framework of the Record of Discussions when necessity arises in the course of implementation of the Project by mutual consent.

2. PLAN OF OPERATIONS

The Plan of Operations (hereinafter referred to as "PO") was formulated according to the Record of Discussions. The PO includes a timetable and responsible persons. The schedule is subject to change within the scope of the Record of Discussions when necessity arises in the course of implementation of the Project. The PO is shown in Annex II.

3. PROJECT DOCUMENT

The Project Document was elaborated through discussions by JICA and the Lao side, which described the detail design of the Project as attached in Annex III. Both sides agreed the contents of the Project Document.

4. IMPORTANT ISSUES DISCUSSED

- (1) Validity and feasibility of the request of the Lao side to construct some facility with rooms for lectures, conferences, clinical practices and self-learning for clinical training will be examined during the baseline survey in the earlier stage of the Project. It will be decided after the baseline survey whether or not some facility will be constructed.
- (2) In implementing the Project, close collaboration among the Ministry of Health, the University of Health Sciences, National Institute of Public Health, Mahosoth Hospital, Mittaphab Hospital, Mother and Child Hospital and the Setthathirath Hospital is essential to spread the effect of the Project to the whole medical education system. Institutionalization and further effective undergraduate and postgraduate medical training system are also important for upgrading the medical

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service of Lao People's Democratic Republic.

- (3) Allocation of medical staff to rural areas is a great concern, and it is desirable for the Government of the Lao People's Democratic Republic to take necessary measures to address this issue to maximize the expected impact of the Project.
- (4) The target clinical training in this Project is undergraduate clinical training and early postgraduate clinical training for those who graduated from the Department of Medicine, the University of Health Sciences within two years. Clinical training of resident courses for medical specialists is out of the scope of the Project.

Annex I. PDM

Annex II. PO

Annex III. PROJECT DOCUMENT

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Annex I: PDM₀

Target Group: Trainers of clinical training for medical students/doctors Date: October 8, 2007 Project Period: 2007 - 2010 (3 years) Project Name: Project for Medical Education and Research of the Setthathirath Hospital in the Lao P.D.R. Target Area: Setthathirath Hospital

Version · No ()	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	Important Assumptions	Medical doctors are	annronriately denloyed at	district hospitals and health	centers in line with the policy	or the MOFI.	Overseas study programs	Long-term training	programs) for obtaining a	master or doctorial degree are	carried out.		The MOH improves clinical	training hand on the	cuttomos of this moses	outcomes of this project.					The MOH continues to secure	41. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	the budget for the clinical	training at the educational	hospitals.
Date: October 8, 2007 Vers	fion	MANUEL OF TELLIFICATION	. Annual Report from Ministry of	Health	2. Annual Report from Ministry of	Health		l. Academic report of completion by	the University of Health Science					I. Traince Assessment by Department	of Personnel and Doctors'	Committee of the Sathathimth	Hosnital	2 External andit from other teaching		MOH	***	1-1. Medical Records in Medical Affairs	1.2 Madian Daganda in Madian 4 ff.	1-2. Incurcal Accords in Medical Aliairs	1-5. Medical Records in Medical Affairs	1-4. Medical Records in Medical Affairs
	\mid	-					-	ine 1	*****					ical 1							-					
Project Period: 2007 - 2010 (3 years)	Objectively Verifiable Indicators	The state of the s	1. The utilization rate of district hospitals increases.		2. The number of medical doctors at district hospitals	increases.		- i	opecialist riograms increases.				-	1. Satisfaction rate of trainees who completed clinical	training at the Setthathirath Hospital increases.	•		2. Evaluation (Reputation) of clinical training at the	Setthathirath Hospital from the professional	organization is enhanced.		1-1. The number of doctors who receive training for			1-2. The number of paniological diagnosis increases.	1-3. The number of transferred patients from other hospitals
Target Area: Setthathirath Hospital	Narrative Summary	Super Goal	udes of medical doctors in the	whole country are improved.			Overall Goal	Quality of clinical training for medical doctors in the Lao					reoject Furpose	Quality of undergraduate clinical training and early	postgraduate clinical training for those who graduated from	the Department of Medicine, the University of Health	Sciences within two years at the Setthathirath Hospital is	improved.			Outputs	Knowledge and know-how on clinical training of	Wetthathirath Hospital as a teaching hospital is			P

al al		
the budget for the clinical training at the educational hospitals.		
1-2. Medical Records in Medical Affairs 1-3. Medical Records in Medical Affairs 1-4. Medical Records in Medical Affairs	2-1. Project Report 2-2. Project Report	3-1. Observation/Assessment by Doctors' Committee in charge, i.e. DTC (Drug Treatment Committee)3-2. Project Report / Training Report
evidence-based medicine increases. 1-2. Medical Records in Medical Affairs 1-2. The number of pathological diagnosis increases. 1-3. Medical Records in Medical Affairs 1-4. Medical Records in Medical Affairs 1-4. The number of compiled clinical cases increases.	The training management system is improved at the Setthathirath Hospital. Setthathirath Hospital. 2-1. The number of monthly meetings for clinical training is 2-1. Project Report 2-2. Project Report 2-2. The number of seminars/meetings held among relevant organizations is increased.	Students/doctors are strengthened. Students/doctors who receive TOT at the Setthathirath Hospital mereases.
Setthathirath Hospital as a teaching hospital is expanded.	The training management system is improved at the Setthathirath Hospital.	Capacities of trainers of clinical training for medical students/doctors are strengthened.

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Activities 1-1 Conduct baseline survey on clinical training for medical students/doctors.	Induits	: ,	
1-1 Conduct baseline survey on clinical training for medical students/doctors.	emder	Lao side	
students/doctors.	Japanese side	1. Personnel	1. Trainers of clinical
	(tentative)	Project Director	
1-2 Conduct training for evidence-based medicine in the	1. Experts	Denuty Project Director	working as teaching
fields of clinical pathology, pathognomy,	Chief Advisor, Medical Education, Pedagoey, Evidence	Project Manager	doctore
y, etc. for trainers of clinic	Based Medicine, Epidemiology, Internal Medicine, Medical	Counternart nersonnel	TOOLOGY STATE
consideration of systematic clinical case presentations.	Record Management, Emergency Medicine, Clinical		2 The number of natients
1-3 Improve medical records from a viewpoint of	Laboratory, Clinical Pathology, Training Management and	2. Provision of the project office and	
•	Evaluation	facilities necessary for the	at the Setthathirath
1-4 Compile clinical cases systematically for evidence-based	(Note: The number of experts will be smaller than the	implementation of the project	Hospital.
medicine.	number of above-mentioned fields, because some experts will	•	4
1-5 Implement case conferences of clinical cases for	be in charge of several fields. At the moment, such envisaged		
trainees.	examples are as follows;	5. Officers	
1-6 Prepare learning materials for case	- Chief Advisor/Evidence Based Medicine/Epidemiology	Administrative and operational costs	
presentations/references for trainees.	- Medical Education/Pedagogy)	costs for electricity, water, etc.	
2-1 Nevelon concents/ahiloscaphy of clinical training from a	7 Training of counternart nerconnel in Isnan		
viewpoint of medical education at the Setthathirath	Medical Education		
Hospital.			Due con detions
2-2 Establish a new committee in charge of clinical training.	3. Equipment/materials		rie-conditions
2-3 Hold monthly meetings for clinical training.	Equipment for Medical Education, Equipment for Clinical		Coneration and auteenent
2-4 Document process, experiences, outcomes, and lessons	Medicine for Educational Purposes		on the project implementation
learned of the clinical training for medical			are obtained from the MOH
students/doctors at the Setthathirath Hospital.			THORE OF HIGH PARTIES OF
2-5 Hold seminars of clinical training in collaboration with			
four teaching hospitals, the Ministry of Health and the			
University of Health Science.			
2-6 Arrange external audit.			
3.4 Draw up the programs and curriculums of training of			
krainers (TOT).			
3-2 Prepare teaching materials for TOT.			
3-3 Conduct TOT for medical doctors working for four (4)			
teaching hospitals and provincial hospitals in the areas of			
pedagogy, problem-based learning clinical training,			
clinical presentations, training management by team			
approach and teaching system, self-learning, etc.			
3-4 Set up the monitoring criteria for trainers of clinical			
training.			No.
3-5 Monitor and evaluate trainers of clinical training.			

	Yearl 07 Month 12 Month 12 Month 12	09 10 10 10 10 10 10 10 10 10 10 10 10 10	Responsible Persons
	၂လ	as a teaching hospital is expanded.	
	1 - I Conduct baseline survey on clinical training for medical students/doctors.		Doctors' committee (Dr. Qu Keo, Head of Doctors' Committee / Chief of Out Patient Department and Gastroenterology)
	1–2. Conduct training for evidence-based medicine in the fields of clinica pathology, pathognomy, symptomatology, etc. for trainers of clinical Idealining in consideration of systematic clinical case presentations.		Dr. Vientzanstv (Daputy Chief of Laboratory, Dr. Phetsamon (Chief of Pathology), Dr. Nilanh (Daputy Director of Medical School)
	1-3 Improve medical records from a viewpoint of follow-up/compiling of clinical cases.		Dr. Vang Yeu(Deouty Director). Dr. Khamsavanh (Deputy Chief of Medical Affairs). Ms. Manolome (Denuty Chief of Svarietics)
	1-4 Compile clinical cases systematically for evidence-based medicine.		Dr. Phay (Chief of General Affairs) Dr. Kham La (Chief of Internal Medicine). Dr. Kham i nin (Danity, Chief of Internal Madicina)
- 1/	1-5 Implement case conferences of clinical cases for trainces.		Do Plans County September 2 ones of internal medicine) Or Kham I on (Danner Hills) Dr. Kham La (Chief of Internal Medicine). Or Kham I on (Danner Chief of Internal Medicine).
	1-6 Prepare learning materials for case presentations/references for trainess.		Or. Character (Sept.) One of alreana interiors (Chief of Internal Medicine). Dr. Kham Lour (Beauty Chief of Internal Medicine). Chief of Internal Medicine).
			Journal of the state of the sta
	OUTPUT 2. The training management system is improved at the Setthathirath Hospital	ath Hospital.	
	2-1 Develop concepts/philosophy of clinical training from a viewpoint of medical education at the Setthathirath Hospital.		Dr. Kampe (Deputy Director), Dr. Bounthieng (Chief of OB/GY), Dr. Somehanh (Chief of Internal Medicina) Dr. Carlin, (Online of Statement Internal Medicina)
	2-2 Establish a new committee in charge of clinical training.		Doctors' committee (Dr. Qu Keo)
	2-3 Hold monthly meetings for alinical training.		Dr. Kohngsinh (Deputy Chief of Pediattics) Dr. Boummy (Deputy Chief of Internal Mod.) Dr. Kochodester (Chief of Chief of
	2-4 Document process, experiences, outcomes, and lessons learned of the clinical training for medical doctors at the Setthathirath Hosnital		Dr. Vanzver Deputy Chieford, Dr. Soulideth (Deputy Chief of Pediatrics), Dr. Chief of Pediatrics), Dr. Chief of Pediatrics, Dr. Chief of Pediatrics, Dr. Chief of Pediatrics, Dr. Chief of Chief of Pediatrics, Dr. Chiefor
	2–5 Hold seminars of clinical training in collaboration with four teaching hospitals, the Ministry of Health, and the University of Health Sciences.		Dr. Som Ok (Director). Dr. Kananilatutti Dr. Som Ok (Director). Dr. Kananilatutti Thomas Chief & Academia Affair). Dr. The Co.
1,	2-6 Arrange external audit.		Verpory Once or Accounted Arian 3, 44, Harvine Leptur Office Or Surgery Director Committee of Setthathirath Hospital (Director and two Deputy Directors: Dr. Konne)
V			CHITISSITES A A GARAGE
	OUTPUTS: Capacities of trainers of clinical training for medical students/doctors	octors are strengthened.	AMERICAN AND AND AND AND AND AND AND AND AND A
	-1 Draw up the programs of training of trainers (TOT).		
	3-2 Prepare teaching materials for TOT.		
	3-3 Condket TOT for medical doctors working for four (4) teaching hospitals and provincial hospitals in the areas of pedagogy, problem-based learning clinical training, clinical presentations, training, training and presentations, training, secondary and teaching system, self-learning, etc.		Dr. Manivath, Southbarthong (Director of Medical School), Dr. Ou Keo (Chief Gasto), Dr. Bouathep (Chief of rehabilitation), Chief of four Departments (Internal, Surgery, OB/GY, Pediatrios)
	3-4 Set up the monitoring criteria for trainers of clinical training.		
	3-5 Monitor and evaluate trainers of clinical training.		
		◆♦C/P training	underline: key person

* The start of the Project, schedules described in this chart and so on are subject to modifications through further examination and discussions.

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Technical Cooperation Project for Medical Education and Research for the Setthathirath Hospital

Project Document

September 2007

Technical Cooperation

Between

The Government of the Lao People's Democratic Republic

And

Japan International Cooperation Agency (JICA)

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Abbreviations

ASEAN: Association of South East Asian Nations

BTC: Belgian Technical Cooperation

CIDA: Canadian International Development Agency

DOM: Department of Medicine GDP: Gross Domestic Product FMS: Faculty of Medical Sciences

FMSP: Family Medicine Specialist Program

INFT: Institute de la Francophonie pour la Medicine Tropicale

JCC: Joint Coordinating Committee

LLDC: Least among Less-Developed Countries

MHW: Medical Health Worker
MCH: Mother and Child Health
MOE: Ministry of Education
MOH: Ministry of Health

MTU: Medical Teaching Unit

NGPES: National Growth and Poverty Eradication Strategy

NIOPH: National Institute of Public Health

NUOL: National University of Laos

TOT: Training of Trainers

UHS: University of Health Science WHO: World Health Organization

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Ex-ante Evaluation Summary (Technical Cooperation Project)

In charge of: Health Personnel Development Team, Group IV, Human Development Department

1. Project Title: Project for Medical Education and Research of the Setthathirath Hospital in the Lao People's Democratic Republic (Lao P.D.R.)

2. Outline of the Cooperation

(1) Outline of the project objective and outputs:

This Project aims at improving the quality of undergraduate clinical training and early postgraduate clinical training for those who graduated from the Department of Medicine, the University of Health Sciences within two years conducted at the Setthathirath Hospital through expansion of knowledge and know-how on clinical training as a teaching hospital, improvement of training management system, and capacity development for trainers of clinical training.

- (2) Cooperation period: From December 2007 to November 2010 (Tentative schedule)
- (3) Total amount of cooperation (Japan): Around 340 million yen
- (4) Implementing agency: Setthathirath Hospital
- (5) Beneficiaries:
 - 1) Direct Beneficiaries:
 - Trainers of undergraduate clinical training and early postgraduate clinical training for those
 who have graduated from the Department of Medicine, the University of Health Sciences
 within two years at the Setthathirath Hospital (about 80, target group)
 - Medical students who receive clinical training at the Setthathirath Hospital (about 300 every year), medical doctors under early postgraduate clinical training for those who have graduated from the Department of Medicine, the University of Health Sciences within two years (about 30 every year)
 - 2) Indirect Beneficiaries: Doctors in other hospitals in Lao P.D.R. (about 1500)
- 3. Project Necessity and Positioning of the Cooperation
 - (1) Current situation and problems

The government of the Lao P.D.R. stated in the "Health Strategy 2020" to ensure that all Lao people has access to healthcare services, and one of the important principles to achieve this goal is to improve the capacity of health staff at each level in order to ensure high quality services.

The Setthathirath Hospital is a general hospital with 175 inpatient beds and is a central hospital which provides tertiary curative care in the country. At the same time, the Hospital plays a role of a teaching hospital providing clinical training and education for both undergraduate medical students and post-graduate medical doctors. Japan provided grant-aid to the Project for Construction of New Setthathirath Hospital from 1998 to 2000 and the new hospital was constructed in November 2000. In addition, JICA conducted technical cooperation for the Project for Improvement of Setthathirath Hospital for five years from October 1999 and supported improvement of medical service and training activities of the Hospital. In September 2004, the Setthatirath Hospital was ranked up from a Vientiane City Hospital to

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a university hospital of the Faculty of Medical Sciences (FMS) of the National University of Laos (NUOL), the Ministry of Education (MOE). In May 2007, Jurisdiction over the FMS of the NUOL was handed over from the MOE to the Ministry of Health (MOH) and turned to be the University of Health Sciences (UHS).

On the other hand, there exists a problem of scarcity in number as well as insufficient technical skills of medical doctors in the country, especially in the rural areas. There is a strong demand to educate qualified medical doctors with ability to respond to the local needs and health issues. The FMS of the NUOL started a two-year post-graduate program, namely Family Medicine Specialist Program to respond to such demand. Setthathirath Hospital receives these doctor trainees as one of the teaching hospitals as well as medical students of the FMS. However, preceptors, trainers of clinical training cannot provide enough teaching to these trainees.

(2) Positioning within the national policies of the government of the Lao PDR

The "Health Strategy up to the Year 2020" has emphasized the development of health care by presenting six key principles. Among those principles, "strengthening the capacity of health staff in terms of attitudes, ethics, and technical skills" is listed in order to ensure high quality services. Also, the National Growth and Poverty Eradication Strategy (NGPES) places considerable emphasis on the development of the health sector.

(3) Positioning within the Japanese foreign aid policy and JICA's plan for county-specific program implementation

Japan's Country Assistance Program for Lao P.D.R. (September, 2006)" by the Ministry of Foreign Affairs of Japan places "improving healthcare services" as one of six priority areas, and human resources development related to the health and medical field (capacity development for healthcare workers) is described in the assistance policy of the priority areas. Also, there are three healthcare-related programs in the JICA's country implementation plan of the Lao P.D.R. (JFY 2006), and this Project is positioned within the Program on Capacity Development for Human Resources in the Health Sector.

4. Framework of the Cooperation

[Main items]

- (1) Objectives of the cooperation (Outcomes)
 - ① Objective to be achieved by the end of the cooperation (Project Purpose)
 - "Quality of undergraduate clinical training and early postgraduate clinical training for those who graduated from the Department of Medicine, the University of Health Sciences within two years at the Setthathirath Hospital is improved."
 - <Indicators/targets> satisfaction rate of trainees who completed clinical training at the Setthathirath
 Hospital, evaluation (Reputation) of clinical training at the Setthathirath Hospital from the professional organizations
 - ② Objective expected to be achieved after the end of the cooperation (Overall Goal)
 - "Quality of clinical training for medical doctors in the Lao P.D.R. is improved."
 - <Indicators/targets> achievement of undergraduates and medical doctors in the FMSP
 - 3 Objective expected to be achieved after the end of the cooperation (Super Goal)

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- "Skills, knowledge, and attitudes of medical doctors in the whole country are improved."
- <Indicators/targets> utilization rate of district hospitals, the number of medical doctors at district hospitals
- (2) Outputs and activities
 - ① Output 1: Knowledge and know-how on clinical training of Setthathirath Hospital as a teaching hospital is expanded.
 - <Indicators/targets>the number of doctors who receive training for evidence-based medicine, the number of pathological diagnosis, the number of transferred patients from other hospitals, the number of compiled clinical cases

Activities:

Conduct baseline survey on clinical training for medical students/doctors; Conduct training for evidence-based medicine for trainers of clinical training in consideration of systematic clinical case presentations; Improve medical records from a viewpoint of follow-up/compiling of clinical cases; Compile clinical cases systematically for evidence-based medicine; Implement case conferences of clinical cases for trainees; Prepare learning materials for case presentations/references for trainees.

② Output 2: The training management system is improved at the Setthathirath Hospital.

<Indicators/targets> the number of monthly meetings for clinical training, the number of seminars/meetings held among relevant organizations

Activities:

Establish a new committee in charge of clinical training; Hold monthly meetings for clinical training; Document process, lessons learned, etc. of the clinical training at the Setthathirath Hospital; Hold seminars of clinical training in collaboration with other relevant agencies and organizations; Arrange external audits.

③ Output 3: Capacities of trainers of clinical training for medical students/doctors are strengthened.
<Indicators/targets> Levels of skills, knowledge, and attitude of trainers of clinical training at the Setthathirath Hospital, Number of trainers of clinical training who receive TOT at the Setthathirath Hospital

Activities:

Draw up the programs and curriculums of training of trainers (TOT); Prepare teaching materials for TOT; Conduct TOT for medical doctors working for four (4) teaching hospitals and provincial hospitals; Set up the monitoring criteria for trainers of clinical training; Monitor trainers of clinical training along with the above criteria.

- (3) Planned Inputs
 - ① Japanese side (Approximate amount: 340 million yen)
 - Experts: (Fields) Chief Advisor, Medical Education, Pedagogy, EBM, Epidemiology, Internal Medicine, Medical Record Management, Emergency Medicine, Clinical Laboratory, Clinical Pathology, Training Management and Evaluation
 - 2) Training of counterpart personnel in Japan: Medical Education

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3) Equipment/materials: Equipment for Medical Education, Equipment for Clinical Medicine for Educational Purposes

② Lao side

1) Personnel

Project Director

Deputy Project Director

Project Manager

Counterpart personnel

- 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.

- (4) External factors (Important Assumptions that should be met)
 - 1) Pre-condition
 - Cooperation and agreement on the project implementation are obtained from the MOH.
 - 2) Important Assumptions necessary for achieving the Outputs
 - Trainers of clinical training continue working as teaching doctors.
 - The number of patients is not reduced drastically at the Setthathirath Hospital.
 - 3) Important Assumption necessary for achieving the Project Purpose
 - The MOH continues to secure the budget for the clinical training at the educational hospitals.
 - 4) Important Assumption necessary for achieving the Overall Goal
 - The MOH improves clinical training based on the outcomes of this project.
 - 5) Important Assumption necessary for achieving the Super Goal
 - Overseas study programs (Long-term training programs) for obtaining a master or doctorial degree are carried out.
 - 6) Important Assumption necessary for maintaining the Super Goal
 - Medical doctors are appropriately deployed at district hospitals and health centers in line with the policy of the MOH.

5. Ex-ante Evaluation Results

As a result of an evaluation from the viewpoints below, it is judged that the implementation of the Project is appropriate.

(1) Relevance

For the following reasons, the Project is judged to be of high relevance:

• The "Health Strategy up to the Year 2020" has emphasized the development of health care by presenting six key principles. Among these principles, "strengthening the capacity of health staff, in terms of attitudes, ethics, and technical skills" is listed in order to ensure high quality services. Also, the National Growth and Poverty Eradication Strategy (NGPES) places considerable emphasis on the development of the health sector. Among health professions, medical doctors play a key role, and this project aims at

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improvement of clinical training of medical doctors at the Setthathirath Hospital for nurturing basic competency as medical doctors. Activities of this project will be expected to contribute to improvement of quality of medical doctors in the long run, so the direction of the project corresponds to the Strategy and Plan and the needs of Lao P.D.R.

• As explained in "3-(3) Positioning within the Japanese foreign aid policy and JICA's plan for county-specific program implementation" earlier, the long-term objective of this Project is in line with the contents of Japan's Country Assistance Program for the Lao P.D.R. by the Ministry of Foreign Affairs and the JICA's Country Implementation Plan of the Lao PDR.

(2) Effectiveness

For the following reasons, it is expected that this Project will be effective:

• The Project Purpose is to be achieved by the synergy effects of multiple Outputs. In order to accomplish the Project Purpose, the following Outputs are established: (a) Expansion of knowledge and know-how on clinical training as a teaching hospital; (b) Improvement of the training management system; and (c) Capacity development for trainers of clinical training. As mentioned in 5.1 "Project Purpose" of the Chapter 5, in terms of (a), in order to expand the basis of knowledge and know-how to conduct clinical training for medical students and doctors as a teaching hospital, such activities are conducted as training for EBM, compiling clinical cases, case conferences of clinical cases for trainees, etc. Regarding (b), the training management system is to be improved at the Setthathirath Hospital whereas the Project adjusts the system for promoting the clinical training efficiently in collaboration with related agencies and organizations at the same time. Also, with reference to (c), TOT is conducted for the trainers of clinical training working for the Setthathirath Hospital. Thus, the Project is designed so as to achieve the Project Purpose, improvement of quality of clinical training for medical doctors, as the synergy effects of each Output. Therefore, it is highly expected that the Project Purpose is achieved at the end of the cooperation period in combination with the Output 1 to 3 in an effective manner.

(3) Efficiency

There are prospects that the Project is efficiently implemented for the following reasons:

- Since the technical basis on medical services had been established in the technical cooperation project
 "The Project for the Improvement of the Setthathirath Hospital in the Lao PDR (1999-2004)"
 implemented in the past, it is expected that the project activities are efficiently conducted through the
 effective utilization of various experiences and lessons learned as well as human resources nurtured in the
 former Project.
- From the perspective of the project efficiency, it is crucial to communicate and coordinate appropriately with other donors, such as the ADB, WHO, University of Calgary, etc., in order to avoid duplication of similar activities among these donors. Thus, it is necessary to establish the environment to collaborate and communicate adequately with other donors right after the commencement of the Project.

(4) Impact

The Impact of this Project is expected to be as follows:

• It is necessary to involve other three teaching hospitals in Vientiane City in order to accomplish

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improvement of quality of clinical training (Overall Goal) and capacity development for medical doctors (Super Goal) from the perspective of spread of effect to the whole country. Thus, the Setthathirath Hospital shares skills and knowledge obtained by the Project with other three teaching hospitals through documentation of the experiences and lessons learned of clinical training at the Setthathirath Hospital as well as holding seminars of clinical training together with related agencies and organizations. That is, the Setthathirath Hospital aims at improving the quality of clinical training so as to be a reference of other teaching hospitals. Also, external audits are supposed to be conducted in the Activity 2-6. This activity is for enhancing the function of clinical training by feeding constructive recommendations from other teaching hospitals and the Department of Curative Medicine in the MOH back to the Setthathirath Hospital. In this way, there is a prospect that the Overall Goal will be achieved in several years after the termination of the Project if the structure for clinical training in the Lao P.D.R. is consolidated for upgrading the quality of clinical training through collaborating with other three teaching hospitals and sharing the common recognition with related agencies and organizations.

• In terms of the capacity development for trainers of clinical training in the Output 3, TOT is conducted for trainers of clinical training who work at the Setthathirath Hospital. Additionally, it is necessary to actively support the capacity development for trainers of clinical training at other three teaching hospitals and regional/provincial hospitals in order to promote the preparation for the achievements of the Overall Goal and the Super Goal during the cooperation period. Therefore, the Project prepares for the spread of effect of the project activities to the whole country through TOT for medical doctors working at other three teaching hospitals and regional/provincial hospitals (Activity 3-3) in the latter half of the Project while monitoring the progress of the Project. In this way, it is significant to establish the mechanism for spread of effect produced at the Setthathirath Hospital to the whole country through considering measures and procedures for achieving the Overall Goal and Super Goal during the cooperation period.

(5) Sustainability

The sustainability of this Project will be expected as follows:

- As mentioned in the Relevance, the "Health Strategy up to the Year 2020" has emphasized "strengthening the capacity of health staff." Therefore, there is a prospect that the policy support will be continued from the Lao side during the cooperation period and even after the termination of the Project.
- Activities promoting the ownership and the project continuity are incorporated in this Project. The capacity of trainers of clinical training is enhanced by TOT through activities under Output 3. These trainers are able to teach other medical doctors and medical students on their own initiative, so that it is expected that the ownership and the continuity of the Project are enhanced. With reference to the activity of developing concepts/philosophy of clinical training, furthermore, because the concepts and philosophy of clinical training will be established in participation of medical staff at the Hospital with some counterparts who take part in the training course in Japan and watch good practices in Japan, the ownership of the counterparts towards the Project will be cultivated by promoting the project activities along with these concepts/philosophy.

6. Consideration for Poverty, Gender, and Environmental Issues

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From the long-term perspective, this Project aims at improving capacity of medical doctors deployed at district hospitals and health centers in the whole country (Super Goal) through the quality improvement of clinical training at four teaching hospitals (Overall Goal). Thus, this Project is also designed in consideration of the poor living in the rural areas to be able to obtain the project benefits.

7. Lessons Learned from the Past Experience

Prior to this Project, the Project for the Improvement of the Setthathirath Hospital in the Lao PDR had been implemented for five years (1999-2004). In the former Project (1999-2004), although the counterparts acquired necessary skills and knowledge and the medical services and training function at the Hospital were improved, post-graduate training were not conducted systematically. As the prerequisite of a teaching hospital which conducts post-graduate training, the terminal evaluation study team of the former Project pointed out that the hospital should record the data on patients and promote data management for utilizing the data more easily. This Project aims at implementing clinical training systematically through improvement of medical records and accumulation of clinical cases as activities from the perspective of improvement of function as a teaching hospital.

8. Future Evaluation Plan

Around April in 2009 Dispatch of Mid-term Evaluation Study Team

Around April in 2010 Dispatch of Terminal Evaluation Study Team

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