

添付資料

1. ミニッツ
2. 協議記録

1. ミニッツ

MINUTES OF DISCUSSIONS
PRELIMINARY STUDY ON THE PROJECT FOR THE REHABILITATION
OF THE UNIVERSITY TEACHING HOSPITAL INFRASTRUCTURE AND
REPLACEMENT OF OBSOLETE EQUIPMENT
IN THE DEPARTMENTS OF OBSTETRICS AND GYNECOLOGY AND PEDIATRICS
IN THE REPUBLIC OF ZAMBIA

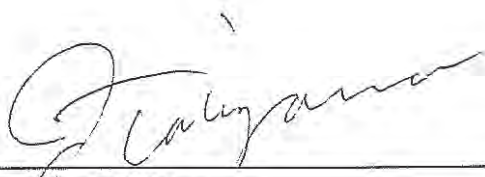
In response to a request from the Government of the Republic of Zambia (hereinafter referred to as "Zambia"), the Government of Japan decided to conduct a Preliminary Study on the Project for the Rehabilitation of the University Teaching Hospital(UTH) Infrastructure and Replacement of obsolete Equipment in the Departments of Obstetrics and Gynecology and Pediatrics (hereinafter referred to as "the Project") and entrusted the study to the Japan International Cooperation Agency (hereinafter referred to as "JICA").

JICA sent to Zambia the Preliminary Study Team (hereinafter referred to as "the Team"), which is headed by Mr. Ikuo Takizawa, Advisor, Human Development Department, JICA from October 13 to November 4, 2008.

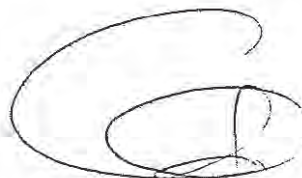
The Team held discussions with the officials concerned of the Government of Zambia and conducted a field survey at the study area.

In the course of discussions and field survey, both parties confirmed the items described in the ATTACHMENT. Subject to the decision by the Government of Japan, JICA will conduct a Basic Design Study on the Project.

Lusaka, November 3, 2008



Mr. Ikuo Takizawa
Leader
Preliminary Study Team
Advisor
Human Development Department,
Japan International Cooperation Agency
Japan



Dr. Simon K. Miti
Permanent Secretary
Ministry of Health
The Republic of Zambia

ATTACHMENT

1. Objective of the Project

The objective of the Project is to improve the quality of health services delivered by the University Teaching Hospital(UTH) through replacing obsolete equipment.

2. Project Sites

The Project Site , which is shown in Annex-1, is in Lusaka, Zambia.

3. Responsible and Implementing Agency

3-1. The Responsible Agency is the Directorate of Policy and Planning, the Ministry of Health, the Government of Zambia. Its organization chart is shown in Annex-2(A).

3-2. The Implementing Agency is the University Teaching Hospital(UTH). Its organization chart is shown in Annex-2(B).

4. Items Requested by the Government of Zambia

After discussions with the Team, procurement of the equipment, listed in Annex-3 , was finally requested by the Zambian side. JICA will assess the appropriateness of the request and will recommend the findings to the Government of Japan.

5. Japan's Grant Aid Scheme

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

5-2. Both sides will take the necessary measures described in Annex-6, for smooth implementation of the Project, as a condition for the Japanese Grant Aid to be implemented.

6. Schedule of the Study

If the Project is found feasible as a result of the Preliminary Study, JICA will send the Basic Design Study Team around March, 2009.

7. Other Relevant Issues

7-1. Rehabilitation of the Facilities

Both sides confirmed that the rehabilitation of the facilities would be undertaken by the Zambian side. The details of the rehabilitation which deem necessary are described in Annex-4.

7-2. Selection of the Targeted Equipment

The equipment included in the original application is described in Annex-3-1. Through the on-site survey and in-depth consultation with the clinical heads of departments of UTH, the equipment essential for each department was additionally requested from the Zambian side as described in Annex-3-2.

Both sides mutually agreed to select the targeted equipment with the criteria described in Annex-3 through the further studies, if the Project is found feasible as a result of the Preliminary Study.

And also, it was mutually confirmed that the equipment for the facilities which would be rehabilitated by the Zambian side by the time of installation should be prioritized. The Zambian side agreed to submit the rehabilitation plan of the facilities to the Japanese side by the end of January, 2009.

7-3. Proper Operation and Maintenance of the Procured Equipment

The Zambian side agreed to secure and allocate enough budget to operate and maintain the procured equipment by the Project. The Zambian side also agreed to promote the effective and appropriate use and maintenance of the procured equipment focusing on planned preventive maintenance. This aspect is important since the UTH is expected to be a technical resource for the Health Capital Investment Support Project, which is a technical cooperation between MOH and JICA.

The Japanese side confirmed that the initial training on the proper operation and daily maintenance of the equipment should be provided by the suppliers.

7-4. Enhancement of the Training Capacity

Both sides confirmed that the procurement of the equipment should contribute to the enhancement of the capacity of UTH in providing pre-service and in-service training of the health care professionals .

Annex-1: Site Map

Annex-2: Organization Chart(A)(B)

Annex-3: Requested Equipment and Adequacy

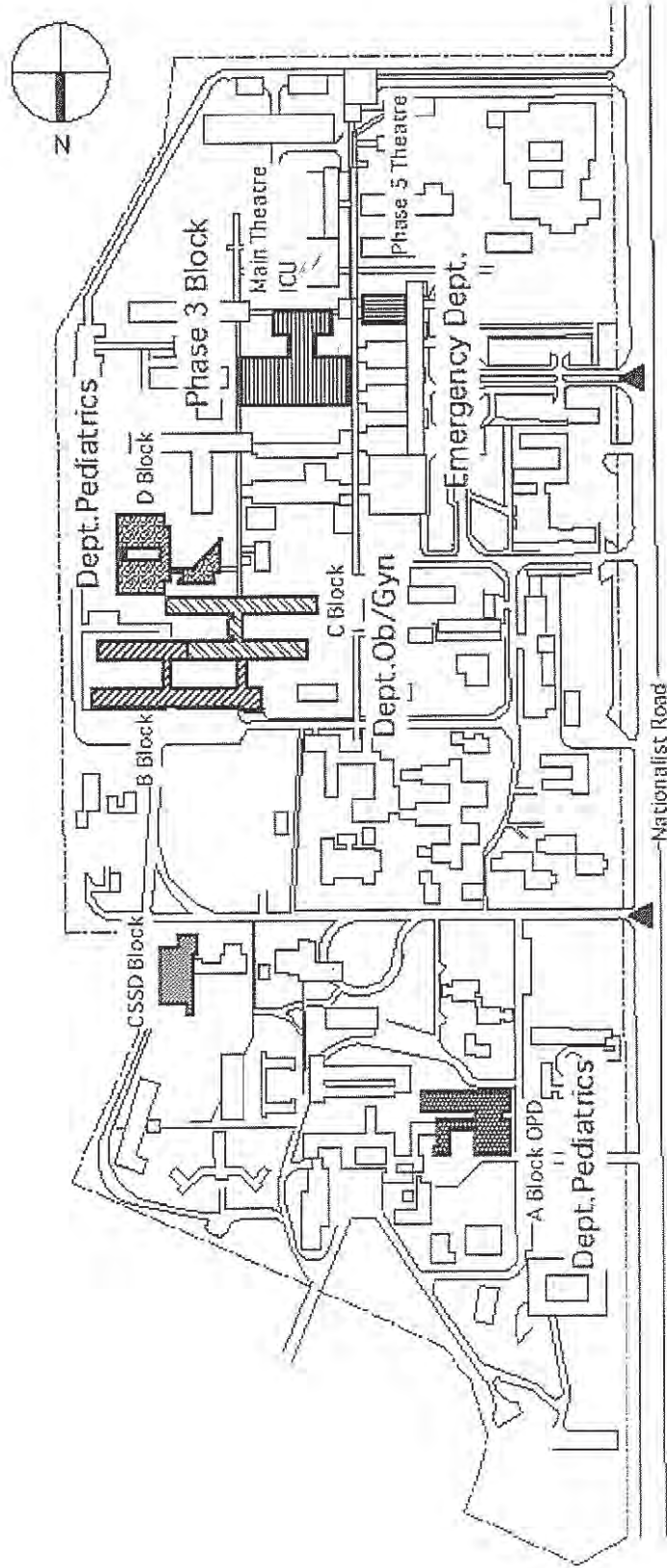
Annex-4: Facilities to be rehabilitated by the Zambian side

Annex-5: Japan's Grant Aid Scheme

Annex-6: Major Undertakings to be taken by Each Government

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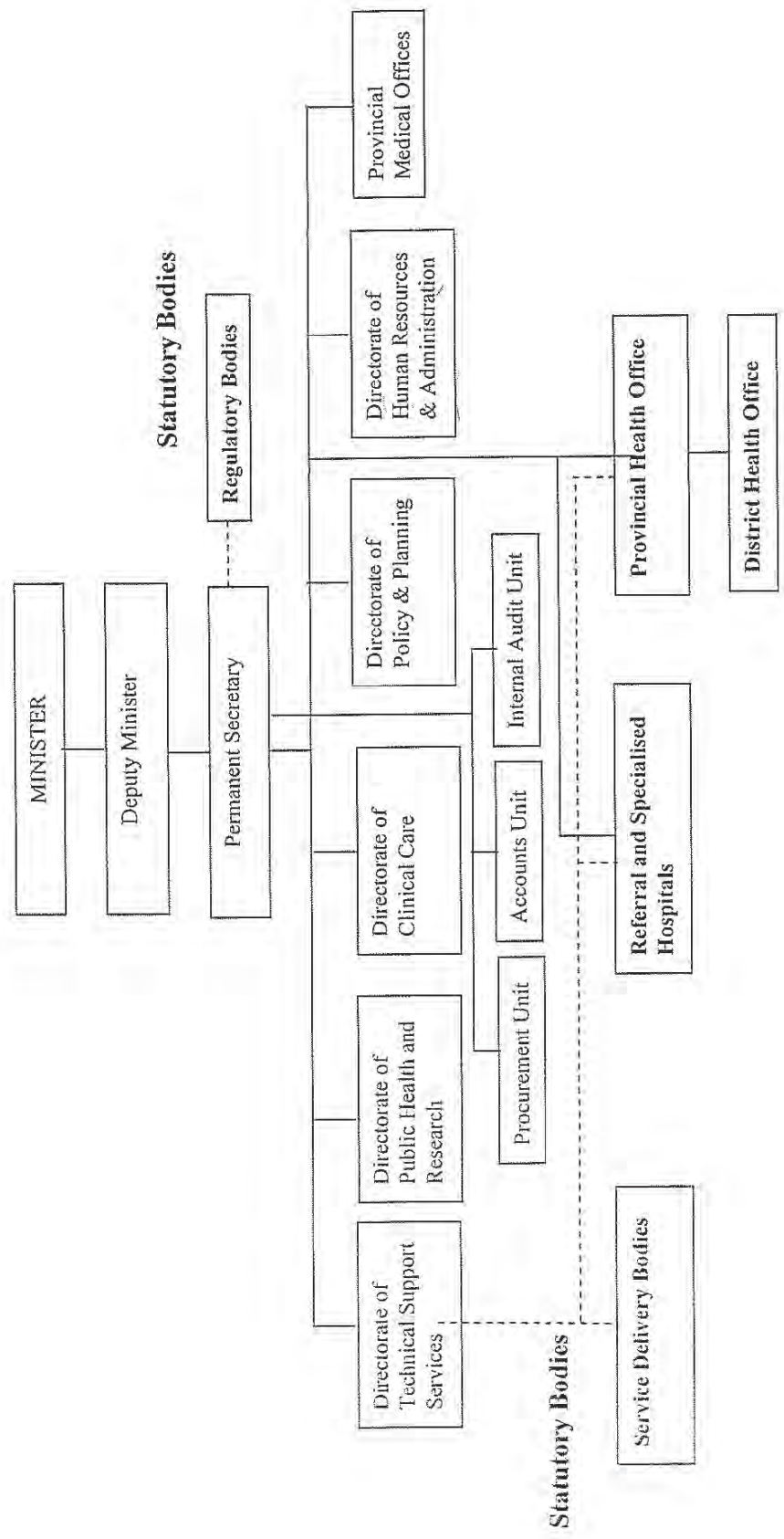
SITE MAP

UNIVERSITY TEACHING HOSPITAL

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MINISTRY OF HEALTH: FUNCTIONAL ORGANISATION STRUCTURE

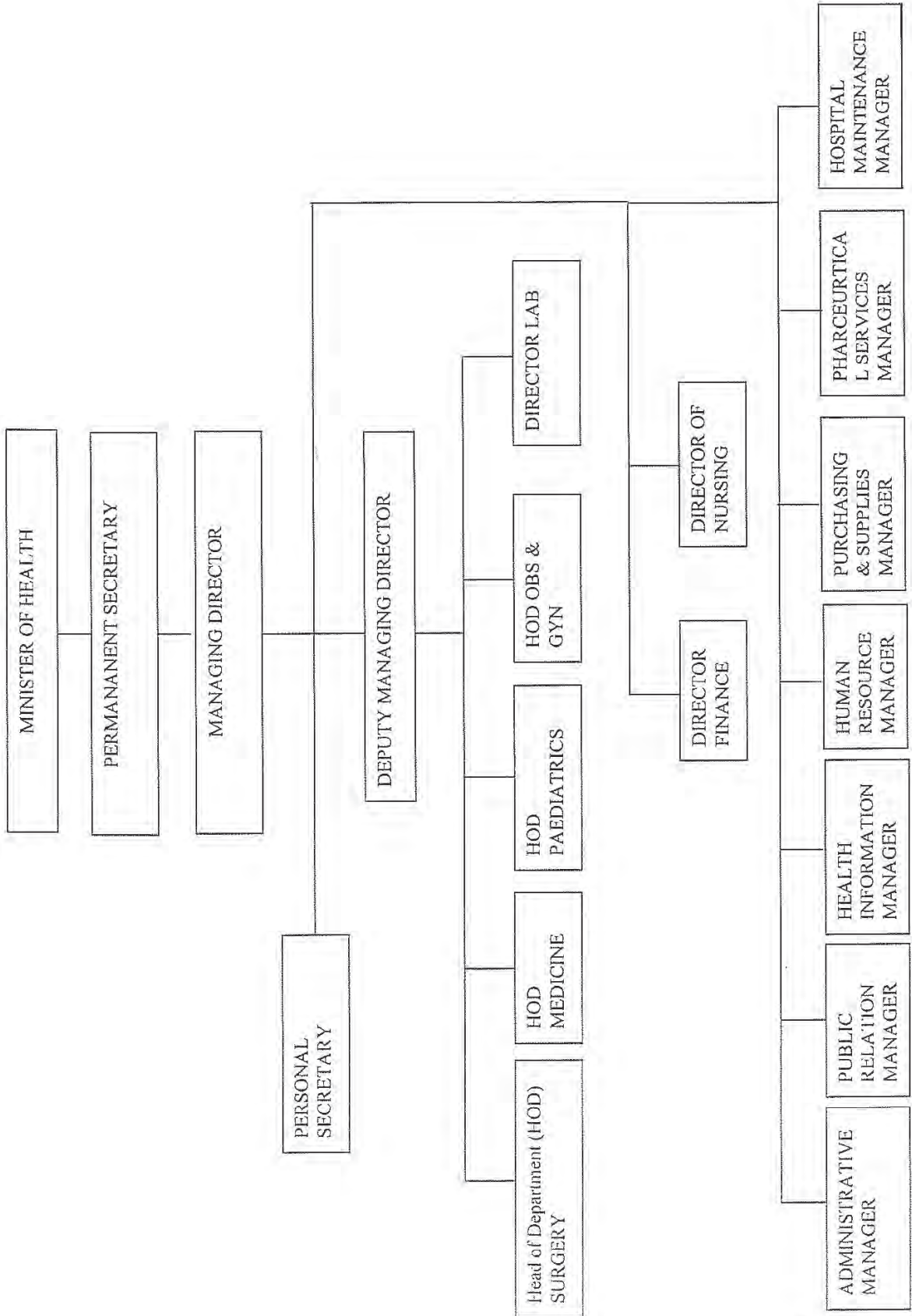


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MINISTRY OF HEALTH

UNIVERSITY TEACHING HOSPITAL ORGANISATION STRUCTURE



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Requested Equipment and Adequacy

Annex-3

Descriptions			Adequacy		
No.	Name of Equipment	Q'ty	A	B	C

3-1. Equipment included in the original application

OPERATING THEATRES

A-1 & 2	Anesthetic Machine w/vaporizer & mechanical ventilator (key switch-able with manual bag)	12	5	4	3
A-3	Suction Machine, two bottles model for operation room	34	18	8	8
A-4	Universal Operation Table, oil-hydraulic	12	7	4	1
A-5	Bi & Mono-polar Surgical Machine	12	7	4	1
A-6	Autoclave	4	4	0	0
A-7	Operating Lamp (ceiling-mount)	12	9	3	0

MICU & PICU

B-1 (1-1)	Mechanical Ventilator (compressor built-in) for Pediatric & Adult	12	9	1	0
B-1 (1-2)	Mechanical Ventilator (compressor built-in) for Infant		1	1	0
B-1 (2&3)	Patient Monitor w/SpO2, IBP, NIBP, HR, ECG monitoring and others	12	12	0	0
B-1 (4)	Volumetric Infusion Pump	12	12	0	0
B-1 (5-1)	Defibrillator (w/electrodes for adults)	3	2	0	0
B-1 (5-2)	Defibrillator (w/electrodes for pediatric & adults)		1	0	0
B-1 (6)	Portable Suction Unit, one bottle model	12	12	0	0
B-2	Blood Gas Analyzer	1	1	0	0

OBSTETRICS AND GYNECOLOGY

C-1	Ultrasound Machine	2	0	1	1
C-2	Vacuum Extractor	5	3	1	1
C-3	Infant Resuscitation Machine w/Oxygen flow meter, SpO2 monitor, Jackson-Rees circuit	5	3	1	1
C-4	Infant Incubator	7	2	1	4
C-5	Delivery Bed	10	10	0	0
C-6	Cardiotocograph (CTG) Machine for Maternal-Fetal simultaneous monitoring	4	3	0	1

NICU & Pediatrics (D block)

D-1	Mechanical Ventilator (compressor built-in) for Neonates w/stand	5	5	0	0
D-4	Patient Monitor w/SpO2, IBP, NIBP, HR, ECG monitoring and others	5	5	0	0
D-5	Blood Gas Analyzer	1	0	1	0

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Requested Equipment and Adequacy

Annex-3

Descriptions			Adequacy		
No.	Name of Equipment	Q'ty	A	B	C
D-6	Volumetric infusion pump	5	5	0	0
D-7	Ultrasound Machine	1	0	0	1
D-8	X-Ray Film Marker	1	0	1	0
D-9	Electrolyte Analyzer	1	1	0	0
D-10	Transportable Infant Incubator	2	0	1	1

BOILER PLANT

E-1	2000kw Electrode Boiler for utilizing the existing Ironer	1	0	0	1
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LAUNDRY HOUSE

F-1 (1)	Washer Extractor	1	0	0	1
F-1 (2)	Tumble Dryer	1	0	0	1
F-1 (3)	Laundry Press	1	1	0	0
F-1 (4)	Roll Ironer	1	1	0	0

3-2. Equipment additionally requested

OPERATING THEATRES

A-1 & 2 (Add)	Anesthetic Machine w/vaporizer & mechanical ventilator (key switch-able with manual bag)	1	0	0	1
A-4 (Add)	Universal Operation Table, oil-hydraulic	3	0	0	3
A-5 (Add)	Bi & Mono-polar Surgical Machine	5	0	0	5
A-7 (Add)	Operating Lamp (ceiling-mount)	5	0	1	4
A-8	Patient Monitor w/SpO2, IBP, NIBP, HR, ECG monitoring and others	15	7	4	4

MICU & PICU

B-1 (1-1, Add)	Mechanical Ventilator (compressor built-in) for Pediatric & Adult	6	0	3	3
B-1 (1-2, Add)	Mechanical Ventilator (compressor built-in) for Infant		0	0	0
B-1 (2&3, Add)	Patient Monitor w/SpO2, IBP, NIBP, HR, ECG monitoring and others	3	3	0	0
B-1 (4, Add)	Volumetric Infusion Pump	8	8	0	0
B-1 (6, Add)	Portable Suction Unit, one bottle model	4	4	0	0
B-2 (Add)	Blood Gas Analyzer	1	1	0	0
B-3	Syringe Infusion Pump	10	3	1	6

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Requested Equipment and Adequacy

Annex-3

Descriptions			Adequacy		
No.	Name of Equipment	Q'ty	A	B	C
B-4	Phototherapy Machine	4	1	1	2
B-5	Bilirubinometer	2	1	0	1
B-6	Haematocrit Centrifuge	2	1	0	1
B-7	Steam Tent	2	1	0	1
B-8	Mobile X-Ray	1	1	0	0
B-9	Infant Incubator	5	1	0	4
B-10	Transportable Infant Incubator	2	1	0	1
B-11	Autoclave table-top	1	1	0	0
B-12	Autoclave floor-mount	1	1	0	0

OBSTETRICS AND GYNECOLOGY

C-7	Laparoscope	1	0	1	0
C-8	Hysteroscope	1	0	1	0

NICU & Pediatrics (D Block)

D-1(Add)	Mechanical Ventilator (compressor built-in) for Neonates w/stand	1	0	0	1
D-6 (Add)	Volumetric infusion pump	15	15	0	0
D-11	Infant Incubator	18	8	2	8
D-12	Mobile X-Ray	1	0	0	1
D-13	Bilirubinometre	1	1	0	0
D-14	Haematocrit Centrifuge	1	1	0	0
D-15	Phototherapy Machine	4	0	0	4
D-16	Syringe Infusion Pump	20	0	2	18
D-17	Autoclave table-top	1	1	0	0
D-18	Neonatal Laryngoscope (flat blade)	10	10	0	0

LAUNDRY HOUSE

F-1 (4, Add)	Laundry Press	1	1	0	0
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Categorization of Adequacy

A : Considered high. Further study for assurance will be made at Basic Design.

B : Considered not high. Detailed investigation and assessment should be made at Basic Design.

C : Considered very low. Further investigation at Basic Design is possible upon request with the detailed clinical statistical data, facts and others evidencing the indispensability of the equipment under this category.

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Facilities to be rehabilitated by the Zambian side

Securing good workplace environment is one of prerequisites to operate the medical equipment safely and effectively. Such conditions can be realized through rehabilitating current dilapidated facilities and it should cover damaged roof, interior, plumbing, electric supply, faulty air conditioning and medical gas outlets. Listed below are buildings in which rehabilitation works should be completed before setting new equipment in place.

Department	Building/Block
Obstetrics & Gynecology	B- block :Delivery Ward C- block Theatre
Pediatrics	A- block :PICU D- block :NICU
Pediatric Surgery	D- block :Theatre
Main Theatre	Main Theatre ICU
Accidents & Emergency.	Phase 5 Theatre

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JAPAN'S GRANT AID SCHEME

The Grant Aid Program provides a recipient country with non-reimbursable funds to procure the facilities, equipment and services (engineering services and transportation of the products, etc.) for economic and social development of the country under principles in accordance with the relevant laws and regulations of Japan. Grant Aid is not supplied through the donation of materials as such.

1. Grant Aid Procedure

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

Application (Request made by a recipient country)

Study (Basic Design Study conducted by JICA)

Appraisal & Approval (Appraisal by the Government of Japan and Approval by Cabinet)

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

2) Firstly, the application or request for a Grant Aid project submitted by a recipient country is examined by the Government of Japan (the Ministry of Foreign Affairs) to determine whether or not it is eligible for Grant Aid. If the request is deemed appropriate, the Government of Japan assigns JICA to conduct a study on the request. If necessary, JICA send a Preliminary Study Team to the recipient country to confirm the contents of the request.

Secondly, JICA conducts the study (Basic Design Study), using Japanese consulting firms.

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

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

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

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2. Basic Design Study

1) Contents of the Study

The aim of the Basic Design Study (hereinafter referred to as "the Study"), conducted by JICA on a requested project (hereinafter referred to as "the Project"), is to provide a basic document necessary for the appraisal of the Project by the Government of Japan. The contents of the Study are as follows:

- a) confirmation of the background, objectives and benefits of the Project and also institutional capacity of agencies concerned of the recipient country necessary for the Project's implementation;
- b) evaluation of the appropriateness of the Project to be implemented under the Grant Aid Scheme from the technical, social and economic points of view;
- c) confirmation of items agreed on by both parties concerning the basic concept of the Project;
- d) preparation of a basic design of the Project; and
- e) estimation of costs of the Project.

The contents of the original request are not necessarily approved in their initial form as the contents of the Grant Aid project. The Basic Design of the Project is confirmed considering the guidelines of Japan's Grant Aid Scheme.

The Government of Japan requests the Government of the recipient country to take whatever measures are necessary to ensure its self-reliance in the implementation of the Project. Such measures must be guaranteed even though they may fall outside of the jurisdiction of the organization in the recipient country actually implementing the Project. Therefore, the implementation of the Project is confirmed by all relevant organizations of the recipient country through the Minutes of Discussions.

2) Selection of Consultants

For the smooth implementation of the Study, JICA uses a consulting firm selected through its own procedure (competitive proposal). The selected firm participates the Study and prepares a report based upon the terms of reference set by JICA.

At the beginning of implementation after the Exchange of Notes, for the services of the Detailed Design and Construction Supervision of the Project, JICA recommends the same consulting firm which participated in the Study to the recipient country, in order to

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maintain the technical consistency between the Basic Design and Detailed Design as well as to avoid any undue delay caused by the selection of a new consulting firm.

3. Japan's Grant Aid Scheme

1) Exchange of Notes (E/N)

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

2) "The period of the Grant" means the one fiscal year which the Cabinet approves the project for. Within the fiscal year, all procedure such as exchanging of the Notes, concluding contracts with consulting firms and contractors and final payment to them must be completed.

However, in case of delays in delivery, installation or construction due to unforeseen factors such as weather, the period of the Grant Aid can be further extended for a maximum of one fiscal year at most by mutual agreement between the two Governments.

3) Under the Grant, in principle, Japanese products and services including transport or those of the recipient country are to be purchased.

When the two Governments deem it necessary, the Grant Aid may be used for the purchase of the products or services of a third country.

However, the prime contractors, namely consulting, contracting and procurement firms, are limited to "Japanese nationals". (The term "Japanese nationals" means persons of Japanese nationality or Japanese corporations controlled by persons of Japanese nationality.)

4) Necessity of "Verification"

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

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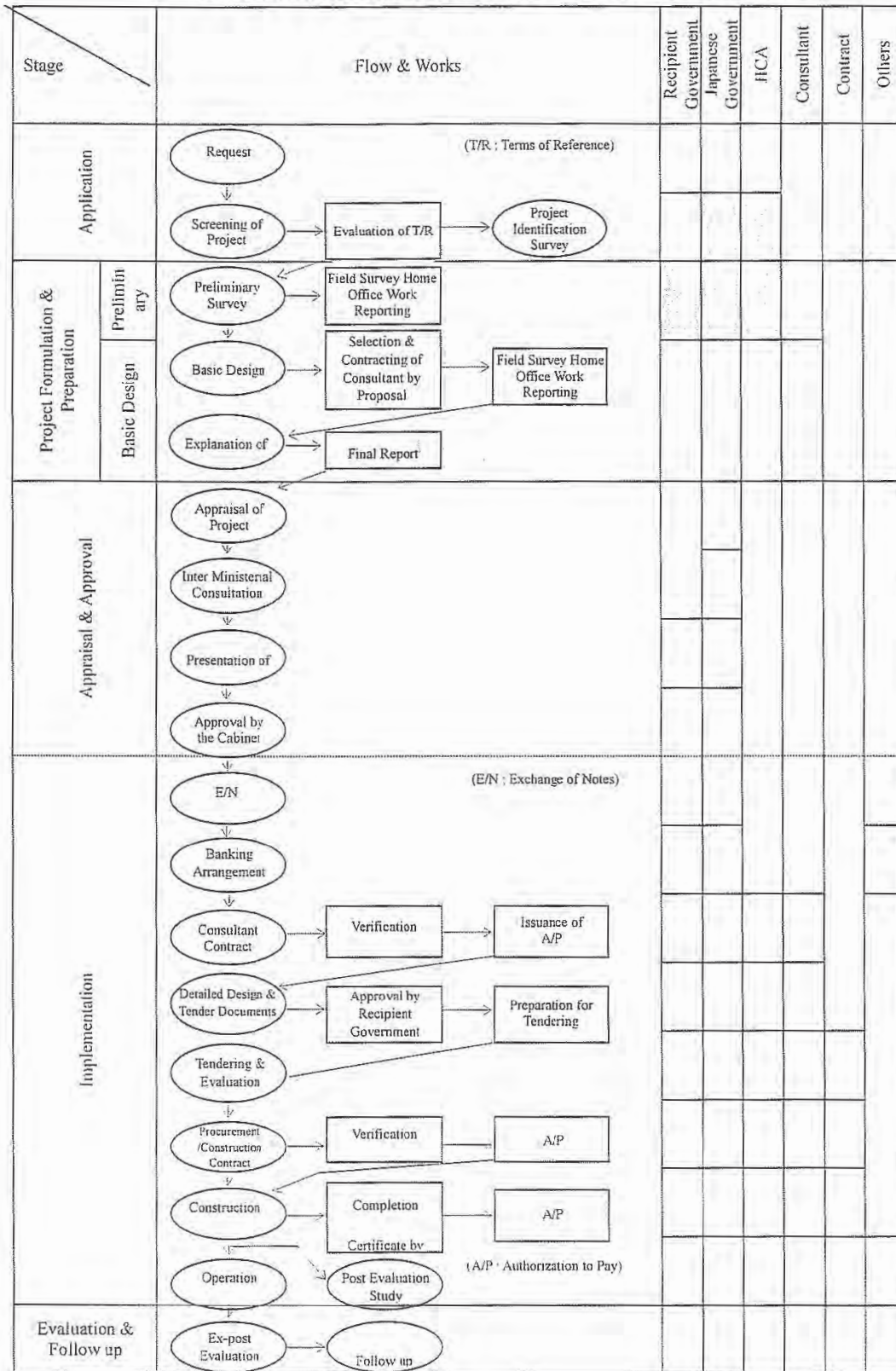
Annex-5

- 5) Undertakings required to the Government of the recipient country
Refer to Annex-6.
- 6) "Proper Use"
The recipient country is required to maintain and use the facilities constructed and equipment purchased under the Grant Aid properly and effectively and to assign the necessary staff for operation and maintenance of them as well as to bear all the expenses other than those covered by the Grant Aid.
- 7) "Re-export"
The products purchased under the Grant Aid shall not be re-exported from the recipient country.
- 8) Banking Arrangement (B/A)
 - a) The Government of the recipient country or its designated authority should open an account in the name of the Government of the recipient country in an authorized foreign exchange bank in Japan (hereinafter referred to as "the Bank"). The Government of Japan will execute the Grant Aid by making payments in Japanese yen to cover the obligations incurred by the Government of the recipient country or its designated authority under the verified contracts.
 - b) The payments will be made when payment requests are presented by the Bank to the Government of Japan under an Authorization to Pay (A/P) issued by the Government of recipient country or its designated authority.
- 9) Authorization to Pay (A/P)
The Government of the recipient country should bear an advising commission of an Authorization to Pay and payment commission to the Bank.

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FLOW CHART OF JAPAN'S GRANT AID PROCEDURES



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Major Undertakings to be taken by Each Government

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

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2. 協議記録

保健省・UTH 院長・調査団

2008 年 10 月 29 日

「ザ」国側出席者：保健省チクウェニャ 副局長他 4 名、UTH ムワバ病院長

調査団側：調査団 5 名、松久 JICA 事務所所員、Ms. リクワシ JICA 事務所コンサルタント

(1) 瀧澤団長より以下の内容を説明した。

- 1) 要請に含まれる事業の必要性・妥当性については確認したが、予算の制約（改修工事を伴うことによるコスト増リスク）、工期の制約（改修工事を伴うことによる工期長期化リスク）、スキームの制約（承認プロセスに時間を要するため、1-2 年以内の対応が必要とされる緊急事業には対応できない）の 3 点を考慮し、プライオリティを付ける必要がある。
- 2) プライオリティ付けの基準としては、事業の重複を回避するため既に改修工事が行われている部門は対象から外す、MDGs の観点および要請書の原題から産婦人科・小児科を優先する、物理的状態が深刻であり三次病院として期待される機能が著しく阻害されている部門を優先する、の 3 つを提案したい。
- 3) 妥当性を考える際には、上位計画との整合性についても確認が必要だが、保健省作成の保健投資計画および UTH 作成の三カ年行動計画のいずれを参照すべきか確認したい。
- 4) 無償資金協力は、日本の外務省が実施の判断を決定するスキーム。JICA の役割は、今回の調査結果やザンビア側の要望を外務省に報告することである。（JICA の「技術協力プロジェクト」との相違も含め、JICA に決定権がないことを説明。）

(2) UTH ムワバ病院長より次の説明があった。

- 1) 要請した内容は緊急に実現したいものばかりであり、JICA の支援が実現するのが 2010 年とか 2011 年というのでは時間がかかり過ぎて待てない。改修や機器購入は今時点も実現に努力しており、要請した内容は常に何かの実現され毎日変化している。C ブロック手術室がその例だ。
- 2) OT や ICU も産婦人科や小児科の患者に使われており、タイトルと要請内容が齟齬していることはない。
- 3) 保健投資計画と三カ年行動計画とが異なっている理由は、前者が本格的な改善像（bigger picture）を示すのに対し、三カ年行動計画には UTH が独自に必要と考えるものが反映されているためである。また、要請内容は現在の緊急ニーズに基づいている。MOH は部分的には UTH の要求を満たしてくれるが不足しており、UTH は自力で収入を生み出して資金を作っている。
- 4) 調査団には、この要請が至急を実現する必要があるということを日本政府にアピールし fast track を検討してもらいたい。
- 5) (医療施設としても高い質的スタンダードが要求される手術室や集中治療室については、時間をかけてでも日本の支援により抜本的な改修をする妥当性があるのではないかと、との当方からの問いに対し) 中央手術室の改修工事もうすぐ入札にかかる予定である。1995 年の無償資金協力「小児科改善計画」で建設された A ブロックの雨漏りは、完了後 6 か月には始まったと聞いている（だから日本が行う工事の質が高いとは言えないだろう）。

- 6) (この間保健省チクウェニャ副局長も交え無償の実現時期と UTH が行う予定の事業についての議論が続いた。) UTH としては建物のリハビリテーションは早急に実現したい状況にあるためこれはザンビア側で行うこととし、日本側には医療機材の支援をお願いしたい。

(3) 結論

- 1) ザンビア側は、日本へ要請したもののうち建物改修は自国で行うこととし、機材整備だけを改めて日本へ要請する。
- 2) 日本側は、申し出のあった要請内容の変更についてその可否を検討する。その結果を踏まえミニッツ協議を明日（水曜日）午後 3 時から行う

以上