

## **Appendices**

## 1. Member List of the Survey Team

Preparatory Survey (March 6 to April 4, 2011)

No.	Name	Assignment title	Organization
1	Dr. Mitsuhiro USHIO	Team Leader	Human Development Department, Japan International Cooperation Agency
2	Dr. Yorihiro USUDA	Technical Advisor	National Center for Global Health and Medicine <sup>1)</sup>
3	Ms. Kaori NAKAOKA	Project Coordinator	Human Development Department, Japan International Cooperation Agency
4	Mr. Masahiro IKAWA	Project Manager & Architectural Planner	Nihon Sekkei, Inc.
5	Mr. Shingo NOKOSHIMATSU	Deputy Project Manager / Architectural & Facilities Designer	Nihon Sekkei International Inc.
6	Ms. Keiko KITA	Health care Planning /Hospital Management	Earl Consultants, Inc.
7	Mr. Ryoji HARADA	Equipment Planner	Earl Consultants, Inc.
8	Mr. Hiroshi TAKEDA	Construction & Cost Planner	Nihon Sekkei, Inc.
9	Mr. Yo TAKAHASHI	Equipment Procurement & Cost Planner	Earl Consultants, Inc.
10	Mr. Takahisa ISOBE	Mechanical Facilities Planner (assistant)	Nihon Sekkei, Inc.
11	Mr. Noboru TAMAMURA	Electrical Facilities Planner (assistant)	Nihon Sekkei, Inc.
12	Ms. Aiko KOISHI	Architectural Designer (assistant)	Nihon Sekkei International Inc.

<sup>1)</sup> Organization at the time of the Preparatory Survey

Explanation on Draft Report (October 23 to October 30, 2011)

No.	Name	Assignment title	Organization
1	Mr. Tadanori SUZUKI	Team Leader	Resident Representative, Vanuatu Office, Japan International Cooperation Agency
2	Mr. Tatsuya ASHIDA	Project Coordinator	Financing Facilitation and Procurement Supervision Department, Japan International Cooperation Agency
3	Mr. Masahiro IKAWA	Project Manager & Architectural Planner	Nihon Sekkei, Inc.
4	Mr. Shingo NOKOSHIMATSU	Deputy Project Manager / Architectural & Facilities Designer	Nihon Sekkei International Inc.
5	Ms. Keiko KITA	Health care Planning /Hospital Management	Earl Consultants, Inc.
6	Mr. Yo TAKAHASHI	Equipment Procurement & Cost Planner	Earl Consultants, Inc.

## 2. Study Schedule

### Preparatory Survey (March 6 to April 4, 2011)

Team member Date	Official Member			Consultant												
	Leader	Technical Adviser	Project Coordinator	Project Manager/ Architectural Planner	Equipment Planner/ Procurement	Health care Planning /Hospital Management	Deputy Project Manager & Architectural Designer	Architectural Designer	Construction & Cost Planner	Equipment Cost and Procurement Planner	Mechanical Facilities Planner	Electrical Facilities Planner				
1 6 (Sun)				Dep. Narita→			Dep. Narita→									
2 7 (Mon)				Sydney → Ar. Port-Vila			Sydney → Ar. Port-Vila									
3 8 (Tue)				Visit JICA Office, MOH and VCH, Explain Inception Report, Confirm Schedule			Visit JICA Office, MOH and VCH, Explain Inception Report, Confirm Schedule									
4 9 (Wed)				Site Survey at VCH, Survey VCH Operation			Site Survey at VCH, Survey VCH Operation									
5 10 (Thu)				Meeting with MOH, The explanation of the Grant Aid			Survey of the relevant Departments in VCH									
6 11 (Fri)				Visit the other Donors (Australia, New Zealand, China, Cuba)			Survey of the relevant Departments in VCH									
7 12 (Sat)				Site survey at VCH, Team Meeting, Document Arrangement, Preparation of Master Plan			Site survey at VCH, Team Meeting, Document Arrangement, Preparation of Master Plan									
8 13 (Sun)	Dep. Narita→		Team Meeting, Document Arrangement, Preparation of Master Plan			Team Meeting, Document Arrangement, Preparation of Master Plan										
9 14 (Mon)	Sydney → Ar. Port-Vila		Discussion w/ VCH, MOH for Master Plan			Discussion w/ VCH, MOH for Master Plan										
	----- Interim Report from the Consultant at Evening					----- Interim Report from the Consultant at Evening										
10 15 (Tue)	Visit MOH, VCHI, Project Component, Site Survey for VCH					Dep. Narita→		Detail Survey at VCH		Dep. Narita→						
11 16 (Wed)	Discussion for Administration Policy, Administration Plan (budget, staffing)					Sydney → Ar. Port-Vila		Study of Facilities Planning		Sydney → Ar. Port-Vila						
12 17 (Thu)	Discussion and preparation for Minuts, Survey and Planning for Facilities and Equipment (*1)					Discussion for Minuts Survey at VCH, Explanation of Questionnaire		Discussion and preparation for Minuts Detail Survey at VCH		Discussion for Minuts Overview at VCH						
13 18 (Fri)	Sign for Minutes of Discussions(MD)(*1)					Same as *1 Financial and Healthcare Planning Survey at MOH-VCH		Same as *1 for Facilities		P lanning Same as *1 Detail of Present Condition of Equipment			Same as *1 Survey at VCH			
14 19 (Sat)	Sydney → Ar. Port-Vila		Document Arrangement	Team Meeting for Facility planning, Equipment planning, Arrangement		Document Arrangement		Team Meeting for Facility planning, Equipment planning, Arrangement		Study of Construction Planning	Study of Equipment Procurement	Team meeting, Facility planning	Sydney → Ar. Port-Vila			
15 20 (Sun)	Ar.Narita		Dep. Port-Vila	Team Meeting for Facility planning, Equipment planning, Arrangement		Document Arrangement		Team Meeting for Facility planning, Equipment planning, Arrangement								
16 21 (Mon)				Meeting w/ Relevant Government offices to this Project		Survey for Financial and Healthcare Planning at MOH-VCH		Meeting w/ Infrastructure-related Government Office			Equipment Agency Investigation		Detail Survey at VCH			
17 22 (Tue)				Discussion w/ VCH, MOH for Facility Planning, Equipment Planning		Survey ofr Hospital Management		Discussion w/ VCH, MOH for Facility Planning, Equipment Planning			Equipment Agency Investigation		Meeting w/ Infrastructure-related Government Office			
18 23 (Wed)				Discussion w/ VCH, MOH for Facility Planning, Equipment Planning		Draft of Advice of Hosptal Management		Discussion w/ VCH, MOH for Facility Planning, Equipment Planning			Agency Investigation		Discussion w/ VCH, MOH for Facility Planning, Equipment Planning			
19 24 (Thu)				Survey at NDH(Northern District Hosptal)		Draft of Advice of Hosptal Management		Survey at NDH(Northern District Hosptal)								
20 25 (Fri)				Meeting w/ MOH for Technical Memorandum(M)		Advice and Survey of MOH Healthcare Planning		Meeting w/ MOH for Technical Memorandum(M)			Agency Investigation		Meeting w/ MOH for Technical Memorandum(M)			
21 26 (Sat)				Team Meeting, Preparation of T/M		Advice and Survey of MOH Healthcare Planning		Team Meeting, Preparation of T/M						Dep.Port-Vila → Sydney		
22 27 (Sun)				Team Meeting, Preparation of T/M		Advice and Survey of Maintenance Cost and Financial Planning		Team Meeting, Preparation of T/M						Sydney → Ar.Narita		
23 28 (Mon)				Meeting with MOH for T/M		Arrangement of Advice and Survey		Meeting with MOH for T/M								
24 29 (Tue)				Meeting with MOH Sign for T/M Report to JICA Office		Report of Advice and Survey		Meeting with MOH for T/M								
25 30 (Wed)				Dep. Port-Vila → Sydney							Study of Construction Planning		Equipment Agency Investigation		Detail Survey at VCH	
26 31 (Thu)				Sydney → Ar.Narita							Study of Construction Planning		Equipment Agency Investigation		Meeting w/ Infrastructure-related Government	
27 1 (Fri)												Material & Equipment Agency Investigation				
28 2 (Sat)												Material & Equipment Agency Investigation				
29 3 (Sun)												Dep.Port-Vila → Sydney				
30 4 (Mon)												Sydney → Ar.Narita				

## Explanation on Draft Report (October 23 to October 30, 2011)

Member  Date			JICA		Consultant				
			Leader	Project Coordinator	Project Manager/ Architectural Planner	Deputy Project Manager & Architectural Designer	Health care Planning /Hospital Management	Equipment Cost and Procurement Planner	
1	Oct. 23	(Sun)		Dep. Narita →	Dep. Narita →				
2	24	(Mon)		Sydney → Ar. Port-Vila					
				Meeting at JICA				Dep. Narita	
3	25	(Tue)	Discussion MOH and VCH(Explanation of Draft report of Preparatory Survey (2) (Basic Design) Report)					Sydney → Ar. Port-Vila	
4	26	(Wed)	Discussion at MOH on Minutes of Discussions (Explanations details of Facility Plan, Medical Equipment Plan, Operation Plan, Obligations of Recipient Country, Technical Assistance, etc)						
5	27	(Thu)	Signing of Minutes of Discussions						
6	28	(Fri)		Conference of Health Partner Group, Report to JICA Office	Meeting w/ Dept. of Environment, Public Works Dept., Conference of Health Partner Group, Report to JICA Office		Conference of Health Partner Group, Report to JICA Office	Confirmation of Spec of Equipment, Report to JICA Office	
7	29	(Sat)		Dep. Port-Vila → Sydney →	Dep. Port-Vila → Sydney →			Dep. Port-Vila → Sydney →	
8	30	(Sun)		Ar. Narita	→ Ar. Narita			Ar.Haneda	

### 3. List of Parties Concerned in the Recipient Countries

	Name	Title/Organization
<b>Vanuatu side</b>		
<b>1</b>	<b>Ministry of Health</b>	
	Mr. Mark Peter Bebe	Director General
	Mr. George Taleo	Acting Director General
	Mr. Morris Amos	Acting Director
	Mr. Russel Tamata	Assistant Health Planner
	Mr. Jameson Mokoreoe	Finance& Accounts Manager
	Mr. Henry	Finance officer
	Mr. Vilan Tovuu	Planning Manager
<b>2</b>	<b>SHEFA Health Office</b>	
	Mr. John TASSEREI	NCB officer SPHO
<b>3</b>	<b>Vila Central Hospital</b>	
	Ms. Leipakoa Matariki	Hospital Manager , Administration
	Dr. Willie Tokon	Medical Service Manager, Administration
	Mr. J. Honore Maurice	Nursing Service Manager, Administration
	Dr. Richard Walsh Leona	Consultant Surgeon
	Ms. Margaret Lui	Pharmacy Supervisor
	Ms. Andorin Gaviga Aki	Nurse in charge-ENT
	Mr. Trevor Hezakie	AVI Volunteer – Biomedical Technician
	Ms. Leitare Yavsil	Rehabilitation manager
	Mr. Romain Paniel	Maintenance Unit ,Acting Supervisor
	Mr. Mawa Reuben	Radiology Department, Acting Principal
	Ms. Anis Jean Noel	Accident & Emergency, Nursing Supervisor
	Dr. Graham Kalosil Patas	President Medical officer-OPD
	Ms. Janet Ores	Nurse in charge OPD/PAE
	Ms. Monique Tahii	Nurse in charge OPD/PAE
	Ms. Hannah Kanas	Nurse practitioner-OPD
	Dr. Nelson Tanghwa	Dentist
	Mr. Kolen Ioanne	Maintenance ,Senior Plumber
	Mr. Tony William	Maintenance ,Oxygen Plant technician
	Mr. Joel Siri	Maintenance ,Electrician
	Mr. Cassidy	Finance officer
	Mr. George Pakoa	Medical Laboratory/Pathology, Manager
	Ms. Dorothy Namel	Operating Theatre, Nursing Supervisor
	Ms. Marie Jean Baptiste Willy	Women's Clinic, Nursing Supervisor
	Dr. Yakep Angue	Obstetrics & Gynaecology Dept, Senior Consultant
	Dr. Tony Harry	Obstetrics & Gynaecology Dept, Junior Consultant
	Dr. Andy Ilo	Operating Theatre, Senior Registrar- Anesthesia
	Dr. Trevor Cullwick	Operating Theatre, Junior Consultant
	Dr. Samson Mesol	Operating Theatre, Senior Consultant
	Mr. Garri Connor	Biomedical Engineer, Maintenance
	Mr. James Bonk Stephen	Oral Health Supervisor, Dental
	Mr. Sero Kalkie	MCJ, Laboratory
	Mr. Roger Psisa	Acting incharge, Surgical Unit
	Ms. Marie Jean Baptiste Willy	Midwife,Women's Health
	Ms. Janet Leitangi	Midwife, Maternity
	Mr. Austin Leo	Plumber Maintenance
	Ms. Carmeu Ahiytiny	Acting incharge, TB ward
	Mr. Cassidy Vusi	Finance officer, Administration
	Ms. Naganga Sandrie	Incharge Kitchen, Kitchen
	Ms. Annie Bony	Incharge, Eye clinic

	Name	Title/Organization
	Ms. Llian Hagga	Senior registered level Nurse, Medical department
	Mr. Finau Mekenzie	Radiographer, X-ray Dept.
	Ms. Leimatiys	Incharge, Cleanings
	Ms. Elty Malili	Incharge Nurse, Children Ward
	Ms. Jean Noel	Incharge, Emergency
4	<b>Ministry of Finance</b>	
	Mr. Nikunj SONI	Senior treasury advisor, Treasury Division
	Mr. Letlet AUGUST	Principal Economist
	Mr. John Robert SIMELUM	Development Accountant, Treasury Division
5	<b>Dept. of Environment</b>	
	Mr. Albert Williams	Director
	Mr. Trinison Tari	Senior Environmental Officer
	Mr. Ready Tari	EIA Officer
	Mr. Roger Tang	Environmental Health Officer
6	<b>Public Works Dept.</b>	
	Mr. Dick Iba Mannalcc	
	Mr. Andre Tatupu	
	Mr. Warlan Alan Lavro	Senior Laboratory Technician
7	<b>AusAID</b>	
	<b>Ms. Kendra Gates Derousseau</b>	Senior Program Officer, Health
	Ms. Belynda McNaughton	First secretary (Health and education)
	Mr. James Buchan	Professor, Queen Margaret University
	Dr. Brady Tassicker	Staff Specialist, Northwest Regional Hospital Burnie
8	<b>UNICEF</b>	
	Mr. Hensley Garaeliu	Health & Nutrition Officer
9	<b>European Union</b>	
	Mr. Robert DE RAEVE	Charge d' Affaires a.i.
10	<b>WHO</b>	
	Dr. Bernard Fabre-Teste, MD PhD	Vanuatu WHO Country Liaison Officer
11	<b>UNELCO</b>	
	Mr. Tony Alvos	Chef du Service Etudes
	Ms. Jsessica Frangni	Assistante du Directeur Technique
12	<b>Telecom Vanuatu Limited</b>	
	Mr. Aline Koroka-Hymak	
	Mr. Harvey Toto	
13	<b>Fire Department</b>	
	Mr. Bomma Avia	Lieutenant
14	<b>VANUATU Meteorological Service</b>	
	Mr. Philip Malsale	Principal Scientific Officer
15	<b>Northern Provincial Hospital</b>	
	Ms. Gerolyn Tagaro	Acting Hospital Manager
	Mr. Tobie Tsiabon	Nurse Practitioner
<b>Japan Side</b>		
16	<b>JICA Vanuatu Office</b>	
	Mr. Tadanori Suzuki	Resident Representative
	Ms. Hiroko Watahashi	Project Formulation Advisor
	Mr. Akihito Motegi	Project Formulation Advisor
	Ms. Jocelyn Loughman	Program Officer
	Ms. Rika Yamaguchi	Volunteer Coordinator
	Mr. Masahiko Suzuki	JOCV, Theatre Nurse of VCH
	Ms. Sayoko Yamaguchi	JOCV, Theatre Nurse of VCH
	Ms. Mutsuko Kawakami	JOCV, Surgery Ward Nurse of VCH
	Ms. Yukari Uchino	JOCV, Nurse of Saupia Health Centre

#### 4. MINUTES OF DISCUSSION

### MINUTES OF DISCUSSIONS ON PREPARATORY SURVEY (2) (BASIC DESIGN) ON THE PROJECT FOR THE REDEVELOPMENT OF VILA CENTRAL HOSPITAL IN THE REPUBLIC OF VANUATU

In response to a request from the Republic of Vanuatu (hereinafter referred to as "Vanuatu"), the Government of Japan decided to conduct a Preparatory Survey on the Project for the Redevelopment of Vila Central Hospital (hereinafter referred to as "the Project") and entrusted the survey to the Japan International Cooperation Agency (hereinafter referred to as "JICA").

JICA sent to Vanuatu a Preparatory Survey Team (hereinafter referred to as "the Team"), which is headed by Dr. Mitsuhiro Ushio, Executive Technical Advisor to the Director General, Human Development Department, JICA, and is scheduled to stay in the country from 14th March to 19th March, 2011.

The Team held discussions with the officials concerned of the Government of Vanuatu and conducted a field survey.

In the course of discussions and field survey, both parties confirmed the main items described on the attached sheets. The Team will proceed to further works and prepare the Preparatory Survey Report.

Port Vila, 18 March, 2011



Dr. Mitsuhiro Ushio

Leader, Preparatory Survey Team  
Executive Technical Advisor to the Director General,  
Human Development Department  
Japan International Cooperation Agency



Mr. Mark Bebe

Director General of Health  
Ministry of Health  
Republic of Vanuatu

## ATTACHMENT

### 1. Objective of the Project

The objective of the Project is to strengthen the services of the Vila Central Hospital (hereinafter referred to as "VCH") by improving its facilities and equipment.

### 2. Project site

The site of the Project is VCH, located in Port Vila, Republic of Vanuatu. The location is shown in Annex-1

### 3. Responsible and Implementing Agency

3-1. The Responsible Agency is Ministry of Health. (Annex-2)

3-2. The Implementing Agency is VCH. (Annex-3)

### 4. Items requested by the Government of Vanuatu

After discussions with the Team, the items listed in Annex-4 and Annex-5 were finally requested by the Vanuatu side. JICA will assess the appropriateness of the request and will recommend to the Government of Japan for approval.

#### (1) Construction of the Buildings and Facilities

Requested items with priority are listed in Annex-4.

#### (2) Procurement of the Equipment

Requested items with priority, and criteria of the priority are listed in Annex-5.

### 5. Japan's Grant Aid Scheme

The Vanuatu side understands the Japan's Grant Aid Scheme and the necessary measures to be taken by the Government of Vanuatu as explained by the Team and described in Annex-6, 7 those were already confirmed on the Preparatory survey (1) which was taken on February 2010.

### 6. Schedule of the Proceedings

6-1. The consultants will proceed to further studies in the Vanuatu until 2<sup>nd</sup> April, 2011.

6-2. JICA will prepare the draft report in English and dispatch a mission to VCH in order to explain its contents in October, 2011.

6-3. In case that the contents of the report is accepted in principle by the Government of Vanuatu, JICA will complete the final report and send it to the Government of Vanuatu by the end of March, 2012.



## 7. Other relevant issues

7-1. The Vanuatu side agreed with master zoning plan described in Annex-8.

### 7-2. Scope of Japanese cooperation

The Japanese side explained the refurbishment and extension of the existing facilities is out of scope of Japanese cooperation. The Vanuatu side understood the scope of Japanese cooperation and agreed to undertake refurbishment and extension of the existing facilities.

7-3. The Vanuatu side agreed that the strengthening of the management capability especially in the following areas is essential in order to provide quality services continuously.

Human resources

Finance

Health Information System

Procurement and Supply

### 7-4. Service functions of VCH

The Vanuatu side agreed to strengthen the health facilities at primary and secondary level so that VCH will provide services focused further on secondary and tertiary services as the top referral hospital

### 7-5. Strengthening of training function

The Vanuatu side agreed that VCH strengthen its education and training function to doctors, nurses, other health personnel, and students.

### 7-6. Staff recruitment

The Vanuatu side agreed to recruit appropriate number of qualified staff to operate and maintain the function of VCH properly and effectively.

### 7-7. Budget allocation

The Vanuatu side agreed to allocate budget enough to operate and maintain the facilities and equipment properly and effectively.

7-8. The Vanuatu side will take necessary measures to ensure duty tax exemption and smooth custom clearance of the Project at the port of disembarkation.

7-9. The Vanuatu side agreed to exempt for the VAT component of the Project.

7-10. The Vanuatu side agreed to maintain the Task Force Team listed in Annex-9 through all stages of the Project for smooth implementation.

7-11. Technical assistance (Soft component)

The Vanuatu side requested the Japanese side to implement technical assistance (soft component) for hospital operation & management and maintenance for medical equipment and facilities as a part of the project.

7-12. The Vanuatu side agreed to conduct demolition and relocation of the existing dental facility within the project site described in Annex-1 before the commencement of the construction of new facilities.

7-13. Improvement of infrastructures

The Vanuatu side agreed to complete necessary improvement of infrastructures before the commencement of the construction work of the Project.

7-14. Maintenance organization and Staff of the Project

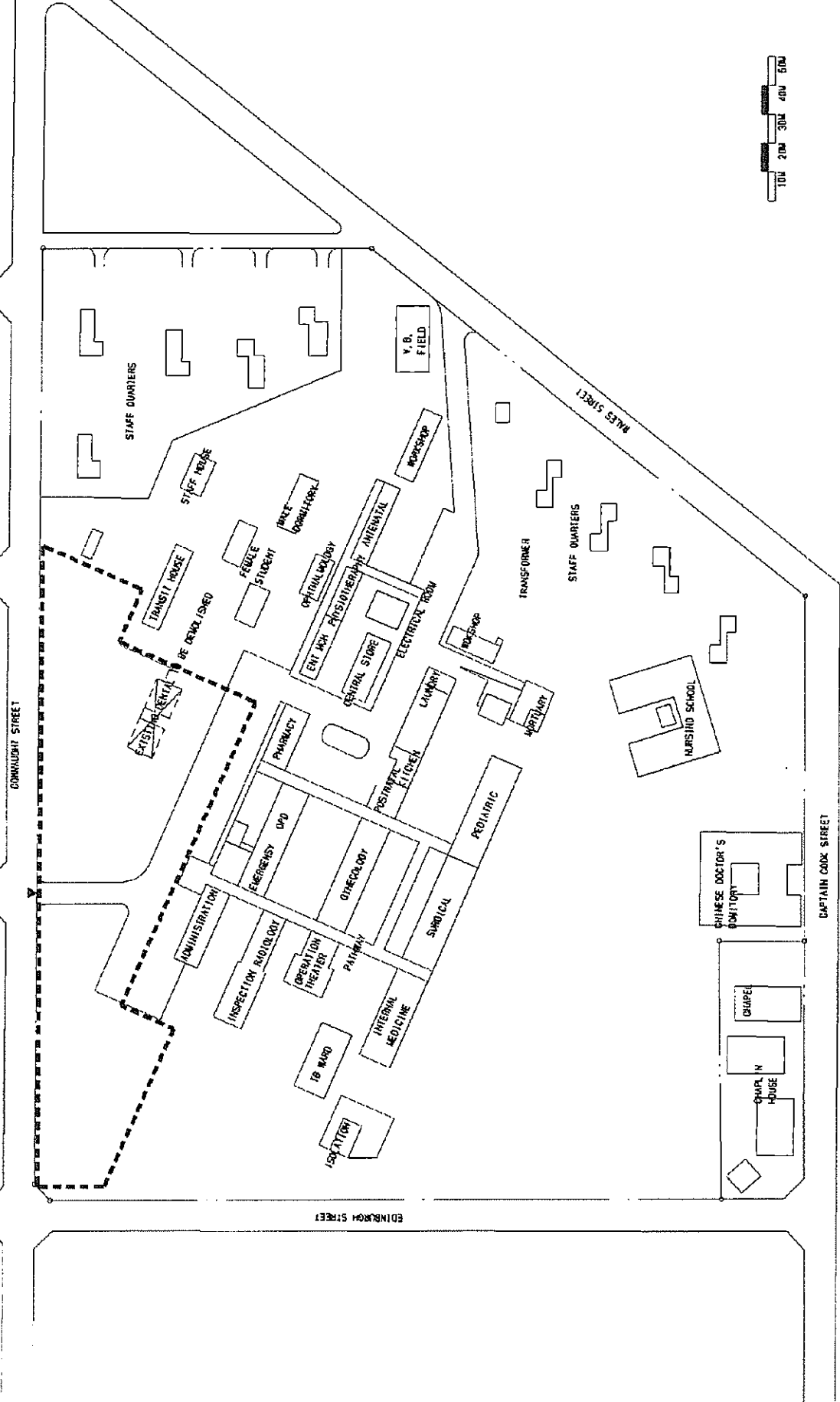
The Vanuatu side agreed to deploy sufficient number of skilled staff for management and operation/maintenance services (electrical, mechanical, and equipment)

Taking account of the above issues, contents of the Project will be decided through the forthcoming survey and analysis in Japan.

- Annex-1 Project site map
- Annex-2 The proposed Organization Chart of Ministry of Health  
(Ministry of Health Top Level Structure & Provincial Structure)
- Annex-3 The proposed Organization Chart of VCH
- Annex-4 List of the facilities and their priority requested by the Vanuatu
- Annex-5 List of the equipment and their priority requested by the Vanuatu
- Annex-6 Japan's Grant Aid scheme
- Annex-7 Major Undertakings to be taken by Each Government
- Annex-8 Master zoning plan
- Annex-9 List of member of Task Force Team

Annex-1

# Project site map

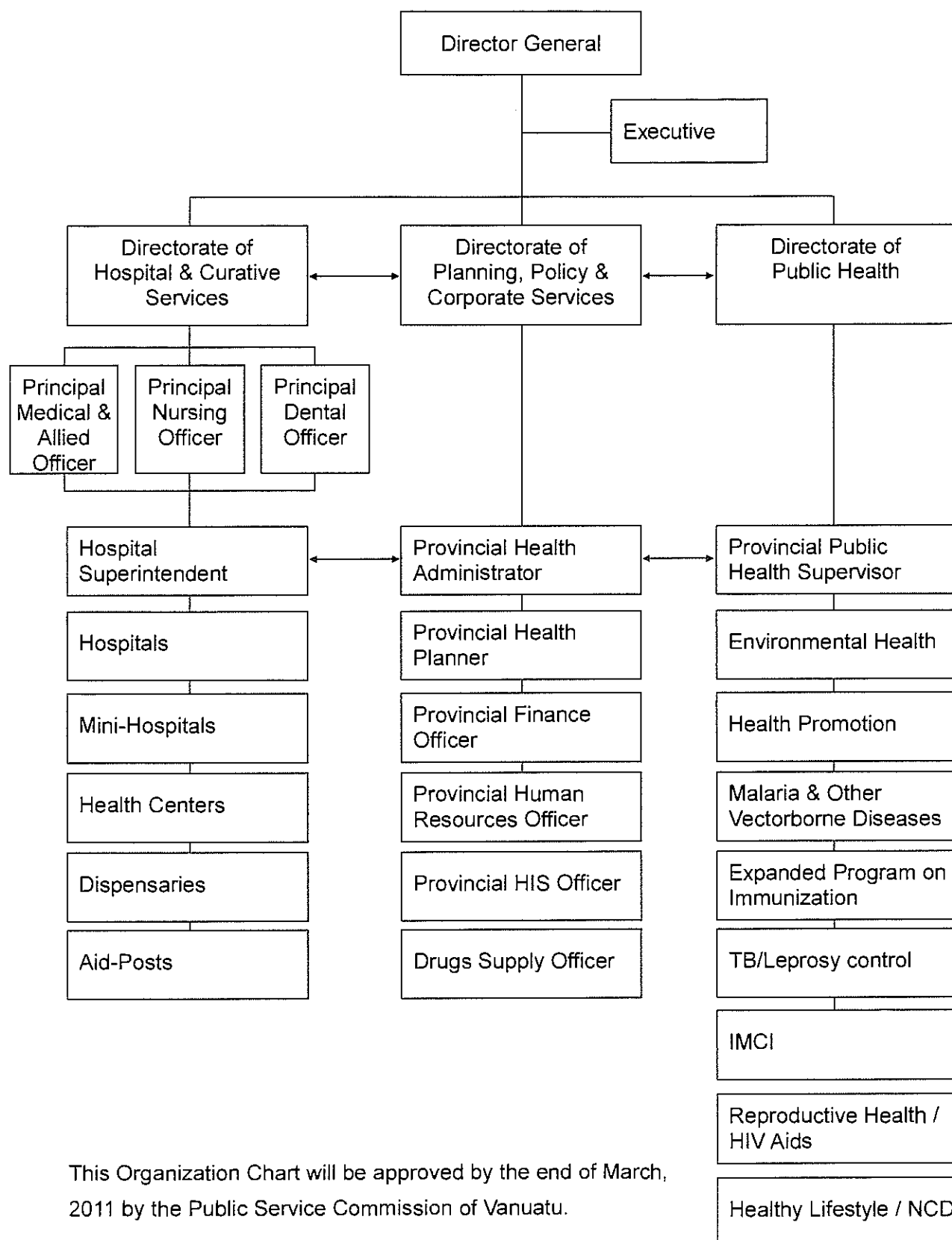


PROJECT SITE

## Annex-2

### The proposed Organization Chart of Ministry of Health

#### Ministry of Health Top Level Structure & Provincial Structure

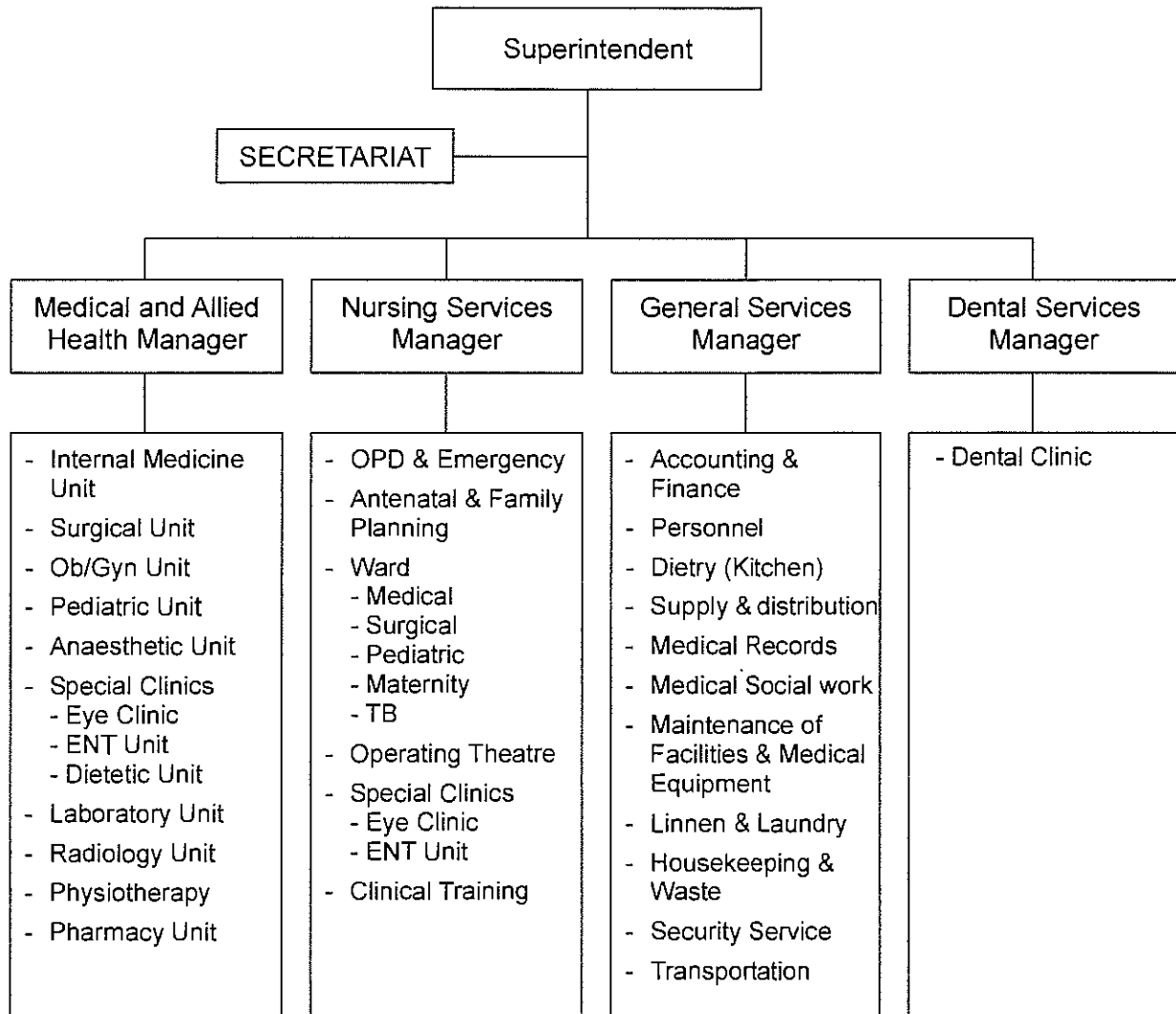


This Organization Chart will be approved by the end of March, 2011 by the Public Service Commission of Vanuatu.

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Annex-3

The proposed Organization Chart of VCH



This Organization Chart of VCH will be approved by the end of March, 2011 by the Public Service Commission of Vanuatu.

# Annex-4

## List of the facilities and their priority requested by the Vanuatu

Facilities		Priority
Emergency Department		A
Outpatients' Department	General Clinic	B
	ENT	B
	Eye Clinic	B—
	NCD (Non-Communicable Disease)	B
	Dental	B
	Physiotherapy	B
Operation Theater	Theater	B
	CSSD	B
Laboratory Department (including blood bank and specimen storage)		B—
Radiology Department		B—
Administration Department		C
Paging System		A

A : High Priority

B : Middle Priority

B—: Middle Priority not prior to B

C : Low Priority

# Annex-5

List of the equipment and their priority requested by the Vanuatu

No.	Description	Priority	No.	Description	Priority
X-ray Department			(Clinical Laboratory)		
1	Diagnostic X-ray	A	1	Centrifuge	B
2	Mobile X-ray	A	2	Binocular microscope	B
3	Automatic Film Processor and X-ray Accessory	A	3	Leukocyte counter	B
4	C-arm X-ray unit	B	4	Medical Refrigerator	B
5	Ultrasound machine	B	5	Electric Balance	B
6	CR system	B	6	Coulter counter	B
Out-Patient			(Blood bank)		
(Obstetric and Gynaecology)			1	Blood centrifuge	B
1	Gynaecological examination table	A	2	Blood bank refrigerator	B
2	Gynaecological examination unit	A	3	Blood product sealer	C
3	Doppler foetal detector	A	4	Water bath	B
4	Colposcope	A	5	Scale weight for bags	B
5	Film Illuminator	A	(Haematology)		
6	Boiling sterilizer	A	1	Haematology analyzer	B
7	Medical refrigerator	A	2	Blood h/m staining machine	B
8	Diagnostic set	B	(Biochemistry)		
9	Examining Instruments set	A	1	Thyroid function analyzer	B
(Paediatrics)			2	Troponin analyzer	B
1	Infant examination/Dressing Table	A	3	Haemoglobin electro analysis machine	B
2	Infant scale (Height and Weight)	A	4	Centrifuge	B
3	Ultrasonic Nebulizers	A	(Microbiology)		
4	Suction unit	A	1	Incubator	B
5	Suction unit	A	2	Autoclave	B
6	1-ch Electro cardiograph	A	3	Teaching microscope	B
7	Film illuminator	A	4	O2,CO2 Gas bag container	B
8	Boiling sterilizer	B	(Physiological Lab)		
9	Diagnostic set	A	1	ECG with Analyzer	B
10	Examination Instrument set	B	2	Tread mill	B
(Endoscopy)			(Pharmacy)		
1	Gastrointestinal Fiberscope with light source	A	1	Medical refrigerator	B
2	Bronchofiberscope with light source	B	2	Top-pan Balance	B
3	Colonofiberscope with light source	B	3	Water Distiller	A
4	Camera Control Unit	B	(Ophthalmology)		
5	Endoscope Table	B	1	Laser machine	B
6	Disinfection Trolley	B	2	A scan machine	B
7	Ultrasonic Cleaner	B	3	Vitrector machine	B
8	Endoscope Cabinet	B	(Dental clinic)		
(Surgery)			1	Dental treatment unit	A
1	Examination lamp	A	2	Dental instruments set	B
2	Examining Instruments set	B	(Physiotherapy)		
3	Film illuminator	A	1	Stationery Bicycle exercise machine	B
4	Electro Cautery	A	2	Ultrasound therapy machine	B
5	Manual Dermotome	A	3	Transcutaneous nerve stimulator	B
6	Gypsum Cutter	C	4	Paraffin wax bath	B
7	Gypsum Utensil Set	C	5	Massage couch/bed (with head hole)	B
(Internal Medicine)			6	Massage machine	B
1	Film illuminator	A	7	Electric oscillating saw	B
2	Boiling sterilizer	B	Obstetric Department		
3	Diagnostic set	A	(Delivery)		
4	Examination Instrument set	B	1	Delivery table	B
(Emergency Department)			2	Vacuum Extractor	B
3	Film illuminator	A	3	Automatic Resuscitator	B
6	Diagnostic set	A	4	Infant Warmer	A
11	Boiling sterilizer	B	5	Cardiotocograph	B
12	Diagnostic set	A	6	Doppler foetal detector	B
13	Examination Instrument set	B	7	Infusion pump	A
14	Medicine Refrigerator	B	8	Operating Light	A
15	Stretcher	B	9	Delivery Instrument Set	A
16	Wheel Chair	B	10	Oxygen analyzer	B
17	Suction Apparatus	A	11	Pulse Oximeter	B
18	Defibrillator	A	(Labour Room)		
19	Manual resuscitator (Ambu-bag)	A	1	Labour Bed	B
20	ECG	A	2	Foetal Monitor	B
21	Patient monitor	A			

No.	Description	Priority
(New born babies)		
1	Baby bassinet with Mobile stand	B
2	Infant scale (Height and Weight)	A
3	Ultrasonic Nebulizers	A
4	Suction Unit	A
5	Nursing bottle sterilizer	A
6	Infusion pump	A
7	Film illuminator	A
8	Phototherapy unit	A
9	Infant incubator	A
10	Intensive care incubator	B
11	Neonatal monitor	A
12	Oxygen analyzer	A
13	Infant resuscitator	A
14	Syringe pump set	B
15	Infant Ventilator	C
16	Bilirubin analyzer	A
17	Ultrasonic Nebulizers	A
18	Infant Warmer	A

A Essential  
B Necessary  
C Least priority

No.	Description	Priority
Operation Theatre		
1	Operating Table	A
2	Suction Unit	A
3	Infusion pump	B
4	Operating Light	A
5	Automatic Resuscitator	B
6	Defibrillator	A
7	Film illuminator	A
8	Patient Monitor	A
9	Operating Instrument set	A
10	Gynaecological Laparoscopy set	B
11	Hand washing Sink Unit	A
12	Pulse Oximeter	A
13	Electro Cautery	A
14	Anaesthesia Apparatus	A
15	Blood Bank refrigerator	A
16	Patient heater	A
17	Infant Warmer	A
18	Solar power supply system	A
I.C.U. (Recovery Room)		
1	Bedside monitor	B
2	Automatic IV. Infusion Pump	B
3	Defibrillator	A
4	Pulse Oximeter	A
5	Oxygen Hood	B
6	Gadget bed	A
7	Suction machine	B
8	Oxygen analyzer	B
C.S.S.D.		
1	Steam Sterilizer	A
2	Carrying Cart	A
Others		
1	Hemoglobinometer machine	B
2	Ultra-Sound scan machine in Maternity complex	B
3	Oxygen generators	A
4	Water softener for autoclaves	A
5	Automatic voltage stabilizers for precision items	A



## Japan's Grant Aid

The Government of Japan (hereinafter referred to as “the GOJ”) is implementing the organizational reforms to improve the quality of ODA operations, and as a part of this realignment, a new JICA law was entered into effect on October 1, 2008. Based on this law and the decision of the GOJ, JICA has become the executing agency of the Grant Aid for General Projects, for Fisheries and for Cultural Cooperation, etc.

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

### 1. Grant Aid Procedures

The Japanese Grant Aid is supplied through following procedures:

- Preparatory Survey
  - The Survey conducted by JICA
- Appraisal & Approval
  - Appraisal by the GOJ and JICA, and Approval by the Japanese Cabinet
- Authority for Determining Implementation
  - The Notes exchanged between the GOJ and a recipient country
- Grant Agreement (hereinafter referred to as “the G/A”)
  - Agreement concluded between JICA and a recipient country
- Implementation
  - Implementation of the Project on the basis of the G/A

### 2. Preparatory Survey

#### (1) Contents of the Survey

The aim of the Preparatory Survey is to provide a basic document necessary for the appraisal of the Project made by the GOJ and JICA. The contents of the Survey are as follows: - Confirmation of the background, objectives, and benefits of the Project and also institutional capacity of relevant agencies of the recipient country necessary for the implementation of the Project.

- Evaluation of the appropriateness of the Project to be implemented under the Grant Aid Scheme from a technical, financial, social and economic point of view.

- Confirmation of items agreed between both parties concerning the basic concept of the Project.

- Preparation of an outline design of the Project.

- Estimation of costs of the Project.

The contents of the original request by the recipient country are not necessarily approved in their initial form as the contents of the Grant Aid project. The Outline Design of the Project is

confirmed based on the guidelines of the Japan's Grant Aid scheme.

JICA requests the Government of the recipient country to take whatever measures necessary to achieve 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 of the recipient country which actually implements the Project. Therefore, the implementation of the Project is confirmed by all relevant organizations of the recipient country based on the Minutes of Discussions.

## (2) Selection of Consultants

For smooth implementation of the Survey, JICA employs (a) registered consulting firm(s). JICA selects (a) firm(s) based on proposals submitted by interested firms.

## (3) Result of the Survey

JICA reviews the Report on the results of the Survey and recommends the GOJ to appraise the implementation of the Project after confirming the appropriateness of the Project.

# 3. Japan's Grant Aid Scheme

## (1) The E/N and the G/A

After the Project is approved by the Cabinet of Japan, the Exchange of Notes (hereinafter referred to as "the E/N") will be signed between the GOJ and the Government of the recipient country to make a pledge for assistance, which is followed by the conclusion of the G/A between JICA and the Government of the recipient country to define the necessary articles to implement the Project, such as payment conditions, responsibilities of the Government of the recipient country, and procurement conditions.

## (2) Selection of Consultants

In order to maintain technical consistency, the consulting firm(s) which conducted the Survey will be recommended by JICA to the recipient country to continue to work on the Project's implementation after the E/N and G/A.

## (3) Eligible source country

Under the Japanese Grant Aid, in principle, Japanese products and services including transport or those of the recipient country are to be purchased. When JICA and the Government of the recipient country or its designated authority 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, constructing and procurement firms, and the prime consulting firm are limited to "Japanese nationals".

(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 JICA. This "Verification" is deemed necessary to fulfill accountability to Japanese taxpayers.

(5) Major undertakings to be taken by the Government of the Recipient Country

In the implementation of the Grant Aid Project, the recipient country is required to undertake such necessary measures as Annex.

(6) "Proper Use"

The Government of the recipient country is required to maintain and use properly and effectively the facilities constructed and the equipment purchased under the Grant Aid, to assign staff necessary for this operation and maintenance and to bear all the expenses other than those covered by the Grant Aid.

(7) "Export and Re-export"

The products purchased under the Grant Aid should not be exported or re-exported from the recipient country.

(8) Banking Arrangements (B/A)

a) The Government of the recipient country or its designated authority should open an account under the name of the Government of the recipient country in a bank in Japan (hereinafter referred to as "the Bank"). JICA 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 JICA under an Authorization to Pay (A/P) issued by the Government of the recipient country or its designated authority.

(9) Authorization to Pay (A/P)

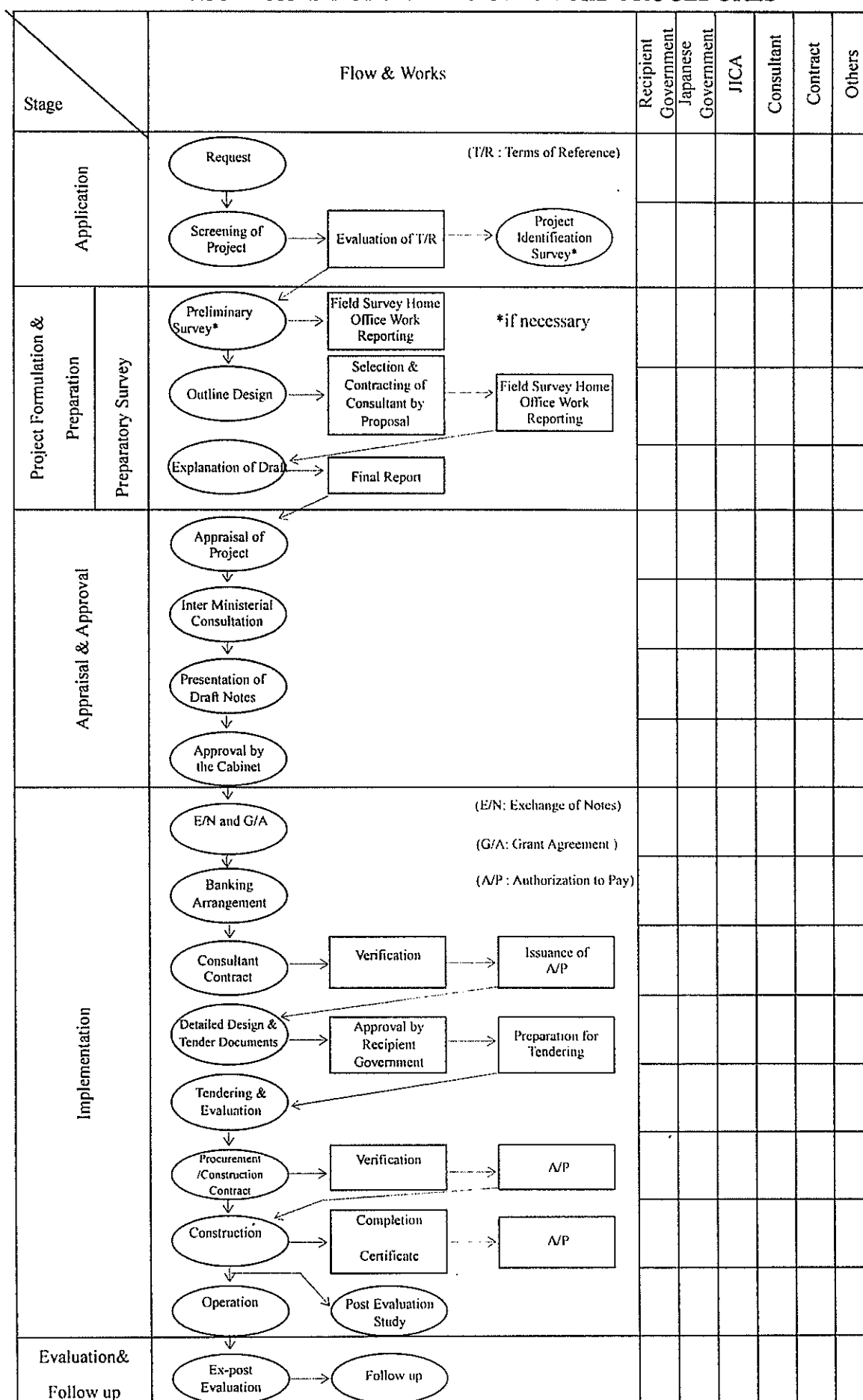
The Government of the recipient country should bear an advising commission of an Authorization to Pay and payment commissions paid to the Bank.

(10) Social and Environmental Considerations

A recipient country must carefully consider social and environmental impacts by the Project and must comply with the environmental regulations of the recipient country and JICA socio-environmental guidelines.

## 2-2 Grant Aid Procedures

### FLOW CHART OF JAPAN'S GRANT AID PROCEDURES



4

2/3

## Major Undertakings to be taken by Each Government

No.	Items	To be covered by Grant Aid	To be covered by Recipient Side
1	to secure [a lot]/[lots] of land necessary for the implementation of the Project and to clear the [site]/[sites].		●
2	To construct the following facilities		
	1) The building	●	
	2) The gates and fences in and around the site		●
	3) The parking lot	●	
	4) The road within the site	●	
	5) The road outside the site		●
3	To provide facilities for distribution of electricity, water supply and drainage and other incidental facilities necessary for the implementation of the Project outside the [site]/[sites]		
	1) Electricity		
	a. The distributing power line to the site		●
	b. The drop wiring and internal wiring within the site	●	
	c. The main circuit breaker and transformer	●	
	2) Water Supply		
	a. The city water distribution main to the site		●
	b. The supply system within the site (receiving and elevated tanks)	●	
	3) Drainage		
	a. The city drainage main (for storm sewer and others to the site)		●
	b. The drainage system (for toilet sewer, common waste, storm drainage and others) within the site	●	
	4) Gas Supply		
	a. The city gas main to the site		●
	b. The gas supply system within the site	●	
	5) Telephone System		
	a. The telephone trunk line to the main distribution frame/panel (MDF) of the building		●
	b. The MDF and the extension after the frame/panel	●	
	6) Furniture and Equipment		
	a. General furniture		●
	b. Project equipment	●	
4	To ensure prompt unloading and customs clearance of the products at ports of disembarkation in the recipient country and to assist internal transportation of the products		
	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	(●)	(●)
5	To ensure that customs duties, internal taxes and other fiscal levies which may be imposed in the recipient country with respect to the purchase of the products and the services [be exempted] or [be borne by the Authority without using the Grant]		●
6	To accord Japanese nationals whose services may be required in connection with the supply of the products and the services such facilities as may be necessary for their entry into the recipient country and stay therein for the performance of their work		●
7	To ensure that [the Facilities and the products]/[the Facilities]/ [the products] be maintained and used properly and effectively for the implementation of the Project		●
8	To bear all the expenses, other than those covered by the Grant, necessary for the implementation of the Project		●
9	To bear the following commissions paid to the Japanese bank for banking services based upon the B/A		
	1) Advising commission of A/P		●
	2) Payment commission		●
10	To give due environmental and social consideration in the implementation of the Project.		●

(B/A : Banking Arrangement, A/P : Authorization to pay)

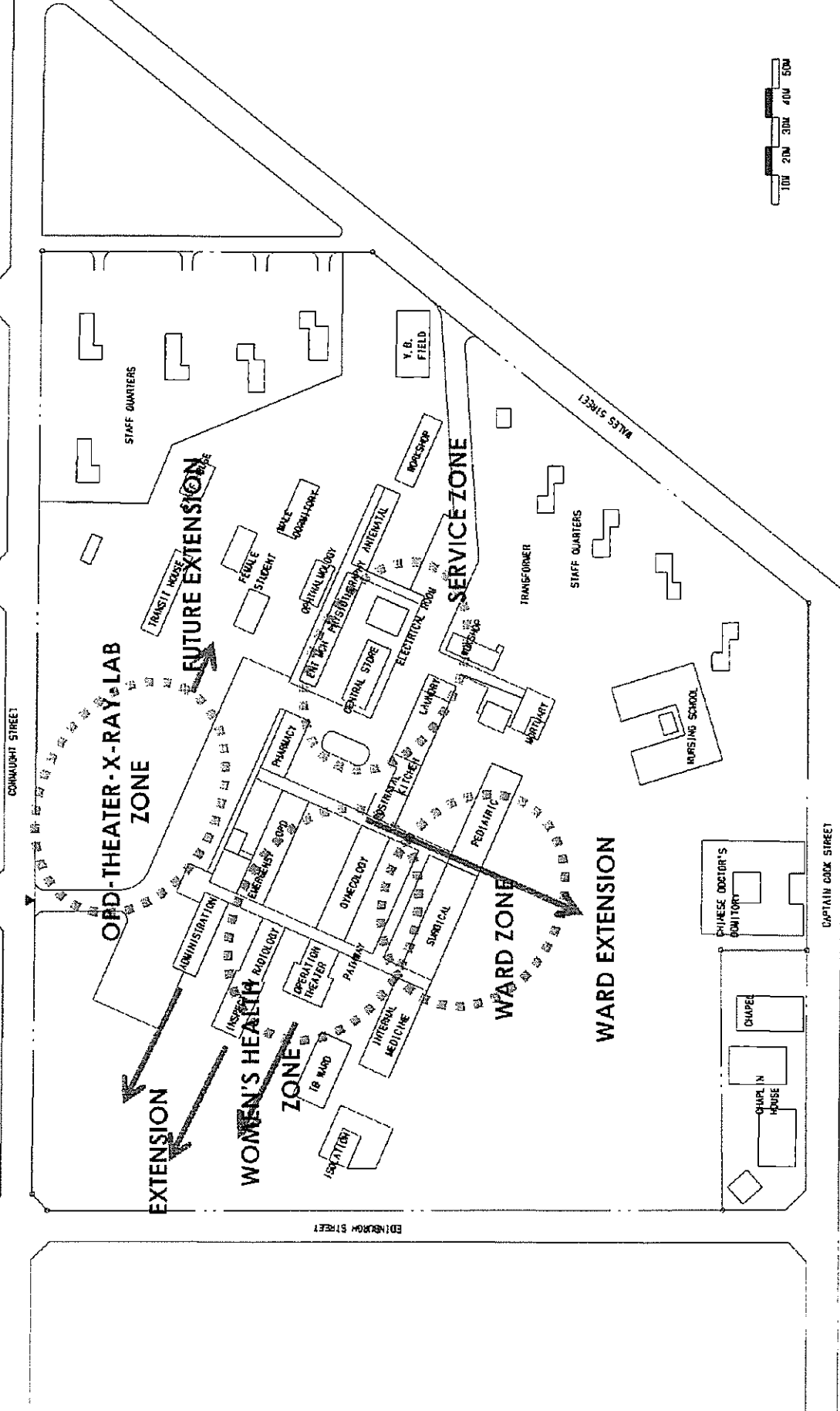
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# Master zoning plan



15



Annex-9

List of member of Task Force Team

List of member of the National Taskforce Committee

Position	Office
Director General of Health	Ministry of Health
Director of Finance	Ministry of Finance
Civil Engineer	Ministry of Infrastructure
Health Sector Analyst	Prime Minister's Office
Representative of Foreign Affairs Department	Ministry of Foreign Affairs

List of member of Ministry of Health Task Force

Position	Office
Director Southern Health Care	Ministry of Health
Planning incharge	Ministry of Health
Finance & Accounts Manager	Ministry of Health
General Services Manager	Vila Central Hospital
Medical Superintendent	Vila Central Hospital
Chief of Surgery	Vila Central Hospital
Sister incharge	Vila Central Hospital
Nurse incharge	Vila Central Hospital
Chief Medical Officer	Vila Central Hospital

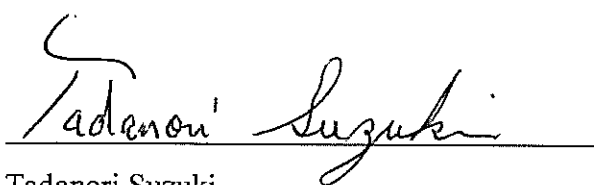
**MINUTES OF DISCUSSIONS  
ON THE PREPARATORY SURVEY  
ON THE PROJECT FOR THE REDEVELOPMENT OF VILA CENTRAL HOSPITAL  
IN THE REPUBLIC OF VANUATU  
(EXPLANATION OF DRAFT REPORT)**

In March 2011, Japan International Cooperation Agency (hereinafter referred to as "JICA") dispatched a Preparatory Survey team on the Project for the Redevelopment of Vila Central Hospital in Vanuatu (hereinafter referred to as "the Project") to the Vanuatu, and through discussion, field survey, and technical examination of the survey results in Japan, JICA prepared a draft report of the survey.

In order to explain and to consult Vanuatu on the components of the draft report, JICA sent to Vanuatu the Draft Report Explanation Team (hereinafter referred to as "the Team"), which is headed by Mr. Tadanori Suzuki, Resident Representative, JICA Vanuatu Office from 23 October to 30 October, 2011.

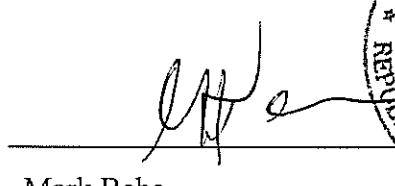
In the course of discussion, both parties confirmed the main items described on the attached sheets. The Team will proceed to further works and prepare the Preparatory Survey Report.

Port Vila, 27 October, 2011

  
Tadanori Suzuki

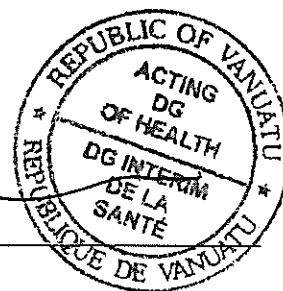
Leader, Draft Report Explanation Team

Resident Representative  
JICA Vanuatu Office  
Japan International Cooperation Agency

  
Mark Bebe

Director General of Health

Ministry of Health  
Republic of Vanuatu





## ATTACHMENT

### 1. Components of the Draft Report

The Government of Vanuatu agreed and accepted in principle the components of the draft report explained by the Team.

### 2. Japan's Grant Aid scheme

The Government of Vanuatu understands the Japan's Grant Aid Scheme and the necessary measures to be taken by the Government of Vanuatu as explained by the Team and described in Annex-6 of the Minutes of Discussions signed by both parties on 18<sup>th</sup> March, 2011.

### 3. Schedule of the Study

JICA will complete the final report in accordance with the confirmed items and send it to the Government of Vanuatu by March 2012.

### 4. Confidentiality of the Project Design

Both sides confirmed that all information related to the Project described in Annex-1 including detailed specifications of equipment and other technical information shall not be released to any outside parties before the signing of all the Contract(s) for the Project.

### 5. Other Relevant Issues

#### 5-1. Confidentiality of the Project Cost Estimation

The Team explained the cost estimation of the Project as described in Annex-2. Both sides agreed that the Project Cost Estimation should never be duplicated or released to any outside parties before signing of all the Contract(s) for the Project. The Government of Vanuatu understands that the Project Cost Estimation described in Annex-2 is not final and is subject to change.

#### 5-2. Undertakings by the Government of Vanuatu

The Government of Vanuatu promised to take every necessary measure to conduct the following undertakings according to the tentative schedule described in Annex-3. Expense of Vanuatu side Obligation Works is described in Annex-4.

#### 5-3. Operation and Maintenance Cost

The Vanuatu side agreed to secure and allocate necessary budget and staff for the proper and sustainable operation and maintenance of the facilities and the equipment to be provided under the Project as described in Annex-5.

#### 5-4. Disposal of Medical equipment to be replaced

The Vanuatu side agreed that disposal of medical equipment is dealt with in proper manner such as reuse in other provincial hospitals or recycle.

#### 5-5. Bus Stop Placement

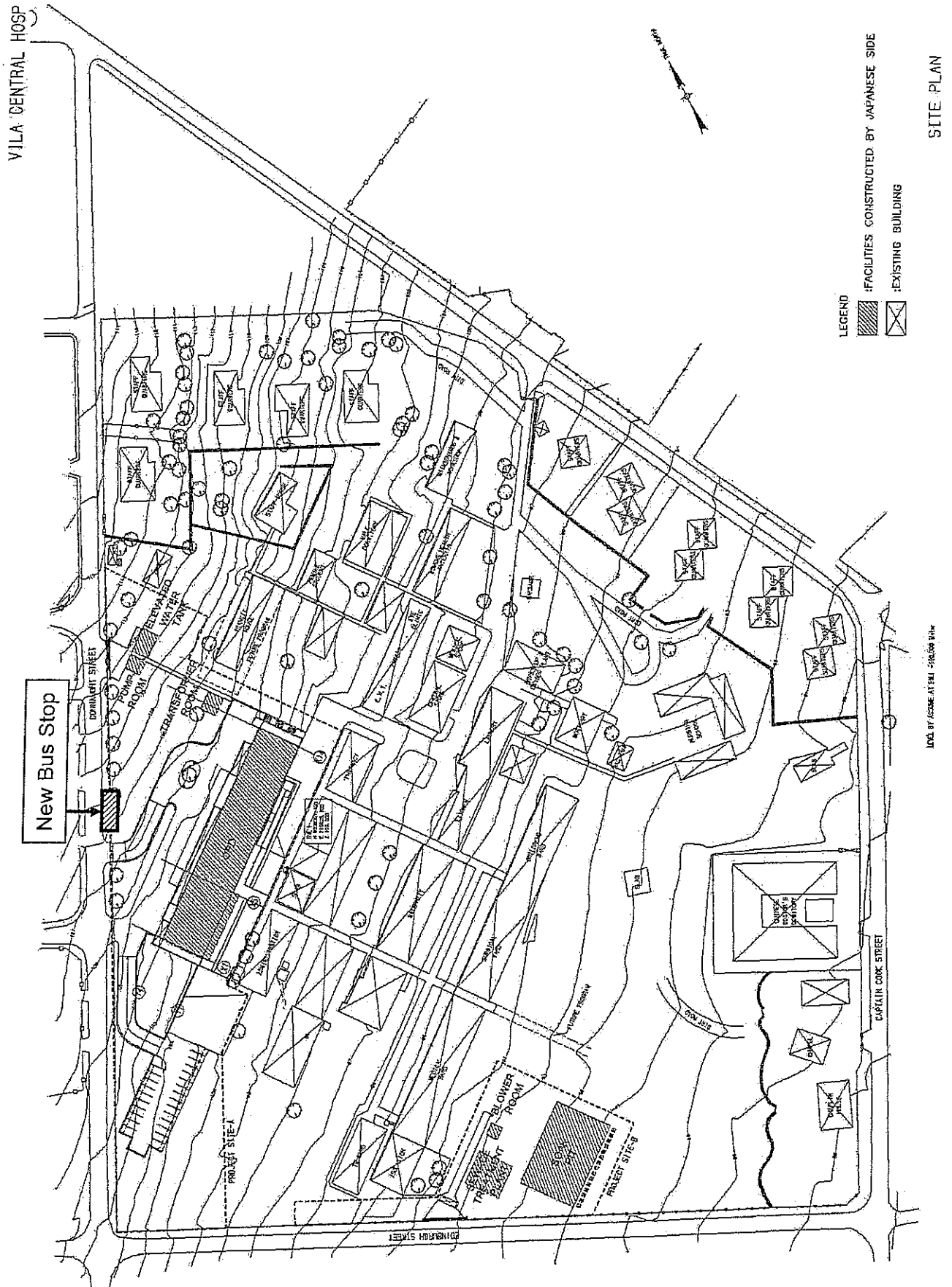
The Vanuatu side shall place the new bus stop along the main street described in site plan of Annex-1 to avoid traffic congestion inside the hospital premises by their expenses.

- Annex-1     Project Design
- Annex-2     Project Cost Estimation
- Annex-3     Tentative Schedule of the Project
- Annex-4     Expense of Vanuatu side Obligation Works
- Annex-5     Operation and Maintenance Cost
- Annex-6     Minutes of Discussions signed by both parties on 18<sup>th</sup> March, 2011

### Outline of the Project

Division	Major project breakdown	Facility
<p>Facility 3,157.56 m<sup>2</sup>  (Interior 2,623.50 m<sup>2</sup> + Exterior common 534.06 m<sup>2</sup>)</p>	<p>OPD Building Two storied building (new construction) 2,501.88 m<sup>2</sup> (Interior) Exterior common 534.06 m<sup>2</sup> RC structure, Some S structure</p>	<p>First floor:</p> <p>Operation Theater: Operation rooms (2), Recovery, Operation Hall, Central Sterilization and Supply, Equipment Room, Changing Room</p> <p>Radiology Department: X-ray(2), Control Room, Ultrasound Scanning, CRT room, Reception, Office</p> <p>Laboratory Department: Hematology/ Serology/ Blood bank/Biochemistry /Cytology/ Histology/ Microbiology/ STI/ Virology/TB/Wash Room/ Media Room/ Malaria/Blood Sampling/ Blood Donation/Tea room/ WC/ Reception/ Office/ Locker Room</p> <p>Second floor:</p> <p>Emergency Department: Waiting, Reception/Staff Room, Resuscitation Room, Treatment Room, Observation Room, Dirty Room, Sterilization Room</p> <p>Outpatients' Department(General Clinic): Waiting, General Consultation Room (7), Nurse Station, Treatment Room, Plaster Room, Medical Record, Reception, Pharmacy, Locker Room, Conference Room</p> <p>Specialized Equipment: Rainwater Utilization System</p>
	<p>Ancillary facilities One-story (new construction) Total 121.62 m<sup>2</sup> RC structure</p>	<p>Elevated Water Tank (44.55 m<sup>2</sup>) Pump Room (25.85 m<sup>2</sup>) Transformer Room (35.24 m<sup>2</sup>) Blower Room (15.98 m<sup>2</sup>) Sewage Treatment Plant (142.55 m<sup>2</sup> BF) Soak Pit)</p>
Medical Equipment	<p>The Equipment necessary the Project facilities; Emergency Department, Outpatients' Department, Operation theater, Radiology Department and Laboratory Department.</p>	

## Site Plan

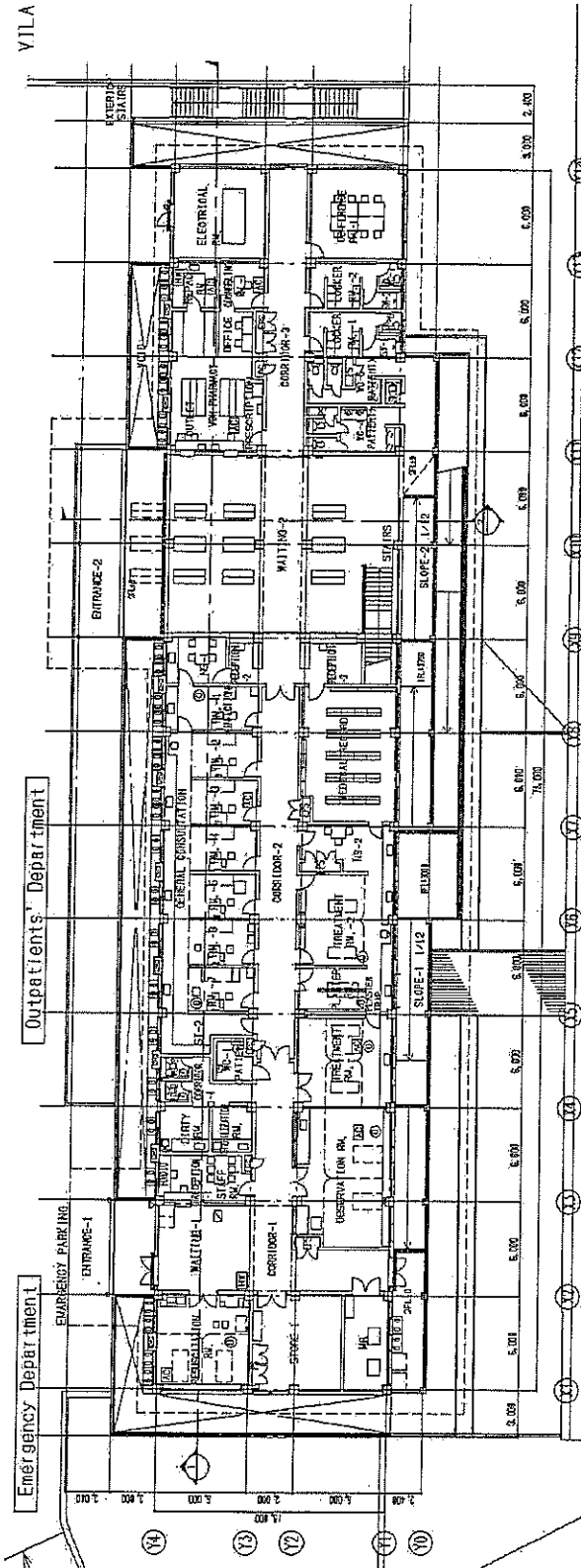


# Annex- 1

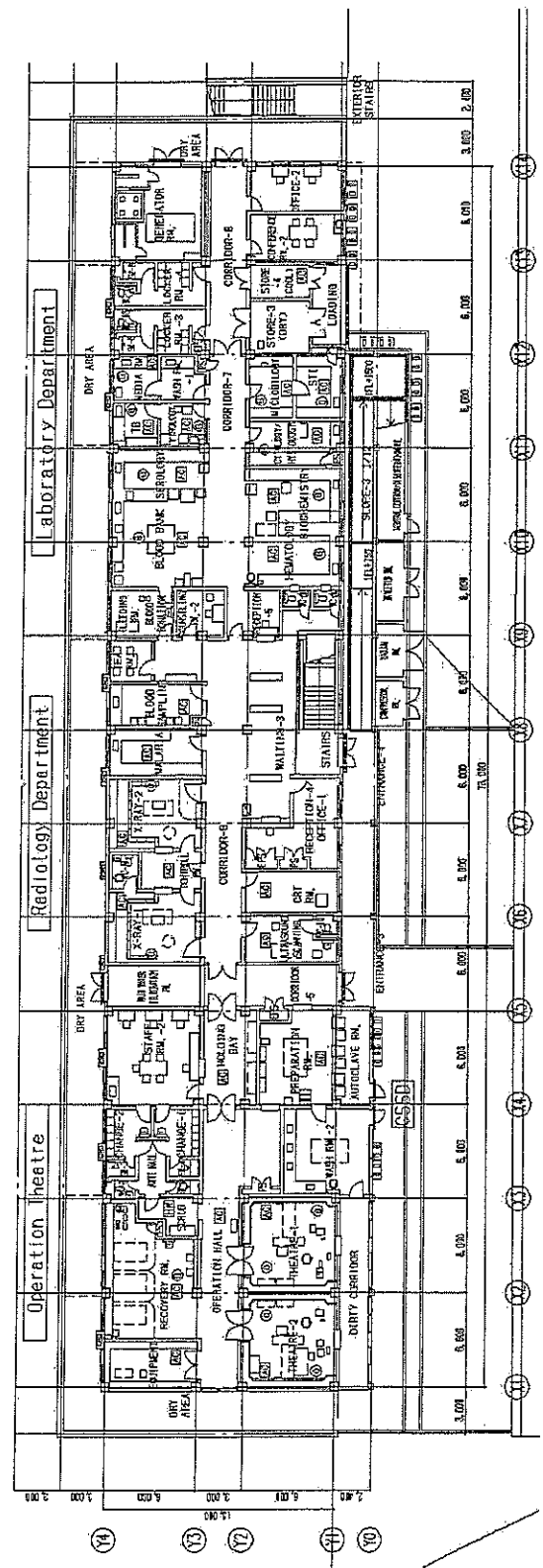
## Project Design

### 1F/2F Plans of OPD Building

VILA CENTRAL HOSPITAL



2F PLAN



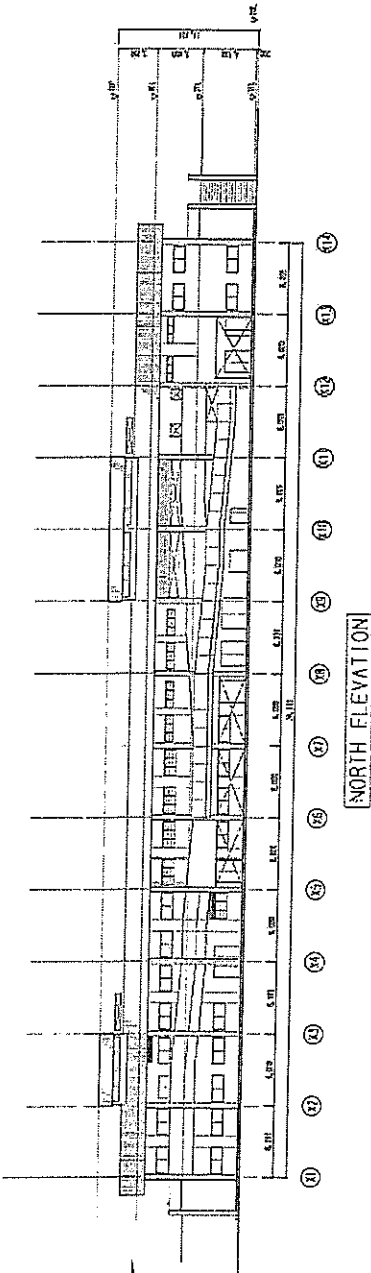
1F PLAN

LEGEND	
1	AIR CONDITIONING
2	HOT WATER
3	OXYGEN
4	GAS

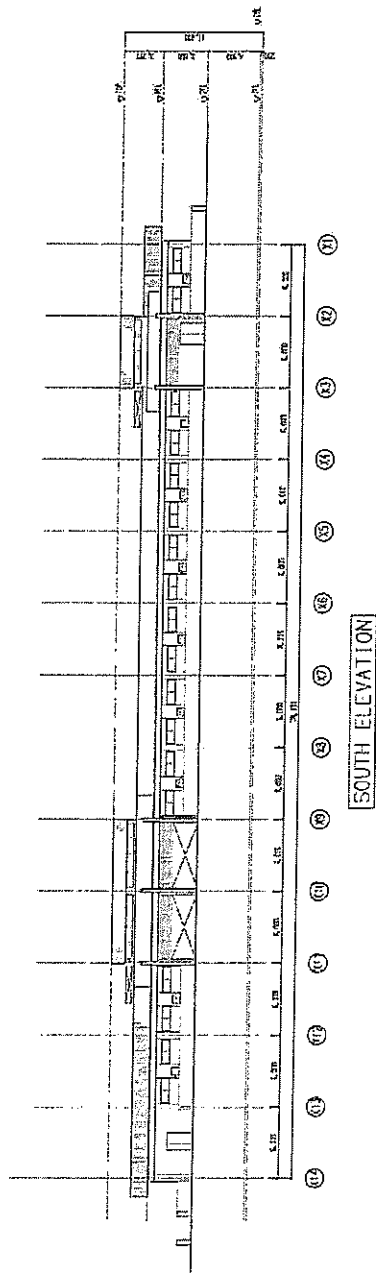
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Elevations/Sections of OPD Building

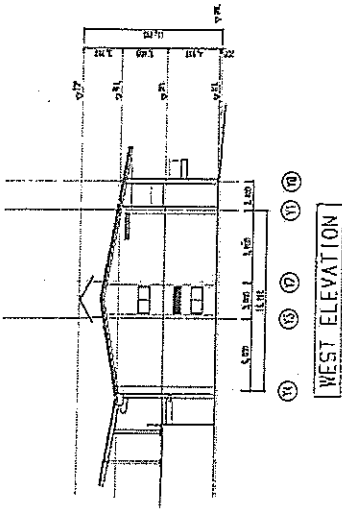
VILA CENTRAL HOSPITAL



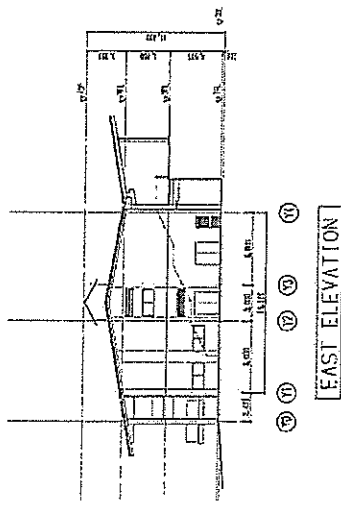
NORTH ELEVATION



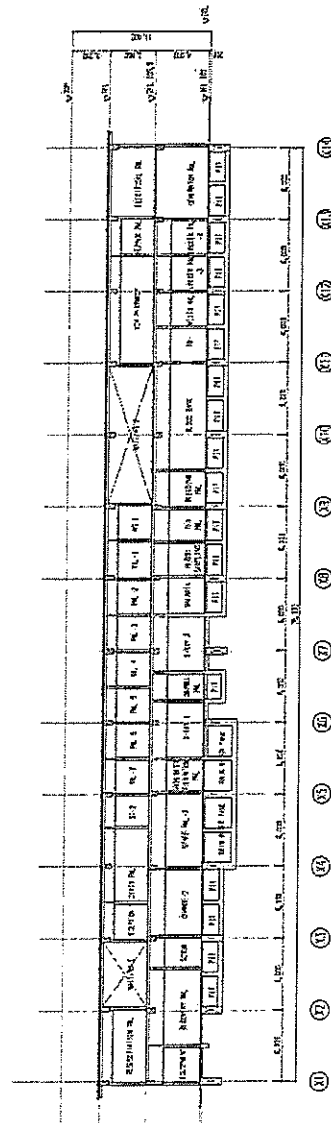
SOUTH ELEVATION



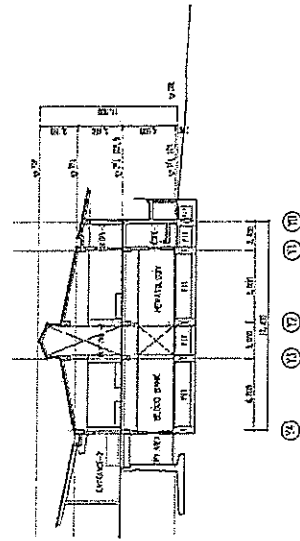
WEST ELEVATION



EAST ELEVATION



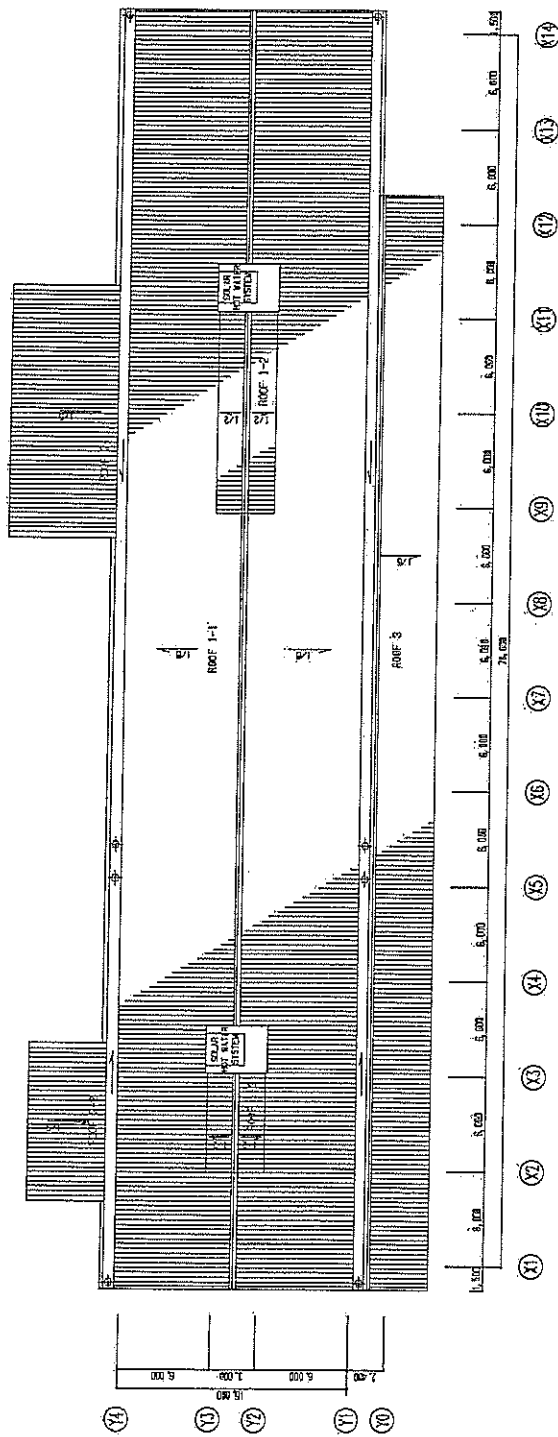
SECTION 1



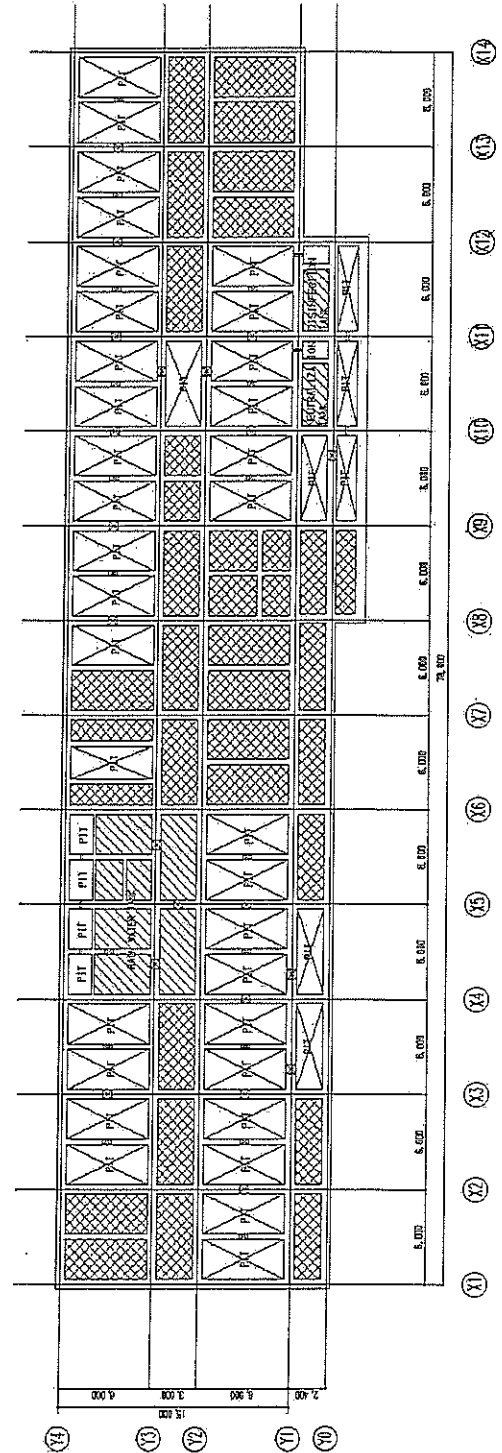
SECTION 2

ELEVATION/SECTION

Roof/Pit Plans of OPD Building



ROOF PLAN



ROOF/PIT PLAN

LEGEND	
	BACK FILLING
	PIT
	PIT - JADA (LESS OTHERWISE SPECIFIED)
	PIT (ARISTAR SPRING TANK)
	TANK

Annex- 1  
Project Design

List of Medical Equipment

*	Equipment	QTY	*	Equipment	QTY
(1) Radiology department			9	Defibrillator	1
1	General X-ray machine	2	10	Resuscitator (manual)	1
2	Mobile X-ray machine	1	11	ECG	1
3	C-arm X-ray machine	1	12	Patient monitor	1
4	Ultrasound machine	1	13	Treatment table	1
5	CR system	1	14	Bed	4
(2) Outpatients' department			(4) Clinical laboratory		
(2)-1 Gynecological department			(4)-1 Laboratory department		
1	Gynecological examination table	1	1	Centrifuge	1
2	Gynecological examination unit	1	2	Electric balance	1
3	Doppler fetal detector	1	(4)-2 Blood bank		
4	Colposcope	1	1	Blood centrifuge	1
5	Film illuminator	1	2	Blood bank refrigerator	1
6	Sterilizer	1	3	Water bath	1
7	Examination instrument set	1	(4)-3 Haematology		
(2)-2 Pediatric department			1	Blood cell counter	1
1	Examination table	1	(4)-4 Biochemistry		
2	Scale (Height and Weight)	1	1	Biochemical analyzer	1
3	Ultrasonic nebulizer	1	(4)-5 Microbiology		
4	Suction unit	1	1	Incubator	1
5	Film illuminator	1	2	Sterilizer	1
6	Diagnostic set	1	3	Microscope (with teaching lens)	1
7	Examination instrument set	1	4	Safety cabinet	1
(2)-3 Endoscopic department			(5) Pharmacy		
1	Gastrointestinal Fiberscope set	1	1	Medical refrigerator	1
2	Bronchofiberscope set	1	2	Water distiller	1
3	Colonofiberscope set	1	(6) Operation theatre		
4	Camera control set	1	(6)-1 Operating theatre		
5	Ultrasonic cleaner	1	1	Operating table	2
6	Endoscope cabinet	1	2	Infusion pump	2
(2)-4 Surgery department			3	Operating light	2
1	Examination lamp	1	4	Defibrillator	1
2	Examination instrument set	1	5	Film illuminator	2
3	Film illuminator	1	6	Patient monitor	2
(2)-5 Internal medicine department			7	Operating instrument set	2
1	Film illuminator	1	8	Laparoscope set	1
2	Diagnostic set	1	9	Hand washing sink unit	1
3	Examination instrument set	1	10	Electrosurgical unit	2
(2)-6 Outpatient 3 rooms			11	Anaesthesia machine	2
1	Examination table	3	12	Blood bank refrigerator	1
2	Film illuminator	3	13	Infant warmer	1
3	Diagnostic set	3	(6)-2 Recovery room		
(3) Emergency department			1	Patient monitor	3
1	Film illuminator	1	2	Infusion pump	3
2	Diagnostic set	1	3	Defibrillator	1
3	Sterilizer	1	4	Gadget bed	3
4	Examination instrument set	1	(6)-3 CSSD		
5	Medical refrigerator	1	1	Autoclave	3
6	Stretcher	1	2	Carrying cart	3
7	Wheel chair	2	3	Sterilizer	1
8	Suction unit	1	4	Cabinet	3

22-4



Annex- 2

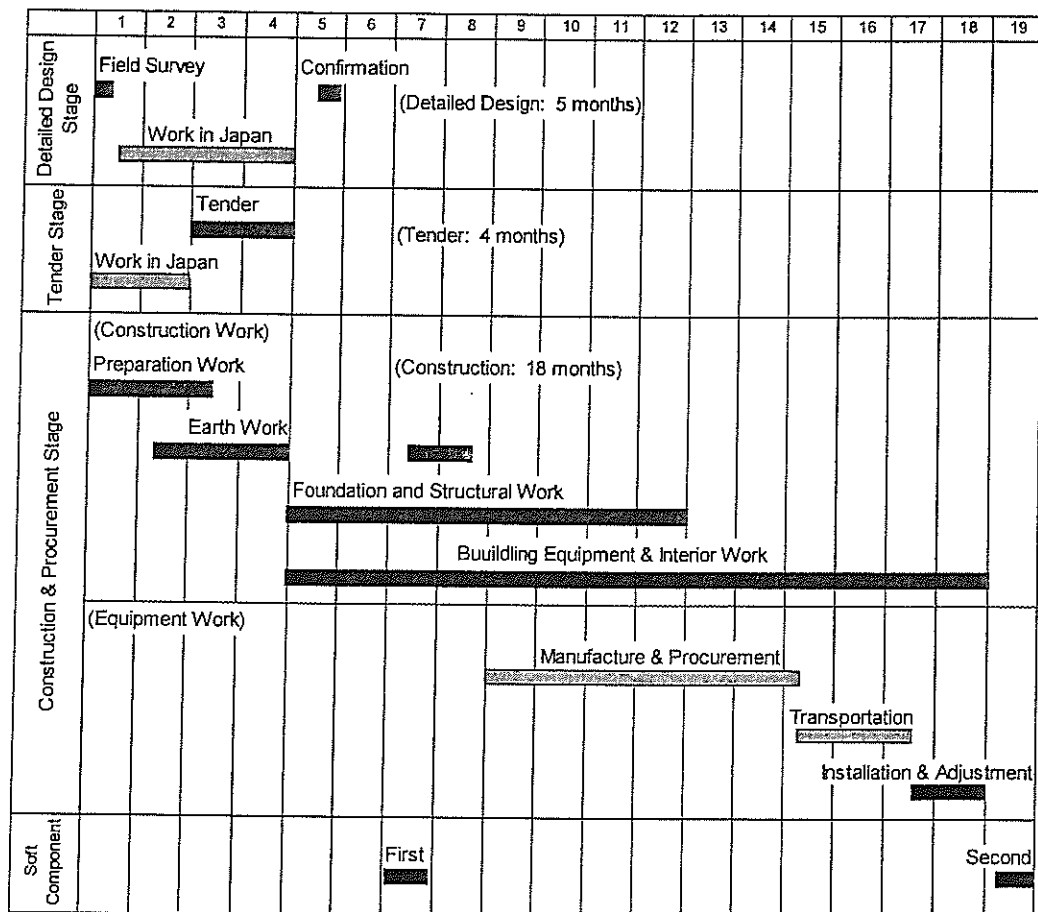
Project Cost Estimation

This Page is closed due to the confidentiality.

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# Annex- 3

## Tentative Schedule of the Project



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# Annex-4

## Expense of Vanuatu side Obligation Works

VANUATU Fiscal Year (January to December)				1 <sup>st</sup> yr	2 <sup>nd</sup> yr	3 <sup>rd</sup> yr	4 <sup>th</sup> yr
General Schedule of the Project					Construction		
Related works preceding the construction works (Figure1)		To be completed by	Expenses (VUV)	▽ Request of Budget (July)			
B-1	Demolition of the existing Dental Facility and rough grading	Before tender	6,130,000		—		
B-2	Demolition of the existing Store and rough grading	Before tender	1,550,000		—		
B-3	Demolition of the existing Stairs	Before tender	370,000		—		
B-4	Removal of the exiting trees	Before tender	240,000		—		
B-5	Construction of temporary road for existing hospital	Before tender	1,890,000		—		
B-6	Demolition of the existing wall fence for the existing hospital access and the project site	Before tender	100,000		—		
B-7	Construction of pathway with covered roof for the existing hospital access	Before tender	1,780,000		—		
B-8	Demolition of the existing canopy	Before tender	230,000		—		
B-9	Demolition of the existing supply water/drainage pipes	Before tender	650,000		—		
B-10	Temporary incoming telephone line wiring to the existing facilities and connection	Before tender	700,000		—		
B-11	Removal of the existing telephone line	Before tender	500,000		—		
B-12	Banking Arrangement for Detailed Design	At Consultant agreement	200,000		—		
	Banking Arrangement for Construction	At Construction Contract	1,300,000		—		
B-13	Arrangement of Tax exemption	At Construction Contract	—	To be determined by Vanuatu side			
Sub-total			15,640,000				

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VANUATU Fiscal Year (January to December)				1 <sup>st</sup> yr	2 <sup>nd</sup> yr	3 <sup>rd</sup> yr	4 <sup>th</sup> yr
Related works during facility construction (Figure2)					▽ Request of Budget (July)		
D-1	High voltage power supply to the new substation and a metering device for the site	5 months prior to completion of construction	1,500,000			—	
D-2	The city water distribution main to the site Existing water supply connection and renovation work at existing Hospital	5 months prior to completion of construction	300,000			—	
D-3	Dismantlement of the existing high voltage power supply to the existing substation, transformer and metering device	5 months prior to completion of construction	2,500,000			—	
D-4	Incoming telephone line and wiring route including hand holes and conduits up to the main distribution frame (MDF) for the site	5 months prior to completion of construction	1,400,000			—	
D-5	Transfer of IT line, connection work to the Project and testing	5 months prior to completion of construction	1,500,000			—	
D-6	Arrangement of Tax exemption	Throughout the year	—	To be determined by Vanuatu side			
Sub-total			7,200,000				
Related works after facility construction					▽ Request of Budget (July)		
A-1	Construction of roads outside the Project site area and gates & fence	At completion of construction	950,000				—
A-2	Landscaping and Planting	At completion of construction	50,000				—
A-3	Curtain and Blind	At completion of construction	825,000				—
A-4	General furniture	At completion of Construction	4,000,000				—
A-5	Removal and installation of existing Equipment	At completion of construction	50,000				—
A-6	Removal and installation of existing fixed furniture and General furniture	At completion of construction	25,000				—
A-7	Removal of temporary incoming telephone line to the existing hospital	At completion of construction	500,000				—
A-8	Arrangement of Tax exemption	Until tax exemption cleared	—	To be determined by Vanuatu side			
Sub-total			6,400,000				
Total			29,240,000				

7/2/2014



Annex- 5

Operation and Maintenance Cost

Estimation of expected increasing operational cost

Unit : VUV

Expected increasing accounts	Second year from the completion of this project
1) Electricity charge	0
2) Telephone charge	0
3) Fuel cost of generator	63,360
4) Water charge	0
5) LPG gas charge	0
6) Oxygen gas charge	0
7) Water treatment chemical costs	1,134,000
8) Neutralization and disinfectant costs	242,000
9) Building maintenance cost	630,000
10) Filter replacement cost	48,000
11) Periodical inspection on power receiving/transforming systems	180,000
12) Equipment maintenance expense	-120,000
Total 1)~12) (Increased amount of management expense)	2,177,360

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**MINUTES OF DISCUSSIONS**  
**ON PREPARATORY SURVEY (2) (BASIC DESIGN)**  
**ON THE PROJECT FOR THE REDEVELOPMENT OF VILA CENTRAL HOSPITAL**  
**IN THE REPUBLIC OF VANUATU**

In response to a request from the Republic of Vanuatu (hereinafter referred to as "Vanuatu"), the Government of Japan decided to conduct a Preparatory Survey on the Project for the Redevelopment of Vila Central Hospital (hereinafter referred to as "the Project") and entrusted the survey to the Japan International Cooperation Agency (hereinafter referred to as "JICA").

JICA sent to Vanuatu a Preparatory Survey Team (hereinafter referred to as "the Team"); which is headed by Dr. Mitsuhiro Ushio, Executive Technical Advisor to the Director General, Human Development Department, JICA, and is scheduled to stay in the country from 14th March to 19th March, 2011.

The Team held discussions with the officials concerned of the Government of Vanuatu and conducted a field survey.

In the course of discussions and field survey, both parties confirmed the main items described on the attached sheets. The Team will proceed to further works and prepare the Preparatory Survey Report.

Port Vila, 18 March, 2011



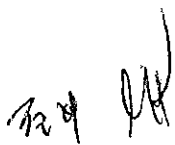
Dr. Mitsuhiro Ushio

Leader, Preparatory Survey Team  
Executive Technical Advisor to the Director General,  
Human Development Department  
Japan International Cooperation Agency



Mr. Mark Bebe

Director General of Health  
Ministry of Health  
Republic of Vanuatu



## ATTACHMENT

### 1. Objective of the Project

The objective of the Project is to strengthen the services of the Vila Central Hospital (hereinafter referred to as "VCH") by improving its facilities and equipment.

### 2. Project site

The site of the Project is VCH, located in Port Vila, Republic of Vanuatu. The location is shown in Annex-1

### 3. Responsible and Implementing Agency

3-1. The Responsible Agency is Ministry of Health. (Annex-2)

3-2. The Implementing Agency is VCH. (Annex-3)

### 4. Items requested by the Government of Vanuatu

After discussions with the Team, the items listed in Annex-4 and Annex-5 were finally requested by the Vanuatu side. JICA will assess the appropriateness of the request and will recommend to the Government of Japan for approval.

#### (1) Construction of the Buildings and Facilities

Requested items with priority are listed in Annex-4.

#### (2) Procurement of the Equipment

Requested items with priority, and criteria of the priority are listed in Annex-5.

### 5. Japan's Grant Aid Scheme

The Vanuatu side understands the Japan's Grant Aid Scheme and the necessary measures to be taken by the Government of Vanuatu as explained by the Team and described in Annex-6, 7 those were already confirmed on the Preparatory survey (1) which was taken on February 2010.

### 6. Schedule of the Proceedings

6-1. The consultants will proceed to further studies in the Vanuatu until 2<sup>nd</sup> April, 2011.

6-2. JICA will prepare the draft report in English and dispatch a mission to VCH in order to explain its contents in October, 2011.

6-3. In case that the contents of the report is accepted in principle by the Government of Vanuatu, JICA will complete the final report and send it to the Government of Vanuatu by the end of March, 2012.



## 7. Other relevant issues

7-1. The Vanuatu side agreed with master zoning plan described in Annex-8.

### 7-2. Scope of Japanese cooperation

The Japanese side explained the refurbishment and extension of the existing facilities is out of scope of Japanese cooperation. The Vanuatu side understood the scope of Japanese cooperation and agreed to undertake refurbishment and extension of the existing facilities.

7-3. The Vanuatu side agreed that the strengthening of the management capability especially in the following areas is essential in order to provide quality services continuously.

Human resources

Finance

Health Information System

Procurement and Supply

### 7-4. Service functions of VCH

The Vanuatu side agreed to strengthen the health facilities at primary and secondary level so that VCH will provide services focused further on secondary and tertiary services as the top referral hospital

### 7-5. Strengthening of training function

The Vanuatu side agreed that VCH strengthen its education and training function to doctors, nurses, other health personnel, and students.

### 7-6. Staff recruitment

The Vanuatu side agreed to recruit appropriate number of qualified staff to operate and maintain the function of VCH properly and effectively.

### 7-7. Budget allocation

The Vanuatu side agreed to allocate budget enough to operate and maintain the facilities and equipment properly and effectively.

7-8. The Vanuatu side will take necessary measures to ensure duty tax exemption and smooth custom clearance of the Project at the port of disembarkation.

7-9. The Vanuatu side agreed to exempt for the VAT component of the Project.

7-10. The Vanuatu side agreed to maintain the Task Force Team listed in Annex-9 through all stages of the Project for smooth implementation.

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7-11. Technical assistance (Soft component)

The Vanuatu side requested the Japanese side to implement technical assistance (soft component) for hospital operation & management and maintenance for medical equipment and facilities as a part of the project.

7-12. The Vanuatu side agreed to conduct demolition and relocation of the existing dental facility within the project site described in Annex-1 before the commencement of the construction of new facilities.

7-13. Improvement of infrastructures

The Vanuatu side agreed to complete necessary improvement of infrastructures before the commencement of the construction work of the Project.

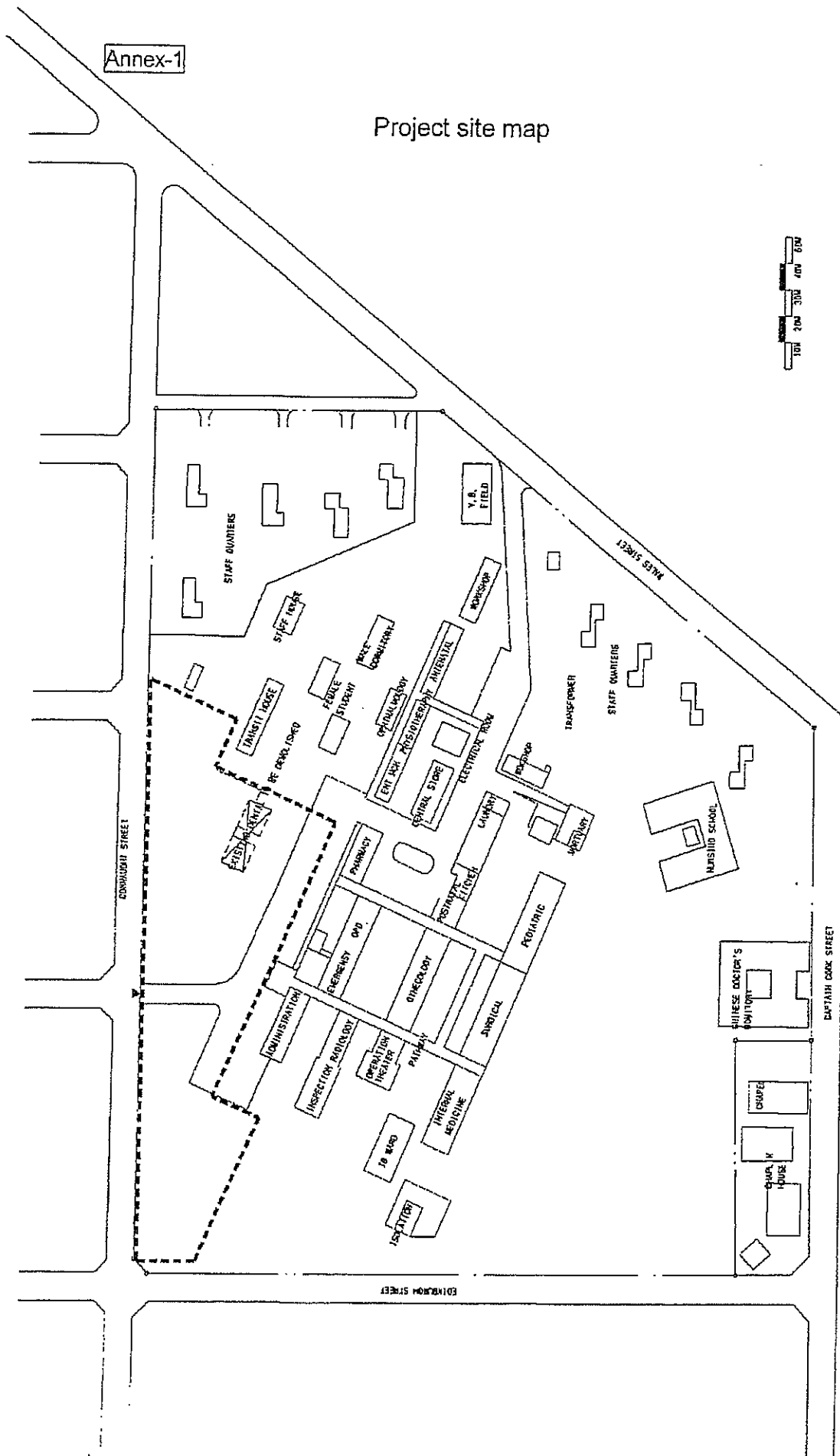
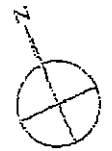
7-14. Maintenance organization and Staff of the Project

The Vanuatu side agreed to deploy sufficient number of skilled staff for management and operation/maintenance services (electrical, mechanical, and equipment)

Taking account of the above issues, contents of the Project will be decided through the forthcoming survey and analysis in Japan.

- Annex-1 Project site map
- Annex-2 The proposed Organization Chart of Ministry of Health  
(Ministry of Health Top Level Structure & Provincial Structure)
- Annex-3 The proposed Organization Chart of VCH
- Annex-4 List of the facilities and their priority requested by the Vanuatu
- Annex-5 List of the equipment and their priority requested by the Vanuatu
- Annex-6 Japan's Grant Aid scheme
- Annex-7 Major Undertakings to be taken by Each Government
- Annex-8 Master zoning plan
- Annex-9 List of member of Task Force Team

### Project site map



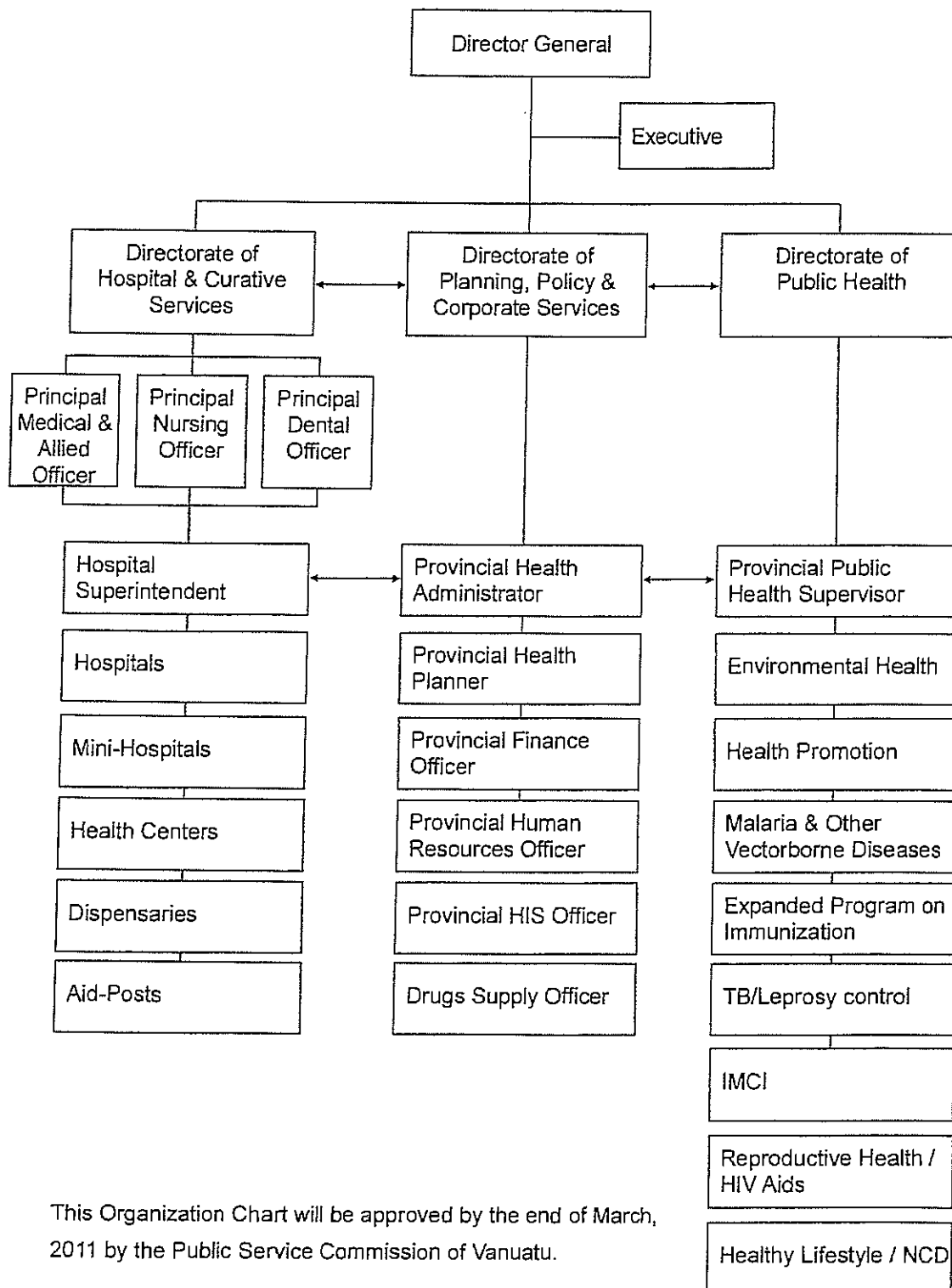
PROJECT SIZE

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Annex-2

# The proposed Organization Chart of Ministry of Health

## Ministry of Health Top Level Structure & Provincial Structure

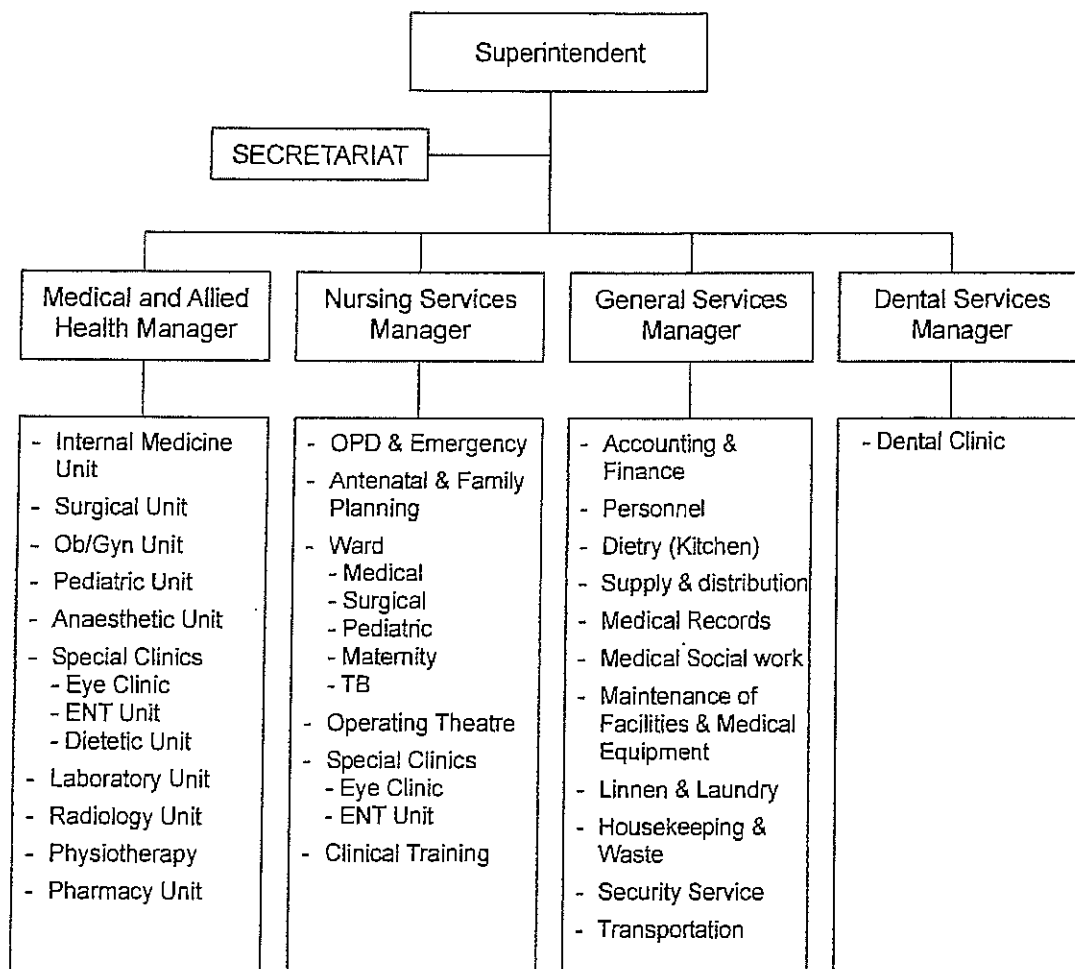


This Organization Chart will be approved by the end of March, 2011 by the Public Service Commission of Vanuatu.

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Annex-3

The proposed Organization Chart of VCH



This Organization Chart of VCH will be approved by the end of March, 2011 by the Public Service Commission of Vanuatu.

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# Annex-4

List of the facilities and their priority requested by the Vanuatu

Facilities		Priority
Emergency Department		A
Outpatients' Department	General Clinic	B
	ENT	B
	Eye Clinic	B—
	NCD (Non-Communicable Disease)	B
	Dental	B
	Physiotherapy	B
Operation Theater	Theater	B
	CSSD	B
Laboratory Department (including blood bank and specimen storage)		B—
Radiology Department		B—
Administration Department		C
Paging System		A

A : High Priority

B : Middle Priority

B—: Middle Priority not prior to B

C : Low Priority

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# Annex-5

List of the equipment and their priority requested by the Vanuatu

No.	Description	Priority	No.	Description	Priority
<b>X-ray Department</b>			<b>(Clinical Laboratory)</b>		
1	Diagnostic X-ray	A	1	Centrifuge	B
2	Mobile X-ray	A	2	Binocular microscope	B
3	Automatic Film Processor and X-ray Accessory	A	3	Leukocyte counter	B
4	C-arm X-ray unit	B	4	Medical Refrigerator	B
5	Ultrasound machine	B	5	Electric Balance	B
6	CR system	B	6	Coulter counter	B
<b>Out-Patient</b>			<b>(Blood bank)</b>		
<b>(Obstetric and Gynaecology)</b>			1	Blood centrifuge	B
1	Gynaecological examination table	A	2	Blood bank refrigerator	B
2	Gynaecological examination unit	A	3	Blood product sealer	C
3	Doppler foetal detector	A	4	Water bath	B
4	Colposcope	A	5	Scale weight for bags	B
5	Film Illuminator	A	<b>(Haematology)</b>		
6	Boiling sterilizer	A	1	Haematology analyzer	B
7	Medical refrigerator	A	2	Blood h/m staining machine	B
8	Diagnostic set	B	<b>(Biochemistry)</b>		
9	Examining Instruments set	A	1	Thyroid function analyzer	B
<b>(Paediatrics)</b>			2	Troponin analyzer	B
1	Infant examination/Dressing Table	A	3	Haemoglobin electro analysis machine	B
2	Infant scale (Height and Weight)	A	4	Centrifuge	B
3	Ultrasonic Nebulizers	A	<b>(Microbiology)</b>		
4	Suction unit	A	1	Incubator	B
5	Suction unit	A	2	Autoclave	B
6	1-oh Electro cardiograph	A	3	Teaching microscope	B
7	Film illuminator	A	4	O2,CO2 Gas bag container	B
8	Boiling sterilizer	B	<b>(Physiological Lab)</b>		
9	Diagnostic set	A	1	ECG with Analyzer	B
10	Examination Instrument set	B	2	Tread mill	B
<b>(Endoscopy)</b>			<b>(Pharmacy)</b>		
1	Gastrointestinal Fiberscope with light source	A	1	Medical refrigerator	B
2	Bronchofiberscope with light source	B	2	Top-pan Balance	B
3	Colonofiberscope with light source	B	3	Water Distiller	A
4	Camera Control Unit	B	<b>(Ophthalmology)</b>		
5	Endoscope Table	B	1	Laser machine	B
6	Disinfection Trolley	B	2	A scan machine	B
7	Ultrasonic Cleaner	B	3	Vitrector machine	B
8	Endoscope Cabinet	B	<b>(Dental clinic)</b>		
<b>(Surgery)</b>			1	Dental treatment unit	A
1	Examination lamp	A	2	Dental instruments set	B
2	Examining Instruments set	B	<b>(Physiotherapy)</b>		
3	Film illuminator	A	1	Stationery Bicycle exercise machine	B
4	Electro Cautery	A	2	Ultrasound therapy machine	B
5	Manual Dermatome	A	3	Transcutaneous nerve stimulator	B
6	Gypsum Cutter	C	4	Paraffin wax bath	B
7	Gypsum Utensil Set	C	5	Massage couch/bed (with head hole)	B
<b>(Internal Medicine)</b>			6	Massage machine	B
1	Film illuminator	A	7	Electric oscillating saw	B
2	Boiling sterilizer	B	<b>Obstetric Department</b>		
3	Diagnostic set	A	<b>(Delivery)</b>		
4	Examination Instrument set	B	1	Delivery table	B
<b>(Emergency Department)</b>			2	Vacuum Extractor	B
3	Film illuminator	A	3	Automatic Resuscitator	B
6	Diagnostic set	A	4	Infant Warmer	A
11	Boiling sterilizer	B	5	Cardiotocograph	B
12	Diagnostic set	A	6	Doppler foetal detector	B
13	Examination Instrument set	B	7	Infusion pump	A
14	Medicine Refrigerator	B	8	Operating Light	A
15	Stretcher	B	9	Delivery Instrument Set	A
16	Wheel Chair	B	10	Oxygen analyzer	B
17	Suction Apparatus	A	11	Pulse Oximeter	B
18	Defibrillator	A	<b>(Labour Room)</b>		
19	Manual resuscitator (Ambu-bag)	A	1	Labour Bed	B
20	ECG	A	2	Foetal Monitor	B
21	Patient monitor	A			

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No.	Description	Priority
(New born babies)		
1	Baby bassinet with Mobile stand	B
2	Infant scale (Height and Weight)	A
3	Ultrasonic Nebulizers	A
4	Suction Unit	A
5	Nursing bottle sterilizer	A
6	Infusion pump	A
7	Film illuminator	A
8	Phototherapy unit	A
9	Infant incubator	A
10	Intensive care incubator	B
11	Neonatal monitor	A
12	Oxygen analyzer	A
13	Infant resuscitator	A
14	Syringe pump set	B
15	Infant Ventilator	C
16	Bilirubin analyzer	A
17	Ultrasonic Nebulizers	A
18	Infant Warmer	A

A Essential  
B Necessary  
C Least priority

No.	Description	Priority
Operation Theatre		
1	Operating Table	A
2	Suction Unit	A
3	Infusion pump	B
4	Operating Light	A
5	Automatic Resuscitator	B
6	Defibrillator	A
7	Film illuminator	A
8	Patient Monitor	A
9	Operating Instrument set	A
10	Gynaecological Laparoscopy set	B
11	Hand washing Sink Unit	A
12	Pulse Oximeter	A
13	Electro Cautery	A
14	Anaesthesia Apparatus	A
15	Blood Bank refrigerator	A
16	Patient heater	A
17	Infant Warmer	A
18	Solar power supply system	A
I.C.U. (Recovery Room)		
1	Bedside monitor	B
2	Automatic IV. Infusion Pump	B
3	Defibrillator	A
4	Pulse Oximeter	A
5	Oxygen Hood	B
6	Gadget bed	A
7	Suction machine	B
8	Oxygen analyzer	B
C.S.S.D.		
1	Steam Sterilizer	A
2	Carrying Cart	A
Others		
1	Hemoglobinometer machine	B
2	Ultra-Sound scan machine in Maternity complex	B
3	Oxygen generators	A
4	Water softener for autoclaves	A
5	Automatic voltage stabilizers for precision items	A

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## Annex-6

### Japan's Grant Aid

The Government of Japan (hereinafter referred to as "the GOJ") is implementing the organizational reforms to improve the quality of ODA operations, and as a part of this realignment, a new JICA law was entered into effect on October 1, 2008. Based on this law and the decision of the GOJ, JICA has become the executing agency of the Grant Aid for General Projects, for Fisheries and for Cultural Cooperation, etc.

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

#### 1. Grant Aid Procedures

The Japanese Grant Aid is supplied through following procedures:

- Preparatory Survey
  - The Survey conducted by JICA
- Appraisal & Approval
  - Appraisal by the GOJ and JICA, and Approval by the Japanese Cabinet
- Authority for Determining Implementation
  - The Notes exchanged between the GOJ and a recipient country
- Grant Agreement (hereinafter referred to as "the G/A")
  - Agreement concluded between JICA and a recipient country
- Implementation
  - Implementation of the Project on the basis of the G/A

#### 2. Preparatory Survey

##### (1) Contents of the Survey

The aim of the Preparatory Survey is to provide a basic document necessary for the appraisal of the Project made by the GOJ and JICA. The contents of the Survey are as follows: - Confirmation of the background, objectives, and benefits of the Project and also institutional capacity of relevant agencies of the recipient country necessary for the implementation of the Project.

- Evaluation of the appropriateness of the Project to be implemented under the Grant Aid Scheme from a technical, financial, social and economic point of view.
- Confirmation of items agreed between both parties concerning the basic concept of the Project.
- Preparation of an outline design of the Project.
- Estimation of costs of the Project.

The contents of the original request by the recipient country are not necessarily approved in their initial form as the contents of the Grant Aid project. The Outline Design of the Project is

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confirmed based on the guidelines of the Japan's Grant Aid scheme.

JICA requests the Government of the recipient country to take whatever measures necessary to achieve 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 of the recipient country which actually implements the Project. Therefore, the implementation of the Project is confirmed by all relevant organizations of the recipient country based on the Minutes of Discussions.

#### (2) Selection of Consultants

For smooth implementation of the Survey, JICA employs (a) registered consulting firm(s). JICA selects (a) firm(s) based on proposals submitted by interested firms.

#### (3) Result of the Survey

JICA reviews the Report on the results of the Survey and recommends the GOJ to appraise the implementation of the Project after confirming the appropriateness of the Project.

### 3. Japan's Grant Aid Scheme

#### (1) The E/N and the G/A

After the Project is approved by the Cabinet of Japan, the Exchange of Notes (hereinafter referred to as "the E/N") will be signed between the GOJ and the Government of the recipient country to make a pledge for assistance, which is followed by the conclusion of the G/A between JICA and the Government of the recipient country to define the necessary articles to implement the Project, such as payment conditions, responsibilities of the Government of the recipient country, and procurement conditions.

#### (2) Selection of Consultants

In order to maintain technical consistency, the consulting firm(s) which conducted the Survey will be recommended by JICA to the recipient country to continue to work on the Project's implementation after the E/N and G/A.

#### (3) Eligible source country

Under the Japanese Grant Aid, in principle, Japanese products and services including transport or those of the recipient country are to be purchased. When JICA and the Government of the recipient country or its designated authority 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, constructing and procurement firms, and the prime consulting firm are limited to "Japanese nationals".

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(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 JICA. This "Verification" is deemed necessary to fulfill accountability to Japanese taxpayers.

(5) Major undertakings to be taken by the Government of the Recipient Country

In the implementation of the Grant Aid Project, the recipient country is required to undertake such necessary measures as Annex.

(6) "Proper Use"

The Government of the recipient country is required to maintain and use properly and effectively the facilities constructed and the equipment purchased under the Grant Aid, to assign staff necessary for this operation and maintenance and to bear all the expenses other than those covered by the Grant Aid.

(7) "Export and Re-export"

The products purchased under the Grant Aid should not be exported or re-exported from the recipient country.

(8) Banking Arrangements (B/A)

a) The Government of the recipient country or its designated authority should open an account under the name of the Government of the recipient country in a bank in Japan (hereinafter referred to as "the Bank"). JICA 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 JICA under an Authorization to Pay (A/P) issued by the Government of the 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 commissions paid to the Bank.

(10) Social and Environmental Considerations

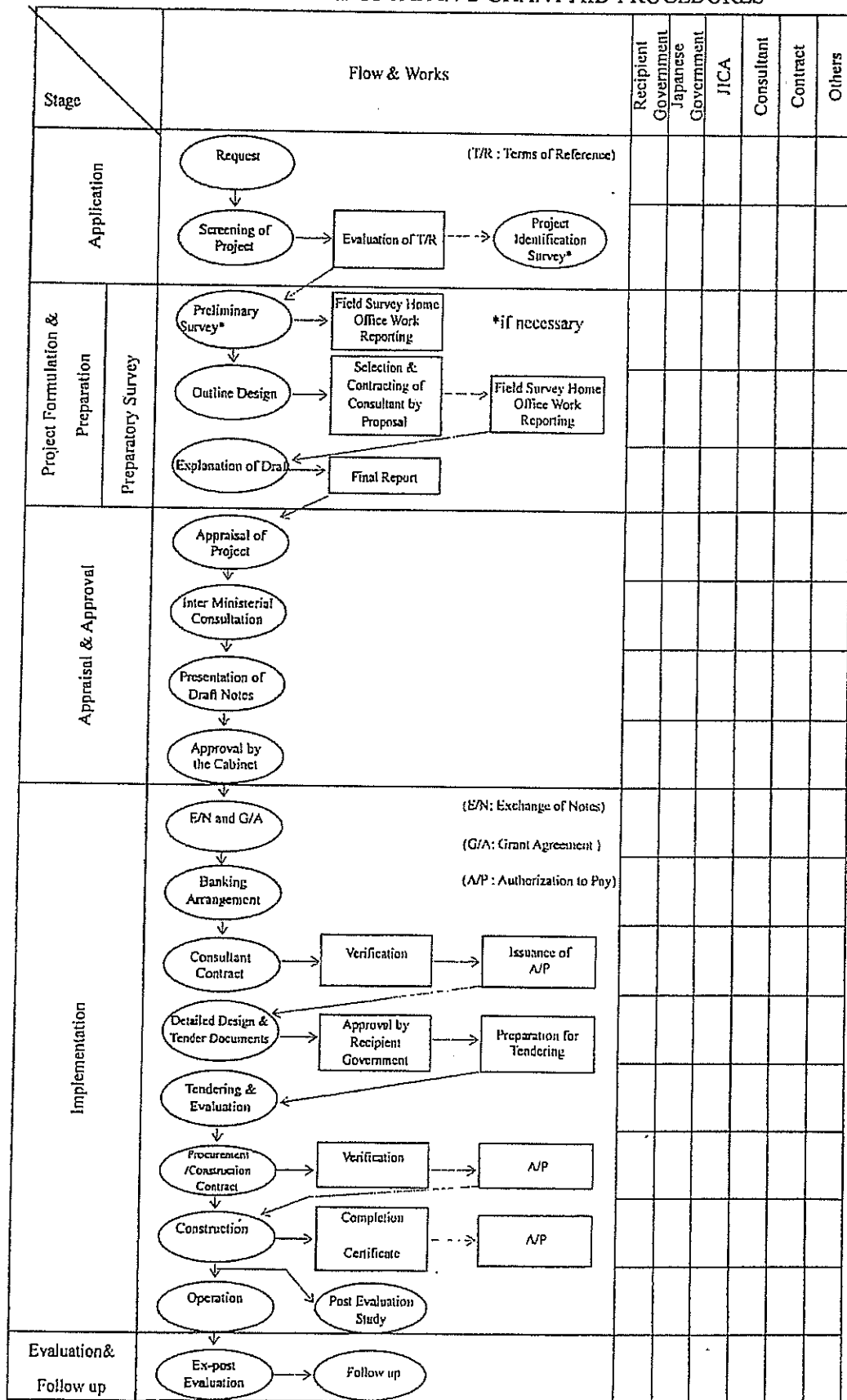
A recipient country must carefully consider social and environmental impacts by the Project and must comply with the environmental regulations of the recipient country and JICA socio-environmental guidelines.

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## 2-2 Grant Aid Procedures

### FLOW CHART OF JAPAN'S GRANT AID PROCEDURES



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# Annex-7

## Major Undertakings to be taken by Each Government

No.	Items	To be covered by Grant Aid	To be covered by Recipient Side
1	to secure [a lot] / [lots] of land necessary for the implementation of the Project and to clear the [site] / [sites];		●
2	To construct the following facilities		
	1) The building	●	
	2) The gates and fences in and around the site		●
	3) The parking lot	●	
	4) The road within the site	●	
	5) The road outside the site		●
3	To provide facilities for distribution of electricity, water supply and drainage and other incidental facilities necessary for the implementation of the Project outside the [site] / [sites]		
	1) Electricity		
	a. The distributing power line to the site		●
	b. The drop wiring and internal wiring within the site	●	
	c. The main circuit breaker and transformer	●	
	2) Water Supply		
	a. The city water distribution main to the site		●
	b. The supply system within the site (receiving and elevated tanks)	●	
	3) Drainage		
	a. The city drainage main (for storm sewer and others to the site)		●
	b. The drainage system (for toilet sewer, common waste, storm drainage and others) within the site	●	
	4) Gas Supply		
	a. The city gas main to the site		●
	b. The gas supply system within the site	●	
	5) Telephone System		
	a. The telephone trunk line to the main distribution frame/panel (MDF) of the building		●
	b. The MDF and the extension after the frame/panel	●	
	6) Furniture and Equipment		
	a. General furniture		●
	b. Project equipment	●	
4	To ensure prompt unloading and customs clearance of the products at ports of disembarkation in the recipient country and to assist internal transportation of the products		
	1) Marine (Air) transportation of the Products from Japan to the recipient country	●	
	2) Tax exemption and customs clearance of the Products at the port of disembarkation		●
	3) Internal transportation from the port of disembarkation to the project site	(●)	(●)
5	To ensure that customs duties, internal taxes and other fiscal levies which may be imposed in the recipient country with respect to the purchase of the products and the services [be exempted] or [be borne by the Authority without using the Grant]		●
6	To accord Japanese nationals whose services may be required in connection with the supply of the products and the services such facilities as may be necessary for their entry into the recipient country and stay therein for the performance of their work		●
7	To ensure that [the Facilities and the products] / [the Facilities] / [the products] be maintained and used properly and effectively for the implementation of the Project		●
8	To bear all the expenses, other than those covered by the Grant, necessary for the implementation of the Project		●
9	To bear the following commissions paid to the Japanese bank for banking services based upon the B/A		
	1) Advising commission of A/P		●
	2) Payment commission		●
10	To give due environmental and social consideration in the implementation of the Project.		●

(B/A : Banking Arrangement, A/P : Authorization to pay)

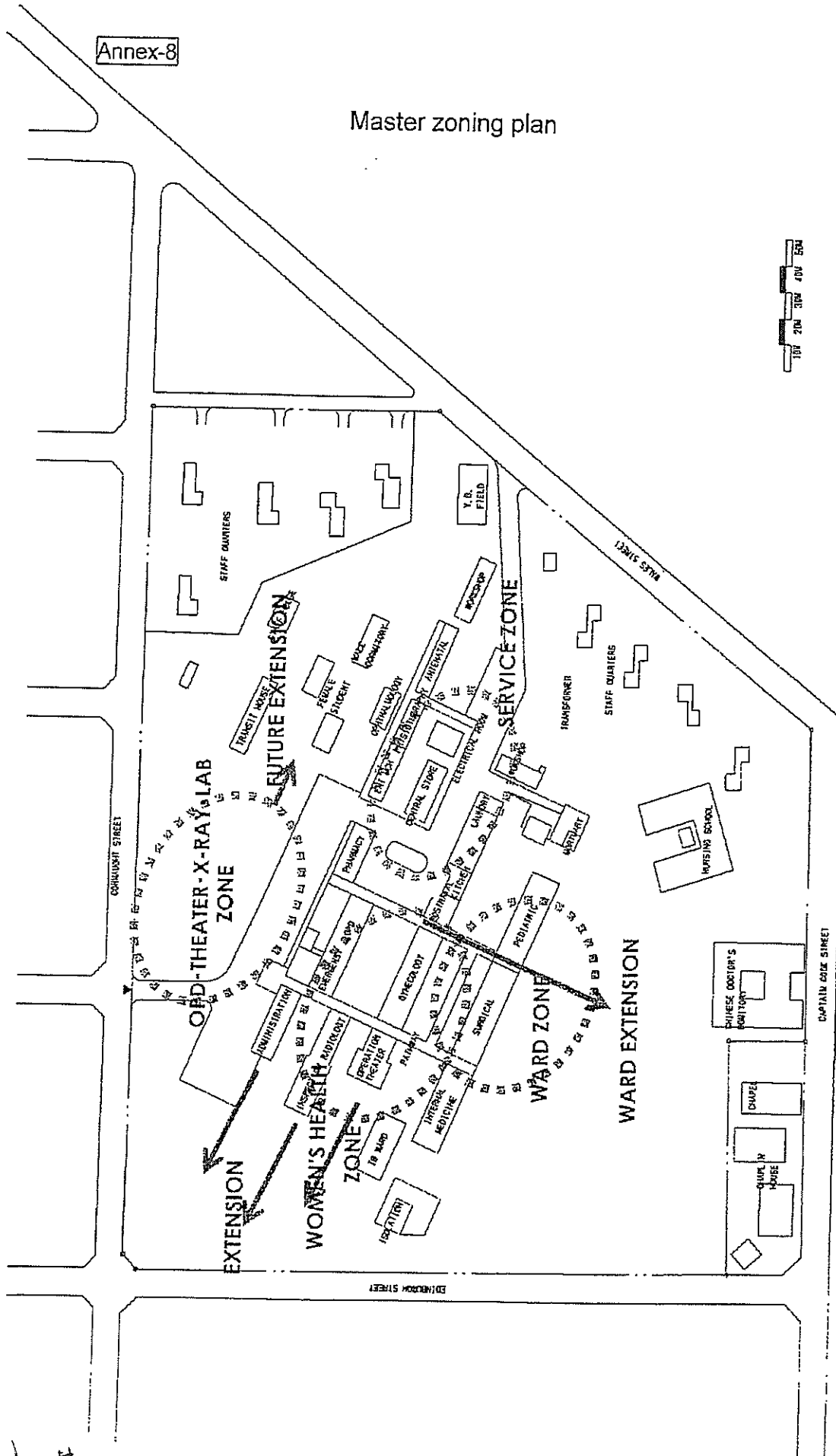
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Annex-8

# Master zoning plan



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**Annex-9**

**List of member of Task Force Team**




**List of member of the National Taskforce Committee**

Position	Office
Director General of Health	Ministry of Health
Director of Finance	Ministry of Finance
Civil Engineer	Ministry of Infrastructure
Health Sector Analyst	Prime Minister's Office
Representative of Foreign Affairs Department	Ministry of Foreign Affairs

**List of member of Ministry of Health Task Force**

Position	Office
Director Southern Health Care	Ministry of Health
Planning incharge	Ministry of Health
Finance & Accounts Manager	Ministry of Health
General Services Manager	Vila Central Hospital
Medical Superintendent	Vila Central Hospital
Chief of Surgery	Vila Central Hospital
Sister incharge	Vila Central Hospital
Nurse incharge	Vila Central Hospital
Chief Medical Officer	Vila Central Hospital

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## **5. Soft Component (Technical Assistance) Plan**

# **The Project for the Redevelopment of Vila Central Hospital**

## **Plan of Technical Assistance (Soft Component)**

### **INDEX**

- 1. Background of Soft Component**
- 2. Objectives of Soft Component**
- 3. Accomplishment of Soft Component**
- 4. Method of Confirming the Degrees of Achievement**
- 5. Activities of Soft Component(Input Plan)**
- 6. Method of Procuring the Implement Resources  
of Soft Component**
- 7. Implementation Schedule of Soft Component**
- 8. Deliverables of Soft Component**
- 9. Outline Expenses of Soft Component**
- 10. Responsibility of Recipient Country**

**November 2011**

**THE CONSORTIUM OF  
NIHON SEKKEI, INC  
NIHON SEKKEI INTERNATIONAL, INC  
EARL CONSULTANTS, INC**



## 1. Background of Soft Component

This project is to implement the construction of new facilities (Outpatients' (General Clinic), Emergency, Operation Theatre, Radiology and Laboratory Departments) and procurements of its essential medical equipment in order to develop the medical services for Vila Central Hospital (hereafter "VCH"), by concentrating the Outpatients' (General Clinic) and Emergency to the diagnostic and treatment functions of VCH.

- (1) The maintenance members of VCH are very limited in number and cannot deal adequately with facilities and equipment in a good order due to insufficient training opportunities.

Although the function and the usual operation method were understood by the member about the equipment which were supplied in the past project (Japanese Grant Aid project in 1994), the actual dealing with the defects were not completed and could not be coped with. Moreover, although the existing oxygen generator was installed in 2000 by AusAID assistance and the engineer who had received training of the maintenance was retired at the end of 2010, there is no adequate maintenance staff member for the oxygen generator and the serious failures have arisen since then. The operation of VCH has been managed by three managers of management services, medical services, and nursing services. However, it is hard to satisfy the demand for the medical services and one of the major issues is thought that VCH is not well controlled in the light of hospital operation management.

In the maintenance unit of VCH, the on-site training of medical equipment management was conducted by the biomedical engineering technician dispatched by AusAID from the end of 2009 to March, 2011, and maintenance management ability can be pulled up to a certain level to conduct the equipment labeling, inventory management, repair services and abandonment of condemned items of equipment. But for more sophisticated items, it is not easy to deal with them.

As of March, 2011, some improvements have been seen such as newly employment of an electrical technician who conducts the maintenance activities for the emergency generator and so on, but he still needs skills development for medical gas related facilities and so on, which is out of his expertise.

- (2) The constraint of the hospital budget hinders hiring new maintenance staff members. The number of the maintenance staff members, considering the current situation that there is one manager (carpenter), one electrical technician, one medical gas assistant, one plumber and one painter (5 members in total), is restricted, so it is not sufficient to perform the activity covering a variety of facilities and equipment. In addition, the budgetary shortage in VCH is very severe which is caused by budgetary shortage in the country itself. And it is not easy to employ new maintenance staff members.

Fortunately, the direct financial support to MOH by SWAPs started from this year, and revenue/expenditure balance of personnel and operating cost at VCH turned to become improved. Among these circumstances, in accordance with new hospital construction and equipment procurement of this project, it will be effective and reasonable to conduct training by this Soft Component in one month, a very short time period, focusing on daily maintenance and budgetary planning.

The proposed solution to deal with these issues is described as follows.

**【Facility and equipment maintenance】**

In order to prevent the serious failure, it is the most effective way to implement daily maintenance. However, it is considered to be the main factors which result in the failure that there is no mechanism of performing maintenance management (facility and equipment list, check list, check schedule and so on) and securing the necessary budget.

In this technical guidance, it is important to carry out the daily maintenance before and after using facility and equipment habitually in addition to master its method by both medical workers and maintenance staff at VCH. While the maintenance activity of VCH has been limited to the spare parts replacement and refilling of lubricant for oxygen generator and so on up to now, according to AusAID, the financial support will enable to appropriate more for the maintenance. Therefore, to secure the maintenance budget by way of enlightening the annual maintenance activity and business planning focusing on the maintenance unit of VCH shall be weighed much. And a financial support from the project based to SWAPs can contribute to improve the revenue/expenditure balance at VCH. The support from SWAPs is expressed to continue for a while. On the other hand, the ability of planning the business plan is not sufficient and the technical support from Japanese senior volunteers will be planned to train the maintenance management and budgetary planning for the VCH staff. Reflecting on the discussion with AusAID, the necessary budget for overhauling of the existing oxygen generator and some items of equipment shall be secured by them. The collaboration with AusAID such as exchange of technical information will make sure to create synergy on the project implementation.

As mentioned above, this technical assistance shall be aimed at training VCH staff to have they acquire daily maintenance method, maintenance activity and proper budgetary planning.

**2. Objectives of Soft Component**

- (1) To acknowledge the significance of the maintenance training to conduct the routine, periodical maintenance activity by VCH staff of Radiology, Outpatients' (General Clinic), Emergency, Laboratory, Pharmacy, and Maintenance Department, and
- (2) To establish and include the maintenance budgetary plan into the annual business plan.

**3. Accomplishment of Soft Component.**

The accomplishments at the completion of the soft component are described as follows.

Guidance Contents	Direct Effects
Strengthening of daily facility maintenance and formulation of sustainable maintenance system	<ul style="list-style-type: none"><li>• Updating of the broken facility and equipment (spare parts, maintenance, replacement) can be smoothly achieved by the development of the maintenance flow system.</li><li>• Hospital staffers can deal with the trivial equipment troubles.</li><li>• Hospital staffers can habitually conduct the daily and periodic maintenance.</li></ul>

Guidance Contents	Direct Effects
Daily equipment maintenance	<ul style="list-style-type: none"> <li>• Equipment operators of Radiology, Outpatients' (General Clinic), Emergency, Laboratory, Pharmacy, Operation Theatre can carry out the daily check habitually, and</li> <li>• Equipment operators can acquire the daily check method.</li> </ul>
Development of the maintenance plan and necessary budgetary allocation	<ul style="list-style-type: none"> <li>• Understand the state of each facility and equipment regarding its necessary consumables and inventory for the next fiscal year by developing the maintenance tools in preventive manner. And also can correspond with the items of equipment not working smoothly, and</li> <li>• Can decide the maintenance plan for the facility and equipment and enforce to secure the necessary allocation of the budget for the maintenance.</li> </ul>

#### 4. Method for Confirming the Degree of Achievement

Items for confirmation of degrees of achievements are indicated in the following table at the completion of the soft component.

Items	Confirmatory method
Daily facility maintenance	<ul style="list-style-type: none"> <li>• To confirm the check result of the record of routine maintenance which the facility operator performs.</li> </ul>
Daily equipment maintenance	<ul style="list-style-type: none"> <li>• To confirm the check result of the record of routine maintenance which the equipment operator performs.</li> </ul>
Development of the maintenance plan and necessary budgetary allocation	<ul style="list-style-type: none"> <li>• To confirm the maintenance budget and activity for the facility and equipment by comparing the previous VCH business plan.</li> </ul>

The concrete evaluation method of above is inspected by

- (1) Inspecting if the routine maintenance is performed periodically and corresponds with manual, and
- (2) Comparing actually required amount for the facility and equipment maintenance with budget allocation of VCH

Remarks: A VCH business plan is conceived for the following annual budget application done by VCH between May to July every year, and the VCH has been doing that. In this case, it is meant to inspect contents of maintenance execution and the expenditures for facility and equipment maintenance.

## 5. Activities of Soft Component (input plan)

Items	Input Plan	Subject Department
Daily facility maintenance	<ul style="list-style-type: none"> <li>For VCH persons concerned, hold a workshop and perform a seminar about the importance of equipment and equipment maintenance management from a viewpoint of a continuous medical service.</li> <li>To explain the guidance and schedule.</li> <li>To instruct the routine check method to the operators</li> </ul>	VCH: Hospital chief. Office manager
Daily equipment maintenance	<ul style="list-style-type: none"> <li>To instruct the routine check method to the operators</li> </ul> <p>【Trainees】</p> <ul style="list-style-type: none"> <li>VCH managing department : Hospital chief, Office manager</li> <li>Facility : Chief engineer of maintenance department, Electrician, Mechanic, Management staff</li> <li>Equipment : Nurse, Radiologist, Inspecting engineer, Electrician in maintenance department (Equipment maintenance)</li> </ul>	Maintenance Department: Maintenance staff, staff of medical division actually use the procured equipment (Outpatients', Operation Theatre, Emergency, CSSD, etc)
Development of the maintenance plan and necessary budgetary allocation	<ul style="list-style-type: none"> <li>To instruct planning of maintenance management for facility and equipment</li> <li>To instruct necessary budgets planning</li> </ul> <p>【Trainees】</p> <ul style="list-style-type: none"> <li>Facility : Chief engineer of maintenance department, Electrician, Mechanic, Management staff</li> <li>Equipment : Electrician in maintenance department (Equipment maintenance)</li> </ul>	VCH: Hospital chief. Office manager Maintenance Department

## 6. Method for Procuring the Implement Resources of Soft Component

- This soft component is the direct support type with which the consultant will come to train in Vanuatu.
- A dispatch engineer shall have the specialty in the following field.
  - ① Facility: A person with experience of designing of an air conditioner, health facilities, and electrical equipment, maintenance management instruction, etc.
  - ② Equipment: A person with experience of a medical equipment plan, supervision/maintenance instruction, and so on.

In implementation of the on-site technical guidance, the VCH should assign an equipment management chief person, and the person enters between the Japanese consultants and the medical worker of VCH who is the candidate for the instruction, and enables to assist technology transfers.

### 1) Implementation schedule

### Soft Component Implementation Schedule (Plan)

Remarks)	▲ Submitting of soft component implementation report
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## 2) Preparation works in Japan

- The covering departments of medical equipment for the training are shown as follows.

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### 3) On-site technical assistance

- Monitor the participant's attendance situation, the situation of an understanding, etc. and grasp a participant's subject, point in question, and so on.
- While summarizing the above situation to a daily report, adjust the subjects, proposals, etc. in the implementation report document.
- Enlighten the importance of the maintenance by workshop method.

#### 【Facility maintenance】

By the workshop, while educating the importance of maintenance control from a viewpoint of continuous medical service and prevention of cross infections, functional cooperation strengthening of inquiry of the problem of the present maintenance and the maintenance unit of VCH, and so on are inspected, and a proposal will be instructed.

The development of the tools, such as an annual maintenance plan to the facility apparatus (air-conditioning, medical gas supply, effluent treatment, power supply and transforming facilities, generators, weak electric appliances, and so on) and new building of this project and the concrete apparatus ledger will be carried out in order to understand the whole working process.

The outline of the training course is shown as follows.

#### On site assistance-1

	Works	Days
1	Preparation in Japan • Collecting of data, such as maintenance ledger, maintenance item, and maintenance report.	1 day
2	Instruction of maintenance plan • Explanation of importance of the maintenance • Instruction of the development of maintenance item and ledger. • Development of maintenance check plan	9 days
3	Sum up report • Adjustment and submission of implementation report • The proposal and report to MOH and VCH	1 day

#### On site assistance-2

	Works	Days
1	Preparation in Japan Development of maintenance related manuals • Manual about water supply and drainage sanitation. • Manual about air-conditioning • Manual about electricity	1 day
2	Instruction of maintenance management • Final instruction for maintenance ledger • Sum up maintenance manual • Development of budgetary plan • Instruction of maintenance management implementation (sanitation, air-conditioning, and electricity)	17 day
3	Sum up report • Adjustment and submission of implementation report • The proposal and report to MOH and VCH	1 day

#### 【Equipment maintenance】

Training and instruction are performed to equipment operators of daily maintenance methods, engineering technicians of VCH maintenance unit, assistants and nurses of operating rooms, and laboratory department. (Training is implemented after equipment installation work to VCH and operating instructions are completed by the equipment supplier.). The training course will train about formulation of annual maintenance plan and budget planning for spare parts supply, overhauling service.

The outline of the training course is shown as follows.

##### On site assistance-1

	Works	Days
1	Preparation in Japan Creation of data manual	1 day
2	Instruction of maintenance management • Planning of maintenance check • Budget Planning	9 day
3	Sum up report • Adjustment and submission of implementation report • The proposal and report to MOH and VCH	1 day

##### On site assistance-2

	Works	Days
1	Preparation in Japan Document manuals • Manual of equipment periodical check • Manual of maintenance plan • Manual of maintenance budgetary plan	1 day
2	Instruction of maintenance management	17 day
3	Sum up report • Adjustment and submission of implementation report • The proposal and report to MOH and VCH	1 day

#### 4) Works in Japan

The results of the technical guidance are summarized and conceived into the report.

## 8. Deliverables of Soft Component

Items	Deliverables
Guidance of facility maintenance	<ul style="list-style-type: none"><li>• Training implementation schedule report (time schedule, attendant list, and so on)</li><li>• Draft Maintenance report</li><li>• Daily check manual</li><li>• Draft maintenance system</li><li>• Draft organization chart</li><li>• Draft budgetary plan</li><li>• Implementation report of soft component</li></ul>
Guidance of equipment maintenance	<ul style="list-style-type: none"><li>• Training implementation schedule report (time schedule, attendant list, and so on)</li><li>• Draft maintenance report</li><li>• Daily check manual</li><li>• Draft budgetary plan</li><li>• Monitoring result</li><li>• Implementation report of soft component</li></ul>

## 9. Outline Expenses of Soft Component

This paragraph is closed due to the confidentiality.

## 10. Responsibility of recipient country

This technical assistance will be performed for the purpose of securing budgetary and technical sustainability of VCH. So the assistance should enhance the autonomous action from the VCH as much as possible. MOH, the responsible agency, agrees to cooperate with this technical assistance based on their fully understanding. By conducting this assistance, VCH has the responsibility to continue to implement this activity along with the manuals, which reflects all responsible staff members of VCH to acknowledge the effectiveness of facility and equipment maintenance. While this Technical Assistance trains VCH staff members, in order to continue to conduct the activities smoothly and promptly the organization structure based on a llocation of ultimate responsibility to the hospital director shall be proposed. In the actual implementation of the operation budget, the budget has been forced to divert to the due payment and pressing debt regardless of the budget for each item of expenditure. Reflecting on that, the managers of VCH should undertake the duty to manage so that it may not divert about necessary expenses including maintenance budget. Moreover, MOH and MOF should continue to monitor and guide the payment balances.