

Internal Ex-Post Evaluation for Grant Aid Project

conducted by Bolivia office: October, 2011

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| Country | El Proyecto de Mejoramiento de los Establecimientos de Salud en la Zona Sur del Departamento de Beni |
| Bolivia | |

I. Project Outline

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|---------------------------|--|----------------------------------|
| Project Cost | E/N Grant Limit: 847 million yen | Contract Amount: 847 million yen |
| E/N Date | August, 2005 | |
| Completion Date | July, 2007 | |
| Implementing Agency | Prefectura del Beni | |
| Related Studies | Basic Design Study: December, 2004 - July, 2005 | |
| Contracted Agencies | Consultant(s) | System Science Consultants |
| | Contractor(s) | Hazama Corporation |
| | Supplier(s) | Mitsubishi Corporation |
| Related Projects (if any) | Japanese cooperations: Technical Cooperation - Study on Enhancement of District Health System for Beni Prefecture in the Republic of Bolivia (2001-2003) - Project for Strengthening Regional Health Network in Santa Cruz Department (FORSA) (2001-2006) | |
| Background | In Bolivia, performance of health indicators such as infant mortality rate, maternal mortality rate and under-five child mortality rate was poor. In particular, Beni Prefecture, the target prefecture of this project, was located in the low-lying land of the upper Amazon in the north of the country, and was underdeveloped with poor access to primary health services. The health situation of Beni Prefecture is shown in the high level of total fertility rate and deaths of under-five children from diseases that could have been prevented with early detection, rapid cure and good care at home. Therefore, the realization of equal access to primary health services was an urgent issue. | |
| Project Objectives | Outcome To improve regional health services through establishing a more solid regional health network by the integrated development of facilities and equipment at prefectural hospitals, health centers, clinics and practical nurses' schools in three (3) districts in Beni Prefecture. | |
| | Outputs Japanese Side - Rehabilitation of 5 health centers, 1 clinic, 1 practical nurses' school, new construction of 2 clinics, and expansion of 2 hospitals - Soft component for improvement of maternal health services, strengthening of the referral system, etc. Bolivia Side - Site preparation, procurement of necessary furniture/equipment for 25 health institutions (1 practical nurses' school, 7 health centers, 14 clinics and 3 prefectural hospitals) and assignment of health personnel | |

II. Result of the Evaluation

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| Summary of the Evaluation |
| <p>Located in the low-lying land of the upper Amazon in the north of Bolivia, Beni Prefecture was underdeveloped with limited access to primary health services. In order to improve health status of the people, ensuring equal access to health services was an urgent issue.</p> <p>This project has achieved its objective, "to improve regional health services through establishing a more solid regional health network by the integrated development of facilities and equipment at prefectural hospitals, health centers, clinics and practical nurses' schools in three districts in Beni Prefecture". The achievement is shown in the increased provision of medical services using equipment developed at prefectural hospital and health centers (i.e., large increase in the number of medical examinations), which reached the expected level both in the target year and the year before the ex-post evaluation. As for sustainability, some problems have been observed in terms of structural and technical aspects and current status of operation and maintenance (O&M) due to insufficient staff assignment to health institutions and consequent lack of preventive maintenance and non-implementation of periodic check and maintenance plans of equipment, while no problem has been found in the financial aspect. For relevance, the project has been highly relevant with Bolivia's development policy, development needs as well as Japan's ODA policy at the time of both ex-ante and ex-post evaluation. For efficiency, project period exceeded the plan. In the light of above, this project is evaluated to be satisfactory.</p> |

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| 1 Relevance |
| <p>This project has been consistent with Bolivia's development policy (sectoral development plan in health movements for right to health and right to life, and socio-economic development plan of Beni Prefecture), development needs (equal access to primary health services), as well as Japan's ODA policy at the time of both ex-ante and ex-post evaluation. Therefore, its relevance is high.</p> |
| 2 Efficiency |
| <p>Although the project cost was as planned (ratio against plan: 100%), project period exceeded the plan (ratio against plan: 133%). Therefore, efficiency of the project is fair.</p> |

3 Effectiveness/Impact

The provision of medical services using the facilities and equipment developed by this project has mostly achieved the expected level in both the target year and the year before the ex-post evaluation (when the latest data is available as of the ex-post evaluation). Also, based on interviewing with the Department of Health of Beni Prefecture and the health statistics collected, it is considered that satisfaction of patients with medical services, that of nursing school students with the learning environment in which they can provide sufficient services with confidence, as well as that of instructors who provide nursing education with the teaching environment that enhances students' willingness to learn and understanding.

Therefore, effectiveness/ impact of this project is high.



A hospital constructed by this project

Quantitative Effects

| Indicators | Basic Design Year (2004) | Target Year (2007) (Planned value) | Target Year (2007) (Actual value) | Latest Year (2010) (Actual value) |
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| 1) Improvement of access to health institutions | | | | |
| <u>(i) Provision of medical services by prefectural hospitals and health centers</u> | | | | |
| a. Number of examinations | a. 14,332 | a. Increase | a. 24,510 | a. 25,184 |
| b. Number of operations | b. 71 | b. Increase | b. 76 | b. 105 |
| c. Number of cases of dental treatment | c. 4,941 | c. Increase | c. 6,258 | c. 7,608 |
| d. Number of cases of Caesarean section | d. 18 | d. Increase | d. 20 | d. 64 |
| <u>(ii) Improvement of access to appropriate medical services by rehabilitation of health centers/ clinics and development of equipment</u> | | | | |
| a. Number of examinations | a. 4,822 | a. Increase | a. 9,019 | a. 13,230 |
| b. Number of operations | b. 38 | b. Increase | b. 21 | b. 52 |
| c. Number of cases of dental treatment | c. 1,239 | c. Increase | c. 298 | c. 1146 |
| d. Number of cases of Caesarean section | d. 19 | d. Increase | d. 21 | d. 42 |
| <u>(iii) Enhancement and expansion of regional health network by construction of new clinics</u> | | | | |
| a. Number of examinations | a. 570 | a. Increase | a. 764 | a. 5,210 |
| b. Number of cases of dental treatment | b. 109 | b. Increase | b. 0 (*) | b. 0 (*) |
| 2) Improvement of quality of regional health services by strengthening cooperation among health institutions | | | | |
| a. Number of referred patients | a. 96 | a. Increase | a. 124 | a. 389 |
| b. Number of field (traveling/visiting) postpartum checkups | b. 396 | b. Increase | b. 424 | b. 600 |
| 3) Improvement of educational environment of practical nursing schools | No library, no laboratory, lacking equipment | Improve | Sufficient facilities/ equipment | Sufficient facilities/ equipment |

Note: * A background factor behind the zero case of dental treatment is a lack of dentists who are willing to be stationed in remote areas.

Sources: Interview with Health Department of Beni Prefecture, Bolivia Health Information 2005-2010, and health statistics.

4 Sustainability

The O&M of the equipment developed at each health institution is under responsibility of the district in charge. Although such structure of the implementing agency is sustained in the similar manner to the ex-ante evaluation, some problems have been observed such as insufficient staff allocation to health institutions where O&M is carried out, and unclear management responsibility for O&M. In the technical aspect for O&M, while, in case of breakdown of equipment, the implementing agency can receive services from private companies with maintenance capabilities (budget for it is available, too), some problems have been observed in that health institutions fail to carry out preventive maintenance due to no staff assigned specifically for maintenance of equipment. As for the financial aspect, the implementing agency has no problem as city-level governments ensure annual budget for development of medical infrastructure and maintenance of equipment. Based on the site visits and interviews with related personnel, it was found that the facilities and equipment was well-maintained and most equipment was utilized. However, the project has some problem in the status of O&M due to lack of periodic check of equipment and the absence of equipment maintenance plans.

Therefore, sustainability of this project is fair.



Medical equipment procured by this project

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III. Recommendations & Lessons Learned

Recommendations for Implementing Agency:

- The implementing agency (Health Department of Beni Prefecture) is recommended agree with the city council of the city that received the project equipment on who is responsible for management of the equipment in a written form in order to clarify O&M responsibility for the equipment.
- The city councils of the cities that received the project equipment are recommended to secure in its annual implementation plan the budget for maintenance of medical equipment, and to share such information with health institutions.
- The Health Department of Beni Prefecture is recommended to take a lead of human resources development to ensure necessary quantity and quality of personnel for sustainability of project effects.
- The city governments of the cities that received the project equipment are recommended to build a system in which the annual budget and operation planning process promotes participation of medical personnel and reflects their will to the administration level, so that issues required in health institutions' annual operation plans are taken into consideration.

Lessons learned for JICA:

- Ensuring staff allocation: in addition to conclusion of official documents on the implementing agency's commitment to staff allocation, a system to guarantee actual recruitment of necessary personnel is important as well.
- Participatory planning of annual operation plans: preparation of annual operation plans with participation of medical personnel is crucially important as it leads to appropriate design including selection of equipment through comprehension of actual situation in the technical aspect.