

# Internal Ex-Post Evaluation for Technical Cooperation Project

conducted by Vietnam office: January, 2014

Country Name	The Project for Strengthening Health Services Provision in Hoa Binh Province
Socialist Republic of Viet Nam	

## I. Project Outline

Background	<p>In Vietnam, District Hospitals (DHs) and Commune Health Center (CHCs) are mainly responsible for the primary health care, and Provincial General Hospital takes care of secondary healthcare services. Hoa Binh is located in the mountainous North West region, where health conditions are poorer than other areas in the country. In Hoa Binh, the referral system among Hoa Binh Provincial General Hospital (HBHGH), DHs and CHCs was not working properly and there was a disparity of the quality of medical services between the city and rural areas. Also, due to a shortage of human resource and facility, limited capacity of DHs and CHCs in responding to the needs of local people was a critical issue.</p>										
Objectives of the Project	<p>1. Overall Goal: Medical system in Hoa Binh Province which has its effectiveness verified will be introduced and spread throughout other provinces in Northern Vietnam.</p> <p>2. Project Purpose: Medical system in Hoa Binh Province is strengthened through the establishment of Direction Office of Healthcare Activity (DOHA) at provincial and lower levels and patient referral system.</p> <p>3. Assumed steps for achieving the project goals: The project implements training and technical guidance activities. Through these activities, the project improves the management capacity of Hoa Binh Provincial Health Department (HBDOH), enhances training support of HBHGH to DHs, establishes DOHA at provincial and lower levels, and develops the patient referral system. By realizing the above project outputs, the project aims to strengthen the medical system in Hoa Binh Province. Then, good practices <sup>(Note 1)</sup> of the medical system in Hoa Binh Province are disseminated throughout other provinces in Northern Vietnam.</p> <p>Note 1: These practices were consolidated into the Guidebook on DOHA and Referral System in Hoa Binh (hereinafter: the Guidebook)</p>										
Activities of the project	<p>1. Project site: Hoa Binh Province</p> <p>2. Main activities Training for the management officers and medical staff of HBDOH, HBHGH and DHs for development of DOHA and referral system, and other training in clinical fields such as emergency, pediatrics, Intensive Care Unit (ICU).</p> <p>3. Inputs (to carry out above activities)</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Japanese Side</td> <td style="width: 50%;">Vietnamese Side</td> </tr> <tr> <td>1) Experts: 15 persons (4 for Long term, 11 for Short term)</td> <td>1) Staff allocated: 9 persons</td> </tr> <tr> <td>2) Trainees received in Japan: 16 persons</td> <td>2) Land and facilities: project office</td> </tr> <tr> <td>3) Equipment: Medical equipment, training facilities and equipment</td> <td>3) Local cost: salaries to counterpart personnel, training cost</td> </tr> </table>			Japanese Side	Vietnamese Side	1) Experts: 15 persons (4 for Long term, 11 for Short term)	1) Staff allocated: 9 persons	2) Trainees received in Japan: 16 persons	2) Land and facilities: project office	3) Equipment: Medical equipment, training facilities and equipment	3) Local cost: salaries to counterpart personnel, training cost
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Project Period	December 2004 – December 2009	Project Cost	255 million yen								
Implementing Agency	Ministry of Health (MOH) Hoa Binh Province, Department of Health (HBDOH)										
Cooperation Agency in Japan	National Center for Global Health and Medicine (NCGM) (former International Medical Center of Japan)										
Related Projects	<p>Japan's cooperation:</p> <ul style="list-style-type: none"> <li>• The Bach Mai Hospital Project for Functional Enhancement (Technical Cooperation, 2000-2005)</li> <li>• Project for the Improvement of Hoa Binh General Hospital (Grant Aid, 2005-2007)</li> </ul> <p>Other donors' cooperation:</p> <ul style="list-style-type: none"> <li>• Improvement of the Quality and Utilization of RH Service Project (UNFPA, Grant, 2002-2004)</li> <li>• Rural Health Project (strengthening mainly District Health Centers in 8 provinces) (ADB, Grant and Loan, 2004-2009)</li> <li>• Upgrading of Community Health Services in Hoa Binh Province (Belgian Technical Cooperation (BTC), Technical Cooperation, 2004-2009)</li> </ul>										

## II. Result of the Evaluation

### 1 Relevance

This project has been highly relevant with Vietnamese development policy ("improvement in accessibility and quality of health care services" in the National Strategy on People's Healthcare and Protection 2001-2010 and the Health Sector Development Plan of Vietnam 2005-2010), development needs ("improvement in the health care services of public medical institutions in Hoa Binh Province"), as well as Japan's ODA policy for Vietnam with the priority area of improvement of

lifestyle and social aspects including health and medical care, at the time of both ex-ante evaluation and project completion. Therefore, relevance of this project is high.

## 2 Effectiveness/Impact

This project focuses on establishment of effective referral system and the DOHA technical guidance system in the public health facilities in Hoa Binh. In order to assess achievement of project purpose and overall goal appropriately, modified indicators are applied to the ex-post evaluation <sup>(Note 2)</sup>. Those for project purpose are as follows: (i) the results of annual evaluation of medical institutions conducted by MOH, (ii) variation of referral data, (iii) status of functioning technical guidance system with DOHA and referral system, (iv) status of support and advice from Bach Mai Hospital to HBHGH, and (v) status of patients' satisfaction. As to (i), the number of hospitals in Hoa Binh Province which were given the highest rate by the MOH's annual evaluation increased from three (3 DHs) in 2006 to eight (HBHGH and 7 DHs) in 2008. In 2012, five hospitals (HBHGH and 4 DHs) remained in the highest rating. Regarding (ii), most of the referral data indicates the positive effects (shown in the box below). According to HBHGH staff, after the improvement of infrastructure and equipment of HBHGH by the Japanese grant Aid in 2007, the capacity of HBHGH was further improved, creating a great motivation to hospital staff because they have had a better working condition. The status of HBHGH was upgraded from grade 2 to grade 1 in 2012 by MOH <sup>(Note 3)</sup>. However, HBHGH is getting overload (currently, actual bed occupation ratio is about 140%), and this situation brought a great burden for HBHGH staff. As for (iii) and (iv), it is confirmed that after the project completion, HBDOH continuously manages and supervises the technical guidance system with DOHA and referral system with the technical support from Bach Mai Hospital and other central hospitals. As for (v), Annual Patient Satisfaction survey conducted by HBHGH and DHs indicates that their medical services were evaluated as "highly satisfactory" by the patients, including the following points such as better communication skill with patients, publicized information on drug, and less complicated administrative procedures.

As for overall goal, its modified indicators are: (i) number of provinces that introduced a technical guidance system and patient referral system based upon the Guidebook, (ii) status of formalization of the Guidebook as an official document of MOH, and (iii) degree of promotional activities for dissemination of good practice of Hoa Binh to other provincial hospitals, provincial DOH and DOHA related departments of the central hospitals undertaken by MOH. As for (i), no province has been applying the same practice of Hoa Binh at the time of the ex-post evaluation. This is because the Hoa Binh practices have not been officially certified by MOH, and therefore official application is not yet carried out in other provinces. Regarding (ii), as stated above, the Guidebook has not been certified by MOH as the standardized guidebook in the country because MOH needs more experimental evidence in other provinces before institutionalizing the Guidebook of Hoa Binh Province as standardized guidebook. As for (iii), since 2009, Hoa Binh Province started receiving the numerous delegations from other provinces and the experience and outcome of the project have been shared widely with them.

In addition, some Project's outcomes have been consolidated to other donors' supported projects. For example, the technical guidance system and patient referral system developed by the project have been integrated to CHCs in the field of new born and emergency obstetrics in UNFPA Project. Also, a referral system among DHs and CHCs has been introduced at 3 districts (Mai Chau, Tan Lac and Kim Boi) of Hoa Binh Province within a framework of the Belgian Technical Cooperation Project (BTC).

In this way, the project has mostly achieved the project purpose. However, the overall goal, dissemination of the project outcome to other provinces, has not been realized yet at the time of the ex-post evaluation. Therefore, effectiveness of the project is fair.

Note2: Since the project purpose is understood as a synonym for project outputs 1-4, the same indicators of project outputs is proposed as additional indicators for the project purpose. Moreover, because the first indicators of overall goal "The MOH and Hoa Binh Province disseminate project's outputs and experiences to relevant organizations and other provinces" is not concrete, alternative indicator is proposed to replace the original indicator. PDM (Version 3) revised on May 24, 2007 is used for ex-post evaluation.

Note3: There are 4 grades of hospital rating system in Vietnam: "Superior", ">"grade 1", ">"grade 2" and ">"grade 3". These are defined in terms of human resource, technique, scope of bed etc.

### Reference data

	2005	2006	2007	2008	2009	2010	2011	2012
Referral cases from DHs to HGH	1,265	2,040	3,303	5,436	8,412	8,383	10,276	12,320
Referral cases from HGH to CHs*	2,935	3,196	4,137	4,493	4,498	3,770	3,698	3,925
No. of out-patient examination at HGH	118,023	136,783	136,702	166,674	167,040	124,950	133,166	121,092
No of in – patients to HGH	N.A.	N.A.	N.A.	25,150	29,179	25,236	27,081	27,404
Emergency cases from DHs to HGH with prior information	N.A.	4	152	339	360	420	395	430
Patients from communities to HGH without reference**	N.A.	373	951	2,547	4,275	1,081	5,735	5,470

\*CHs: Central Hospitals responsible for tertiary health care (for example, Bach Mai Hospital in Hanoi).

\*\* From 2011, there was a change in health insurance policy, requiring all citizens to go to the DHs first. As a result, some of patients do not wait until receiving the reference note, but go directly to HBHGH because of their better economic condition and better access.

### Achievement of project purpose and overall goal

Aim	Indicators	Results
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(Project Purpose) Medical system in Hoa Binh Province is strengthened through the establishment of DOHA at provincial and lower levels and patient referral system.	11 District Hospital (DHs) and HGH are all graded as “excellent” on the criteria related to the project <sup>(Note 4)</sup> by annual evaluation of medical institutions conducted by the Ministry of Health.	(Project completion) In 2006, three hospitals (3 DHs) were rated as excellent, and in 2008, eight hospitals (HGH and 7 DHs) were rated as excellent. (Ex-post Evaluation) Based upon the new rating system <sup>(Note 5)</sup> , five hospitals (HGH and 4 DHs) were rated as good (the best title) in 2012.
(Overall goal) Medical system in Hoa Binh Province which has its effectiveness verified will be introduced and spread throughout other provinces in Northern Vietnam.	The MOH and Hoa Binh Province disseminate project outputs and experiences to relevant organizations and other provinces.	(Ex-post Evaluation) The Guidebook was shared with other provinces in the North (e.g. Ninh Binh, Phu Tho, Tuyen Quang, Vinh Phuc, Lang Son, Thanh Hoa, and Yen Bai)
	Project’s important outputs such as guideline or referral system are used as guide and referral by other provinces to strengthen their DOHA activities.	(Ex-post Evaluation) No province has introduced the same practices of Hoa Binh in its medical institutions yet because the Guidebook has not been certified by MOH as the standardized ones.

Source: Terminal Evaluation Report, Interviews with counterparts.

Note 4: The criteria include “examination and treatment”, “training”, “referral guideline”, “diagnosis, hospitalization, department transference, hospital transference and discharge”, “nursing and total care”, “medical ethics and professional culture”, “emergency department”, medical equipment management”, “Nosocomial infection control” and “hospital management”.

Note 5: The rating system of annual evaluation by MOH has been changed from 2011, in which there was no more “excellent”, the best title was “good”.

### 3 Efficiency

The inputs were appropriate for producing the outputs of the project, and both the project cost and the project period were as planned (ratio against the plan: 87%, 100%). Therefore, efficiency of the project is high.

### 4 Sustainability

In policy aspect, this project is still given importance in the current development policy such as the Health Sector Development Plan of Vietnam (2011-2015) and Socio Economic Development Plan of Hoa Binh Province (2011-2015). Currently, MOH is finalizing the Circular on Referral and JICA’s technical cooperation project “Strengthening Medical Service in Northwest Province” (March 2013 ~ March 2017), is being implemented in order to disseminate the Hoa Binh experience to other Northern provinces. Regarding the institutional aspect, the DOHA network is sustained among HBDOH, HGH and DHs and most of staff who received training by the project continues to work at their respective hospitals. However, a shortage of human resource (medical staff) is observed in DHs in Hoa Binh, which is though a common issue in the whole health sector in Vietnam. Regarding the technical aspect, the training on DOHA and referral system has been continuously conducted with utilization of the Guidebook, and it has become a routine work in HBDOH, HBHGH and DHs. HBHGH continuously receives the technical support and advice from Bach Mai Hospital, which serves as the top referral hospital of the country, and other central hospitals. Regarding financial aspect, despite limited budget condition, HBDOH, HGH and DHs put great effort to maintain the operation of established systems and allocate the necessary budget in the annual plan. From these findings, there are some issues in institutional and financial aspects, therefore, sustainability is fair.

### 5 Summary of the Evaluation

The project has mostly achieved the project purpose, but overall goal has not been realized at the time of ex-post evaluation. HBHGH and several DHs were given the highest rate by the MOH’s annual evaluation. A series of referral data indicates that the referral system and the DOHA technical guidance system introduced in Hoa Binh Province by the project have been still well functional at the time of the ex-post evaluation. The capacity of HBHGH was further improved by the Japanese grant aid in 2007, which resulted in the upgrade of HBHGH’s status from grade 2 to grade 1 in 2012 by MOH. The medical services of HBHGH and DHs were evaluated as “highly satisfactory” by the satisfaction survey to the patients. However, the experience and outcome of the project in Hoa Bin Province has not been disseminated to other northern province in Vietnam as expected mainly due to delay in institutionalization process of the guidelines by MOH. Regarding efficiency of the project, both the project cost and the project period were within the plan, thus its efficiency is high. As for sustainability, there are some issues in institutional and financial aspects, therefore, sustainability is fair.

In the light of above, this project is evaluated to satisfactory.

## III. Recommendations & Lessons Learned

Recommendations for Implementing agency:

- In order to sustain and further develop the project outcome, it is strongly recommended Hoa Binh Province to continuously promote the experience sharing with other provinces, as well as with MOH, so that MOH could make sound decision on the institutionalization of the DOHA and referral activities. Once it is institutionalized by MOH, the issues on limited allocation of staff and budget would be improved than current situation. In this respect, MOH is expected to closely collaborate with the on-going JICA’s technical cooperation project “Strengthening Medical Service in Northwest Province” to accelerate this institutionalization process.

Lessons learned for JICA: None