No.34/27/2009-EO(F) Government of India Ministry of Personnel, P.G. and Pensions Department of Personnel & Training

North Block, New Delhi-1 Dated the 3 April 2009.

TRAINING CIRCULAR

Subject : A Group Training Course in Hospital Administration and Health Services Management to be held in Japan from 18th August 2009 to 26th September 2009.

The undersigned is directed to state that the Japan International Cooperation Agency (JICA), under the Technical Cooperation Programme of the Government of Japan has invited applications for a Group Training Course in Hospital Administration and Health Services Management to be held in Japan from 18th August 2009 to 26th September 2009. The details of the programme and the application form may be drawn from Ministry of Personnel, Public Grievances and Pensions website (persmin.nic.in).

2. The Training programme is designed for officers who are engaged in top management at hospital (e.g. Director or Deputy Director of hospital) or government officers who are responsible for district health care or hospital administration. The overall goal of the programme is to develop human resources who can utilize effectively and efficiently limited resources regarding hospital administration and health services management, and to improve the situation in health and medical care at both a country level and a regional level in the long term.

3. The applicant should be a university graduate or the equivalent; be engaged in top management at hospital (e.g. Director or Deputy Director of hospital) or government officers who are responsible for district health care or hospital administration; be proficient in written and spoken English; be between 35 years and 45 years of age; not be serving in the military and be in good health both physically and mentally to undergo the training.

4. The fellowship award covers a Round-trip ticket between an international airport designated by the JICA and Japan; travel insurance from arrival to departure in Japan; and includes allowances for accommodation, living expenses, outfit and shipping; expenses for study tours; free medical care for participants who may fall ill after arriving in Japan (costs related to pre-existing illness, pregnancy, or dental treatment are <u>not</u> included). The participants are not allowed to take any family member during the training course.

5. It is requested that the nomination of the suitable candidates may please be forwarded to this Department in accordance with the eligibility criteria and the terms and conditions of the JICA's Circular dated 1st April 2009. The Ministry/ State Governments may sponsor the names of only Government/ Public Sector Undertaking functionary.

6. The nomination details should be submitted in the JICA's prescribed proformas (A2A3 Forms), duly authenticated by the Department concerned alongwith the country report.

7. The applications should reach this Department <u>through proper channel</u> not later than 8th June 2009. Nominations received after the prescribed date will not be considered. The circular inviting applications for training courses is available on this Department's website persmin.nic.in

> (Trishaljit Sethi) Director

- 1. Ministry of Health & Family Welfare, Nirman Bhavan, New Delhi.
- All State Governments/ Union Territories. [With the request to circulate it amongst the related organizations]
- 3. Director (Technical), NIC with the request to post the circular along with the JICA's circular and the enclosed application Proformas on the Department's website



Japan International Cooperation Agency (Government of Japan)

No. 29/GT-CP/2009

1st April, 2009

Dear Mr. Kharb,

A Group Training Course in Hospital Administration and Health Services Management will be held in Japan from 18th August, 2009 to 26th September, 2009 under the Technical Cooperation Programme of the Government of Japan.

We are forwarding herewith two copies of the General Information Booklet on the above offer. It is requested that the following documents of the selected candidate may please be submitted to this office by 15^{th} June, 2009:-

(1) The Nomination Form A2A3 together with the medical history questionnaire,

(2) The desired Inception Report

Further details are available in the General Information Booklet. It may be noted that the completed Inception Report is essential for screening of applications.

It is further informed that 15 slots are available globally for the said course and it would be much appreciated if you could take further necessary action and submit the nomination(s) of suitable candidate(s) to this office by the designated date.

With regards,

Yours sincerely,

o Asakuma Senior Representative

Encl: As stated above.

Mr. R.K. Kharb Desk Officer Department of Personnel and Training Ministry of Personnel, Public Grievances and Pensions North Block New Delhi

Copy to:-

Ms. Arun Prabha, Under Secretary (PMU and Trg.), Department of Economic Affairs, Ministry of Finance, North Block New Delhi.

JICA India Office 2nd Floor, Dr. Gopal Das Bhawan 28, Barakhamba Road, New Delhi-110001 TEL: +91-11-47685500 FAX: +91-11-47685555 URL: http://www.jica.go.jp/



TRAINING AND DIALOGUE PROGRAMS

GENERAL INFORMATION ON

HOSPITAL ADMINISTRATION AND HEALTH SERVICES MANAGEMENT 集団研修「病院管理技術とヘルスサービスマネージメント」 JFY 2009 <Type: Leaders Training / 類型:中核人材育成型> NO. J09-00792 / ID. 0980959 From August 18, 2009 to September 26, 2009

This information pertains to one of the Training and Dialogue Programs of the Japan International Cooperation Agency (JICA), which shall be implemented as part of the Official Development Assistance of the Government of Japan based on bilateral agreement between both Governments.

I. Concept

Background

Even today, health resources are still limited in developing countries in spite of desirable further improvement of public health condition. Considering this situation, it is required to equip personnel with abilities of health service management to make the optimum use of those limited resources.

The purpose of this course is to enhance participants' knowledge on how to manage health care delivery system effectively and efficiently and to contribute to the improvement of health condition of people in developing countries. To attain this purpose, participants are expected to acquire general information on health resource management through lectures, case studies and group discussions arranged in this course. Moreover, it is also meaningful to acquire the practical knowledge through learning Japan's cases in the field of health and medical care, which has received high evaluation in the world.

For what?

This program aims to develop human resources who can utilize effectively and efficiently limited resources regarding hospital administration and health services management.

For whom?

This program is offered to officers who are engaged in top management at hospital (e.g. director or deputy director of hospital) or government officers who are responsible for district health care or hospital administration.

How?

The curriculum is programmed mainly for the case study. Therefore, the lectures will provide the required knowledge needed to solve difficult issues in the case. Through the case study, the participants will acquire necessary knowledge and practical skills for hospital management. In addition to the case study, participants will acquire more specific skills by a research project on individual interests. Every participant is required to present a final report including action plans on one of important issues based on your interests and concerns directly relating to your current job responsibility.

II. Description

1. Title (J-No.): Hospital Administration and Health Services Management (J09-00792)

2. Period of program August 18, 2009 to September 26, 2009

3. Target Regions or Countries

Afghanistan, Egypt, India, Iraq, Kenya, Maldives, Nigeria, Philippines, Samoa, Saudi Arabia, South Africa, Swaziland, Uganda, Venezuela and Vietnam

4. Eligible / Target Organization

This program is designed for officers who are engaged in top management at hospital (e.g. director or deputy director of hospital) or government officers who are responsible for district health care or hospital administration.

5. Total Number of Participants: 15 participants

6. Language to be used in this program: English

7. Overall Goal

To develop human resources who can utilize effectively and efficiently limited resources regarding hospital administration and health services management, and to improve the situation in health and medical care at both a country level and a regional level in the long term.

8. Program Objective:

To gain the necessary knowledge and skills on hospital administration and health services management, and summarize as a final report including action plan.

9. Expected Module Output and Contents:

This course is designed based on two different perspectives together, namely hospital management at policy level and field level. Through two perspectives, participants are expected to gain following knowledge and skill through lectures, case studies, group discussions, field visits and respective country report and research.

To understand Japan's case and experience as a model of global trend of health systems To comprehend the measures for total quality management and patient safety management on health services by solving the presented cases

To gain the necessary knowledge on management issue according to the needs of each country such as:

- 1) personnel management
- 2) material management
- 3) financial management
- 4) <u>marketing</u>

To summarize their learning and countermeasures as a final report in order to provide high quality and efficient health services back home

This program consists of the following components. Details on each component are given below:

<Structure of the program (tentative) >

Topic outline (subject to minor changes)

1st week (8/18-8/21)

- (1) Registration, Briefing
- (2) Program Presentation
- (3) General Orientation

2nd week (8/24-8/28)

- (1) Workshop (Inception Report Presentation by participants)
- (2) Orientation and initial discussion for the case study (group work)
- (3) Lecture (as a basement knowledge for the case study)
 *Health Care System and Health Financing System in Japan
 *Health Sector Reform and Hospital Reform in Japan
 *Strategic Hospital Management
 *Patient Safety and Quality Management
 *Marketing
 *Facility Management
 *Inventory and Material Management

3rd week (8/31-9/4)

(1) Lecture

*International Trend on Hospital Management and Hospital Reform *International Trend of Health Financing Method and Financial Reform *Basic concept of Hospital Financing and Hospital Financing Management *Equipment Management

- *Pharmaceutical Management
- (2) Hospital visit (to understand Japanese Health Care Providing System)

4th week (9/7-9/11)

(1) Lecture

*Personal Management *Information Management *District Health Care System *Cost Evaluation

- (2) Hospital visit (to understand the function of municipality owned hospital)
- (3) Workshop (Case Study Presentation by each group of participants)
- (4) Discussion for the Final Report (to decide each theme of the report)

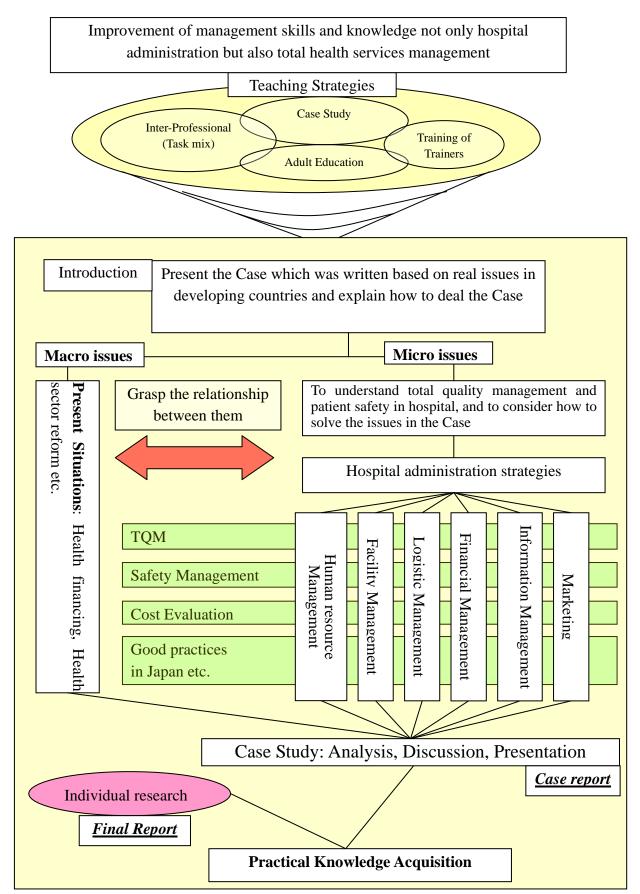
5th Week (9/14-9/18)

(1) Hospital visit

(to see a role of hospital in a community, advanced private hospital management)

6th Week (9/21-9/25)

- (1) Preparation for the Final Report
- (2) Workshop (Final Report Presentation by each participant)
- (3) Evaluation Session, Closing Ceremony



Course Concept for Hospital Administration and Health Services Management

III. Conditions and Procedures for Application

1. Expectations for the Participating Organizations:

- (1) This project is designed primarily for organizations that intend to address specific issues or problems faced in their operations. Applying organizations are expected to use the Program for those specific purposes.
- (2) In this connection, applying organizations are expected to nominate the most qualified candidates to address the issues or problems, carefully referring to the qualifications described in section III-2 below.
- (3) Applying organizations are also expected to use knowledge acquired by the nominees for the purpose.

2. Nominee Qualifications:

Applying Organizations are expected to select nominees who meet the following qualifications.

(1) Essential Qualifications

Applicants should:

- 1) be nominated by their government in accordance with the procedures mentioned in
 - 4. (Procedure for Application and Selection) below,
- 2) be university graduates or the equivalent,
- be currently engaged in hospital administration at top level management (e.g. director and/or deputy director of hospital) or government officers responsible for district health care or hospital administration
- 4) have a sufficient command of spoken and written English,

*This course requires high English ability for discussion, if you have any record/certification of official English examination e.g. TOEFL, that should be submitted for selection purpose.

- 5) be between thirty five (35) and forty five (45) years of age,
- 6) not be serving in the military, and

7) be in good health, both physically and mentally, to undergo the training.

*Pregnancy: Pregnant participants are strictly requested to complete the required procedures before departure in order to minimize the risk for their health. The procedures include ①letter of the participant's consent to bear economic and physical risks ②letter of consent from the participant's supervisor ③letter of consent from your Embassy in Japan, ④medical certificate. Please ask National Staffs in JICA office for the details.

3. Required Documents for Application

- (1) Application Form: The Application Form is available at the respective country's JICA office or the Embassy of Japan.
- (2) Nominee's English Score Sheet: to be submitted with the application form. If you have any official documentation of English ability (e.g., TOEFL, TOEIC, IELTS), please attach it (or a copy) to the application form.

(3) Inception Report: to be submitted with the application form. Typewrite the Annex-1 of this General Information, and submit it along with the Nomination Form. <u>*Application not accompanied with a completed Inception Report will not be duly</u> <u>considered as qualified</u> in the screening of candidates.

4. Procedure for Application and Selection:

(1) Submitting the Application Documents:

Closing date for application to the JICA Center in JAPAN: <u>June 15, 2009</u> <u>Note: Please confirm the closing date set by the respective country's JICA office</u> <u>or Embassy of Japan of your country to meet the final date in Japan.</u>

(2) Selection:

After receiving the document(s) through due administrative procedures in the respective government, the respective country's JICA office (or Japanese Embassy) shall conduct screenings, and send the documents to the JICA Center in charge in Japan, which organizes this project. Selection shall be made by the JICA Center in consultation with the organizations concerned in Japan based on submitted documents according to qualifications. *The organization with intention to utilize the opportunity of this program will be highly valued in the selection.*

(3) Notice of Acceptance

Notification of results shall be made by the respective country's JICA office (or Embassy of Japan) to the respective Government by **not later than** <u>July 15, 2009</u>.

5. Conditions for Attendance:

- (1) to observe the schedule of the program,
- (2) not to change the program subjects or extend the period of stay in Japan,
- (3) not to bring any members of their family,
- (4) to return to their home countries at the end of the program in Japan according to the travel schedule designated by JICA,
- (5) to refrain from engaging in political activities, or any form of employment for profit or gain,
- (6) to observe the rules and regulations of their place of accommodation and not to change the accommodation designated by JICA.

IV. Administrative Arrangements

- 1. Organizer:
 - (1) Name: JICA Tokyo
 - (2) Contact: Ms. KATSUMATA Naoko (ticthd@jica.go.jp)

Mr. YOSHIOKA Kojiro (jicatic-jice@jica.go.jp)

2. Implementing Partner:

- (1) Name: National Institute of Public Health (NIPH)
- (2) Contact: Office of International Cooperation, NIPH
- (3) URL: <u>http://www.niph.go.jp/</u>
- (4) **Remark**: NIPH was established on April 1st, 2002, integrating The Institute of Public Health, National Institute of Health Services Management and a part of the Department of Oral Science in National Institute of Infectious Disease.

The mission of the new organization is to carry out education and training of the personnel engaging in the works of public health, environmental hygiene and social welfare, and to conduct research in these areas.

At present, 15 departments and 1 center are in charge of education & training and research. In 2005, a total of 4,300 trainees attended the programs provided by the Institute.

3. Travel to Japan:

- (1) Air Ticket: The cost of a round-trip ticket between an international airport designated by JICA and Japan will be borne by JICA.
- (2) **Travel Insurance**: Term of Insurance: From arrival to departure in Japan. The traveling time outside Japan shall not be covered.

4. Accommodation in Japan:

JICA will arrange the following accommodations for the participants in Japan:

JICA Tokyo International Center (JICA TOKYO)

Address: 2-49-5 Nishihara, Shibuya-ku, Tokyo 151-0066, Japan

TEL: 81-3-3485-7051 FAX: 81-3-3485-7904

(where "81" is the country code for Japan, and "3" is the local area code)

If there is no vacancy at <u>JICA TOKYO</u>, JICA will arrange alternative accommodations for the participants. Please refer to facility guide of TIC at its URL,

http://www.jica.go.jp/english/contact/domestic/pdf/welcome.pdf

5. Expenses:

The following expenses will be provided for the participants by JICA:

- (1) Allowances for accommodation, living expenses, outfit, and shipping
- (2) Expenses for study tours (basically in the form of train tickets.
- (3) Free medical care for participants who become ill after arriving in Japan (costs related to pre-existing illness, pregnancy, or dental treatment are <u>not</u> included)
- (4) Expenses for program implementation, including materialsFor more details, please see p. 9-16 of the brochure for participants titled "KENSHU-IN

GUIDE BOOK," which will be given to the selected participants before (or at the time of) the pre-departure orientation.

6. Pre-departure Orientation:

A pre-departure orientation will be held at the respective country's JICA office (or Japanese Embassy), to provide participants with details on travel to Japan, conditions of the workshop, and other matters.

V. Other Information

1. Certificate

Participants who have successfully completed the course will be awarded <u>certificates</u> by JICA.

2. Presentation of Inception Report

Each participant is requested to make a presentation for about 10-15 minutes at the start of the training to promote mutual understanding and issues related to your working environment of the field in their respective countries.

The purpose of this exercise is

- to help participants to share the understanding among each other on the basis of own working environment as well as the different country situation and background,
- 2) to help participants to analyze their problems and challenges in their working environment /country situation.
- 3) to help participants to prepare the first step to formulate their plan aligned to the provincial/ national policy and situation.

In the presentation, please <u>focus on your management issues</u> with minimum description of background on country / hospital profile so that the discussions will be centered on the issues, which may help participants to find clues or solutions.

Brief and visual material is encouraged to make for effective presentation. Such audio-visual equipment as overhead projector, video player, slide projector, PC with Microsoft PowerPoint 2003 will be available for the participants in the seminar room.

3. Materials for the Final Report

In order to improve health management of your responsibility, every participant is required to formulate a Final Report on one of important issues based on your interests and concerns directly relating to your current job responsibility such as capacity building of workforce, improvement of logistics, etc. Necessary and helpful materials for the Final Report are as follows:

(1) Inception Report

Applicants are required to make an Inception Report (ANNEX - 1), and attach them with the Nomination form.

(2) Relevant information and documents must be brought for concerning Hospital

Strategic Plan.

(3) Annual Report and Health Statistics

It would be very much appreciated if annual reports of health and health statistics of respective countries are available as references.

4. Characteristics of This Course

This course is based on adult education theory i.e., "Experience Based Problem Solving" and "Competence Based Training". The experience of participants will be exchanged through Inception Report Presentation. Several cases are provided to be solved by the group discussion which will guide learning experience of lectureship. In relation to the case study, participants are expected to join the group discussion on a voluntary basis even after the daily training program. Site visit will provide the experience to understand Japanese Health Care System. Active participation is expected to solve the cases and explore the research on management issues. In order to satisfy the expected training contents, some training programs might be arranged even on Japan's public holidays in September. Through those activities of this course, participants are expected to develop the competency for Strategic Hospital Management.

VI. ANNEX-1:

Hospital Administration and Health Services Management (JFY 2009) *Inception Report*

Applicants are requested to prepare an inception report on the following issues and submit with the application form. The report should be typewritten in English on A4 size paper (21 cm x 29.5 cm) in single spacing at maximum of 10 pages. <u>*Application not accompanied with a completed Inception Report will not be duly considered as qualified in the screening of candidates.</u>

NOTE: Participants in this course are requested to discuss on their inception report in group discussion sessions during the course program.

Purpose of this report is to find out of your hospital faced issue and analyze it in terms of 'Hospital Administration'. Please fill in the following tables by using your country and hospital statistical data.

Name	
Country	
Institute	
Position	
Specialty	

Part 1: Country Profile

1. Vital Data

	1990	2000	2008
Total population(000)			
Percentage of population aged 60+years			
(%)			
Life expectancy at birth(years)			
Infant mortality rate/1000			
Adult literacy rate (%)			

2. Human Resources on Health

	1990	2000	2008
Total Number of Doctors			
Total Number of Nurses			
Total Number of Pharmacists			
Other Specialists(if the data available)			
Total Number of Medical Schools			

3. Top 10 Causes of Death & Percentage of Total Death

	1990	2000		2008	
1	%		%		%
2	%		%		%
3	%		%		%
4	%		%		%
5	%		%		%
6	%		%		%
7	%		%		%
8	%		%		%
9	%		%		%
10	%		%		%

4. Financing (US dollar)

		1990	2000	2008
Gross domestic	National	US\$	US\$	US\$
product(GDP)	Per capita	US\$	US\$	US\$
Total expenditure GDP	on health as % of	%		%
Private expenditure total expenditure	e of health as % of	%		%

External resources for health as % of		
general government expenditure on	%	%
health		

Question about the Health Sector Reform of your country 5. Please answer the following questions about the status of Health Sector Reform activities. 1) Is there any Health Sector Reform Policy for enhancing reform activities?........Yes / No (MD, NS, Other health related worker) 6. In your country, which is the main source to cover patients' medical costs? a) Government Tax b) Health Insurance (Public) c) Health Insurance (Private) d) Out of Pocket e) others (please describe:)

If there is the Public Health Insurance system in your country, please describe the details:

Part 2: Medical Service

1. Public Sector

1) Ownership

		Total number of hospitals	Total number of beds	Total number of medical doctors	Total number of nurses (midwife)
	Ministry of Health				
Central Government	Ministry of Education				
	Other Ministry				
District or l	Provincial				
Township o	or Village				

2) Service level

	Total number of hospitals	Total number of beds	Total number of medical doctors	Total number of nurses(midwife)
Tertiary Level				
Secondary Level				
Primary Level				

* Primary level; including clinic, health center etc.

2. Private Sector

	Total number of hospitals	Total number of beds	Total number of medical doctors	Total number of nurses(midwife)
Tertiary Level				
Secondary Level				
Primary Level				

* Primary level; including clinic, health center etc.

Part 3: Hospital Profile

1. Background	1. Background		
Address of the hospital			
Coverage area			km²
Coverage population (es	timate)		Persons
Age structure of the	% > Age 60		%
population in the area	% < Age 15		%
3 major industry	1.		%
% of working	2.		%
population in the area 3 .			%
Unemployment rate amo	ong the workin	g population	%

2. Surrounding Environment (if there are some other health institution in your area)

Name of the Institute	Private / Public	Function (Clinic/ Hospital etc.)	Number of Beds	Number of Medical doctors

3. Hospital Vital Data

Owner	ship	
Number	of beds	
	Medical doctor	Persons
Number of employees	Nurse	Persons
	Others	Persons
Average length of stay		day
Bed occupancy rate		%
Number of admiss	sions per month	Persons
Number of outp	atient per day	Persons
Number of delivery per month		Persons
Number of operation	General anesthesia	Persons
per month	Local anesthesia	Persons

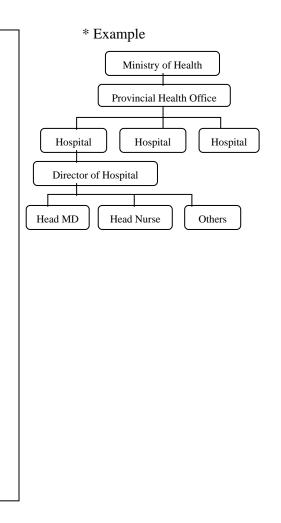
4. Clients (Patients) Data

	Out Patients (reason)	Inpatients (reason)
1	%	%
2	%	%
3	%	%
4	%	%
5	%	%
6	%	%
7	%	%
8	%	%
9	%	%
10	%	%

Top 10 Reasons for visiting hospital & Percentage of total patients

5. Management: Organizational Structure

Please describe your hospital's Organizational Structure



6. Financing

Source of the hospital budget

Sou	irce	% of Total Hospital Revenue
Generation	Central	
Government	Provincial or city	
User charge(paid by the patients)		
Insurance or social	security scheme	
Others(donation etc)		

* Please Describe Your Hospital Financial Management

(How to receive the budget from where and when; how to use the revenue; who have a power to decide the way of spending money; how to get the refund from insurance fund, if any insurance fund available; how to operate the user fee system and exemption system if you have the system, etc.)

7. Other Activities

Please describe the other activities besides providing medical care, if you have.

(Health Education in a school etc.)

8. Major Management Issues of your hospital

Please make a list of the issues which you face now in your hospital.

1.		
2.		
3.		
4.		
5.		

9. Please describe your theme of research paper based on your interest. (Every participant is required to formulate a final report by researching related issues on individual interests at the end of the course.)

10. Please describe your expectations for this course. (Please acknowledge that the curriculum may not meet all your expectations.)

Thank you very much

For Your Reference

JICA and Capacity Development

The key concept underpinning JICA operations since its establishment in 1974 has been the conviction that "capacity development" is central to the socioeconomic development of any country, regardless of the specific operational scheme one may be undertaking, i.e. expert assignments, development projects, development study projects, training programs, JOCV programs, etc.

Within this wide range of programs, Training Programs have long occupied an important place in JICA operations. Conducted in Japan, they provide partner countries with opportunities to acquire practical knowledge accumulated in Japanese society. Participants dispatched by partner countries might find useful knowledge and re-create their own knowledge for enhancement of their own capacity or that of the organization and society to which they belong.

About 460 pre-organized programs cover a wide range of professional fields, ranging from education, health, infrastructure, energy, trade and finance, to agriculture, rural development, gender mainstreaming, and environmental protection. A variety of programs and are being customized to address the specific needs of different target organizations, such as policy-making organizations, service provision organizations, as well as research and academic institutions. Some programs are organized to target a certain group of countries with similar developmental challenges.

Japanese Development Experience

Japan was the first non-Western country to successfully modernize its society and industrialize its economy. At the core of this process, which started more than 140 years ago, was the "*adopt and adapt*" concept by which a wide range of appropriate skills and knowledge have been imported from developed countries; these skills and knowledge have been adapted and/or improved using local skills, knowledge and initiatives. They finally became internalized in Japanese society to suit its local needs and conditions.

From engineering technology to production management methods, most of the know-how that has enabled Japan to become what it is today has emanated from this "*adoption and adaptation*" process, which, of course, has been accompanied by countless failures and errors behind the success stories. We presume that such experiences, both successful and unsuccessful, will be useful to our partners who are trying to address the challenges currently faced by developing countries.

However, it is rather challenging to share with our partners this whole body of Japan's developmental experience. This difficulty has to do, in part, with the challenge of explaining a body of "tacit knowledge," a type of knowledge that cannot fully be expressed in words or numbers. Adding to this difficulty are the social and cultural systems of Japan that vastly differ from those of other Western industrialized countries, and hence still remain unfamiliar to many partner countries. Simply stated, coming to Japan might be one way of overcoming such a cultural gap.

JICA, therefore, would like to invite as many leaders of partner countries as possible to come and visit us, to mingle with the Japanese people, and witness the advantages as well as the disadvantages of Japanese systems, so that integration of their findings might help them reach their developmental objectives.



CORRESPONDENCE

For enquiries and further information, please contact the JICA office or the Embassy of Japan. Further, address correspondence to:

> JICA Tokyo International Center (JICA TOKYO) Address: 2-49-5 Nishihara, Shibuya-ku, Tokyo 151-0066, Japan TEL: +81-3-3485-7051 FAX: +81-3-3485-7904

VI. ANNEX-1:

Hospital Administration and Health Services Management

(JFY 2009)

Inception Report

Applicants are requested to prepare an inception report on the following issues and submit with the application form. The report should be typewritten in English on A4 size paper (21 cm x 29.5 cm) in single spacing at maximum of 10 pages. <u>*Application not accompanied with a completed Inception Report will not be duly considered as qualified in the screening of candidates.</u>

NOTE: Participants in this course are requested to discuss on their inception report in group discussion sessions during the course program.

Purpose of this report is to find out of your hospital faced issue and analyze it in terms of 'Hospital Administration'. Please fill in the following tables by using your country and hospital statistical data.

Name	
Country	
Institute	
Position	
Specialty	

Part 1: Country Profile

1. Vital Data

	1990	2000	2008
Total population(000)			
Percentage of population aged 60+years			
(%)			
Life expectancy at birth(years)			
Infant mortality rate/1000			
Adult literacy rate (%)			

2. Human Resources on Health

	1990	2000	2008
Total Number of Doctors			
Total Number of Nurses			
Total Number of Pharmacists			
Other Specialists(if the data available)			
Total Number of Medical Schools			

3. Top 10 Causes of Death & Percentage of Total Death

	1990	2000	2008	
1	%	%	%	
2	%	%	%	
3	%	%	%	
4	%	%	%	
5	%	%	%	
6	%	%	%	
7	%	%	%	
8	%	%	%	
9	%	%	%	
10	%	%	%	

4. Financing (US dollar)

		1990	2000	2008
Gross domestic	National	US\$	US\$	US\$
product(GDP)	Per capita	US\$	US\$	US\$
Total expenditure GDP	on health as % of	%		%
Private expenditure total expenditure	e of health as % of	%		%

External resources for health as % of general government expenditure on		%
health		

Question about the Health Sector Reform of your country 5. Please answer the following questions about the status of Health Sector Reform activities. 4) Is there any policy to foster Health Worker?Yes / No (MD, NS, Other health related worker) 6. In your country, which is the main source to cover patients' medical costs? a) Government Tax b) Health Insurance (Public) c) Health Insurance (Private) d) Out of Pocket e) others (please) describe:

If there is the Public Health Insurance system in your country, please describe the details:

Part 2: Medical Service

1. Public Sector

1) Ownership

		Total number of hospitals	Total number of beds	Total number of medical doctors	Total number of nurses (midwife)
	Ministry of Health				
Central Government	Ministry of Education				
	Other Ministry				
District or I	Provincial				
Township o	or Village				

2) Service level

	Total number of hospitals	Total number of beds	Total number of medical doctors	Total number of nurses(midwife)
Tertiary Level				
Secondary Level				
Primary Level				

* Primary level; including clinic, health center etc.

2. Private Sector

	Total number of hospitals	Total number of beds	Total number of medical doctors	Total number of nurses(midwife)
Tertiary Level				
Secondary Level				
Primary Level				

* Primary level; including clinic, health center etc.

Part 3: Hospital Profile 1. Background

Address of the hospital		
Coverage area		km²
Coverage population (es	stimate)	Persons
Age structure of the	% > Age 60	%
population in the area	% < Age 15	%
3 major industry	1.	%
% of working	2.	%
population in the area	3.	%
Unemployment rate amo	ong the working population	%

2. Surrounding Environment (if there are some other health institution in your area)

Name of the Institute	Private / Public	Function (Clinic/ Hospital etc.)	Number of Beds	Number of Medical doctors

3. Hospital Vital Data

Owne	rship	
Number		
	Medical doctor	Persons
Number of employees	Nurse	Persons
	Others	Persons
Average len	gth of stay	day
Bed occup	ancy rate	%
Number of admis	sions per month	Persons
Number of outp	atient per day	Persons
Number of deliv	ery per month	Persons
Number of operation	General anesthesia	Persons
per month	Local anesthesia	Persons

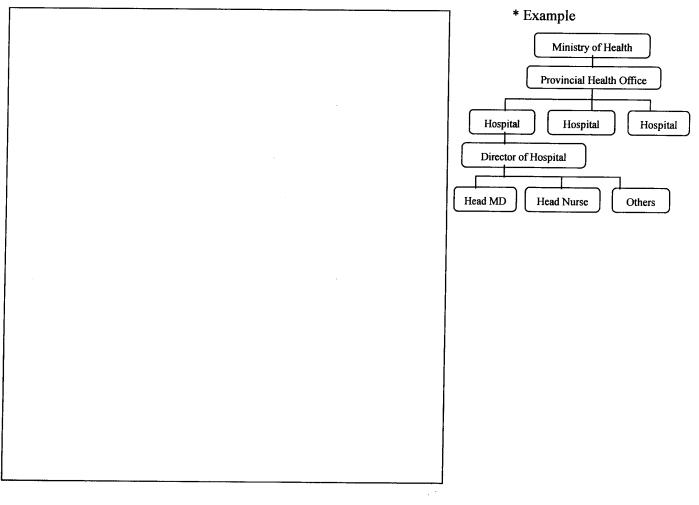
4. Clients (Patients) Data

Top 10 Reasons for visiting hospital & Percentage of total patients

	Out Patients (reason)	Inpatients (reason)
1	%	%
2	%	%
3	%	%
4	%	%
5	%	%
6	%	%
7	%	%
8	%	%
9	%	%
10	%	%

5. Management: Organizational Structure

Please describe your hospital's Organizational Structure



6. Financing

Source of the hospital budget

Se	ource	% of Total Hospital Revenue
	Central	
Government	Provincial or city	· · · · · · · · · · · · · · · · · · ·
User charge(paid	by the patients)	
Insurance or socia	l security scheme	
Others(donation e	tc)	

* Please Describe Your Hospital Financial Management

(How to receive the budget from where and when; how to use the revenue; who have a power to decide the way of spending money; how to get the refund from insurance fund, if any insurance fund available; how to operate the user fee system and exemption system if you have the system, etc.)

7. Other Activities

Please describe the other activities besides providing medical care, if you have.

(Health Education in a school etc.)

8. Major Management Issues of your hospital

Please make a list of the issues which you face now in your hospital.

1.	
2.	
3.	
4.	
5.	

9. Please describe your theme of research paper based on your interest. (Every participant is required to formulate a final report by researching related issues on individual interests at the end of the course.)

10. Please describe your expectations for this course. (Please acknowledge that the curriculum may not meet all your expectations.)

Thank you very much

Guidelines of Application Form for the JICA Training and Dialogue Program

The attached form is to be used to apply for the training and dialogue programs of the Japan International Cooperation Agency (JICA), which are implemented as part of the Official Development Assistance Program of the Government of Japan. Please complete the application form while referring to the following and consult with the respective country's JICA Office - or the Embassy of Japan if the former is not available - in your country for further information.

1. Parts of Application Form to be completed

1) Which part of the form should be submitted?

It depends on the type of training and dialogue program you are applying for.

>Application for Group and Region Focused Training Program

Official application and Parts A and B must be submitted.

>>Application for Country Focused Training Program including Counterpart Training Program

Part B will be submitted. Official application and Part A need not to be submitted

2) How many parts does the Application Form consist of?

The Application Form consists of three parts as follows;

Official Application

This part is to be confirmed and signed by the head of the relevant department/division of the organization which is applying.

Part A. Information on the Applying Organization

This part is to be confirmed by the head of the relevant department/division of the organization which is applying.

Part B. Information About the Nominee

This part is to be completed by the person who is nominated by the organization applying. <u>The applicants for Group and Region Focused Training Program are required to fill in **every** <u>item</u>. As for the applications for Country Focused Training Program including Counterpart Training Program and some specified International Dialogue Programs, it is required to fill in the designated "**required**" items as is shown on the Form.</u>

Please refer to the General Information to find out which type the training and dialogue program that your organization applies for belongs to.

2. How to complete the Application Form

In completing the application form, please be advised to:

- (a) carefully read the General Information (GI) for which you intend to apply, and confirm if the objectives and contents are relevant to yours,
- (b) be sure to write in the title name of the course/seminar/workshop/project accurately according to the GI, which you intend to apply,
- (c) use a typewriter/personal computer in completing the form, of which the electronic



version is available on the web site: <u>http://www.jica.go.jp/</u>, or write in <u>block</u> <u>letters</u>,

- (d) fill in the form in **English**,
- (e) use \square or "x" to fill in the () check boxes,
- (f) attach a picture of the Nominee,
- (g) attach additional page(s) if there is insufficient space on the form,
- (h) prepare the necessary document(s) described in the General Information (GI), and attach it (them) to the form,
- (i) confirm the application procedure stipulated by your government, and
- (j) submit the original application form with the necessary document(s) to the responsible organization of your government according to the application procedure.

Any information that is acquired through the activities of the Japan International Cooperation Agency (JICA), such as the nominee's name, educational record, and medical history, shall be properly handled in view of the importance of safeguarding personal information.

3. Privacy Policy

1) Scope of Use

Any information used for identifying individuals that is acquired by JICA will be stored, used, or analyzed only within the scope of JICA activities. JICA reserves the right to use such identifying information and other materials in accordance with the provisions of this privacy policy.

2) Limitations on Use and Provision

JICA shall never intentionally provide information that can be used to identify individuals to any third party, with the following three exceptions:

- (a) In cases of legally mandated disclosure requests;
- (b) In cases in which the provider of information grants permission for its disclosure to a third party;
- (c) In cases in which JICA commissions a party to process the information collected; the information provided will be within the scope of the commissioned tasks.

3) Security Notice

JICA takes measures required to prevent leakage, loss, or destruction of acquired information, and to otherwise properly manage such information.



Training Programs under Technical Cooperation with the Government of Japan

Application Form for the JICA Training and Dialogue Program

OFFICIAL APPLICATION

(to be confirmed and signed by the head of the relevant department / division of the applying organization)

1. Title: (Please write down as shown in the General Information)

2. N	umbe	er: (Pl	lease	write d	own a	s shov	vn in th	ne Ger	neral Inform	nation)
J	0		-							

3. Country Name:

4. Name of Applying Organization:

5. Name of the Nominee(s):

1)	3)
2)	4)

Our organization hereby applies for the training and dialogue program of the Japan International Cooperation Agency and proposes to dispatch qualified nominees to participate in the programs.

Date:			Signature:					
Name:								
Designation / I	Position							
Department / Division				Official Stamp				
Office Address	and	Address:						
Contact Inform	nation	Telephone:	Fax:	E-mail	:			

Confirmation by the organization in charge (if necessary)

I have examined the documents in this form and found them true. Accordingly I agree to nominate this person(s) on behalf of our government.

Date:	Signature:	
Name:		
Designation / Position		Official Stamp
Department / Division		



Part A: Information on the Applying Organization

(to be confirmed by the head of the department / division)

1. Profile of Organization

1) Name of Organization:

2) The mission of the Organization and the Department / Division:

2. Purpose of Application

1) Current Issues: Describe the reasons for your organization claiming the need to participate in the training and dialogue program, with reference to issues or problems to be addressed.

2) Objective: Describe what your organization intends to achieve by participating in the training and dialogue program.



3) Future Plan of Actions: Describe how your organization shall make use of the expected achievements, in addressing the said issues or problems.

4) Selection of the Nominee: Describe the reason(s) the nominee has been selected for the said purpose, referring to the following view points; 1) Course requirement, 2) Capacity /Position, 3) Plans for the candidate after the training and dialogue program, 4) Plan of organization and 5) Others.



Part B: Information about the Nominee

(to be completed by the Nominee)

NOTE>>>The applicants for Group and Region Focused Training Program are required to fill in "Every Item". As for the applications for Country Focused Training Program including Counterpart Training Program and some specified International Dialogue Programs, it is required to fill in the designated "**required**" items as is shown below.

1. Title: (Please write down as shown in the General Information) (required)

2. N	umb	er: (Pl	lease	write d	own a	s shov	vn in th	ne Ger	neral Info	ormatior	n) (require	d)
J	0		-									

Attach the nominee's photograph (taken within the last three months) <u>here</u> Size: 4x6 (Attach to the documents to be submitted.)

3. Information about the Nominee(nos. 1-9 are all required)

1) Name of Nominee (as in the passport)

Family Name

Fi	First Name															
Μ	Middle Name															
													 			L

2) Nationality			5) Date of	of Birth (p	lease write	e out the
(as shown in the passport)			month in	n English a	ıs in "Apri	I")
3) Sex	() Male	() Female	Date	Month	Year	Age
4) Religion						

6) Present Position and Current Duties

Organization							
Department / Division							
Present Position							
Date of employment by the	Date	Month	Year	Date of assignment to the	Date	Month	Year
present organization				present position			

7) Type of Organization

() National Governmental	() Local Governmental	() Public Enterprise
() Private (profit)	() NGO/Private (Non-profit)	() University
() Other ()	

8) Outline of duties: Describe your current duties



9) Contact Information

	Address:					
Office	TEL:	Mobile (Cell Phone):				
	FAX:	E-mail:				
	Address:					
Home	TEL:	Mobile (Cell Phone):				
	FAX:	E-mail:				
	Name:					
	Relationship to you:					
Contact person in emergency	Address:					
	TEL:	Mobile (Cell Phone):				
	FAX:	E-mail:				

10) Others (if necessary)

4. Career Record

1) Job Record (After graduation)

	City/	City/ Period				
Organization	Country	From	То	Position or Title	Brief Job Description	
	Country	Month/Year	Month/Year			

2) Educational Record (Higher Education)(required)

	•	• •		,, ,			
		City/	Period				
	Institution		From	То	Degree obtained	Major	
		Country	Month/Year	Month/Year			
Ī							
Ī							
Ī							



Version 071011

3) Training or Study in Foreign Countries; please write your past visits to Japan specifically as much as possible, if any.

	/			
	City/	Period		
Institution		From	То	Field of Study / Program Title
	Country	Month/Year	Month/Year	

5. Language Proficiency (required)

1) Language to be used in the progra	am (as in GI)			
Listening	() Excellent	()Good	()Fair	()Poor
Speaking	() Excellent	()Good	()Fair	() Poor
Reading	() Excellent	()Good	()Fair	() Poor
Writing	() Excellent	()Good	()Fair	() Poor
Certificate (Examples: TOEFL, TOEIC)				
2) Mother Tongue				
3)Other languages ()	() Excellent	() Good	()Fair	() Poor

¹ Excellent: Refined fluency skills and topic-controlled discussions, debates & presentations. Formulates strategies to deal with various essay types, including narrative, comparison, cause-effect & argumentative essays.

¹ Good: Conversational accuracy & fluency in a wide range of situations: discussions, short presentations & interviews.
 ² Compound complex sentences. Extended essay formation.
 ³ Fair: Broader range of language related to expressing opinions, giving advice, making suggestions. Limited compound compound complex sentences.

and complex sentences & expanded paragraph formation. ¹ Poor: Simple conversation level, such as self-introduction, brief question & answer using the present and past tenses.



6. Expectation on the applied training and dialogue program

1) Personal Goal: Describe what you intend to achieve in the applied training and dialogue program in relation to the organizational purpose described in Part A-2.

2) Relevant Experience: Describe your previous vocational experiences which are highly relevant in the themes of the applied training and dialogue program. (required)

3) Area of Interest: Describe your subject of particular interest with reference to the contents of the applied training and dialogue program. (required)

*7. Declaration (to be signed by the Nominee) (required)

I certify that the statements I made in this form are true and correct to the best of my knowledge.

- If accepted for the program, I agree:
- (a) not to bring or invite any member of my family (except for the program whose period is one year or more),
- (b) to carry out such instructions and abide by such conditions as may be stipulated by both the nominating government and the Japanese Government regarding the program,
- (c) to follow the program, and abide by the rules of the institution or establishment that implements the program,
- (d) to refrain from engaging in political activity or any form of employment for profit or gain,
- (e) to return to my home country at the end of the activities in Japan on the designated flight schedule arranged by JICA,
- (f) to discontinue the program if JICA and the applying organization agree on any reason for such discontinuation.
- (g) to consent to waive exercise of my copyright holder's rights for documents or products that are produced during the course of the project, against duplication and/or translation by JICA, as long as they are used for the purposes of the program.

Date:	Signature:
	Print Name:



)

MEDICAL HISTORY AND EXAMINATION

1. Present Status

(a) Do you currently use any drugs for the treatment of a medical condition? (Give name & dosage.)

() No	() Yes >> Na), Quantity							
	()							
(b) Are you pregnant?									
() No) No () Yes (months)								
(c) Are yo	(c) Are you allergic to any medication or food?								
() No	() No () Yes >>> () () Food () Other:								
Medication									
(d) Please	(d) Please indicate any needs arising from disabilities that might necessitate additional support or facilities.								

(

Note: Disability does not lead to exclusion of persons with disability from the program. However, upon the situation, you may be directly inquired by the JICA official in charge for a more detailed account of your condition.

2. Medical History

(a) Have you had any significant or serious illness? (If hospitalized, give place & dates.)

Past:	() N	o () Yes>>Name of illness (), Place & dates					
		()						
Present:	() N	o () Yes>>Present Condition						
		()					
(b) Have y	(b) Have you ever been a patient in a mental hospital or been treated by a psychiatrist?								
Past:	() N	o () Yes>>Name of illness (), Place & dates					
		()						
Present:	() N	o () Yes>>Present Condition						

(c) High blood pressure

Past:	() No	() Yes		
Present:	() No	() Yes>>Present Condition () mm/Hg to () mm/Hg

(d) Diabetes (sugar in the urine)							
Past:	() No	() Yes				
Present:			()	Yes>>Present		Condition
	() No	()	
			Are you taking any m	edicine or insulin?		() No	() Yes

(e) Past History: What illness(es) have you had previously?

() Stomach and	() Liver Disease	() Heart Disease	() Kidney Disease		
Intestinal Disorder					
() Tuberculosis	() Asthma	() Thyroid Problem			
() Infectious Disease >>> Specify name of illness					
()			
() Other >>> Specify					
()		

(e') Has this disease been cured?

		() No (Specify name of illness)			
() Yes	Present Condition:			
		()		



3. Other: Any restrictions on food and behavior due to health or religious reasons?

I certify that I have read the above instructions and answered all questions truthfully and completely to the best of my knowledge.

I understand and accept that medical conditions resulting from an undisclosed pre-existing condition may not be financially compensated by JICA and may result in termination of the program.

Date:	Signature:
	Print Name: