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FINAL REPORT

MOROCCO HEALTH MANAGEMENT IMPROVEMENT PROJECT
Project No. 608-0151
Contract No. NEB-0151-C-00-2012-00

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FINAL REPORT: HEALTH MANAGEMENT IMPROVEMENT, MOROCCO

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HEALTH MANAGEMENT IMPROVEMENT PROJECT

FINAL REPORT

Project No. 608-0851
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INTRODUCTION

Although the project officially came to an end on 30 September 1987, there has been no MSH presence in Morocco since early 1986. The resident team left in the summer of 1985, with the exception of the programmer who remained until early January, 1986. The Ministry subsequently asked that remaining funds be reallocated for the procurement of material to expand the capacity of the mini-computer system. AID agreed, and as a result, the MSH role during the last 21 months of the project was limited to the procurement of that material. This report is necessarily based primarily on familiarity with the situation while the MSH team was in Morocco, however the former MSH chief-of-party visited the Ministry of Health during a brief stay in Morocco in April, 1986, and again a year later, and his observations from those visits are incorporated in the report.

Chapters I and II are a succinct review of objectives, inputs and critical variables. Chapter III briefly recounts the process anticipated to attain each of these objectives; factors that influenced what was, in fact, done; accomplishments; and, observations regarding the future in the case of the several fields of activity. Training is very succinctly reported upon in Chapter IV. Finally, in Chapters V and VI, "lessons and reminders," and recommendations are presented. Annexes A, B, and C are, respectively, a list of short-term technical assistance missions, documents produced, and people trained.

I. OBJECTIVES AND INPUTS

A. OBJECTIVES

Project and Contract objectives were spelled out as follows:

- Improvement of central ministry management analysis and program planning and evaluation capacity;
- Improvement of ministry data processing and analysis capacity;
- Improvement of operational records management (service and use statistics);
- Increasing the coordination of program planning and operations;
- Improvements in personnel system;
- Improvements in programmatic budgeting and accounting;
- Improvements in pharmaceutical distribution and supply;
- Improvements in logistics system (material & transport).

B. RESOURCES/INPUTS

The contract (and project) was to last three years, starting January 1982. It called for the provision and support of a two-person technical assistance team throughout the life of the project, along with thirty person-months of short-term technical assistance.

As the project evolved, the contract was amended 11 times. With the last amendment, the life of project became 64 months, from January 1982 through September 1987. Some of the procurement initially to be done by AID was delegated to MSH and increased. A programmer was added to the resident team in September, 1983, and short-term technical assistance was increased (see Annex A for an overview).

II. BACKGROUND FACTORS

A. STRATEGY

Objectives were to be attained through a new unit in the Ministry which was to be responsible for management improvement. The technical assistance was to complement the staff of the unit (6-8 qualified Moroccans anticipated in project plans) and provide technical inputs not available within the Ministry. The technical assistance programmed was rather limited relative to the scope of the several objectives, but this was explained by

- a) relatively intensive use of short-term consultants (30 person months planned in the 36 month project);
- b) the fact that Morocco is not lacking in well-trained, experienced people capable of playing a major role in the type of work called for to achieve project objectives; and
- c) the understanding that an appropriate number of such Moroccans would be working on project activities.

In practice, short-term consulting resources were increased and totaled approximately 33 person months in country, over 90% concentrated between the 10th and 40th months of the project (more was programmed, but cut in favor of hardware procurement at Ministry request in 1986).¹ The Moroccans assigned to work full-time with MSH were fewer in number and in most cases less qualified than the planners anticipated. The new unit they were to staff was established on the eve of the departure of the technical assistance team.

B. MINISTRY ORGANIZATIONAL STRUCTURE

The Ministry has long been organized as a bipolar structure, with all units under either the Department of Technical Affairs (DAT) or the Department of Administrative Affairs (DAA), the former run by physicians, the latter by administrators. Each has its own perspective, and conflict between the two is not unusual. Reorganization plans to diminish the extent of this bipolarization were being considered before the project and in changing forms throughout its life, but as of Spring 1987 had not been put into effect.

The objectives of the Project spread across responsibilities of the two Departments; it could not succeed, or even progress without cooperation from both. Experience during much of the first year made it clear that being too closely identified with either department would seriously impede any work that touched on responsibilities of the other.

To avoid such difficulties the Secretary General publicly, if informally, attached the project to his own office, above the two departments, and MSH took care to keep both the DAA and the DAT informed and involved. Through the spring of 1984, recognition of the Secretary General's interest was ensured through coordinating committee meetings every few weeks over which he presided. These meetings were attended by representatives of all services involved in Project activity (often 20-40 people), thus ensuring widespread awareness. As Project activities became more numerous and more involved, the duration of these meetings increased, then their fruitfulness and frequency diminished to become rare by the last year of the Project.

C. CONTRACTOR INSTALLATION IN THE MINISTRY

The MSH team was quite reasonably expected to be housed in the Ministry. However, Ministry office space was over-crowded when the Project began. As a result of delays in completing a new Ministry annex, the technical assistance team was based in borrowed space at USAID for its first five months. The Ministry did provide good office space for the team and the Moroccans assigned to work with it from August, 1982, to the end of the project. The Management Unit has continued to occupy the offices since the departure of the technical assistance team.

¹ Person-months here refer to time in country; this will differ from accounting figures due to travel time and the authorization of six-day weeks.

D. ORGANIZATIONAL DEVELOPMENT/TECHNICAL IMPROVEMENT

During the early months of the project, an effort was made to give important roles to both technical efforts and organizational development techniques to attain project objectives. By the end of the first year, it was decided that this approach was not likely to be effective in the short lifespan of the project and with the limited staff available, and emphasis was focused on identification and implementation of technical improvements.

E. TOP LEVEL PROJECT SUPPORT

A project to improve management can be (and often is) threatening to those whose management is to be improved. Resistance to change is almost inevitable. One asset to any effort to bring about improvements (changes) is strong support from top management. The project had very good support from the Secretary General and, particularly after the first year, from the heads of the two departments. These officials were rarely prepared to be the project "champion" when there was resistance from their senior subordinates, or when their own or the Minister's management practices were threatened, but their support resolved many conflicts and was an essential contributor to the accomplishments of the project.

In the highly centralized structure of the Ministry of Health, the contractor and Ministry personnel working on the project were put at a major disadvantage by the fact that the Minister was not particularly interested in management or in the project. The real significance of this became all too obvious after the appointment of a new Minister who was a manager and planner under instructions from His Majesty to improve the management of the Ministry. This happened three months before the scheduled termination of long-term technical assistance. It ensured the formal establishment of the Management Unit, greatly improved its staffing, and provided strong support for activities begun in the context of the project but not yet finished. It also demonstrated how much more could have been done through the project had there been such support from the start.

III. ACTIVITY AND ACCOMPLISHMENTS

A. MANAGEMENT IMPROVEMENT CAPACITY

The project was to (a) "upgrade management analysis capability within [the] central Ministry," and (b) "provide a corps of skilled personnel for implementation and overall coordination of management improvement activities of the Ministry." The process was to "focus on hiring additional personnel and on upgrading skills and resources of existing personnel," and required "creation of an appropriate organizational instrument."²

² From the descriptions of "Major Project Modules", Module 1000, Annex 2 of the Contract.

Several Ministry staff members worked more or less closely with the technical assistance team and consultants during the life of the project. Those assigned full-time to work in the project, and numerous others with varying degrees of involvement, participated in training under project auspices in or out of the country.³ Through on-the-job experience and training, the capacity of existing staff to analyze and improve management was increased. A number of individuals in the Ministry are now better equipped than before the project to undertake management improvement efforts.

However, the Ministry itself is less well equipped than hoped, or than would have been the case had

- (a) the personnel assigned full-time to project work been more experienced, more senior and more numerous, and
- (b) the envisaged "organizational instrument" been formally established with a qualified Moroccan named to direct it at the beginning, rather than the end of the project.

In practice, during all but the last months of technical assistance, the MSH team plus two to three Ministry staff members assigned to work with it were identified as being a "Management Unit" or a "Management and Methods Office." This unofficial "unit" reported to the Secretary General in an arrangement that worked out well in terms of providing access and minimizing the problems with "channels" that can paralyze activity in any bureaucracy. However, the unit did not formally exist and was not the full-time responsibility of any Ministry official. As a result, no Moroccan was learning on-the-job how to run such a unit and the unit was not establishing a tenable role for itself within the Ministry; it was (correctly) perceived as essentially a technical assistance vehicle. Moreover, those assigned to it had no sense of security and no champion familiar with the system to plead their causes and resolve their inevitable personal problems with the bureaucracy; learning, morale and productivity suffered.

In effect, the technical assistance personnel were left to pursue project objectives with two fairly junior, but hard-working assistants and - for the last year - one who was more senior, plus whatever help could be obtained from the Divisions affected by, or otherwise interested in specific undertakings.

During the first quarter of 1985, early in the one year extension then in effect, the Minister officially made the unit the "Organization and Methods Service" and named the senior staff member then assigned to it "Chef de Service." The new "chef" left the Service and the Ministry a few weeks later for a more attractive para-public sector job. He was promptly replaced by a colleague who had been closely associated with project activities in the Personnel Division and had participated in project training courses. Two additional middle management people were added to the staff, and very shortly, a three-person secretariat. Three months later the technical assistance team left, as scheduled.

³ Participants in training activities are listed in Annex B.

Thus, the organizational unit was finally created and staffed; it is still in place. At the time the contractor team left (July 1985), two junior staff members of the unit had 1.5 and 3 years respectively of experience in the unit, and the new head had about 1.5 years experience of working with the unit from his post in the Personnel Division. The two other staffers were new. This was not the unit envisaged in the plans, with a Moroccan staff of six to eight people who had three years experience running the unit and carrying out project activities in collaboration with technical assistance, but its staff embodied some such experience and the Minister seemed to be ready to give it a chance to do as much as it proved capable of handling.

Project plans had called for the Moroccan staff of the management unit to play a major role in project implementation, and for a well-staffed management unit to be one of the fruits of the project. Failure early in the project to assign adequate staff in terms of either qualifications or numbers limited both the work that could be done in the diverse technical areas and the quality of the unit left in place after the project.

In the Spring of 1987, two years after the technical assistance team left, the "chef de service" remained. He had been joined by a former colleague from the Personnel Division who had done an MBA in the US under the project and 3-4 new recruits. The unit now seems to be trying to focus on human resources planning, and its role in other areas appears to have diminished since 1985.

B. DATA PROCESSING AND ANALYSIS CAPACITY

According to initial plans, the project was to "use appropriate computer technology to make more effective and efficient the Ministry's storage, retrieval, reporting and analysis of data, (particularly in the control and evaluation of day-to-day operations)." The system was to be "flexible and adaptable to [the] many and changing needs of Ministry...easy to use and maintain." The process was to focus "on review of present and anticipated needs, evaluation of technical alternatives, acquisition and use of hardware and software, training of operations personnel and debugging, modification and implementation of [the] system."⁴

During most of the first project year, work in this area was postponed in favor of concentration on organization development and management training. Early in 1983, on the basis of discussions with Ministry officials and the technical assistance team, a consultant outlined an approach to what became "informatique" in the project context. Its major elements included,

- * Careful attention to the wider system elements:
 - Supporting procedures for information collection;
 - Self-sufficiency in systems analysis and design skills;
 - Information user analysis and education;

- * Selection of an organizational focus within the Ministry for "informatique" development and support;

- * Identification and training of "informatique" management;

⁴ From the descriptions of "Major Project Modules", Module 2000, Annex 2 of the Contract.

- * Development of a nucleus of skilled informatique professionals;
- * Acquisition of a central computer for use in processing of survey data and health statistics;
- * Detailed analyses of the Personnel and Logistics sub-systems, and design of computer application;
- * Acquisition and installation of simple, small-scale equipment for the Personnel and Logistics applications;
- * Subsequent additional application analysis and design by the "Informatique" unit, with minimum external assistance.

These recommendations received Ministry approval and became the basis of subsequent efforts. An implementation plan was produced during a follow-up consultancy in June, 1983.

The Project provided equipment, software, training and technical assistance to those who would use the computers and who would support other users. This meant the "Service d'Exploitation Mécanographique" (SEM), which was the "informatique" service, and other services. The core of the strategy in this area was having all parties concerned, but particularly management and staff of SEM, develop on-the-job their capacity in the needs analysis, planning and development of applications (e.g. the personnel and vehicle park information systems) for operational services. The aim was to have them learn by doing, to get the applications developed and to ensure that Ministry staff could support the applications after the departure of the technical assistance team.

The SEM was the obvious choice for "organizational focus." However, it was not a perfect choice. SEM had virtually no computer hardware of its own and its director and most of the staff were statisticians; their experience was primarily with surveys and studies. In management information systems, they had no training or experience, and their past work was seldom tied to daily operations of the Ministry (as is MIS activity). SEM was located several kilometers from the main Ministry offices and the "management" users envisaged, limiting informal contact and creating logistics problems. Even the most senior staff had little experience with micro-computers and (quite understandably) none with applications programs that were then becoming available; they tended not to consider them serious tools, much preferring to do their own programming and to work on larger systems. In addition, with only two or three experienced programmers, even when staff was expanded by adding several new graduates, their inexperience and the supervision they required meant that productive capacity was very limited. SEM also had no experience managing computer systems, having always been the users of others' hardware in the past. On the other hand, SEM personnel did have experience using computers for survey processing and analysis, and for processing of service statistics, and its staff, although small, did include the only Ministry programmer/analysts.

SEM's senior analyst/engineer and a colleague were sent to the US for a short-course in Information Service Management in 1983, and the senior of the two men participated in a short-term (6 weeks) management training in Canada in 1984. Meanwhile, SEM staff was expanded with the recruitment of several new engineers, programmers and technicians (all new graduates) late in 1983 and subsequently.

Hardware procurement began immediately after the "informatique" planning consultancy in June 1983. Four micro-computers, the first "small-scale equipment," were installed in the Management Unit and SEM in September for initial learning and applications development. Seven more micros were installed in the same two units plus the Personnel and the Planning (Infrastructure) Divisions in May 1984. The procurement of an HP 3000 (a "mini") as the central computer was approved by AID in February 1984, an order signed in March, and the equipment installed during the last quarter of that year, 3-4 months after the scheduled delivery date. The capacity of the mini-system was substantially increased in 1987, in the last phase of the project, to facilitate its use as the central processing unit for the Ministry's MIS.

Informal instruction in the use of the micros was given from the time of their arrival. In addition, four SEM staff members attended a ten-week course in micro-computer and applications software use in the US in 1984, several half day sessions on specific software were run for SEM and other Ministry personnel at the Management Unit, and technical assistance was regularly provided by the MSH programmer and other members of the technical assistance team. Training in the use of the "mini" was provided by the supplier as part of the procurement contract.

SEM personnel played major roles in applications development and testing activities. The systems analysis for the personnel information system was done by an SEM analyst; some of the programming for that system and all of the programming for the logistics (vehicle park) systems was done by SEM staff; and they were involved in computer-related project work as much as possible, both to develop their capability (most of the staff was very inexperienced) and to get the jobs done. When the technical assistance terminated, SEM personnel were expanding both the logistics and the personnel information systems from pilot to full-scale level. Two years later, they had moved the logistics system to the mini-computer, had prepared programs to run the personnel information system on the mini, and were working on other systems.

It should be noted that the Management Unit also helped the Infrastructure Division introduce micro-computers for its analysis and planning work. There were no professional "informaticiens" in that Division, but several staff members developed considerable skill with spreadsheet, data base and word processing software.

The Ministry had far more "informatique" capacity at the end of the project than at the beginning. There are still key weaknesses in management and lack of depth of technical expertise (due to high turnover rates, most staff is still very new and inexperienced); if not corrected, these are likely to create real problems as the MIS becomes increasingly dependent on SETI's (see below) management of the mini-computer. In addition, there is little or no organized capacity to support micro-computer users. On the other hand, late in 1985, the Minister separated the "informatique" operations and staff from SEM to create a "Service d'Etudes et Traitement Informatique," and by late 1987 the new service (SETI) is to be installed at the main Ministry site. These actions remove major impediments to system integration and are encouraging signs of the Minister's determination to use informatique in managing the Ministry.

C. IMPROVEMENT OF OPERATIONS RECORDS MANAGEMENT (SERVICE AND USE STATISTICS)

The aim was to "improve the quality and flow of operational information within the Ministry; i.e. increase relevance, reliability, validity, integrability, deducibility and representativeness of information collected and of its pattern of communication." The process was to involve "review of information needs...redesigning forms and training various levels of persons in their use." It was perceived as being "a communicative process involving interaction between administrative and technical personnel, central program and field personnel."⁵

Given the unclear position of the Management Unit and its very limited staff, work on this was postponed indefinitely the first year. It came to the fore again early in 1984 in the context of work on finance when a consultant recommended "development of a system of performance reports as a first step toward the eventual introduction of cost accounting."⁶

The Management Unit had no staff to assign to this activity but the technical assistance team agreed to work closely with Infrastructure Division staff, who took the lead but could work on it only part-time. The goal was a brief standard report to be prepared at the province level describing key cost and service delivery items for individual service units, with comparisons of current and past data on the items covered. The idea was to get away from the voluminous reports of raw data then going to management at all levels and to provide summary information that shows what is going well, and what is not. This was to be management's "control panel" ("tableau de bord").

The new report was planned in collaboration with central and province level authorities, tested in a first form in Rabat Prefecture, then in a revised version in Kenitra Province. Feedback was positive. The rather lengthy form was revised and shortened (some, but not nearly enough), and a first draft of documentation was begun for use in wider testing. The effort had reached this point by the end of the first quarter of 1985. Two years later it has gone no further.

This activity went as far as it did because of the Infrastructure Division. It was not completed because the senior person working on it there was not able to devote to it as much time as he had previously. The Management Unit, which should have been playing a bigger role, had no one to take his place.

D. INCREASING THE COORDINATION OF PROGRAM PLANNING AND OPERATIONS

The goal was to "create an institutional capacity and ... process to increase the coordination and integration of operational program planning...." It was to involve "establishing an institutional mechanism, a technical methodology, an improved data processing and integration capacity and facilitate organization (program-division) interaction and communication."⁷

⁵ From the descriptions of "Major Project Modules", Module 3000, Annex 2 of the Contract.

⁶ H.P. HOLZER, Financial Management Issues in the Moroccan Ministry of Health. Consultancy Report. January 1984.

⁷ From the descriptions of "Major Project Modules", Module 4000, Annex 2 of the Contract.

Closely related work was initiated through a WHO project begun after the signing of the Project Agreement for the Health Management Improvement Project and this activity was thus low on the Ministry's priority list for the Management Unit. It was set to one side on the basis of consultations during Year 1 and no work was undertaken in this field during the life of the project.

E. IMPROVEMENTS IN THE PERSONNEL SYSTEM

The objectives when the Project began were to "upgrade efficiency of personnel administration in [the] Ministry; reduce time required to process application, transfer, hiring, promotion, pay raise, etc; improve employee morale." To do this, the staff was expected to "review and specify procedural changes...[and] develop new file access and storage medium to facilitate and speed access to files and principal personnel tasks."⁸

This module was one of two given priority by the Ministry from early in the project. Staff of SEM, the Personnel Division and the Management Unit played major roles in this effort and made substantial contributions. A committee which met often but irregularly insured involvement of all the concerned parts of the Ministry in planning, major decisions and coordination touching on the personnel information system (PIS). One key consultant, occasionally aided by one or two others, made periodic visits to help plan, review progress, revise plans and resolve technical problems. Most of the programming was done by the MSH programmer; SEM staff made important contributions, but their involvement was irregular, depending on changing Ministry priorities and other factors. During the first two years, a member of the technical assistance team oversaw the effort with the help of a Management Unit staff member. From late spring, 1984, responsibility for planning, monitoring, follow-up and - most important - initiative was shifted from the technical assistance team to Ministry personnel who were obviously going to have to complete the job after the departure of the team.

The process worked well as long as there was capable, persistent follow-up. Final results were short of planned targets because progress slowed substantially after mid-1984. It picked up again a year later when the new Minister made known his interest in the effort, and the new head of the Management Unit (who had been very much involved on the Personnel Division side of the work) took on leadership of the effort himself.

Another key weakness was the fact that no one in the Personnel Division really felt responsible for the new information system to the point of monitoring its operation and use, and keeping the Management Unit and SEM technical staff informed when it was not functioning or being used as planned. In theory, it might have been possible to compensate for this with Management Unit staff, but not with the staff available.

While there were inevitably problems, the results of the effort in human resources management were considerable. The physical facilities used to store personnel files were expanded to provide adequate space, and were put in order. The information needs for each of the numerous personnel actions were analyzed and systematically documented in a personnel service manual. A computer program

⁸ From the descriptions of "Major Project Modules", Module 5000, Annex 2 of the Contract.

to maintain the basic files for the medical personnel was developed and put in place on a micro-computer to facilitate record updating and analysis, and to help management improve personnel administration ("reduce time required.." as per the objectives quoted above). Print-outs are now commonly seen on desks of personnel service managers. After a trial and improvement period, a modified version of the program was developed to computerize the far more numerous paramedical personnel records, using a second micro. The MSH programmer remained in Morocco to the end of 1985 to complete the revision with an SEM programmer. The shift of the paramedical records to the computer was completed under the direction of Ministry personnel after the contract technical assistance terminated; the expanded system is currently operational. The entire personnel information system is to be transferred to the mini-computer after it is moved to the Central Ministry in the Fall of 1987; SETI reports having completed the necessary programming.

No one who recalls the situation in 1982, when each personnel action involved consulting a personnel file, and these files were stacked randomly throughout offices and corridors, as well as in the archives, can doubt that the system has improved. However, it can be made still better. The computerized personnel information system makes it possible to identify bottlenecks in the system, situations where action can be taken to reduce delays in processing time and otherwise improve operations. This capability was drawn to the attention of officials but never exploited. It does not meet any real "felt needs" as long as pressures are on to accelerate the processing of this file or that one, not to speed up the whole system. The Minister may change this.

The effort in this field had a second facet introduced on the initiative of the Technical Affairs Division early in the project: manpower planning to improve staffing patterns and optimize the match between demand and supply. Most of the consulting missions for the FIS also involved work in this area with the Infrastructure Division. This effort was to use data being collected in another project which unfortunately progressed much more slowly than anticipated. That fact, the workload of Infrastructure staff, and shifting Ministry priorities resulted in repeated postponement of a planned training course, and there was no real progress in assessing human resources supply or projecting needs, although there was some individual instruction, a manual was provided and specific guidelines were set forth in consulting reports.

F. IMPROVEMENTS IN PROGRAMMATIC BUDGETING AND ACCOUNTING.

The initial objectives were (1) to "enable the Ministry to better determine program costs and to combine this with program effect information obtained from operations statistics;" (2) "to supplement, in a complementary manner, the Ministry's current budget system;" and (3) "to increase [the] efficiency and speed of [the] present accounting and commitment system." This was to be done through "an interactive process involving persons both from Budget and Accounting and from Program Operations divisions." It was to involve "determining a workable system of program categories and elements; upgrading data processing capacity; redesigning forms and work procedures to utilize program categories and data processing capacity; training and implementation and use."⁹

⁹ From the descriptions of "Major Project Modules", Module 6000, Annex 2 of the Contract.

This was delicate ground, substantially involving the interests of both the Technical and Administrative Departments. In addition, work already done and activity underway in the context of the WHO project in Agadir dealt with aspects of it. On the basis of discussions with the Ministry during Year 1, work on program budgeting was set aside. In the fall of 1983, when MSH raised the issue of Project work on financial management (more broadly defined than the objectives under this heading in the Project Plan), it was agreed that a consultant would be asked to review the situation and make recommendations for action. His recommendations focused on,

- a. development of a system of performance reports as a first step toward the eventual introduction of cost accounting;
- b. elimination of a bottleneck in the manual processing of accounting reports required to obtain release of funds accrued from one year to another;
- c. review of procurement workload distribution;
- d. improvement of financial information flows to managers responsible for service units and programs;
- e. strengthening and formalizing the management unit; and
- f. support for improvements in aspects of the pharmaceutical procurement system already recommended by others.

The recommendations were approved by a committee established to review them and then charged with seeing to their implementation. The committee met numerous times, usually at great length and with little positive result; there was no readiness to delegate action.

Eventually, it was agreed that the Management Unit and the Infrastructure Division (primarily the latter) would do what they could with the first recommendation. An effort already underway in the Equipment Division to computerize capital budget management would contribute to meeting the second recommendation. There was no action on the other four: (c) was delicate and controversial; there was no agreement on what action would be appropriate for (d); and action on the other two was considered beyond the scope of the committee.

The action on (a) was reported earlier (Section C). The Equipment Division had been working for quite a while on the computerization of the capital budget and special accounts called for by (b). This ceased to be the isolated venture of a single Division it had been and was more closely integrated with the information system work of the Ministry of a whole; hardware, software and training were provided to the Equipment Division and the French cooperants working on the effort there, as was technical assistance from the Management Unit and SEM. By the end of 1985, the application was reported to be running tightly on a micro and to be expanding across budget lines until it covers all MOH expenditures except drugs. Its status was not determined during the brief 1987 visit.

G. IMPROVEMENTS IN PHARMACEUTICAL DISTRIBUTION AND SUPPLY.

The objectives: "eliminate problems in system of storage and distribution of drugs which, in an environment of scarcity, results in regular and unnecessary shortages; upgrade over-all effectiveness and efficiency of pharmaceutical distribution and disbursement system." This was to "involve specification of responsibilities, clarification of problems at several levels, and design, discussion and implementation of administrative improvements."¹⁰

This module was one of two given priority by the Ministry from virtually the start of the project. It was also one in which the objectives concern the responsibilities on both the Administrative and Technical Departments, somewhat slowing progress at times and influencing what could and could not be done.

The basic approach involved a study of the pharmaceutical pipeline (ordering, purchase and distribution) in 1982-83 which was used to help set priorities and plan appropriate action. Work was planned and coordinated through a Pharmaceutical Logistics Committee. The Infrastructure Division took the lead, but several Ministry units were involved and tasks were delegated to individuals and small groups. The Management Unit provided technical assistance with consultants, one of the resident team members and, during the last few months, with a very competent new Moroccan staff member.

Taking into account the results of the "pipeline study," the agenda agreed upon in the fall of 1983 involved relevant activities already on the Ministry agenda and others suggested by the study. The resulting overall pharmaceutical logistics improvement plan encompassed:

- a. Selection:
 - Revision of the nomenclature;
 - Development of standardized lists by treatment facility;
 - Development of standardized treatment protocols.
- b. Quality Control.
- c. Procurement:
 - Development of a "marché cadre;"
 - Development of a system of direct provincial purchases for certain drugs;
 - Exploration of international tender offers for drug purchase;
 - Improving the procurement unit.
- d. Drug Ordering:
 - Developing of system for real price estimates;
 - Improving ordering practices.
- e. National and Provincial Stock:
 - Rationalizing national stock of pharmaceuticals;
 - Improving provincial and central stock management.

¹⁰ From the descriptions of "Major Project Modules", Module 7000, Annex 2 of the Contract.

By mid-1984, the Pharmaceutical Logistics Committee had concluded that it was highly unlikely that there could be progress on all items during the remaining life of the Project. The reasons for the conclusion were the diffusion of responsibility (and authority) for pharmaceutical management, the lack of qualified staff who could be assigned full-time to these agenda items, and the fact that a World Bank project for drug manufacture was under discussion. It was agreed within the Committee that during the remaining year, Project resources in this sector would be focused on

- * drug requirements estimation and ordering methodology;
- * the activities under (a) Selection, on the agenda; and
- * if productive work became feasible - stock management improvement.

The collaboration between the Management Unit and the Infrastructure Division for this work was close and productive.

Results included a standard treatment manual and a pharmaceutical handbook in whose preparation a wide range of medical personnel from central and provincial offices had participated. The manuals awaited final approval in mid-1985 and were ready for reproduction and distribution as of early 1986; a year later we understood that UNICEF was having the standard treatment manual printed and was at the proof-reading stage, while the therapeutic handbook was not yet being printed for want of funding. Another output was a revised nomenclature (standard drug list) including recommended levels of use (i.e. at which levels of the medical service they should be dispensed or prescribed) which was the result of analysis of a carefully structured survey of the medical community. The new nomenclature has been formally approved by the relevant national committee.

In addition, a computer-based drug needs estimation model for order preparation was developed, documented and run through initial tests in pilot provinces; the Ministry planned to make revisions without further contractor involvement. As of 1987, the work in this area is being done in the Central Pharmacy, whose staff now includes a very competent former member of the Management Unit. The work in needs estimation has led to new procedures and more systematic consideration of medical problems in relation to drug applications in order to estimate needs. Moreover, this is now done separately for hospitals and primary health care services which then meet to negotiate agreement on a Province order. The ABC analysis technique introduced by the Project is now used regularly and has shown that the percentage of the pharmaceutical budget being spent on drugs used for primary health care (as opposed to hospital care) is increasing. (This is an excellent example of the use of the MIS to monitor what is happening in the system.)

In contrast to the Selection and Ordering areas, in Stock Management the project had no direct productive impact; two consulting reports with recommendations are in Ministry hands and further assistance in stock management was requested for late 1986, subsequently postponed at Ministry initiative, and eventually cancelled in favor of computer equipment procurement.

H. IMPROVEMENTS IN LOGISTICS SYSTEM (MATERIAL & TRANSPORT).

The objective targeted by this module was the elimination of "problems of unnecessary shortages and time lags in receipt of material caused by inefficiency in the material supply system of the Ministry." The effort was to "involve specification of respective responsibilities of provinces and central ministry

(with a view to determining activities appropriate to each level), clarification of problems in present system and design and implementation of administrative practices and procedures (including data collection and processing) which might alleviate some of the present problems."¹¹

Work on this module was postponed until the second year of the Project. The strategy adopted was a focus on the information system for vehicle park logistics. The objective was

to help the managers of the vehicle fleet conceive and introduce a system that will regularly provide in the most useful possible form, the information needed by central and field management responsible for the resources used to equip, maintain, operate and replace the vehicle fleet.

A consultant made periodic visits to help in analysis, planning, progress review and training as work evolved. A Management Unit staff person, a member of the technical assistance team and the head of Vehicle Park Management worked closely with the consultant in all of those functions and ensured implementation and coordination between his visits. A technician at SEM did all of the programming with technical assistance from the MSH team programmer.

The basic vehicle-use record (the "carnet de bord") and all reporting forms were revised to eliminate unneeded data and to record other data that would facilitate program cost analysis and control. The forms were tested in several provinces, as was the use of the computer with the resulting data. The forms were revised, documented and printed by the Ministry, and teams of key users from all provinces were brought to Rabat and trained in their use. Programming was completed at SEM.

In early 1986, the system was reported running on a micro-computer with hard disk and was being extended by Ministry staff from the three pilot provinces to the entire country. Somewhat later, the system was transferred to the mini-computer. As of Spring, 1987, the system is said to be in regular use. Data are received more or less regularly at SETI from the Car Park Office. SETI inputs the data and generates a set of standard reports which were defined on the basis of recommendations left by the MSH consultant.

There is still no analysis of data or feedback to the field designed to result in more efficient vehicle management, although the data base should now permit that in a number of areas (for example, using data on high, low and average fuel consumption by type and age of vehicle). On the other hand, we understand that analysis of repair and operating cost data from this information system was used to support a request to the Ministry of Finance for a budget allocation to purchase new vehicles. The analysis (done in the Statistics Service) reportedly made it clear that it would be more economical to replace some vehicles than to continue operating them. The budget request was approved. This is encouraging; it has long been our understanding that the funding Ministries (Plan and Finance) favored this project from the very start in the hope that the Ministry of Health would develop the ability to justify its budget requests, most of which were then being refused for want of adequate justification.

¹¹ From the descriptions of "Major Project Modules", Module 8000, Annex 2 of the Contract.

I. MAJOR PROJECT REVIEW AND EVALUATION ACTIVITIES.

There was a major project review at the end of the first year. A plan for mid-course and final evaluations was submitted to AID in late 1983 and the mid-term evaluation took place in late 1984. There were also appropriate reviews and documentation on the occasion of contract amendments. Annex B contains a bibliography of Project-related reports.

IV. TRAINING

A. LONG-TERM PARTICIPANT TRAINING

Project plans called for six Moroccans to be sent abroad for long-term participant training. The Ministry is less than enthusiastic about long-term training, and AID's rule obliging the Ministry to pay for air travel created budgetary problems. However, the principle was eventually accepted and two competent officials who had been working with the project (Mr. Oucherif, from the Management Unit, and Mr. Tihani, from the Personnel Division) were nominated, put through 9-12 months of full-time language training and then sent to the US. They successfully completed their training, received their degrees, and returned to Morocco and the Ministry on schedule in 1986. Mr. Tihani has moved to the Management and Methods Service, while Mr. Oucherif is with the Population Division.

B. OTHER TRAINING

There was a considerable amount of short-term training in-country and, to some extent, in the US and third countries. Some was done in connection with specific interventions, such as training in the use of new personnel forms, or of new reporting forms for the car park information system. Other training was more general. The principal training activities and their participants are listed in Annex C.

V. LESSONS AND REMINDERS

A. THE MORE NUMEROUS, AND THE MORE INDIRECT THE LINKS BETWEEN TWO ACTIONS, THE LESS LIKELY THERE IS TO BE ANY IDENTIFIABLE CAUSE AND EFFECT RELATIONSHIP.

The project played a role in introducing a new approach to estimating drug needs, and it introduced an analytical technique and related information system concepts which have demonstrated that primary health care is now getting a bigger share of the pharmaceutical budget than previously. With the exception of pharmaceutical logistics, though, project activities were only indirectly related to health care delivery and probably had little effect on it, certainly little identifiable effect. Given the broad front over which the project spread limited resources, the limited time frame, and the indirect links between service delivery and such things as the personnel office, SEM and central car park management, one really should not expect anything else.

- B. WHEN PLANNING A PROJECT THROUGH WHICH ONE EXPECTS TO SIMULTANEOUSLY DEVELOP NEW STAFF CAPABILITIES AND PRODUCE NEW OR IMPROVED PRODUCTS OR SYSTEMS USING THAT SAME STAFF, THE RATIO OF EXPERIENCED STAFF TO THE NUMBER AND VARIETY OF THE PRODUCTS ANTICIPATED IS CRITICAL.

The higher the percentage of staff that is in effect in on-the-job training, the longer it will take to generate the product or system outputs, and the greater the risk of problems that will require later correction. If the experienced staff is under pressure to ensure that the product or system outputs are completed on schedule, the training and production goals are likely to conflict with each other. Does one put priority on the production goal at the risk of doing an incomplete job of training, or concentrate on training and accept delay or faults in the output? The dilemma was faced in this project.

For example, in the case of the personnel information system, the MSH team was expected to develop capacity in the Management Unit and SEM and through the same people, at the same time, to design and introduce new record-keeping and processing systems, including the relevant computer programming. For a variety of reasons, of which a major one was concern that the personnel information system might not be operational even on a pilot scale before the end of the project, we intervened when it seemed necessary to avoid major problems or delays and we opted to make sure the programming got done, even though it meant the MSH programmer had to do most of it.

On the other hand, once the pilot was operational and planning had been done for the next step, we pointed out to our Ministry colleagues that they were obviously going to have to finish the job after the termination of technical assistance then a year off, and it was decided that they would henceforth have to take responsibility for getting things done. We were prepared to help on request (and did), but it was up to them to watch for things needing attention, and to take any needed initiative. The assessment at the time was that (a) they had some experience with the pilot; (b) there would be similar work left to do after our departure and it was better they try it on their own while technical assistance was at hand; and (c) our continued close supervision in that area was not likely to be a deciding factor in the rate of advancement, while there was likely to be much more impact from the same effort to project activities in the pharmaceutical sector at that point. The SEM and Management Unit staff did learn from the process, and the information system was installed, but in neither case were the results all that had been hoped for. Had inexperienced staff at SEM and in the Management Unit not so heavily outnumbered those with experience, the situation would have been quite different.

- C. PROJECT TIME LIMITS TEND TO BE MORE OF A CONSTRAINT ON CONTRACT PERSONNEL THAN ON MINISTRY PERSONNEL, AND PROJECT GOALS ARE OFTEN, OR TEMPORARILY FROM TIME TO TIME, OF LOWER PRIORITY TO MINISTRY THAN TO CONTRACTOR PERSONNEL.

At times, completing the systems development work had lower priority for the Ministry than for MSH. The contractor had to work to the project calendar, while the Ministry personnel essential to that work could be, and were, diverted to other activities without notice and for varying periods of time according to the changing priorities of the Ministry.

For example, late in 1984 the Minister decided that top priority should be given to processing grade advancements for thousands of members of the Ministry staff who had not had their "automatic" advancements for the past two or three years. The work of two or three years was to be done immediately. This resulted in a substantial diversion of staff, management attention, computer time and even office space away from the personnel information system for several months. Its impact was felt to a lesser extent for many months more. This was exceptional only in its duration and depth of impact.

The contractor (and AID) feel that they must finish the work by the termination date. The view in Ministry offices tends to be that if WE feel that need, then we should finish it. To the extent that it is their work, they can accept delays if faced with what they perceive to be more urgent demands on their resources. They will be there next year and the year after. They feel pressure only for what is high priority with "the boss" today. Where ad hoc decisions are more common guidelines than plans, there are many unexpected "high priorities" to compete for resources. The more a project is dependent on local resources, the more it is at the mercy of this phenomena. On the other hand, the higher and stronger the management support for the project, the more likely it will be able to successfully fend off such demands.

- D. THE NUMBER OF MAJOR INTERVENTIONS SUPPORTED BY SHORT-TERM TECHNICAL ASSISTANCE THAT CAN BE UNDERTAKEN SUCCESSFULLY IS A FUNCTION OF THE IN-COUNTRY STAFF AVAILABLE TO COMPETENTLY AND REGULARLY FOLLOW-UP THE WORK OF THE CONSULTANTS.

The small team, in/out consultants and key local inputs approach is good. However, it is very easy to have consultants start more than the resident organization and technical staff can finish if there are too many interventions per experienced staff member. The relationship between staff capacity and planned output (volume and diversity) in this project strained resources.

Between the 10th and the 40th month of the project, over half the time there was at least one consultant (the average was 2) in country for one of the several project activities. Carrying on the work planned and/or initiated by the consultant requires that at least one resident person understand the consultant and have the time, authority, capacity and inclination (or responsibility) to follow-up the mission. The roles can be divided, as we necessarily divided them, with senior people supervising others who follow-up as best they can. However, the diversity and the complexity of the interventions for which an individual must oversee the follow-up, and the capability of those to whom some of the activity can be delegated are major determinants of the success of the strategy (see B, above).

- E. LONG-TERM PARTICIPANT TRAINING AND HARDWARE PROCUREMENT SHOULD BE KEPT OFF THE CRITICAL PATH.

Long-term participant training and hardware procurement are processes that usually, if not inevitably, take longer than planners expect, and longer than implementors dare allow themselves to anticipate. If allowed on the critical path, they will almost certainly delay project completion, and can easily provoke planning changes that reduce project impact (e.g. when those trained return at project end rather than early enough to apply their new skills and establish their role in the ongoing project).

VI. RECOMMENDATIONS

1. The pay-off on the substantial hardware investment made through this project could be significantly enhanced by training and technical assistance focused on managing SETI and on the use of the HP3000 as the central processor of an organization's MIS. This would be justified only if SETI had adequate, qualified staff and if the Ministry could make a convincing case for having eliminated the causes of its high turnover in "informatique" staff. These conditions do not appear to be met at present.
2. At least for the next year or two, support for any new activity that depends on SETI inputs should be considered only after very careful analysis of its capacity and commitments. Until it manages to hold onto staff for more than a year or two at a time and has the personnel, capital budget, accounting and vehicle information systems running smoothly, the few experienced staff members are likely to be over-worked (and they are always the first to be diverted by unforeseen problems and shifting priorities).
3. There are almost certain to be excellent opportunities to improve decisions, control and overall management within the Ministry through training and technical assistance for those who are actively trying to improve management and to productively use micro-computers in their efforts. The Central Pharmacy is a case in point, if it is not already receiving such assistance.

ANNEX A

SHORT-TERM TECHNICAL ASSISTANCE
ASSISTANCE TECHNIQUE, COURT-TERME

1982 - 1985

ANNEX A : SHORT-TERM TECHNICAL ASSISTANCE
ASSISTANCE TECHNIQUE, COURT-TERME

CP CAR PARK/PARC AUTO
HR HUMAN RESOURCES/RESSOURCES HUMAINES
MIS MGT. INFORMATION SYSTEMS/INFORMATIQUE
PL PHARMACEUTICAL LOGISTICS/LOGISTIQUE PHARMACEUTIQUE

| SECTOR | CONSULTANT | START/DEBUT | FINISH/FIN |
|--------|------------|-------------|------------|
| PL | BATES | 29-Oct-82 | 16-Nov-82 |
| FL | KEMPNER | 29-Oct-82 | 16-Nov-82 |
| FL | O'CONNOR | 29-Oct-82 | 16-Nov-82 |
| HR | SHIPP | 30-Oct-82 | 12-Nov-82 |
| HR | HUME | 30-Oct-82 | 12-Nov-82 |
| HR | HORNBY | 06-Feb-83 | 13-Feb-83 |
| MIS | ROUSSELLE | 06-Feb-83 | 14-Feb-83 |
| FL | FEILDEN | 06-Feb-83 | 13-Feb-83 |
| FL | KEMPNER | 13-Mar-83 | 28-Mar-83 |
| FL | O'CONNOR | 19-Mar-83 | 23-Apr-83 |
| HR | SHIPP | 11-Apr-83 | 29-Apr-83 |
| HR | HUME | 11-Apr-83 | 29-Apr-83 |
| FL | FEILDEN | 21-Mar-83 | 24-Apr-83 |
| FL | FEILDEN | 18-May-83 | 01-Jun-83 |
| FL | KEMPNER | 18-May-83 | 01-Jun-83 |
| PL | BOS. STAFF | 23-Apr-83 | 05-May-83 |
| MIS | ROUSSELLE | 27-May-83 | 19-Jun-83 |
| MIS | DESJARDINS | 27-May-83 | 19-Jun-83 |
| HR | SHIPP | 18-Jul-83 | 05-Aug-83 |
| HR | HUDDART | 18-Jul-83 | 05-Aug-83 |
| HR | HUME | 24-Jul-83 | 12-Aug-83 |
| HR | SHIPP | 03-Oct-83 | 14-Oct-83 |
| FL | O'CONNOR | 24-Oct-83 | 04-Nov-83 |
| PL | KEMPNER | 24-Oct-83 | 04-Nov-83 |
| PL | BATES | 04-Dec-83 | 20-Dec-83 |
| FIN | HOLZER | 30-Dec-83 | 18-Jan-84 |
| HR | SHIPP | 02-Feb-84 | 26-Feb-84 |
| HR | HUME | 26-Mar-84 | 07-Apr-84 |
| HR | SHIPP | 26-Mar-84 | 13-Apr-84 |
| HR | SHIPP | 16-Apr-84 | 15-May-84 |
| CP | BURNS | 16-Apr-84 | 08-May-84 |
| HR | SHIPP | 10-Sep-84 | 04-Oct-84 |
| HR | HUME | 19-Sep-84 | 04-Oct-84 |
| MIS | HURTUBISE | 08-Sep-84 | 14-Sep-84 |

CP CAR PARK/PARC AUTO
 HR HUMAN RESOURCES/RESSOURCES HUMAINES
 MIS MGT. INFORMATION SYSTEMS/INFORMATIQUE
 PL PHARMACEUTICAL LOGISTICS/LOGISTIQUE PHARMACEUTIQUE

| SECTOR | CONSULTANT | START/DEBUT | FINISH/FIN |
|--------|--------------|-----------------------|------------|
| PL | O'CONNOR | 22-Aug-84 | 25-Aug-84 |
| PL | KEMPNER | 22-Aug-84 | 07-Sep-84 |
| PL | ELKINS | 27-Aug-84 | 07-Sep-84 |
| PL | BISAILLON | 15-Jul-84 | 28-Jul-84 |
| PL | CUSHMAN | 15-Jul-84 | 28-Jul-84 |
| CP | BURNS | 09-Oct-84 | 23-Oct-84 |
| HR | SHIPP | 21-Nov-84 | 15-Dec-84 |
| CP | BURNS | 25-Nov-84 | 15-Dec-84 |
| PL | O'CONNOR | 03-Dec-84 | 14-Dec-84 |
| PL | KEMPNER | 03-Dec-84 | 14-Dec-84 |
| PL | QUICK | 03-Dec-84 | 14-Dec-84 |
| MIS | HURTUBISE | 23-Nov-84 | 30-Nov-84 |
| PL | DAVELOOSE | 02-Jan-85 | 12-Jan-85 |
| PL | KEMPNER | 15-Apr-85 | 20-Apr-85 |
| PL | REDDY | 15-Apr-85 | 20-Apr-85 |
| PL | HASSAR | 01-May-85 | 22-May-85 |
| PL | HAKKOU | 01-May-85 | 10-Jun-85 |
| CP | BURNS | 25-Mar-85 | 13-Apr-85 |
| HR | SHIPP | 15-Apr-85 | 17-May-85 |
| MIS | ROUSSELLE | 01-Oct-85 | 08-Oct-85 |
| MIS | SOULAS | 01-Oct-85 | 31-Oct-85 |
| PL | DAVELOOSE | 11-Oct-85 | 22-Oct-85 |
| PL | WOLFF | 11-Oct-85 | 22-Oct-85 |
| MIS | ROBERTS | 01-Apr-86 | 05-Apr-86 |
| PL | BOSTON STAFF | First quarter of 1985 | |

ANNEX A:

MOROCCO, HEALTH MANAGEMENT IMPROVEMENT...SHORT-TERM TECHNICAL ASSISTANCE IN COUNTRY, 1982 - 1985
 MAROC, AMELIORATION DE LA GESTION DE LA SANTE PUBLIQUE...ASSISTANCE TECHNIQUE, COURT-TERME, 1982 - 1985

| SECTOR | VOILET CONSULTANT | 1 9 8 2 | | | | 1 9 8 3 | | | | 1 9 8 4 | | | | 1 9 8 5 | | | |
|--------|-------------------|---------|-------|-------|-------|---------|-------|-------|-------|---------|-------|-------|-------|---------|-------|-------|-------|
| | | QTR 1 | QTR 2 | QTR 3 | QTR 4 | QTR 1 | QTR 2 | QTR 3 | QTR 4 | QTR 1 | QTR 2 | QTR 3 | QTR 4 | QTR 1 | QTR 2 | QTR 3 | QTR 4 |
| HR | MS. HUME | | | | | | | | | | | | | | | | |
| HR | MR. SHIPP | | | | | | | | | | | | | | | | |
| PL | MS. KEMNER | | | | | | | | | | | | | | | | |
| PL | DR. O'CONNOR | | | | | | | | | | | | | | | | |
| PL | MR. BATES | | | | | | | | | | | | | | | | |
| MIS | MR. ROUSSELLE | | | | | | | | | | | | | | | | |
| PL | MS. FEILDEN | | | | | | | | | | | | | | | | |
| HR | MR. HORNBY | | | | | | | | | | | | | | | | |
| MIS | MR. DESJARDINS | | | | | | | | | | | | | | | | |
| HR | MS. HUDDART | | | | | | | | | | | | | | | | |
| FIN | DR. HOLZER | | | | | | | | | | | | | | | | |
| CP | MR. BURNS | | | | | | | | | | | | | | | | |
| PL | DR. DAMELOOSE | | | | | | | | | | | | | | | | |
| PL | DR. CUSHMAN | | | | | | | | | | | | | | | | |
| PL | MS. BISAILLON | | | | | | | | | | | | | | | | |
| PL | MR. ELKINS | | | | | | | | | | | | | | | | |
| MIS | MR. HURTUBISE | | | | | | | | | | | | | | | | |
| PL | DR. QUICK | | | | | | | | | | | | | | | | |
| PL | MS. REDDY | | | | | | | | | | | | | | | | |
| PL | DR. MASSAR | | | | | | | | | | | | | | | | |
| PL | DR. HAKKOU | | | | | | | | | | | | | | | | |
| MIS | MR. SOULAS | | | | | | | | | | | | | | | | |
| PL | DR. WOLFF | | | | | | | | | | | | | | | | |
| ALL | S.T.T.A | | | | | | | | | | | | | | | | |

CP: CAR PARK (VEHICLE LOGISTICS)
 HR: HUMAN RESOURCES

MIS: MGT. INFORMATION SYSTEMS/INFORMATIQUE
 PL: PHARMACEUTICAL LOGISTICS

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A N N E X B

PRINCIPAL DOCUMENTS PRODUCED SINCE MARCH 1982
DOCUMENTS PRINCIPAUX PRODUITS DEPUIS MARS 1982

A N N E X B

PRINCIPAL DOCUMENTS PRODUCED, SINCE MARCH 1982
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COMMENTS ON A PROPOSED UPGRADE FOR THE DATA PROCESSING EQUIPMENT AT THE MINISTRY OF HEALTH, MOROCCO. May 1986. (English only).

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ADMINISTRATIVE/ADMINISTRATIF

MSH TEAM/EQUIPE MSH
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(FR/ENG) = traduit en français; (ENG) = anglais uniquement)

| | |
|------------------------|-----------------------------|
| Juin 1982 (ENG) | Septembre 1984 (FR/ENG) |
| Octobre 1982 (ENG) | Decembre 1984 (FR/ENG) |
| Juin 1983 (ENG) | Avril 1985 (FR/ENG) |
| Septembre 1983 (ENG) | Juillet 1985 (FR/ENG) |
| Decembre 1983 (FR/ENG) | Janvier 1986 (2 Qtrs) (ENG) |
| Mars 1984 (FR/ENG) | Octobre 1986 (3 Qtrs) (ENG) |
| Juin 1984 (FR/ENG) | |

MSH TEAM/EQUIPE PROJECT EXTENSION. (a statement prepared for AID by the MSH team giving its view as to the 5/84 project objectives attainable by January, 1985, the difference an extension until July should make, and the reasons the July goals will not be in hand by January.) 21 May 1984. (*Les points principaux furent traduits en français : RESULTATS ANTICIPES DE L'ELARGISSEMENT DU PROJET et transmis au responsables du ministère le 2 août 1984.*)

PROJECT SUMMARY DOCUMENTS (abstracted for the Minister in April-May 1985 from prior reports, French only.)

- *RESUMES D'ACTIVITY, PAR TRIMESTRE, OCTOBRE 1983 - MARS 1985.*
- *MISSIONS D'ASSISTANCE TECHNIQUES COURT TERMS, MARS 1982 - MARS 1985.*
- *LA FORMATION, MARS 1982 - MARS 1985.*
- *DOCUMENTS PRINCIPAUX, MARS 1982 - AVRIL 1985.*

A N N E X C

TRAINING
LA FORMATION

ANNEX C : TRAINING/LA FORMATION

I. LONG TERM/LONGUE DUREE

1. Nom: M. TIHANI
 Service: PERSONNEL
 Lieu de Formation: UNIVERSITY OF MIAMI, CORAL GABLES, USA
 Durée: 2 ans (9/84 - 6/86)
 Sujet: PUBLIC HEALTH ADMINISTRATION/ADMINISTRATION DE LA SANTE PUBLIQUE
2. Nom: M. DUCHERIF
 Service: PERSONNEL
 Lieu de Formation: UNIVERSITY OF MIAMI, CORAL GABLES, USA
 Durée: 2 ans (1/85 - 12/86)
 Sujet: PUBLIC HEALTH ADMINISTRATION/ADMINISTRATION DE LA SANTE PUBLIQUE

II. SHORT TERM/COURTE DUREE

NOTE: The following list does not include the numerous workshops and seminars organized as an integral part of activities having a purpose other than training. There were several. For example, the two workshops to develop a methodology and documentation for diagnostic and standard treatment protocols; the workshops to familiarize those concerned with changes in the principles, procedures and forms introduced in the revised information systems in personnel and vehicle park management. Similarly excluded are the several sessions on general management held during Saturday mornings the first year of the project but for which the participant list is not available.

NOTE: La liste suivante n'inclut pas de nombreux ateliers et séminaires organisés comme partie intégrante des activités ayant un but autre que la formation. Il y en a eu plusieurs. Par exemple, les deux ateliers pour développer une méthodologie et la documentation des protocoles de diagnostic et de traitement standard, les ateliers pour familiariser les intéressés au changements dans les principes, procédés et imprimés introduits aux systèmes d'information en personnel et au parc auto. Egalement exclus sont les plusieurs sessions sur le management général des samedi matins la première année du projet pour lesquels on n'a pas de liste des participants.

1. Lieu de formation: MANAGEMENT SCIENCES FOR HEALTH (MSH), BOSTON, USA
 Date/duree: 4 SEMAINES, JUIN 1982
 Sujet: HEALTH MANAGEMENT/MANAGEMENT DE LA SANTE PUBLIQUE
 Participants: M. AMOUZGHIR (DAA) M. DUCHERIF (BMM) M. KHALDI (FINANCE)
 M. LAZIRI (INFRASTRUCTURE) c) M. BOUYAHIA (AGADIR)
 M. AZIZI (HYGIENE-AGSAIN.) M. OUADGHIRI (BMM)

2. Lieu de formation: NEW YORK ET QUEBEC
 Date/duree: 2 SEMAINES, JUILLET-AOUT 1983
 Sujet: INFORMATION CENTER MANAGEMENT & ORGANIZATION; FAMILIARIZATION WITH VARIOUS HARDWARE AND SOFTWARE.
 GESTION, ORGANISATION CENTRE D'INFORMATIQUE; FAMILIARISATION AVEC DIVERS "HARDWARE" ET "SOFTWARE"
 Participants: M. HASBI (SEM) M. ELLAKHMI (SEM)
3. Lieu de formation: QUEBEC, ECOLE NATIONALE D'ADMINISTRATION PUBLIQUE
 DATE/DUREE: 6 SEMAINES, JUILLET-AOUT 1984
 Sujet: PUBLIC ADMINISTRATION/ADMINISTRATION PUBLIQUE
 Participants: M. HASBI (SEM)
4. Lieu de formation: UNIVERSITY OF PITTSBURGH (GSPIA), USA
 Date/duree: 2 MOIS, JUILLET-AOUT 1984
 Sujet: MANAGEMENT (in French)/GESTION-ADMINISTRATION GENERALE (EN LANGUE FRAN AISE)
 Participants: M. AMOUZGHIR (C.A) M. AOUFOUSSI (BMM) M. ANNAS (PERSONNEL)
 M. KHALDI (FINANCE) M. DUANAIM (BMM)
5. Lieu de formation: STANFORD UNIVERSITY, USA
 Date/duree: 4 SEMAINES, AOUT 1984
 Sujet: DOS & SELECTED APPLICATIONS SOFTWARE/LE DOS, ET L'EMPLOI DES PROGICIELS SELECTIONNES.
 Participants: M. ELLAKHMI (SEM) M. HAJRA (SEM)
 M. GUENDASSI (SEM) MLE. NOCAIRI (SEM)
6. Lieu de formation: RABAT (DIVISION DE LA POPULATION)
 Late/duree: 4 JOURS, NOVEMBRE 1984 (PRECEDE EN SEPTEMBRE PAR 2 CONFERENCES/DISCUSSIONS D'UN DEMI- JOUR
 CHACUN A RABAT ET EN PROVINCE AU QUEL ONT ASSISTE UNE CENTAINE DE CADRES DU MSP)
 Sujet: THE MIS FOR MANAGEMENT PURPOSES/LE SYSTEME D'INFORMATION AUX FINS DE GESTION (LE SIG (OU MIS)).
 Participants: M. ABERCHANE (SCE. DE PERSONNEL) DR. IZZEDDINE (KENITRA)
 M. AL JEM (S.E.M.) M. JBARA (PHARMACIE CENTRALE)
 M. ANNASE (SCE. DE PERSONNEL) M. JOUAL (S.E.M.)
 MLE. AOUAJ (S.E.M.) M. KAMEL (KENITRA)
 M. AOUFOUSSI (SCE. ORG. ET METHODES) M. LATRACHE (SCE DE CONSTRUCTION)
 DR. BELDUALI (DIV. DE L'INFRASR.) DR. MANSOURI (MARAKECHE)
 DR. BENSALAH (OUARZAZATE) M. MOUTAOUAKIL (BENI MELLAL)
 M. BOUHAHYA (TETOUAN) M. NAIM (BENI MELLAL)
 M. BOUJJAT (TAROUDANT) M. OUADGHIRI (SCE. ORG. ET METHODES)
 M. EL HASSA (KENITRA) M. OUAKRIM (S.E.M.)
 M. FADI (PARC AUTO) M. DUANAIM (SCE. ORG. ET METHODES)
 M. GHOLIDI (DIV. DE L'INFRASR.) M. OUTKOUMIT (TIZMIT) DR. RACHIDI (MARAKECHE)
 M. GUENDASSI (S.E.M.) MME. RAMZI (SCE DE COMPTABILITE)
 M. HADDAD (SCE. DE PERSONNEL) DR. ROCHD (TAROUDANT)
 M. HASBI (S.E.M.) M. SEDRATI (SCE. CENT. DE LA PHARM.)
 M. HEMMI (SCE. DES MARCHES) M. SLIMANE (S.E.M.)
 M. HOUARI (MEKNES) M. WASFI (DIV. DE L'INFRASR.)
 M. IDALI (SCE. DE PERSONNEL) M. ZADU (DIV. DE L'INFRASR.)

7. Lieu de formation: RABAT, DIV. DE LA POPULATION, SEMINAIRE INTERNATIONAL SUR LES PROBLEMES DE GESTION DE LA SANTE; MANAGEMENT SCIENCES FOR HEALTH, AVEC LA COLLABORATION DU MSP.

Date/duree: 4 SEMAINES, JANVIER-FEVRIER 1985

Sujet: HEALTH MANAGEMENT/GESTION DE LA SANTE

Participants: MME. BAKKAR (SCE.REGLE. ET CONT.)
DR. BELOUALI (DIV. DE L'INFRA.)
M. BENNOUNA (SCE.HYGIENE...)
M. BOULAHIDID (PROV.MED.TAZA)
MME. FLISSAT (SCE.REGLE. ET COMT.)
M. GHOULIDI (DIV. DE L'INFRA.)

M. DJALI (SCE.DE PERSONNEL)
M. LATRACHE (SCE. DES CONSTRUCTIONS)
M. SAROUJI (SCE. DE PERSONNEL)
DR. TIAN (PROV.MED.D'AGADIR)
M. ZAOUI (DIV. DE L'INFRA.)
M. ZAYYOUN (DIV. DE L'INFRA.)

8. Lieu de formation: RABAT, SERVICE D'ORGANISATION ET METHODES, MSP

Date/duree: 14 DEMI-JOURNEES (1 A 2 PAR SUJET ET NIVEAU), FEVRIER-MARS 1985

Sujet: (A) 10 BEGINNERS SESSIONS IN THE USE OF THE MICRO-COMPUTER, DOS, THE MOST COMMON SOFTWARE USED IN THE MINISTRY AND OTHER MORE SPECIALIZED OR GENERAL UTILITY PACKAGES; (B) 4 ADVANCED SESSIONS ON PARTICULAR SOFTWARE PRODUCTS.

(A) 10 SEANCES D'INITIATION A L'EMPLOI DU MICRO-ORDINATEUR, DE SON SYSTEME D'EXPLOITATION, DES PROGICIELS LES PLUS EN EMPLOI AU MINISTERE, ET QUELQUES AUTRES PROGICIEL PLUS SPECIALISES OU DE CARACTERE UTILITAIRE EN GENERAL; (B) 4 SEANCES AVANCES TRAITANT DES PROGICIELS PARTICULIERS.

Participants: 32 PEOPLE FROM 5 SERVICES/32 PERSONNES DE 5 SERVICES:

DIV. EQUIPEMENT ET MATERIEL: 6
DIV. DE L'INFRASTRUCTURE: 10
EPIDIDMIOLOGIE: 1
S.E.M.: 13
S.O.M.: 2

9. Lieu de formation: RABAT, SERVICE D'ORGANISATION ET METHODES, MSP (ORGANISE AVEC LA DIV. DE L'INFRA.)

Date/duree: 1 SEMAINE (+ UNE SEMAINE DE TRAVAUX PRATIQUES POUR LES NON-MEDECIENS, ORGANISE PAR LA DIV. DE L'INFRASTRUCTURE).

Sujet: INTRODUCTION TO THE MICRO-COMPUTER, DOS AND THE USE OF LOTUS 1-2-3. TRAINING DESIGNED IN PREPARATION FOR THE INTRODUCTION OF "SYMPHONY" AND MICRO-COMPUTERS IN PILOT PROVINCES IN THE BASIC HEALTH CARE PROJECT.

INTRODUCTION AU MICRO-ORDINATEUR, SON SYSTEME D'EXPLOITATION ET L'EMPLOI DU TABLEUR (LOTUS1-2-3). FORMATION CON UE COMME ETANT UN PREALABLE A L'INTRODUCTION DU PROGICIEL "SYMPHONY" ET DES PC DANS LES PROVINCES PILOTES DU PROJET DE SANTE DE BASE.

Participants: M. ALIBAT (ASDES, STATIST., SETTAT)
M. BOUDRIGA (ASDES, STATIST., AGADIR)
DR.ESSULBI (MED.CHEF DE PRO'., AGADIR)
DR.LARDI (MED.CHEF SIAAP, TAROUDANT)

M. MHAMZOU (ASDES, STATIST., TAROUDANT)
DR.TIAN, (MED.CHEF SIAAP, AGADIR)
DR.ZAHI (MED.CHEF DE PROV.SETTAT)