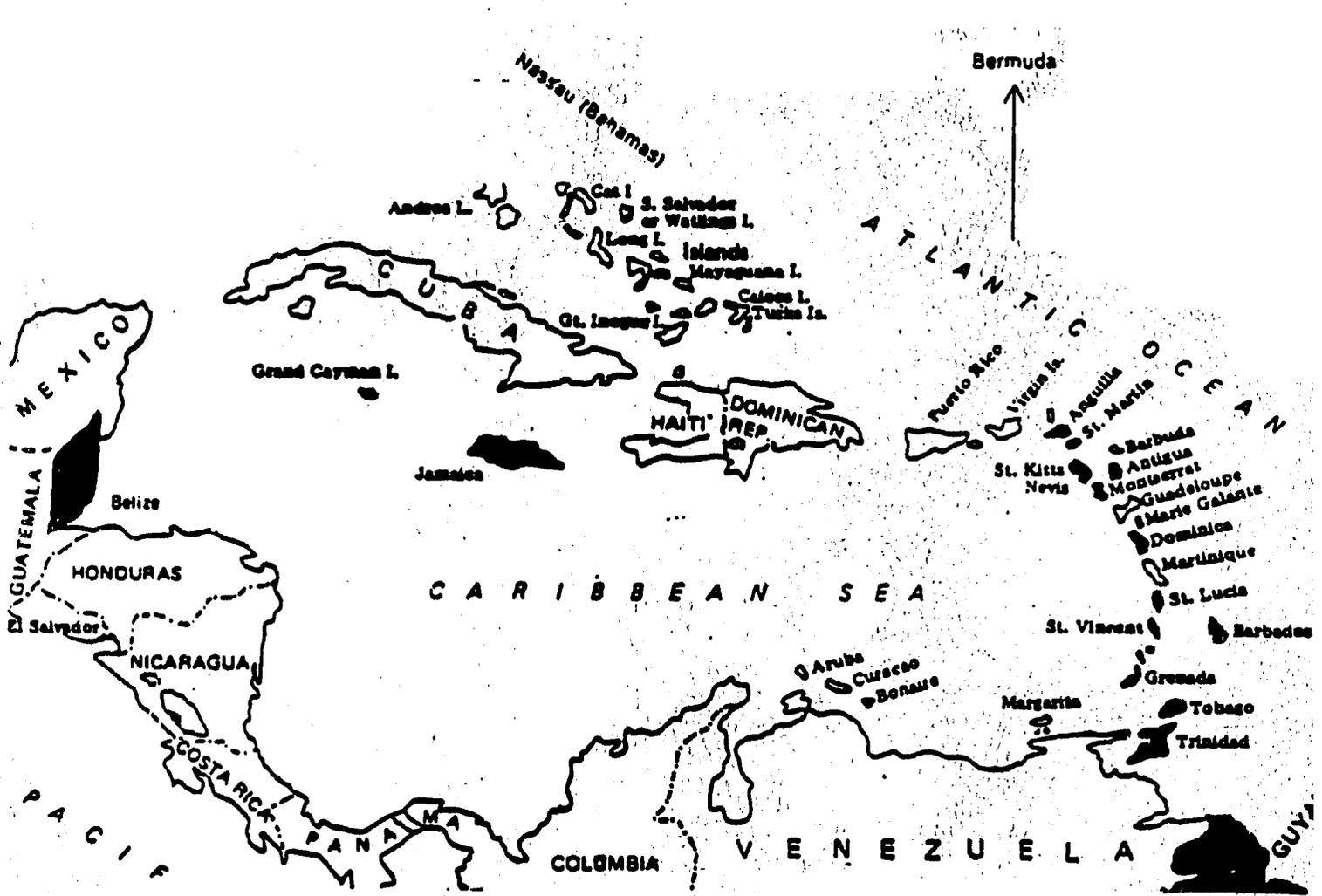


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Health Development Planning and Management Project

Follow-Up to Mid-Term Project Evaluation

March 25 - April 2, 1985



Funded By:

Agency for International Development
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Collaborators:

American Public Health Association
University of the West Indies
University of Pittsburgh

AGENCY FOR INTERNATIONAL DEVELOPMENT
HEALTH DEVELOPMENT PLANNING AND MANAGEMENT PROJECT

FOLLOW-UP TO MID-TERM PROJECT EVALUATION

MARCH 25 - APRIL 2, 1985

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Cooperative Agreement No. AID/DSPE-5901-A-00-1039-00
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EXECUTIVE SUMMARY

A mid-project evaluation of the AID-Washington funded Caribbean Health Development Planning and Management (HDFM) Project was carried out in February, 1984. That evaluation reaffirmed the validity of AID assistance to develop Caribbean resources for health planning and management. That evaluation also made apparent the urgent need to re-allocate project resources toward accelerated development of on-campus health management training at the University of West Indies.

This follow-up to the mid-project evaluation was conducted to assess UWI progress in establishing on-campus training through a one year post-baccalaureate diploma program in health management. The follow-up evaluation was conducted by a two person team between March 25 and April 2, 1985. The team was made up of a member of the 1984 mid-project evaluation team and a consultant with experience in health management and health management education. Upon arrival in Kingston, Jamaica, the team interviewed students, staff and UWI administrators involved with the diploma program. The team presented its findings to project managers and to the Project Advisory Committee. They departed Jamaica April 3, after which they completed and submitted the report.

The follow-up evaluation showed each of the six on-campus training recommendations from the mid-project evaluation have been successfully fulfilled. The diploma now has formal University approval, and it is administratively located with the Faculty of Social Sciences. Faculty of Medicine input has been included in planning and teaching the diploma courses. Curriculum planning has been well done; teaching staff and students were recruited; and the program began as scheduled in October, 1984. Budgetary provisions were made for the necessary additional staffing and subsidies were provided for Eastern Caribbean students.

Interviews with staff and students gave evidence that the curriculum is coming together into an integrated whole. The program presents appropriate academic exposure for mid and senior level Caribbean health administrators. The faculty is making a major commitment to development of the curriculum. The students are well qualified, with relevant experience and the potential for making a significant long term contribution to their countries' health management systems. In sum, the on-campus training component has made impressive progress.

The teaching staff plan their own internal review to further improve the curriculum during the coming year. Faculty development is a continuing need but project leadership is well aware of this and is making plans to meet the need. The University of Pittsburgh has come into play as a useful collegial ally for faculty development and for the development of Caribbean

relevant case materials. Collaboration has also begun between HDPM in-service training and on-campus training. More collaboration can be expected in the development of field experiences for diploma students.

From AID project management on down, there is evidence that all elements of this project are progressing more effectively and more interactively. The project has the support of PAHO, CARICOM and the Eastern Caribbean countries who have experienced its benefits. The UWI has shown evident interest in the project. Every effort must now be made to identify sources of long term support.

I. PROJECT REVIEW PROCEDURE

This document represents the results of a follow-up mid-project evaluation carried out by two consultants at the request of AID Washington. The team consisted of William Callen, Ph.D., School of Public Health and Community Medicine, University of Washington and Ian Rawson, Ph.D., M.P.H., Vice President, Allegheny General Hospital, Pittsburgh. Dr. Callen had served as team leader for the 1984 mid-project evaluation. Dr. Rawson, formerly of the University of Pittsburgh School of Public Health had participated in early stages of development of the project.

Agency for International Development (AID) requested this follow-up evaluation to ascertain whether the Caribbean Health Development Planning and Management Project had met with recommendations agreed upon at the mid-project evaluation. In addition, the team was asked to consult with APHA project managers and with University of West Indies faculty to identify ways to strengthen the training program. (The evaluation Scope of Work and interview schedule are contained in Appendix 1 and 2.)

Prior to visiting the University of West Indies, team members consulted by telephone with the AID project officer, Alan Randlov, and with each other. They also reviewed the mid-project evaluation report and other documentation provided by Dr. Gerald at APHA. Dr. Rawson then personally consulted with University of Pittsburgh faculty who had participated in project activities during the past year.

Both team members arrived in Kingston, Jamaica on Sunday, March 24, 1985. For the next four days they visited the UWI Mona campus to interview faculty, students and project administration. Since it was end of term vacation period, classes were not in session. However, faculty and students made time available for interviews with the team.

On the first day, Monday, the team met with Richard Thelwell, Project Administrator, and with Dr. Phyllis Mcpherson Russell, Director of HDPM in-service training. The consultants then spent two hours with the students as a group. This was a very productive period. The students were enthusiastic and frank. They presented a very positive picture of why they wanted such training and how much they valued the learning opportunity presented through the diploma program. The students did not hesitate to speak to both strengths and weakness in the first year of the program. Their comments were constructive, stated in a spirit of optimism that supported the program while hoping to see it further improved for subsequent classes of students. Five students including a physician and some Eastern Caribbean students were invited back for individual interviews.

The next several days were spent interviewing the majority of faculty who had taught modules within the diploma courses. Each faculty person was asked about his/her perception of student

interest and ability. They were asked to describe course content and teaching methods employed, to identify instructional objectives and to state developmental goals for future improvement of modules. From these interviews a set of common issues emerged.

At the end of the week the consultant team met with Dr. Edwin Jones, Chairman of the Interfaculty Coordinating Committee. Joyce Rawlins, Curriculum Coordinator and Hermione McKenzie, Head of Sociology, were also present. In a collegial spirit, the team, shared with Dr. Jones their perception of curriculum development issues identified through discussions with students and faculty.

The team also had an extended meeting with Pro Vice Chancellor Robinson. Administrative developments and future HDPM resource needs were discussed. The weekend period was spent analyzing findings and drafting a report. On Monday and Tuesday the team briefed APHA project managers, Mr. Thelwell and Dr. Gerald. Findings were then presented to the HDPM Project Advisory Committee on Tuesday afternoon.

On Wednesday, April 3, 1985, the consultants departed Jamaica, after which they completed and edited the report.

b) Student and Faculty Selection

Applicant response to announcement of the diploma program was encouraging. Sixty-eight candidates applied, thirty full-time applicants and thirty-eight part-time applicants. There were four from the Bahamas, four from Trinidad and Tobago, one from St. Lucia, one from Dominica and the rest from Jamaica.

Twenty-two students were selected. Selection criteria was based on academic background, experience in the health sector, geographic representation and promise of productivity in future health sector employment. Eight of the twenty-two students were accepted on a part time basis. These were Jamaica residents who expected to complete the diploma requirements in two years time. Subsidies were established to support three Eastern Caribbean students. Students selected included five physicians and a range of individuals from mid and senior level management positions in Ministries of Health.

The HDPM interfaculty coordinating committee quickly agreed upon the curriculum format. It modified the curriculum which it had earlier drafted during the December, 1982 consultancy of Dr. Morris Schaefer from the University of North Carolina. The curriculum required a program of five three-term courses, all specific to the subject of health management. In the meantime the 1983-84 experimental course, Health and Social Organization, was completed by Dr Samuels. She taught the epidemiology module in Winter and Spring terms. This solidified the commitment of the Department of Social and Preventive Medicine to collaboration in the diploma program.

c) Implementation of Diploma Program

Interviews with staff and students have demonstrated a very successful beginning for the diploma program. The interfaculty coordinating committee has continued to meet regularly and the assistant training coordinator has demonstrated the usefulness of that role. The position provides an identifiable person who can be responsive to student needs and who can follow up on decisions of the coordinating committee.

The students have shown themselves to be an experienced, well-motivated group of individuals who are enthusiastic about the opportunities for learning presented in the diploma courses. As of the end of the second term, all students originally enrolled have continued in the program.

Based on direct interview and feedback from students and administration, the teaching staff give evidence of working very hard to provide relevant instruction and to develop materials and case examples that illustrate situations

applicable to Caribbean health management. Staff with limited health management experience are well aware of their need to develop more case materials. The teachers' task has been hindered by a serious shortage of textbook and reference materials. Plans are underway to alleviate this shortage situation in the following year.

The University of Pittsburgh has played an active role in implementing the diploma program. They have presented a series of seminars designed to supplement classroom instruction. In addition, one of their faculty is scheduled to teach a Health Management Process Course module on evaluation and control.

The director of the in-service component of HDPM has begun teaching a module in the Health Resources Management Course. This establishes an initial, strong linkage between on-campus and in-service training. A brief field training experience is planned for the first class year. In succeeding years, this field "attachment" phase will be lengthened. It can be expected that in-service will play a useful role in identifying and monitoring field placements sites. It is conceivable that in-service staff could also play a role in follow-up support for diploma graduates. The graduates themselves will serve to strengthen the receptive framework for future field placement activities, as well as for future in-service training.

III. CURRICULUM RELATED ISSUES

During interviews with UWI and Pitt faculty, as well as with current HDPM students, a number of issues were identified for further project analysis and development. These issues reflect the normal adjustments to be expected during the first year of a graduate-level program. They are areas of active discussion among the HDPM staff, which plan to address them in some detail in its projected review following completion of the first year diploma class.

1) Focus/pitch of module content

The diversity of the student body made it difficult for instructors to select the ideal intellectual level of each module. Recognizing that this diversity is a desirable element of the program's design, each faculty member faces the challenge of making appropriate revisions for next year's offering.

2) Balance of Theory and Practice

While many of the students seek instruction in techniques to address current problems, their future leadership roles require a strong theoretical base. The present curriculum addresses both levels, probably in an appropriate balance. Further refinement of each module's design will insure an interaction between theory and practical problem-solving skills.

3) Case Materials: Health and Caribbean

All instructors share the common problem of a limited resource base for Caribbean case materials which may be used to enrich theoretical presentations. Each faculty member might consider developing relevant case materials, drawing from several optional approaches:

- Development of short "situation analyses" (1-2 pages) which provide students with the opportunity to apply principles to a simulated problem.
- Translating student presentations or experiences into situation analyses or fuller case studies.
- Design tutorial sessions to draw from student experiences, maintaining the structural integrity of the tutorial design.

4) Educational Objectives

Each module has been prepared with clearly-defined objectives and content outlines. This has facilitated the integration of curricular materials, which has been recognized and appreciated by the students. At the next

level of curricular refinement, some thought might be put to an application of the concept of sequencing of objectives within modules or courses.

5) Faculty Development

Processes may be instituted by UWI faculty to enhance instructors' familiarity with the health management environment, including the following strategies:

- Attendance at North Carolina Summer Courses
- Counterpart visits to the University of Pittsburgh.
- Attachment to Caribbean health institutions.

6) Examinations as Student Evaluation

Some students have expressed an interest in reducing the stress of a final examination as the major form of evaluation. While university policy restricts the final examination to a minimum of 60% of the students' total grade, some thought might be put to providing evaluative feedback to students at the end of each module or term.

7) Literature Resources

Both faculty and students have identified serious issues concerning the high cost of reference and text books. One possibility of addressing this issue would be to request, through the Pitt consultancy, the purchase of six copies of the major reference text for each module, 3 to be filed in ISER, and 3 to be placed on closed reserve in the main library.

8) Tutorial Sessions

Some variability has been encountered in the quality of tutorial sessions. Perhaps the clear identification of educational objectives for each tutorial session, focussing on the application level would assist in bringing a focus to these sessions. This appears to have been instituted by several instructors, with notable success.

9) University of Pittsburgh Seminars

The role of Pitt in the HDPM project has evolved during the past year, and has become clarified as collegial, institutional collaboration with UWI staff in the development of the HDPM on-campus curriculum. This support has been provided through faculty development seminars at both Pittsburgh and Jamaica, and through topical seminars presented as part of the HDPM curriculum. Observations of both HDPM staff and students indicate that these seminars,

which involve 2-4 Pitt staff, provide a useful intellectual stimulus within the curriculum. With the exception of one topic which is a planned module (Evaluation, to be presented by Edmund Ricci), the Pitt seminars represent an adjunct to the HDPM curriculum, enriching the curricular presentations of management theory and techniques. In analysing the Pitt contribution during 1984-85, the UWI faculty recognize that they are presented with the challenge of further focusing the Pitt role, fully integrating the seminars into the curriculum and further clarifying the counterpart approach to interfaculty collaboration. For its part, Pitt would be expected to analyse the HDPM curriculum to identify, in cooperation with UWI faculty, the most appropriate areas for its involvement.

IV. OTHER ISSUES

A) Link to In-Service Training Component

There are no particular recommendations which can be offered to insure linkage between in-service and on-campus components of the HDPM Project. The two components are based in different Faculties and function in very different ways. However, there are natural points of interaction between the two components. Some collaboration/linkage has already occurred. Future links can also be projected.

Two of the three Eastern Caribbean students in the diploma program come from countries where the HDPM in-service component has been active. This is to be expected since activities in one component are bound to influence the other component. A second point of contact is that the in-service training director is teaching a module in the diploma program. This illustrates that staff collaboration is taking place, as well as the fact that some of the methods/skills developed in an effective in-service program are being taught to diploma students.

Between the extremes of ignoring in-service expertise and totally delegating responsibility to in-service, there is a wealth of opportunity for collaboration in the identification, monitoring and evaluation of field attachment experiences for diploma students. Furthermore, after they graduate, it can be expected that diploma students will prove a valuable resource and ally for future in-service activities.

B) Extension to Other Campuses

The original design of the HDPM project calls for the extension of the on-campus curriculum to the faculties at Cave Hill and St. Augustine. This appears to raise two major issues:

Feasibility: At the moment, it would appear that necessary faculty resources may not be adequate to extend the courses. Cave Hill would appear to be better prepared, and the program's extension there would provide an appropriate base for extension of the program into the Eastern Caribbean. Resources, however, are limited.

Desirability: As with other UWI programs, multiple-campus duplication reduces the opportunity for the emergence of inter-country relationships among students, which emerge from integrated programs. With the current reorganization of the UWI, this is certain to be an issue in the determination of appropriate location of specific programs.

C) Long Term Support

Funding of the on-campus component should be continued during the life of the project. Unfortunately, the HDPM project is funded one year off cycle with the UWI planning triennium. The project

is scheduled to cease funding one year prior to the close of the UWI 1984-1987 budget triennium. In planning now underway for the 1987-1990 cycle, projections reportedly include HDPM support for the diploma program. In fact, however, if the next triennium is delayed in approval, the project faces the potential of two years unsupported activity. Although, beyond the scope of this report, the issue of long-term support deserves mention. Important momentum could be lost if all parties, AID, PAHO, CARICOM, and UWI, do not pay attention to this issue. A similar concern should be voiced about the future of in-service training since the project is too young to be expected to both demonstrate and sell itself to those Caribbean countries who did not have the opportunity to participate in HDMP.

V. SUMMARY EVALUATION

A) Recommendations from Mid-Project Evaluation

In reviewing the six recommendations which the mid-project evaluation team had offered, it can be stated without qualification that each of the recommendations has been successfully fulfilled:

- 1) The University of West Indies has formally approved the diploma program and its administrative location has been established in the Faculty of Social Sciences.
- 2) The inter-faculty coordinative committee has been reactivated and course planning, staff recruitment and student recruitment have been expeditiously completed.
- 3) Budgetary provision was made for additional staffing within both cooperating faculties of medicine and social sciences.
- 4) All planning and preparations were completed on schedule and the diploma program began as planned in October 1984.
- 5) The Faculty of Medicine were actively involved in planning and implementing last year's experimental course and the entire diploma program for this year.
- 6) Budgetary provisions were made to provide scholarships for students from the Eastern Caribbean.

B) Curriculum

Two terms of the diploma program have now been completed and the curriculum appears to be coming together into a unified whole. The students in particular stated that they see the integration between modules and courses. Such an outcome is no accident. It is the result of hard work by the individual teaching staff, the interfaculty coordinating committee, its chairman, Dr. Jones, the curriculum coordinators and project administration under Mr. Thelwell's leadership. The staff give evidence of working very hard to insure that the curriculum meets the needs of Caribbean students.

The curriculum presents appropriate academic exposure for mid and senior level Caribbean Health administrators. Curriculum contents provides a theoretical framework plus practical skills. Students can develop the basis for personal advancement and the competency to better fulfill their current work demands.

In looking at the overall curriculum and the qualifications of the teaching staff, it should be noted that, with the exception of duration, the diploma program curriculum meets the criteria for

accreditation of U.S. graduate programs in health administration, under the standards established by the American Council of Education in Health Services Administration (ACEHSA).

C) Student Body

One measure of need is found in the number and quality of applicants who apply for training. With relatively short notice, sixty eight applications were received and twenty two students selected. All of these students have continued. They present themselves as a solid group of energetic, well motivated individuals.

The student group is diverse in age, sex and range of experience. This should be considered a strength of the program. The students are adult learners who can learn from each other, as well as from faculty and from field attachment experience. The challenge to the staff is to maintain an integrated intellectual content, leavened with case materials and practical skills training that will foster application of theory to Caribbean health practices.

D) Teaching Staff

The number of teaching staff and the number of modules presented a difficult coordination task. Although coordination is difficult for most faculties, this group worked hard to bring the curriculum together. The teachers on the whole gave evidence of being hard working and highly motivated. Some of the more experienced staff from the Faculty of Social Sciences contributed significant teaching time. Leadership was actively provided by Dean Mills and Dr. Jones as head of the Interfaculty Coordinating Committee. In addition, experienced medical staff contributed a Caribbean health care perspectives.

The coming year should see a refinement and focusing of the curriculum based on internal review by the teaching staff. All of this indicates that the UWI Faculties are making a major commitment to development of the HDPM diploma program.

E) Linkage with In-Service Training

Although there is no real functional basis to link in-service and on-campus training it is encouraging to see that some collaboration has evolved. The in-service trainer is teaching in the diploma program. Furthermore, both sides give evidence of seeking ways to collaborate in identification and monitoring of field placement for diploma students.

F) Inter-Institutional Relationships

From the funding agency on down, the HDPM project appears to be functioning very well. The project participants noted with pleasure that AID, Washington, has shown increased interest and responsiveness toward the project. APHA expresses greater optimism for the future.

A collegial inter-institutional role between the University of Pittsburgh and UWI has been clarified and developed. The Pitt faculty development seminars were judged very useful and the Pitt curriculum seminars have provided useful enrichment.

Finally, as was evident at the Project Advisory Committee meeting of April 2, 1985, the diploma program, as well as the in-service component has earned the support of PAHO, CARICOM, and the Eastern Caribbean countries.

Appendix 1

Evaluation Scope of Work Health Development Planning And Management Project

On-Campus Training Element Proposed for March 1985

Objective

The objective of this effort is to field a team of two persons, (1) a physician/health management specialist and (2) a health administration educator, to evaluate UWI progress in establishing a one-year post-baccalaureate course of study in health management.

Scope of Work

The contract team, working in collaboration with AID officials, will undertake the following:

- 1) Gather information necessary to make on-site judgements concerning the project's success in achieving planned objectives through reviewing relevant documentation, (especially the 1984 mid-project evaluation report) and interviewing representatives of the following groups:
 - a) University of West Indies officials responsible for establishing the health management academic program, concerning the effort's implementation status and projected next steps.
 - b) University of West Indies students enrolled in the program, to learn their career objectives, reasons for enrollment, perceived academic needs and the extent to which the academic program responds to these needs.
 - c) APHA officials responsible for assisting the UWI in all phases of the project.
 - d) Faculty of the University of Pittsburgh that are involved with the curriculum development and start-up of the diploma program.
- 2) In collaboration with UWI officials, analyze the existing and proposed curriculum outline of the health management program in terms of its technical content, relevance to expressed needs of students and projected needs of the target Caribbean countries.

- 3) Make recommendations as to how UWI can establish linkages between the developing health management academic program and the project's successful in-service training activities.
- 4) Compare these current findings with the recommendations of the 1984 evaluation team to determine:
 - a) To what extent has the on-campus training component fulfilled the conditions for continued AID support which were identified in the mid-project evaluation?
 - b) How can APHA project managers and UWI improve the training program, making it more responsive to the left management and planning needs of health sector personnel and organizations in the target region?

Report

The team will prepare a report, based on the above Statement of Work. A draft of the report will be submitted within 15 days of the contractor's departure from Jamaica with the final report due 15 days thereafter.

Appendix 2

PERSONS INTERVIEWED

PITTSBURGH

E. Ricci
W. Rohrer
D. Cleland
J. Cutler

AID

A. Randlov

APHA

R. Thelwell
Dr Gerald

JAMAICA

Dr. Phyllis MacPherson-Russell
HDPM Students (Group)
Joan Rawlins
Prof. G. Mills
Dr. E. Jones
Mr. Loxley Lindo
Mr. F. Salmon
Mr. H. Hardy-Henry
Mrs. H. McKenzie
ISER Document Librarian
Dr. W. Davidson
Mr. D. Miller
Mr. Omri Evans
Mr. C. Davis
Mr. H. McZenzie
Dr. A. Samuels
Dr. S. Maharaj
Mr. K. Khan
Mrs. C. Gibson
Ms. E. Richards
Mr. Lyle Worrell
PVC. Leslie Robinson

DEPARTMENT

DEMS
See attached list
HDPM

Mgt. Studies
Mgt. Studies
Mgt. Studies
Sociology
ISER

S&PM
Student-S&PM
Student-UWI Admn.
St. Lucia
Dominica
Barbados

Appendix 2 (Cont'd)

STUDENTS INTERVIEWED

| | |
|------------------|------------------------------|
| Shirley Campbell | MOH Jamaica - Personnel |
| H. Cheltenham | MOH Barbados - Admin. |
| C. Gayle | MOH Jamaica - Statistics |
| S. Maharaj | S+PM Dept. - UWI |
| N. Rockhead | Cornwall - Matron |
| L. White | Jamaica - P.H. Nurse |
| L. Worrell | Barbados - P.H. Inspector |
| C. Gibson | St. Lucia - Asst. Supervisor |
| E. Richards | Dominica - Matron |
| G. Grant | Jamaica - Veterinarian |
| J. Barnes | Jamaica - Nurse, JDF |
| K. Khan | UWI - Admin. |
| D. Lennon | Jamaica - Dutch Project |
| L. Harrison | UWI Hospital - Personnel |

Appendix 3

LIST OF DOCUMENTS REVIEWED

Mid-Term Project Evaluation Report, HDPM, February 3-29 1984

Executive Summary of On-Campus Training Progress Since Mid-Term Evaluation

Related Correspondence Concerning On-Campus Training Activities

Course Outline for the Existing Diploma in Health Management

Reports

Report of the On-Campus Training Program

Minutes of Advisory Board Meetings

Minutes of Executive Committee Meetings

Trip Reports

Quarterly Reports

Semi-Annual Reports

Appendix 4

RECOMMENDATIONS FROM 1984 MID-PROJECT EVALUATION REPORT

1) Administration Diploma Program

Either UWI Vice-Chancellor Preston or Pro Vice Chancellor Robinson should immediately confer with the two Deans of Medicine and Social Science to confirm whether they endorse administrative placement of the Health Management Diploma Program within the Faculty of Social Science - If so, the decision must be officially established. This was the recommendation of the December, 1982 Curriculum Consultancy Committee - but it is not clear whether it has the support of both faculties and is still considered the best course of action.

2) Curriculum Planning

The most critical issue facing HDPM at UWI is adequate staffing and the administrative approval of the on-campus diploma program in health management. Staffing was a critical omission in design of the project and it must be remedied immediately. An inter-department work group responsible for development of the diploma program was established by the 1982 Curriculum Consultancy Committee. This work group should be reactivated. Planning needs to occur for student enrollment in already existing course modules and teaching resources identified for new course modules. If part-time money is required for work-group activities, it should be provided by HDPM.

3) Diploma Program Staffing

The Senior Researcher position has been formally transferred to a Course Coordinator position. This may not be enough. In addition, to clerical and part-time staff support for the inter-departmental work group, an additional full-time equivalent teaching staff position should be budgeted to carry out curriculum development and teaching in the diploma program. Creation of these positions should have priority for allocation of resources over all other project activities (except in-service), including UWI research, University of Pittsburgh consultancies and other expatriate consultancies. APHA and AID should take the steps necessary to promptly facilitate whatever re-budgeting is required.

4) Implementation Deadline

UWI should proceed forcefully and expediently in attempting to begin the diploma program in Fall 1984. At least two

rounds of training must be completed in order to establish a market for the program and to develop a tested curriculum. To have reasonable hope of achieving project expectations in regards to the on-campus component, it is imperative that the diploma begin as planned. Should it not begin in Fall 1984, AID should seriously consider deleting this component with concurrent reduction of funding.

5) Faculty of Medicine Input

Every effort should be made to directly involve the Faculty of Medicine in planning and implementation of the remaining first course and the entire diploma program for next year.

6) Study Grants

The project should consider supporting the economic costs of a selected number of promising health planners and managers from the non-campus countries for the next two years, to increase the potential for their participation given the small islands economic constraints, and provide an expanded student base for the demonstration years of the program.

File: Midproj
April 17, 1985 sc