

Ref. No. DEIDS/10



DEPARTMENT OF HEALTH

Ministry of Public Health

Devasam Palace

Bangkok, Thailand.

Telephone 815504, 817168, 816399

February 11, 1975.

Dr. Thomas R. Hood
Associate Director
Division of International Health Programs
American Public Health Association
1015 Eighteenth Street, N.W.,
Washington, D.C. 20036, U.S.A.

Dear Dr. Hood:

Enclosed herewith please find the DEIDS Project Report for First Quarter Ending December 31, 1974.

The delay of submission of the report due to administrative constraints is much regretted.

Very truly yours,

(Dr. Somboon Vacharotai)
Director General,
Department of Health, and
DEIDS Project Director.

Encl.

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DEIDS PROJECT QUARTERLY REPORT
FOR
QUARTER ENDING DECEMBER 31, 1974

Introduction

Although the formal DEIDS Project Agreement between the Thai Government and APHA was signed on September 23, planning and build-up activities had been going on for some time before that date. The first Quarterly Report will focus on activities in the quarter ending December 31, 1974, but will also cover some activities that began previous to that period. In spite of all forms of administrative and traditional difficulties derived by the tri-parties concerned, the first quarter activity has been focussed on the following:

1. recruiting and assembling the Lampang DEIDS Project staff and completing the health staffing of all existing service levels in Hang Chat District;
2. planning of specific objectives and activities for each of the Project Components;
3. procurement and preparation of facilities and equipment for the various program components.

It should be emphasized here that the first quarter was highlighted in December by the DEIDS Project Workshop; Project staff, along with consultants and representatives from a broad variety of health and health-related institutions met in a one-week Workshop to clarify project objectives and to formulate the functional plan by which to achieve them.

The Quarterly Report will, for the most part, follow the general format suggested in the Royal Thai Government/APHA DEIDS Project Agreement.

I. Thai and US Inputs

A. Recruitment and selection of chiefs for the Divisions of Administration, Personnel Development, Medical and Health Services, and Information and Evaluation, along with their supporting staffs were completed in the first quarter. Staff members have been recruited from a broad cross-section of public health, hospital, and medical school professionals. Existing staff positions were filled at the Hang Chat Health Center in anticipation of upgrading its status to a Medical and Health Center (formerly called First Class Health Center).

B. Establishing DEIDS Offices within the facilities of the Provincial Health Offices and the Provincial Hospital of Lampang. Personnel Development, Information, and Evaluation, Administration Divisions, and University of Hawaii staff are in the buildings of the Provincial Health Office. The Medical and Health Services Division--responsible for operationalizing the field programs and integrative innovations--established its office in the Provincial Hospital. Attempts have been made in order to achieve the first step in the DEIDS Project's plan to utilize the Provincial Hospital as the center point of the integrated health care system, incorporating a satellite system of health centers and village promotor/providers. The hospital established a new Department of Community Medicine which will take specific responsibility for coordinating the flow of care between the hospital and the outlying health centers.

C. In order to secure understanding of, cooperation with, and support for the DEIDS Project from other government agencies in Lampang, DEIDS orientation/information meetings were arranged for:

1. The Hang Chat District Officer and his staff
2. The Governor of Lampang Province and his staff (who is regularly informed of project progress)
3. The Chief Education Officer of Hang Chat District
4. The village and tambol leaders of Hang Chat District

D. The Minister, Deputy Minister, and Undersecretary of State for the Ministry of Public Health visited the Lampang project site and while there, appeared on television (the Lampang regional station) to promote the DEIDS Project. This was viewed as a valuable public relations and information input.

E. Field Coordination and Adjunct Consumer Committees were established in Hang Chat District. Adjunct Consumer Committees were set up at the village and tambol levels. After formation, these committees were then oriented to the objectives and strategy of DEIDS. Included in these committees are village and district leaders such as government officials, senior monks, and businessmen.

F. The Personnel Development Division began planning curricula for cross-training of service personnel; for training Communicators, Health Post Volunteers, and Traditional Midwives; as well as for the MEDEX Training Program. The first groups of Communicators (totalling 114 people) were trained in two-day sessions. Cross training sessions for the present Hang Chat health staff are scheduled for early February, to be followed by Communicator and Health Post Volunteer training. Medex curriculum planning and development is under way and training is now scheduled to begin in June. Two of the Personnel Development Division staff, Drs. Nopadol and Wannarat of the Provincial Hospital, will travel to Hawaii in February to collaborate with the University of Hawaii Medical School's Health Manpower Development staff in further developing the Medex training curriculum and teaching materials.

G. The Information and Evaluation Division began preparations for the studies it will undertake in the first quarter of 1975:

1. The major focus of attention was planning the baseline Community Surveys and designing the survey instrument, which, after undergoing several revisions in consultation with evaluation specialists from the Thai National Institute of Development Administration (NIDA), the University of Hawaii, and other institutions, is in the final stages of completion. Pretesting of the survey instrument is scheduled for mid-February, and the survey teams will go into the field full time at the end of February for implementation of the surveys.
2. As plans for the Community Survey were laid, a household listing and mapping for Hang Chat District was carried out by the Evaluation staff. The listing was used to complete current census data and maps of the area as a prelude to the Community Surveys,

3. During the first quarter, DEIDS Project staff determined that NIDA would have a major role in supporting evaluation activities. NIDA specialists, headed by Statistician Consultant, Dr. Boonserm Weesakul, are being utilized as consultants in the Community Survey, Task and Cost Analysis, Data Processing and Computer Analysis. The Ministry of Public Health (MOPH) will provide consultants for Vital Statistics, Medical and Health Services Statistics, and the Nutrition Survey in Hang Chat and the control areas. Both NIDA and MOPH consultants have been closely involved in the planning for evaluation. An overall plan of evaluation is in preparation and should be completed in February.

The Administrative Division, after a change of Division Chief, organized procedures for reporting, accounting, procurement, and support. Initial problems of local staff unfamiliarity with the procedures and requirements of AID/APHA have been for the most part, resolved by clarification from APHA and ongoing orientation by knowledgeable staff members. The initial unfamiliarity and personnel changes produced some reporting delays and procedural miscues, but these are not anticipated in the future.

I. From December 18 to 23, the DEIDS Project Workshop was held in Lampang and Chiangmai. The purpose of the Workshop was to formulate the DEIDS functional plan for the implementation phase by providing the DEIDS staff with an opportunity to present its tentative plans to a broad group of health professionals and consultants representing many fields of expertise and experience relevant to establishing an integrated delivery system. Moreover, the participants in the Workshop were expected to make comments and suggestions which would help the DEIDS Staff to further plan and clarify the Project objectives and activities. A detailed Functional Plan for the operations of DEIDS was the hoped-for output of the Workshop, but this was perhaps an over-ambitious expectation for such a short period of time. A detailed functional plan as such was not completed, but the Workshop did indeed clarify objectives, and provided the DEIDS Staff with a wealth of recommendations which will be considered in continuing planning. Subsequently, working groups for each division composed of DEIDS staff and outside local consultants, have been established to formulate detailed functional plans and follow through from the Workshop. The outcome of this Workshop will be summarized, printed and distributed to everybody concerned.

J. Two of the three University of Hawaii DEIDS resident staff members, Dr. Ronald Wilson (Chief of Party) and John Rogosch, arrived in Thailand and began their work with the Project in December.

II. Problems Encountered and Anticipated

A. As mentioned above, establishing accounting, reporting, and procurement procedures along AID/APHA guidelines was an unfamiliar task for the Lampang staff. This was further complicated by the untimely but appropriate changes in key Administrative Division personnel, and resulted in some procurement misunderstandings and late reporting. The late financial report, in turn, held up the reimbursement of funds by APHA and strained Project financing to its limits (APHA's quick response on receiving the financial report was greatly appreciated). These problems have diminished as the administrative staff completed the first quarterly cycle of reporting and accounting and, with more experience and continual orientation, these should be minimal in the future.

B. There is concern among senior Project Staff over the delays in equipment and services procurement caused by the lack of approval for required source waivers. Source waivers have been requested for procurement of Project vehicles (10 motorcycles and 3 new vehicles), for copying equipment, for local audit services and for some of the other Project equipment. The vehicles, copy services and audiovisual equipment are needed immediately, and the required source waivers should be obtained at the earliest time so that procurement can be accomplished and the equipment and services provided to the Project without further delay.

This is regarded as the chief problem anticipated and, if not accomplished with due priority attention, may result in untimely and serious delays in the implementation of DEIDS and critically compromise our ability to accomplish the targeted objectives and goals of the Project.

C. It would be mentioned here that the DEIDS Project is still in the what so called the "embryonic stage". Without the full administrative support from the tri-parties concerned, slow progress of the Project would be anticipated.

III. Cooperation from Private Sector Health Providers

A. Sixty druggists in the Province have been identified by the Field Project Director, by whom they are nominally licensed (the Field Project Director is acting Provincial Chief Medical Officer). The Field Project Director has invited the druggists to take part in monthly meetings to discuss their problems and to orient them to the DEIDS Project. Other cooperative activities, such as referrals and reporting, are being discussed, but the intricacies and complexities involved require Project Staff to proceed with sensitive vigilance and calculating judgement.

B. Private Hospitals (2) and clinics (providing Western-style medical care) will be contacted in an attempt to gather information on numbers and types of patients. However, the question of how to effectively integrate indigenous practitioners still is not fully resolved. Traditional midwives will be trained by the project, but the role of injectionists and other local practitioners needs to be further defined and developed. Most of these practitioners have already been identified for Hang Chat. Monks, as mentioned above, are now participating as members of the adjunct committees, although none have been chosen in the first two groups of communications. There is still some reticence among Project Staff because of the theoretical restrictions on monks' contact with women (a major target group), or on discussion of sexually-related topics (eg., family planning), but this will be further explored in the coming months. Recently some traditional practitioners have been recruited to be Communicators.

Conclusion

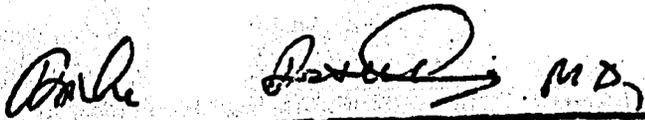
The final quarter of the implementation phase of the DEIDS Project has witnessed the recruitment, mobilization, orientation and organization of the complete Thai DEIDS Staff and two (of three) of the UHSPH resident U.S. DEIDS Staff; additionally, specific project objectives and division activities programmed toward these objectives have been further clarified as significant progress is being made toward development of the functional plan for the operations of the DEIDS Project. Consultant reports from the December Workshop are now being received and will be prepared for distribution to all concerned parties in the near future. Administrative and organizational

procedures for the operations of the project have been established to support the increasing activities of the divisions of the project which are now operating at near full capacity.

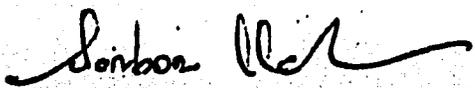
The early and normal problems encountered in the start up of the organization and administration of the implementation phase of the project are being satisfactorily resolved and are not expected to recur.

The primary problem anticipated concerns the procurement of project equipment, vehicles, and services which are needed at the present time and which may cause untimely constraints on and delay of critical project activities if not received soon.

Signed:


Dr. Pricha Desawadi, Field Director


Dr. Ronald Wilson, Assoc. Field Director and
U.S. Counterpart


Dr. Somboon Vachrothai, Project Director

CC: Dr. Hood (APHA)
Dr. Voulgaropoulos (UNSPH)
Dr. Vanderhoof (USOM)

*Note: The headings "Studies Completed and Further Studies Planned", "Evaluation Performed and Results", and "Recommended or Planned Adjustments as a Result of Evaluation", listed in the suggested format for the Quarterly Report have not been specifically addressed in the first Quarterly Report. Progress in these topics is discussed in the report text, but since studies and evaluation are now both in the early developmental stages, they will be discussed in more detail in subsequent reports.