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PROJECT NO. 590 708	2. PAR FOR PERIOD: 6/30/74 TO 5/30/75	3. COUNTRY Korea	4. PAR SERIAL NO. 1976-3
PROJECT TITLE PD-KAN-717 ISN-33007			
HEALTH PLANNING Reference Center A.I.D. ROKG/US			

6. PROJECT DURATION: Begon FY <u>74</u> Ends FY <u>76</u>	7. DATE LATEST PROP <u>5/29/74</u>	8. DATE LATEST PIP None	9. DATE PRIOR PAR None
10. U.S. FUNDING	a. Cumulative Obligation Thru Prior FY: \$ <u>500,000</u>	b. Current FY Estimated Budget: \$ <u>210,000</u>	c. Estimated Budget to completion After Current FY: \$ <u>-0-</u>

11. KEY ACTION AGENTS (Contractor, Participating Agency or Voluntary Agency)

a. NAME	b. CONTRACT, PASA OR VOL. AG. NO.
Westinghouse Electric Corporation (Health Systems Group)	AID/ea-C 1067

I. NEW ACTIONS PROPOSED AND REQUESTED AS A RESULT OF THIS EVALUATION

A. ACTION (X)			B. LIST OF ACTIONS	C. PROPOSED ACTION COMPLETION DATE
USAID	AID 'W	HOST		
			None. (Evaluation suggests that the objectives and strategies in current PROP and Project Agreement are adequate to guide actions at this early stage of the project. A general evaluation will be completed by ROKG/USAID in January 1976 after more experience is obtained.)	

12. REPLANNING REQUIRES	REVISOR OR NEW: <input type="checkbox"/> PROP <input type="checkbox"/> PIP <input type="checkbox"/> PRO AG <input type="checkbox"/> PIO/T <input type="checkbox"/> PIO/C <input type="checkbox"/> PIO/P	E. DATE OF MISSION REVIEW <u>June 12, 1975</u>
PROJECT MANAGER: TYPED NAME, SIGNED INITIALS AND DATE <u>James R. Brady</u>		MISSION DIRECTOR: TYPED NAME, SIGNED INITIALS AND DATE <u>Michael H. B. Adler</u>

II. PERFORMANCE OF KEY INPUTS AND ACTION AGENTS

A. INPUT OR ACTION AGENT CONTRACTOR, PARTICIPATING AGENCY OR VOLUNTARY AGENCY	B. PERFORMANCE AGAINST PLAN							C. IMPORTANCE FOR ACHIEVING PROJECT PURPOSE (X)					
	UNSATISFACTORY		SATISFACTORY			OUT-STANDING		LCW		MEDIUM			HIGH
	1	2	3	4	5	6	7	1	2	3	4	5	
1. Westinghouse Corporation				X								X	
2.													
3.													

Comment on key factors determining rating

Two-man team has been on board only for two months, but is proceeding satisfactorily to establish working relationships with counterpart organizations and develop detailed work plan. One 30-day consultant arrived in May to help develop in-country training programs and identify candidates for overseas training.

4. PARTICIPANT TRAINING \$14,000	1	2	3	4	5	6	7	1	2	3	4	5
				X						X		

Comment on key factors determining rating One long-term (12 months) and 6 short-term (one month) participants to be programmed by USAID and 6 long-term participants by contractor to train health planners for Ministry of Health's planning section, SNU School of Public Health, and new National Health Secretariat. Westinghouse contract includes \$54,000 for participant training.

5. COMMODITIES \$20,722	1	2	3	4	5	6	7	1	2	3	4	5
				X						X		

Comment on key factors determining rating

Minor commodity input will be required for supporting new ROKG Health Planning staffs (2-3 vehicles, audio-visual and planning aids, and library-reference materials). PIO/C's are now being prepared.

6. COOPERATING COUNTRY	a. PERSONNEL											
	1	2	3	4	5	6	7	1	2	3	4	5
			X									X
	b. OTHER Funding											
			X								X	

Comment on key factors determining rating

- (1) Ministry of Health has moved slowly in requesting authority to establish new Health Planning Section, but approval is expected by July 1975.
- (2) Creation of other necessary national health bodies was agreed to in principle by ROKG in March 1975. Action by Economic Planning Board (EPB) to establish National Health Council and National Health Secretariat expected by July 1975.
- (3) Scope of activities in CY 1975 may be reduced by EPB's failure to include adequate project counterpart funds in ROKG budget.

7. OTHER DONORS WEO/UNICEF	1	2	3	4	5	6	7	1	2	3	4	5
				X						X		

(See Next Page for Comments on Other Donors)

II. PERFORMANCE OF KEY INPUTS AND ACTION AGENTS

A. INPUT OR ACTION AGENT CONTRACTOR, PARTICIPATING AGENCY OR VOLUNTARY AGENCY	B. PERFORMANCE AGAINST PLAN							C. IMPORTANCE FOR ACHIEVING PROJECT PURPOSE (X)					
	UNSATISFACTORY		SATISFACTORY			OUTSTANDING		LOW		MEDIUM		HIGH	
	1	2	3	4	5	6	7	1	2	3	4	5	
1. Westinghouse Corporation				X								X	
2.													
3.													

Comment on key factors determining rating

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\$20,722				X						X		

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6. COOPERATING COUNTRY	a. PERSONNEL											
	1	2	3	4	5	6	7	1	2	3	4	5
			X									X
	b. OTHER Funding											
			X								X	

Comment on key factors determining rating

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7. OTHER DONORS	1	2	3	4	5	6	7	1	2	3	4	5
WHO/UNICEF				X						X		

(See Next Page for Comments on Other Donors)

7. Continued: Comment on key factors determining rating of Other Donors

WHO/UNICEF and USAID are coordinating their efforts to achieve their mutual goal of a stronger Health Planning System.

III. KEY OUTPUT INDICATORS AND TARGETS

A. QUANTITATIVE INDICATORS FOR MAJOR OUTPUTS		TARGETS (Percentage/Rate/Amount)					END OF PROJECT
		CUMULATIVE PRIOR FY	CURRENT FY		FY 76	FY ____	
			TO DATE	TO END			
1. Senior health planning economists trained and employed in EPB/MHSA.	PLANNED	0	0	0	2		2
	ACTUAL PERFORMANCE	0	0				
	REPLANNED			1	1		2
2. Health planning and research analysts trained and employed in EPB/MHSA/KDI.	PLANNED	0	0	2	3		5
	ACTUAL PERFORMANCE	0	0				
	REPLANNED			1	4		5
3. Research and test agenda delineated and activated.	PLANNED	0	75%	25%			100%
	ACTUAL PERFORMANCE	0	0				
	REPLANNED			25%	75%		100%
4. Data-gathering system created to support health planning needs.	PLANNED	0		50%	50%		100%
	ACTUAL PERFORMANCE	0	0				
	REPLANNED			10%	90%		100%
B. QUALITATIVE INDICATORS FOR MAJOR OUTPUTS		COMMENT: Need has become understood and accepted by economic planners and by several Ministry of Health officials. This is reflected in new guidelines and proposals for health component of 4th Five-Year Plan.					
1. Need for new "low cost" health delivery system accepted by economic planners & health officials.		COMMENT:					
3.		COMMENT:					

1020-25 (10-70)	PROJECT NO.	PAR 1 OR PERIOD:	COUNTRY	PAR SERIAL NO.
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IV. PROJECT PURPOSE

A. 1. Statement of purpose as currently envisaged. 2. Same as in PROP? YES NO

Assist the ROKG to establish a health sector planning capability which is based on systematic analysis, research, and data assessment.

B. 1. Conditions which will exist when above purpose is achieved. **Items 1-3** 2. Evidence to date of progress toward these conditions.

1. EPB, MNSA and Ministry of Home Affairs staffed and linked together in discharging discrete functions related to health planning.
2. Health sector management information system installed.
3. National Health Planning Council and Interministerial Committee organized.

1. Agreement was reached to establish National Health Council to promote inter-ministerial cooperation and support on health planning. Membership includes EPB, MNSA, MHA, Ministry of Education, and representatives of private sector and academia. Creation expected by end FY 75.
2. We had some success in getting ROKG to recognize present health data system is woefully inadequate. ROKG/USAID has made 3 small grants to local universities to conduct limited baseline research to initiate data collection effort.
3. See 1. above.

NOTE: No progress to report yet on items 4-8 under Sec. B.2. of PROP.

V. PROGRAMMING GOAL

A. Statement of Programming Goal
 Sector goal is "Enhanced public welfare in rural areas through expanded health, sanitation, and social security programs and facilities based on economically sound and site-tested planning systems."

B. Will the achievement of the project purpose make a significant contribution to the programming goal, given the magnitude of the national problem? Cite evidence.
 The achievement of the project purpose will provide the institutional system and procedures for rationally allocating resources to upgrade health services. However, achievement of the program goal requires a political or policy level decision to utilize the new system in such a way that existing resources are allocated rationally to achieve maximum cost-benefits.