



PROVISION OF BASIC HEALTH SERVICES
IN SIEM REAP AND OTDAR MEANCHHEY PROVINCES
CAMBODIA

**PBHS-SROM
KAM02/007/11**

2007 ANNUAL REPORT

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ACRONYMES

ACH	Angkor Children Hospital	NCHP	National Centre for Health Promotion
€	EUR (European Currency)	NGO	Non Governmental Organization
AOP	Annual Operation Plan	NHS	National Health Survey WB/ADB
BCC	Behavioral Change Communication	NIPH	National Institute of Public Health
BTC	Belgian Technical Cooperation	OD(O)	Operational District (Office)
CAR	Council of Administrative Reform	OT	Operating Theater
CAAFW	Cambodian NGO	OI	Opportunistic Infection
CB	Capacity Building	OMC	Otdar Meanchey
CBHI	Community Based Health Insurance	OPD	Out Patient Department
CDC	Communicable Diseases Control	PAP	Priority Action Program
CFDS	Community Family Development Services	PBHS-	PBHS in the provinces of SR and OMC
CHHRA	Cambodian Health and Human Rights Alliance	PIS	Project Implementation Strategy
CMS	Central Medical Store	PBHS-	Provision of Basic Health Services in KC
CPA	Complementary Package of Activities	PHA	Provincial Health Advisor
CR	Cambodian Riel	PHD (O)	Provincial Health Department (Office)
CRO	Consumer Rights Organization	PHTAT	Provincial Health Technical Advisory Team
DGDC	Directorate General of Development Cooperation	PLHA	People living with HIV/AIDS
DHTAT	District Health Technical Advisory Team	PLWHA	People living with HIV/AIDS
DRH	District Referral Hospital	PMG	Priority Mission Group
GAVI	Global Alliance for Vaccine and Immunization	PMU	Project Management Unit
GIS	Geographical Information System	PRH	Provincial Referral Hospital
GOKC	Government Of the Kingdom of Cambodia	PTAC	Project Technical Advisory Committee
HC	Health Centre	ProCoCo	Provincial Coordination Committee
HCMC	Health Centre Management Committee	QI	Quality Improvement
HEF	Health Equity Fund	QIP	Quality Improvement Plan
HEFO	Health Equity Fund Operator	RH	Referral Hospital
HFU	Health Financing Unit	SCA	Save the Children Australia
HIB	Handicap International Belgium	SCA	Save the Children Australia
HIS	Health Information System	SHI	Social Health Insurance
HMIS	Health Management Information System	SMT	Senior Management Team
IEC	Information Education Communication	SR	Siem Reap
IPD	In Patient Department	SWiM	Sector Wide Management
HRD(P)	Human Resource Development (Plan)	TB	Tuberculosis
JLCB	Joint Local Consultative Body	TA	Technical Assistant
KC	Kampong Cham	TASC	Technical Advisory Sub Committee
MEF	Ministry of Economy and Finance	TFF	Technical & Financial File
MOEYS	Ministry Of Education Youth and Sports	TNA	Training Needs Assessment
MOH	Ministry Of Health	TOR	Terms of Reference
MPA	Minimum Package of Activities (HC activities)	TOT	Training of Trainers
MSF-B	Médecins Sans Frontières Belgique	US\$	United States Dollar
MTR	Mid-Term Review	WOMEN	Local NGO

1 PROJECT SHEET

Provision of Basic Health Services (PBH) in the Provinces of Siem Reap and Otdar Meanchey

Project Implementing Agency	Ministry of HEALTH, through 2 Provincial Health Departments
Reference N° DGDC formulation	18955/11
Reference N° BTC project	KAM/02/007/11
Starting Date/Duration	June 2004 for 48 months
Contribution Total	13.8 M EUR (55.4 Billion Riel)
Contribution Belgian Government	4.58 M EUR (18.3 Billion Riel) ¹
Contribution Cambodian Government	34.8 Billion Riel (8.70 M EUR) ¹
Contribution Cambodian Population	2.3 Billion Riel (0.57 M EUR) ¹
Sector intervention	Health
Sub-sector intervention	Behavioral Change Communication, Poverty reduction, Equity, Consumer Rights, Health system performance

General objective: to improve the health, especially of mothers and children, thereby contributing to poverty alleviation and socio-economic development in Siem Reap and Otdar Meanchey provinces.

Specific Objective is to Enhance health sector development by supporting the provincial Plan in its 6 key areas (Strategic Plan).

Expected Results:

- 1 Health services are more demand oriented;
- 2 Behavior of the population and the health staff has improved;
- 3 Service provision of Public Health Services has increased;
- 4 Quality of Public Health Services has risen;
- 5 Technical and managerial capacity amongst health staff is strengthened;
- 6 Health Sector is better managed, planned, regulated, financed, monitored and evaluated.

Direct Beneficiaries: 900,000 people as the population of the 2 provinces The project will disproportionately target and benefit to the poorest ones

Key Contacts: Project PMU office: pbhsrom.po@online.com.kh +85563760703
Project Director: Dr DyBunChhem: drbchhem@camintel.com
Deleg. Co-Director: Dr Frederic Bonnet Frederic.bonnet@btcctb.org

Partner Institutions: Ministry of Health of Cambodia
Main bi-multilateral partners in health(WHO, WB, GTZ, USAID, ...)
Local NGOs (CHHRA, WOMEN,

Note: this project is parallel to a brother project covering the province of Kampong Cham (KAM/003/009/11, DGCD:18956/02). Future developments shall merge the 2 projects.

2 BRIEF FACTUAL OVERVIEW

Local events/changes

- 1 - A Malteser International expert was appointed as Adviser to the PHD OMC focusing on the CBHI and MCH.
- 2 - Annual Provincial Health Review meeting in Siem Reap
- 3 - Annual Provincial Health Review meeting in Otdar Meanchey
- 4 - Construction of a new health center at TokKlokLeu, Sotnikum OD (People for Care and Learning, an international volunteer humanitarian foundation)
- 5 - MSF starts construction of a new TB department
- 6 - MSF phased out from OMC and replaced by AHF for supporting OI/ART clinic in the RH OMC.
- 7 - HEF external assessment (report and recommendations)
- 8 - PBHS-SROM Mid-Term Review (report and recommendations)
- 9 - Ministry of Planning with support of GTZ implements/prepares Pre-Identification of poor families in the project provinces.
- 10 - GAVI/HSS. a Performance Contracting approach, was approved for all Angkor Chum OD
- 11 - The Priority Mission Group, an incentive initiative of the government, was officially declared for Siem Reap (59 staff) and OMC (26 staff)

Points 7, 8 and 9 illustrate the inception of systematic approaches in line with the project concept.

National events/changes

- 1 - The mobilization of government budget remains under the classic “Chapter system” with unchanged reduced access to resources and reduced autonomy in the use of resources:
- 2 - Major country wide outbreak of Hemorrhagic Dengue Fever as in neighbouring countries
- 3 - Joint Annual Performance Review meeting in Phnom Penh
- 4 - Decree and guidelines on Special incentive for midwives (40,000 Riel at RH and 60,000 Riel at HC for each alive new-born delivery in the structure).
- 5 - MoH decree on Provincial Referral Hospital moving out from the OD Office to the PHD Office.
- 6 - The MOH developed the second Health Strategic Plan (HSP2) 2008-2015 and the second phase of the Health Sector Support Program (HSSP2) 2009-2013. Both will have an important impact on the development of the Cambodian Public Health System.
- 7 - MoH Decree on Quality Certification for Hospitals and Health Centers
- 8 - Decree on keeping hospitals and health centers (and schools) at their current location
- 9 - MoH HEF monitoring tools developed and tested + Draft MoH guideline on implementation of HEF and on Government Subsidies for the Poor.

Points 4 to 9 illustrate the development of institutionalised systematic approaches in line with the project concept

3 OVERVIEW OF ACTIVITY PLANNING

3.1 Activity overview+ Analysis of activity planning

2007 Activity Plan per budget lines and Variations										
Mode		Initial 2007 Plan				Actual implementation				Ref.
		Q1	Q2	Q3	Q4	Variations in Orange				
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
A	ENHANCE HEALTH SECTOR									
A 01	Consumer Rights Organisations									
A 01 01	HEF TA	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
A 01 02	International HEF TA including CBHI	CO/BI	x				x			1
A 01 03	Identification of the poor (2 OD in SRP + OMC)	CO/OD							xxx	2
A 01 04	Social support activities for the poor	CO								
	Food support to TB patients in SRP provincial hospital		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	Food support to TB patients in OMC provincial hospital		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
A 01 05	Equity funds operational & direct support	CO								
	Siem Reap provincial hospital		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	HEF for Oncology patients in SRP RH		xxx	xxx	xxx	xxx	xxx	xxx	xxx	3
	Kralanh referral hospital		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	Sotnikum referral hospital		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	Five health centers in Sotnikum OD		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	Otdar Mean Chey provincial hospital		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	Anlong Veng health center with beds		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	Database Development for HEF				xx				x	4
A 01 06	Equity funds operation fee	CO								
A 02	Behavioral Change Communication									
A 02 01	BCC TA	CO								
A 02 02	BCC contracted out campaigns	CO								
	1. Health Newsletters Project									
	Quarterly Health Newsletter Publishing		x	x	x	x	x	x	x	
	2. Road Safety Promotion Campaign									
	Road safety School Education programs		x		x					5
	Road Database RTAVIS Trainings		x							
	3. Marketing on Referral Hospital									
	TV Advertisement on Health services		x	x	x	x	x	x	x	
	Radio Advertisement		x	x	x	x	x	x	x	
	Newspaper advertisement		x	x	x	x	x	x	x	
	Symbol Signs directing to 14 HCx (100m distance) for OMC		x	x	x	x	x	x	x	
	TV Spot or Leaflet of RH/HC in OMC		x	x	x	x	x	x	x	
	Other marketing publications (light signs for RHs of OMC & SRP)		x	x	x	x	x	x	x	
	4. Support Special Events									
	Water Festival Days in SR & OMC		x	x	x	x	x	x	x	
	World AIDs Day for Siem Reap		x	x	x	x	x	x	x	
	Breast feeding day for SR & OMC		x	x	x	x	x	x	x	
	Candle light Day for OMC & SRP		x	x	x	x	x	x	x	
	TB World Day for OMC & SRP		x	x	x	x	x	x	x	
	Update of project brochure		x	x	x	x	x	x	x	
	Dengue fever boards, announcement,						x	x		6
	5. BCC Red Cross				x				x	
A 02 03	School Health Education	CO								
A 03	Strengthening Health service delivery									
A 03 01	Project director SR & OMC	CO								
A 03 02	OD Directors SR (3)	CO								
	DSMT responsibility bonus Sotnikum		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	DSMT responsibility bonus Siem Reap		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	DSMT responsibility bonus A. Chum		xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	DSMT responsibility bonus Kralanh		xxx	xxx	xxx	xxx	xxx	xxx	xxx	

- 1- Originally planned at the beginning of the year, the external assessment of the HEF of the project was postponed by about 3 months due to time constraints for the selection procedure process. As a results, the HEF contract with a local agency was extended by 3 months, without significant impact on the results.
- 2- Identification of the poor families was cancelled by SC decision in March 2007. Then MoP/GTZ could find a separate funding. The project just contributed for the cost of taking picture of the poor family to insert on the cards. The timing of this is depending upon the the progress of the pre-identification by MoP/GTZ
- 3- This activity was conditional to the development of the concerned services by another project in Phnom Penh that was cancelled.
- 4- This was postponed to dec07-jan08 due to time constraints.
- 5- The project is phasing out from this activity that is not in direct line with the project main objective (MTR recommendations)
- 6- Unexpected Dengue fever outbreak that required project mobilization

2007 Activity Plan per budget lines and Variations											
	Make	Initial 2007 Plan				Actual implementation				Ref.	
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4		
A		ENHANCE HEALTH SECTOR									
A 03 03		Output related bonus system for 60 HCs									
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
A 03 04		Output related bonus system RH									
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
A 03 05		Output related bonus system ODO									
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
A 03 06		Output related bonus system PHDO									
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
A 03 07		Promotion of HBC for AIDS patients									
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
A 03 08		School Health Inspection Program									
A 03 09		Public health support									
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		x	x	x	x	x	xxx	xxx	x	7	
A 04		Quality Improvement									
A 04 01		TA Quality Improvement									
A 04 02		Micro interventions									
		x	x							8	
				x						9	
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
				xxx	xxx			x	x	10	
				xxx	xxx			x	x		
				xxx	xxx			x	x		
				xxx	xxx			x	x		
				xxx	xxx			x	x		
				xxx	xxx			x	x		
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		
		xx						xx		11	
		xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx		

- 7- Dengue fever outbreak that intensified scheduled activities on this line
- 8- Cancelled in waiting for confirmation of a consolidation phase (MTR recommendations)
- 9- Purchase postponed to Q1 2008
- 10- Reduced intensity on these activities in relation to delay in establishing the required framework and developing the tools.
- 11- Attempt to coordinate the purchase with PBHS-KC. Delayed by about 4 months

2007 Activity Plan per budget lines and Variations										
	Mode	Initial 2007 Plan				Actual implementation				Ref.
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
A		ENHANCE HEALTH SECTOR								
A04 03	CO	Incentive for achieving qualitative indicators (Quality Standard								
A04 04	CO	Quality improvement at RH								
		Additional drug supply for RHs	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
		Exceptional support to RHs	x	x	x	x				
		Conduct re assessment at SR and Samrong RH		x					x	12
		Conduct hospital assessment for SNK			x					13
		Conduct hospital assessment for KRL			x					
		Conduct training on hospital assessment tools for RHs				x				
		Clinical improvement at RHs	xxx	xxx	xxx	xxx	x	x	x	x
		Quality Bonus	xxx	xxx			xxx	xxx	xxx	xxx
A0405	g	Infrastructural works at PRH-SR								
		Renovation building in SRP RH + some equipment	xxx	xxx	xxx	xxx	xx	xx	xx	xx
		Others (salary, per diem)	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
A 05		Improve Staff Skills through Capacity building								
A0501	g	TA-Surgeon International				xxx	xxx	xxx	xxx	
A05 02	CO	Contracting in training / workshop								
		Support quarterly/yearly review of AoP SR	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
		Support quarterly/yearly review of AoP OMC	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
		Support provincial AIDS Committee meeting for SR	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
		Private pharmacies committee in SR & OMC	x		x		x		x	
		Support SR senior managt monthly meeting of PHD	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
		Concept paper for consolidation phase						x		16
A0503	g	Contracting in training for teachers								
A0504	g	Contracting Out Training								
		Training on Pediatric Nursing care at AHC		xx		xx			xx	
		Midewifery training	xx		xx		xx		xx	
		HMT for 9 Hosp staffs Samrong + Sotnikum (NIPH)			xx	xx		xx	xx	17
A05 05	g	Training activities								
		TA Surgeon	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
		Surgery training for OMC	x	x	x	x				18
		SR-KC surgical routine exchanges	x	x	x	x				19
		Project staff retreat/team building			x					20
		Various training and workshop participation to conference	x	x	x	x	x	x	x	
A06		Institutional and Capacity Building								
A0601	CO	TA-PHA								
		PHA-TA	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
		Short term consultancy (Dr. Ir Por)	x	x	x	x	x	x	x	
A0602	g	TA Financial Planning-International								
		Consultancy on Health financing and contracting			x			x		
A0603	g	Supervision on the job training								
		Monthly PHD Integrated Supervision team	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
A0604	g	HMIS Auditing/Monitoring								
		Strengthening monitoring team in SRP	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
		Strengthening monitoring officers in OMC	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
A0605	g	Central level intervention								
		Support to/dialogue with central level	x	x	x	x	x	x	x	
		Membership Medicam	x			x				

- 12- This mobilizes MoH resource personnel that were not available in time.
- 13- Limited availability of resource personnel of MoH. The department decided to not cover CPA2 and 1 hospitals this year.
- 14- Was supposed to be replace by another approach (critical initiatives) that was delayed in implementation (see 10).
- 15- Delay in implementation due to weak responsiveness of local contractors and weaknesses of the project infrastructure team.
- 16- SC decided to reformulate the initially proposed concept paper for a consolidation phase (MTR)
- 17- Initially scheduled for 9 staff this activity has been extended to 12 staff
- 18- Cancelled due to lack of response from the concerned hospital.
- 19- Cancelled due to lack of response from the concerned staff
- 20- Cancelled due to time constraints.

2007 Activity Plan per budget lines and Variations											
		Mod	Initial 2007 Plan				Actual implementation				Ref.
			Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
B	Strengthening Monitoring & Evaluation										
B0101	TA Planning/Finance Local	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
B0102	TA M&E International (Mid-Term review)	RE	xx	xx				xx	xx		21
B0103	External HMIS Auditing	CO									
B0104	External Monitoring Quality Seal	CO									
B0105	Survey	CO									
B0106	Steering Committee Meeting	CO		x	x			x	x		
Z	Technical Assistance and Direct Costs										
	Technical Assistance										
Z.01.01	Secretary (2)	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.02	Office Assistant / Drivers (2)	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.04	Team Leader - Co-director - International Expert	RE	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.05	Assistant Team Leader - National expert	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
	Direct Costs										
Z.01.06	Local staff mission costs	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.07	National air tickets	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.08	Office equipment	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.09	Office running costs	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.10	Vehicle running costs	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.11	Office furniture/supplies	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.12	Moto Running costs	CO	xxx	xxx	xxx	xxx	xxx	xxx	xxx	xxx	
Z.01.15	Vehicle purchase (co-director, assist co-director, 2 TA)	CO									
Z.01.16	Moto purchase (one per supervisor)	CO									

21- MTR postponed due to delayed selection procedure and lack of availability of concerned consultants

4 FINANCIAL OVERVIEW

4.1 Overview of expenditure versus financial planning + Analysis of financial planning

Provision of Basic Health Service in Siem Reap & Otdar Meanchey			Project KAM0200711 - Budget Execution 2007										Figure: EURO		deviation	Ref		
FIT Code	Descriptions	Fin Mod e	Total Budget	Expenditure Start 2004-2006	Q1		Q2		Q3		Q4		Total Yearly		Budget Balance End Q4-2007			
					Planning	Actual Expense	Planning	Actual Expense	Planning	Actual Expense	Planning	Actual Expense	Planning	Actual Expense				
A	ENHANCE HEALTH SECTOR DEVELOPMENT BY SUPPORTING		3,330,666.70	1,410,034.04	398,827.00	249,298.11	336,078.00	225,599.12	356,337.00	314,238.76	319,812.00	242,029.03	1,411,054.00	1,031,165.02	889,467.65			
A 01	Strengthened Consumer Rights in Commu		727,645.47	313,119.49	71,160.00	49,896.15	71,311.00	34,888.84	79,695.00	96,607.23	83,862.00	73,659.15	306,028.00	255,051.37	159,474.61			
A 01 01	TA - Social/BCC - Local	COGES	44,404.24	23,768.91	2,500.00	2,683.56	2,569.00	3,354.30	2,308.00	2,679.89	2,769.00	2,649.62	10,146.00	11,367.37	9,267.96	112%		1
A 01 02	TA Equity/Finance - International	REGIE	33,117.39	12,284.39	20,833.00	1,803.40	-	5,865.10	-	-	2,308.00	-	23,141.00	7,668.50	13,164.50	33%		2
A 01 03	Identification of the poor	COGES	61,000.00	51,360.99	-	-	-	-	8,462.00	2,455.61	7,708.00	2,432.56	16,170.00	4,888.17	4,750.84	30%		3
A 01 04	Social support activities for poor	COGES	26,000.00	8,630.37	2,375.00	8,911.07	2,423.00	1,936.44	2,423.00	3,532.76	2,769.00	2,018.30	9,990.00	16,398.57	971.06	164%		3
A 01 05	Equity Fund - Medical Fees	COGES	554,973.95	208,924.95	45,452.00	36,498.12	66,319.00	23,733.00	66,502.00	87,938.97	68,308.00	66,558.67	246,581.00	214,728.76	131,320.24	87%		
A 01 06	Equity Fund - Operation Fees	COGES	8,149.88	8,149.88	-	-	-	-	-	-	-	-	-	0.00	0.00			
A 02	Enhanced Behavior Change & Communicat		145,300.00	72,274.88	6,418.00	3,776.27	5,831.00	4,750.02	16,923.00	11,346.27	7,054.00	4,687.56	36,226.00	24,560.12	48,465.00			
A 02 01	TA - Social/BCC - Local	COGES	41,629.30	20,260.77	2,500.00	2,567.10	2,446.00	3,460.22	2,308.00	2,029.89	3,462.00	2,930.46	10,716.00	10,967.67	10,380.86	103%		4
A 02 02	BCC contracted out campaigns	COGES	76,570.70	49,901.10	3,918.00	1,085.55	3,385.00	1,252.55	10,923.00	9,316.38	2,823.00	1,757.10	21,049.00	13,411.58	13,258.02	64%		4
A 02 03	School Health Education	COGES	27,100.00	2,113.01	-	123.62	-	37.25	3,692.00	-	769.00	-	4,461.00	160.87	24,826.12	4%		5
A 03	Strengthening Quality of Delivery of Health Service		1,287,100.00	604,375.11	136,636.00	99,701.35	103,103.00	91,700.90	106,273.00	113,966.99	106,561.00	91,794.99	452,573.00	397,164.23	285,560.66			
A 03 01	Project director SR and OMC	COGES	60,071.70	35,405.03	3,500.00	5,536.48	3,230.00	4,097.73	3,231.00	4,119.59	3,923.00	3,738.38	13,884.00	17,492.18	7,174.49	126%		7
A 03 02	Project director ODs	COGES	29,628.30	15,311.18	2,250.00	2,055.49	2,077.00	2,018.42	2,077.00	2,010.73	2,100.00	2,063.70	8,504.00	8,148.34	6,168.78	96%		
A 03 03	Output related bonus system HC	COGES	579,355.43	284,103.13	51,810.00	48,606.09	44,077.00	45,660.61	46,015.00	44,583.46	42,208.00	37,366.74	184,110.00	176,216.90	119,035.40	96%		
A 03 04	Output related bonus system RH	COGES	316,500.00	138,349.14	30,096.00	23,802.87	27,692.00	25,318.67	27,692.00	29,500.53	29,748.00	26,964.73	115,228.00	105,586.80	72,564.06	92%		
A 03 05	Output related bonus system DHTAT	COGES	114,000.00	60,280.96	8,770.00	8,288.62	8,308.00	7,952.84	8,308.00	7,686.14	8,294.00	7,488.34	33,680.00	31,415.94	22,303.10	93%		
A 03 06	Output related bonus system PHTAT	COGES	89,044.57	42,544.57	7,460.00	7,091.57	7,154.00	6,845.48	7,154.00	7,868.69	7,615.00	6,809.68	29,383.00	28,615.42	17,884.58	97%		
A 03 07	Promotion of Family Based Care	COGES	58,681.53	12,431.53	27,250.00	4,136.71	6,103.00	-1,506.49	8,258.00	14,747.34	8,827.00	5,952.02	50,438.00	23,329.58	22,920.42	46%		6
A 03 08	School health inspection program	COGES	968.50	968.50	-	-	-	-	-	-	-	-	-	0.00	0.00			
A 03 09	Health Support	COGES	38,849.97	14,981.07	5,500.00	183.52	4,462.00	1,313.64	3,538.00	3,450.50	3,846.00	1,411.40	17,346.00	6,359.06	17,509.84	37%		7
A 04	Increased number of Quality Improvement Initiatives		568,000.00	108,451.53	109,741.00	66,684.87	69,235.00	38,972.63	76,246.00	49,448.97	92,217.00	49,675.80	347,439.00	204,782.27	254,766.20			
A 04 01	TA Quality Improvement	COGES	31,200.00	11,306.42	2,500.00	2,687.25	2,446.00	3,062.93	2,308.00	2,566.57	2,769.00	2,218.38	10,023.00	10,535.13	9,358.45	105%		8
A 04 02	Micro interventions	COGES	110,000.00	20,288.27	8,808.00	9,599.34	18,022.00	3,712.98	5,725.00	8,191.15	16,513.00	7,992.85	49,068.00	29,496.32	60,215.41	60%		8
A 04 03	Quality standard and seal	COGES	7,300.00	0.00	-	-	769.00	-	-	-	-	-	769.00	0.00	7,300.00	0%		
A 04 04	Quality Improvement plans at RH	COGES	164,500.00	73,980.05	58,433.00	51,605.24	3,846.00	3,836.70	14,615.00	3,094.71	13,425.00	3,795.87	90,319.00	62,332.52	28,187.43	69%		9
A 04 05	Infra structural Works in PRH Siem Reap	COGES	255,000.00	2,876.79	40,000.00	2,793.04	44,152.00	28,360.02	53,598.00	35,596.53	59,510.00	35,668.70	197,260.00	102,418.29	149,704.92	52%		10
A 05	Improved Staff Skills through capacity build		371,658.44	176,616.53	54,372.00	22,680.30	59,329.00	44,106.84	68,470.00	30,758.88	21,578.00	16,078.36	203,749.00	113,624.38	81,417.53			
A 05 01	TA - Surgeon - International	REGIE	170,258.44	112,657.24	27,881.00	12,206.78	28,500.00	29,600.00	18,462.00	2,490.22	2,308.00	2,785.09	77,151.00	47,082.09	10,519.11	61%		11
A 05 02	Contracting in training / workshop	COGES	36,900.00	8,371.25	8,181.00	5,749.81	1,166.00	53.29	2,320.00	828.00	923.00	1,474.55	12,590.00	8,105.65	20,423.10	64%		12
A 05 03	Contracting in training for teachers	COGES	1,000.00	487.49	-	-	-	-	-	-	-	-	-	0.00	512.51			
A 05 04	Contracted out training	COGES	101,500.00	24,463.76	13,333.00	-	25,569.00	12,407.85	45,034.00	25,695.20	10,809.00	9,943.01	94,745.00	48,046.06	28,990.18	51%		13
A 05 05	Training activities	COGES	62,000.00	30,636.79	4,977.00	4,723.71	4,094.00	2,045.70	2,654.00	1,745.46	7,538.00	1,875.71	19,263.00	10,390.58	20,972.63	54%		14

- .1- Original plan includes a Database international consultant on this line. Then moved to A_01_06 and postponed to Q1 2008
- .2- Activity cancelled by SC decision. However contribution to photo component.
- .3- Increased services in relation with (opportunity) contract with local NGO for services to HIV patients in OMC
- .4- Reduced activities, phasing out from road safety
- .5- Delay in development under control of BETT project
- .6- ,7-, 8- and 9- Lower activity than planned: absorption capacity
- .10- Delayed execution (construction companies + project construction team weaknesses)
- .11-, 12-, 13- and 14 Lower response than expected from local target personnel

Provision of Basic Health Service in Siem Reap & Otdar Meanchey

FIT Code	Descriptions	Mod	Total Budget	Expenditure Start 2004-2006	Q1			Q2			Q3			Q4			Total Yearly	Budget Balance End 04-2007	deviation	Ref
					Planning	Actual Expense	Actual Expense	Planning	Actual Expense	Actual Expense	Planning	Actual Expense	Actual Expense	Planning	Actual Expense	Actual Expense				
A	ENHANCE HEALTH SECTOR DEVELOPMENT BY SUPPORTING		3,330,666.70	1,410,034.04	398,827.00	249,298.11	336,078.00	225,899.12	314,238.76	319,812.00	242,029.03	319,812.00	6,133.17	65,039.00	1,411,054.00	1,031,165.02	889,467.65			
A.06	01 T/A PHA		230,962.79	135,196.50	20,500.00	6,559.17	27,269.00	11,179.89	12,110.42	8,540.00	2,816.23	8,540.00	2,816.23	17,405.00	35,992.65	13,145.69	16,984.67	76%	15	
A.06	02 T/A Finance/Planning-International		76,825.64	46,695.28	6,250.00	3,208.19	16,615.00	4,307.85	5,299.49	3,462.00	2,892.00	3,462.00	2,892.00	25,926.00	5,315.99	4,684.01	16,984.67	21%	16	
A.06	03 Supervision /on the job training		11,100.00	8,822.98	3,750.00	300.81	346.00	519.63	289.02	462.00	247.43	462.00	247.43	1,528.00	1,356.89	920.13	89%	17		
A.06	04 Stakeholder Internal HMIS auditing		48,200.00	17,298.94	3,125.00	3,033.67	4,615.00	2,542.17	2,640.17	4,154.00	2,382.51	4,154.00	2,382.51	16,509.00	10,598.53	20,302.53	64%	17		
A.06	05 Central level interventions		67,300.00	44,842.15	1,583.00	1,462.00	3,810.24	1,068.31	1,068.31	308.00	687.00	308.00	687.00	3,815.00	5,565.55	16,892.30	146%	18		
B	STRENGTHEN MONITORING & evaluation capacity		122,390.24	54,419.52	1,708.00	2,256.51	13,600.00	18,787.79	14,761.19	808.00	744.29	808.00	744.29	16,947.00	23,264.78	44,705.94				
B.01	01 T/A Social/ Planning / Finance - Local		9,000.00	2,872.73	875.00	573.58	831.00	802.81	776.07	808.00	744.29	808.00	744.29	3,345.00	2,896.75	3,230.52	87%	19		
B.01	02 T/A M & E - International		30,091.00	10,091.00	0.00	2,000.12	11,538.00	16,669.38	0.00	0.00	0.00	0.00	0.00	11,538.00	18,669.50	1,330.50	162%	19		
B.01	03 External HMIS auditing		1,000.00	451.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	548.11				
B.01	04 External Monitoring Quality Seal		923.08	37,695.66	0.00	-1,914.56	1,231.00	1,099.44	0.00	0.00	0.00	0.00	0.00	0.00	-815.12	36,985.62				
B.01	05 Surveys		73,876.16	37,695.66	833.00	1,597.37	52,898.00	75,358.43	700.12	54,235.00	71,040.82	54,235.00	71,040.82	211,568.00	291,119.68	115,985.07	122%			
B.01	06 Steering Committee expenses		7,500.00	3,308.24	833.00	1,597.37	52,898.00	75,358.43	700.12	54,235.00	71,040.82	54,235.00	71,040.82	211,568.00	291,119.68	115,985.07				
Z	GENERAL MEANS		1,126,943.06	719,838.31	51,851.00	66,051.86	52,898.00	75,358.43	6,168.00	6,168.00	4,965.75	6,168.00	4,965.75	23,284.00	16,401.43	27,582.48	65%	20		
Z.01	01 Secretary (2) / Drivers (2)		102,000.00	59,013.09	3,845.00	3,617.37	9,230.00	3,617.37	4,833.13	6,346.00	4,833.13	6,346.00	4,833.13	23,284.00	16,401.43	27,582.48	242%	21		
Z.01	02 Office Assistant / Drivers (2)		19,500.00	8,632.06	375.00	611.54	462.00	2,241.57	1,036.65	565.00	705.37	565.00	705.37	1,896.00	4,595.13	2,272.81				
Z.01	03 Government Salaries & Allowances		675,572.94	401,740.63	37,500.00	46,138.64	30,000.00	54,007.82	60,979.67	36,158.00	55,379.27	36,158.00	55,379.27	139,477.00	216,505.40	57,326.89	155%	22		
Z.01	04 Team Leader - Co-director - International		76,800.00	35,778.98	5,000.00	7,727.81	6,015.00	6,675.32	5,645.57	5,769.00	4,431.68	5,769.00	4,431.68	21,399.00	24,480.38	16,940.64	114%			
Z.01	05 Assistant Team Leader - National expert		11,900.00	7,580.19	667.00	925.58	615.00	652.66	615.00	1,027.72	692.00	692.00	700.97	2,589.00	2,906.93	1,412.88	112%			
Z.01	06 Local staff mission costs		5,100.00	1,713.44	417.00	417.00	385.00	385.00	385.00	462.00	462.00	462.00	462.00	1,649.00	0.00	3,386.56	0%			
Z.01	07 National air tickets		41,275.68	41,275.68	0.00	0.00	862.00	1,469.42	1,792.96	923.00	1,223.79	923.00	1,223.79	3,541.00	6,468.41	-60.02	183%			
Z.01	08 Office equipment		26,500.00	20,631.61	833.00	1,982.24	30,000.00	6,289.31	2,722.62	2,769.00	3,039.09	2,769.00	3,039.09	12,236.00	17,361.42	3,478.18	142%			
Z.01	09 Office running costs		59,500.00	38,680.42	6,300.00	5,316.39	4,329.00	6,289.31	4,173.75	385.00	281.26	385.00	281.26	1,598.09	1,598.09	1,322.18	102%			
Z.01	10 Vehicle running costs		22,000.00	19,079.73	417.00	557.00	385.00	346.08	413.75	346.00	346.00	346.00	346.00	1,923.00	802.49	3,043.40	42%			
Z.01	11 Office furniture/supplies		8,400.00	4,554.11	500.00	207.48	615.00	64.88	216.49	346.00	313.64	346.00	313.64	1,923.00	0.00	0.00	0.00			
Z.01	12 Moto Running costs		-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
Z.01	13 Government Running costs		-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
Z.01	14 Government Social Interventions		-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
Z.01	15 Vehicle purchase (co-director, assist co-director)		75,000.00	74,783.91	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
Z.01	16 Moto purchase (one per supervisor)		7,394.44	7,394.44	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
	REGIE		936,576.92	554,310.43	95,381.00	62,145.44	86,653.00	106,142.30	68,769.38	40,774.00	58,164.36	40,774.00	58,164.36	277,089.00	295,241.48	87,025.01	107%			
	COGESTION		3,643,423.08	1,629,891.44	357,005.00	255,441.04	315,923.00	213,603.04	325,614.14	334,081.00	255,649.78	334,081.00	255,649.78	1,362,480.00	1,050,308.00	963,133.64	77%			
	TOTAL		4,580,000.00	2,184,291.87	452,386.00	317,606.48	402,576.00	319,745.34	409,752.00	374,855.00	313,814.14	374,855.00	313,814.14	1,639,569.00	1,345,549.48	1,050,138.65	82%			

- .15- Less intervention than planned from a local consultant
- .16- Foreseen international consultant less available than expected. Project team did most of the work on its own.
- .17- Less activity than expected
- .18- Additional Steering Committee meeting for MTR approval
- .19- MTR cost higher than expected
- .20- and 21- reorganization of office staff (MTR recommendations) recruitment of a Project Officer
- .22- Wrong allocation of PBHS-KC team leader costs by BTC HQs
- .23- Under-estimated office running costs (more than 2,000 Euros for bank transfer charges were not taken into account in the plan)
- .24- Under-estimation of car maintenance costs: change tires + some repairs
- .25- Maintenance costs lower than expected.

5 MONITORING OF THE INDICATORS

5.1 Specific objective

Specific Objective	Enhance health sector development by supporting the provincial plan in line with the 6 key areas in the Health Sector Strategic Plan 2003-2007
Output 1	Health services are more demand oriented
Output 2	Behaviour of the population and the health staff has improved
Output 3	Service provision of public health services has increased
Output 4	Quality of public health services has risen
Output 5	Technical and managerial capacity among health staff is strengthened
Output 6	Health sector is better managed, planned, regulated, financed, monitored and evaluated

5.2 Results and evolution

Intermediate results	Indicators	Status end of 2007	Trend
IR. 1. Consumer Rights / HEF	1. Number of Hospitals with HEF established and functioning out of XX Hospitals	4 RHs with HEF are functioned out of 4 in Siem Reap and Otdar Meanchey + 1 HC with Beds is functioned out of 1 HC with Beds in OMC	Reached and sustained
	2. % HEF in-patient as proportion of all in-patient	28% HEF paid for the in-patients in SR and 51% HEF paid for in-patient in OMC	Evolve towards more realistic %
	3. Total number of HEF beneficiaries	Total HEF beneficiaries is 7,060 cases for in-patient and 5,294 cases for out-patient	Increase as total number of patients increases
	4. Number of HEF in-patients per 1000 poor persons per year in the province	90 of HEF in-patients per 1000 cap/year in OMC and 31 of HEF in-patients per 1000 cap/year in SRP	Evolve towards more realistic figures
IR. 2. Behaviorial Change Communication	1. Number of RH with routine video health education system established and functioning.	4 referral hospitals	Reached and sustained
	2. Number of quarterly Newsletter produced and distributed	1000 thousand Health Newsletter. 10 issues were printed	Reached and sustained
	3. HEF patient exit interview score in % for staff behavior (presence, friendliness, treatment)	70% for staff behavior is friendly and no under table payment. 3% is complaining about waiting time and 15% complaining about respond of health staff.	Improving

IR. 3. Health Service Delivery through contracting by the system	1. Number of MPA HC with a Performance contracts in place out of 73 MPA HC	1. 58 MPA HC out of 59 HC in Siem Reap and 14 MPA HC out of 14 HC in Oddar Meanchey	Increasing as new HCs are becoming operational
	2. Number of RH with a Performance contracts in place out of 4	2. 4 Referral hospitals	Reached and sustained
	3. Number of ODOs and PHDOs with a Performance contracts in place out of the 6 PHDOs/ODOs	4 ODOs and 2 PHDOs	Reached and sustained
	4. Average amount increase of staff monthly income in comparison to the average income of 50\$ of before the project	Depends on Units. The staff regular income in monthly average increase +10% to 300%	On the increase in amount and in concerned staff
	5. Number of monthly monitoring visits of RHs implemented in reference to the 1 visits planned	1 Visit/month/RH	Reached and sustained
	6. Number of monthly monitoring visits of HCs implemented in reference to the 1/3 +1 visits planned	Quarterly evaluation and monthly monitoring in HC	Reached and sustained
	7. OPD utilization rate at HC level	OPD utilization rate is 0.60 for SR and 0.62 for OMC province.	stable
	8. Annual Bed Occupancy rate of the RH in the project area	BOR is 83.49% for SR and 78%for OMC	Increasing
	9. Number of hospitalization / 1000 persons / year	Hospitalization/1000 persons /year is: 24 for SR and 38 for OMC	Increasing
	10. % of deliveries in HC or RH	Deliveries in HC 47% for SR and 43% for OMC	increasing
	11. % children under 1 fully vaccinated Performance contract in place with HC	Fully immunized: 91% for SR and 95% for OMC	Reaching maximum
IR. 4. Quality Improvement	1. Number of external quality assessments done	2 assessments	As planned

	2. Number of RHs having received a yearly external quality assessment out of the XX RHs	2 PRH (Samrong and SRRH)	As planned
	3. Proportion of planned infrastructural works and equipment supply	Infrastructure : 50% Equipment: 60%	Slow
	4. implemented (Cumulative and financially) % of MPA HC compared to Plan	92% of MPA HC compared to Plan	On schedule
IR. 5. Capacity building / Human Resource development	.1- Number of persons trained in case-management	347 staffs	On schedule
	.2- Number of persons trained in support service competencies	0 staff	No opportunity
	.3- Number of persons trained in management and administration	89 staffs	On schedule
	.5- National Training and conference < 1 month. Nbre pax	545 staffs (included above 1, 3 and added more for WS 109)	On schedule
	.6- National Training and conference > 1 month. Nbre pax	15 staffs	On schedule
	.7- International Training and conference < 1 month. Nbre pax	4 staffs (3 in Philippines and 1 in Toronto)	On schedule
	.8- International Training and conference >1month. Nbre pax	0	No opportunity

IR. 6. Institutional Development and Management Strengthening	1. Number of Pro-TWH meeting out of the XX meetings planned	12/12 of Pro-TWGH monthly meetings	Reached and sustained
	2. Number of DHTA meetings out of the XX meetings planned	48/48 of DHTA monthly meetings	Reached and sustained
	3. Number of quarterly AoP reviews out of the 4 reviews planned	4/4 of quarterly AOP reviews	Reached and sustained
	4. % of recurrent budget arriving at mid year	44% of recurrent budget (chapter 60, 61, 62, 64, 65) arriving at mid-year compared to AOP	Below national average in amount/cap/year and in access
	5. % of recurrent budget arriving at end year	88% of recurrent budget (chapter 60, 61, 62, 64, 65) arriving at end-year compared to AOP	Below national average in amount/cap/year and in access
	6. % of HC with at least one secondary midwife and one secondary Nurse.	70% of HCs in OMC and 80% of HCs in SRP	Staff (midwife) shortage not improved in 2007

6 ASSESSMENT OF MONITORING CRITERIA

6.1 Efficiency

The project under-estimated the need for specialized resource persons/institutions in developing activities in Communication, clinical quality and construction work.

As a consequence, results under the related components are either of lower than expected intensity, or progressing at a slower than expected pace, or of lower than expected quality.

Despite the fact that the project is coming to its end in few months arrangements shall be made to address the most pressing issues (clinical quality and construction work).

6.2 Effectiveness

The project combines demand-side and provider-side mechanisms to improve the utilization and the availability/quality of services. Demand-side mechanisms are essential to ensure the benefits reach the targeted beneficiaries.

Strengthening of demand-side mechanisms such as social insurance schemes is desirable. This can only take place in a several year's perspective. It is planned within a proposed Consolidation Phase

6.3 Sustainability

Sustainability is a main issue in the approach developed by the project. This is acknowledged by the partner institution and jointly and progressively addressed, with however some delay on the initial schedule. This applies to financial, organizational and technical aspects of sustainability. Sustainability is the main objective of a proposed 4-year Consolidation Phase to be confirmed.

Based on its results, the MoH is taking the project as a model for reproduction under other cooperation agreements.

7 MEASURES AND RECOMMENDATIONS

7.1 Overview of the assessment criteria

The assessment criteria show an overall satisfactory evolution of the project in terms of efficiency, effectiveness and sustainability.

However, several specific activities or groups of activities should receive a more specialized attention and the combined evolution of the project and of its context justify an additional commitment to consolidate the results and ensure sustainability.

7.2 Recommendations

Despite the fact that the project is coming to its end in few months arrangements shall be made to address the most pressing specific issues on which progresses are not fully satisfactory: clinical quality of care (especially pediatric care), and quality of construction work.

Sustainability is depending upon higher levels of domestic funding and introduction of longer term financing mechanisms such as Social Health Insurance.

The proposal for a 4-year Consolidation Phase, submitted by the partner institution (Ministry of Health) is justified to ensure the wrapping and the long term impact of the current project achievements.

A commitment from the Belgian Government for a Consolidation Phase for about half of the proposed budget is acquired. With this additional period the above main recommendations will be addressed in depth.

8 PLANNING FOR THE UPCOMING YEAR (YEAR N+1)

8.1 Activity planning year N+1 and Financial planning year N+1

AOP / Budget Year 2008 with 3-month no-cost extension (2 PBHS budgets combined)										
in Euro			Plan Q1 2008		Plan Q2-Q3-Q4 2008					
1.3 USD = 1 EURO		Mark	Balance end of Q4 2007	Total	Foreseen Balance	Q2	Q3	Oct-Nov	Total	Foreseen Balance
A	ENHANCE HEALTH SECTOR		889,467.62	388,949	500,518	354,954	262,657	16,051	633,662	-133,143
A 01	Consumer Rights Organisations		159,474.56	80,677	78,798	87,815	83,398	2,577	173,789	-94,992
A 01 01	HEF TA	€	9,267.94	2,769	6,499	2,769	2,769	2,577	8,115	-1,617
A 01 02	International HEF TA including CBHI	€	13,164.50	0	13,165	0	0	0	0	13,165
A 01 03	Identification of the poor (2 OD in SRP + OMC)	€	4,750.83	5,138	-388	3,846	3,846	0	7,692	-8,080
A 01 04	Social support activities for the poor	€	971.05	2,308	-1,337	1,846	1,846	0	3,692	-5,029
	Food support to TB patients in SRP provincial hospital			2,308	-2,308	1,846	1,846	0	3,692	-6,000
A 01 05	Equity funds operational & direct support	€	131,320.24	70,462	60,859	79,353	74,936	0	154,289	-93,431
	Siem Reap provincial hospital			25,385	-25,385	25,385	25,385	0	50,769	-76,154
	Kralanh referral hospital			6,000	-6,000	6,000	6,000	0	12,000	-18,000
	Sotnikum referral hospital			16,154	-16,154	16,154	16,154	0	32,308	-48,462
	Five health centers in Sotnikum OD			1,154	-1,154	1,154	1,154	0	2,308	-3,462
	Otdar Mean Chey provincial hospital			12,692	-12,692	12,692	12,692	0	25,385	-38,077
	Anlong Veng health center with beds			5,769	-5,769	5,769	5,769	0	11,538	-17,308
	Health Center with Beds in Angkor Chum OD (2HC)			0	0	11,045	7,782	0	18,828	-18,828
	Database Development for HEF			3,308	-3,308	1,154	0	0	1,154	-4,462
A 02	Behavioral Change Communication		48,464.99	23,977	24,488	6,285	5,362	2,769	14,415	10,073
A 02 01	BCC TA	€	10,380.85	3,462	6,919	3,462	3,462	2,769	9,692	-2,773
A 02 02	BCC contracted out campaigns	€	13,258.02	5,131	8,127	2,823	1,900	0	4,723	3,404
	1. Health Newsletters Project			977	-977	977	977	0	1,954	-2,931
	Quarterly Health Newsletter Publishing			977	-977	977	977	0	1,954	-2,931
	3. Marketing on Referral Hospital			769	-769	1,077	769	0	1,846	-2,615
	4. Support Special Events			3,385	-3,385	769	154	0	923	-4,308
A 02 03	School Health Education	€	24,826.12	15,385	9,442	0	0	0	0	9,442
A 03	Strengthening Health service delivery		285,560.68	106,100	179,461	108,127	108,127	2,692	218,946	-39,485
A 03 01	Project director SR & OMC	€	7,174.48	3,923	3,251	3,923	3,923	2,692	10,538	-7,287
A 03 02	OD Directors SR (3)	€	6,168.78	2,100	4,069	2,100	2,100	0	4,200	-131
	DSMT responsibility bonus Sotnikum			577	-577	577	577	0	1,154	-1,731
	DSMT responsibility bonus Siem Reap			600	-600	600	600	0	1,200	-1,800
	DSMT responsibility bonus A. Chum			462	-462	462	462	0	923	-1,385
	DSMT responsibility bonus Kralanh			462	-462	462	462	0	923	-1,385
A 03 03	Output related bonus system for 60 HCs	€	119,035.41	42,208	76,828	42,985	42,985	0	85,969	-9,142
	Sotnikum 1 HC with bed and 18 HCs (+1 HC in Q2?? Tayek HC)			12,531	-12,531	12,531	12,531	0	25,062	-37,592
	Siem Reap: 16HCs (+ 1 in Q2??Mondul Moi HC)			10,338	-10,338	10,915	10,915	0	21,831	-32,169
	AKC 2HCs with beds (other 9HCs under GAV/HSS and 6 HCs under PMG)			2,077	-2,077	2,077	2,077	0	4,154	-6,231
	Kralanh: 1HC with bed and 8 HCs			7,015	-7,015	7,077	7,077	0	14,154	-21,169
	OMC: 14HCs (4 HCs under PMG) and 1 health post			10,246	-10,246	10,385	10,385	0	20,769	-31,015
A 03 04	Output related bonus system RH	€	72,564.06	29,748	42,816	29,748	29,748	0	59,497	-16,681
	Sotnikum			2,532	-2,532	2,532	2,532	0	5,063	-7,595
	Siem Reap including IDD support			20,917	-20,917	20,917	20,917	0	41,834	-62,751
	Kralanh			2,954	-2,954	2,954	2,954	0	5,908	-8,862
	OMC			3,346	-3,346	3,346	3,346	0	6,692	-10,038
A 03 05	Output related bonus system ODO	€	22,303.11	8,294	14,009	8,294	8,294	0	16,588	-2,578
	Sotnikum			2,301	-2,301	2,301	2,301	0	4,602	-6,902
	Siem Reap			2,301	-2,301	2,301	2,301	0	4,602	-6,902
	Angkor Chum			1,846	-1,846	1,846	1,846	0	3,692	-5,538
	Kralanh			1,846	-1,846	1,846	1,846	0	3,692	-5,538
A 03 06	Output related bonus system PHDO	€	17,884.58	7,615	10,269	7,615	7,615	0	15,231	-4,962
	Siem Reap PHDO			4,615	-4,615	4,615	4,615	0	9,231	-13,846
	OMC PHDO			3,000	-3,000	3,000	3,000	0	6,000	-9,000
A 03 07	Promotion of HBC for AIDS patients	€	22,920.41	8,365	14,555	8,769	8,769	0	17,538	-2,983
	Social supports to MMM/PLWHA in SRP OD			1,904	-1,904	1,923	1,923	0	3,846	-5,750
	Social supports to MMM/PLWHA in OMC OD (home base			3,462	-3,462	3,846	3,846	0	7,692	-11,154
	Transportation voucher for PLHA adult within OMC			2,308	-2,308	2,308	2,308	0	4,615	-6,923
	Transportation voucher for PLHA children between OMC &			692	-692	692	692	0	1,385	-2,077
A 03 08	School Health Inspection Program	€	0.00	0	0	0	0	0	0	0
A 03 09	Public health support	€	17,509.85	3,846	13,664	4,692	4,692	0	9,385	4,279
	Malaria outreach in OMC & SRP (SNK)			2,308	-2,308	3,462	3,462	0	6,923	-9,231
	Disaster control and preparedness in SR & OMC (reserve)			1,538	-1,538	1,231	1,231	0	2,462	-4,000

AOP / Budget Year 2008 with 3-month no-cost extension (2 PBHS budgets combined)										
in Euro			PlanQ1 2008		Plan Q2-Q3-Q4 2008					
1.3 USD = 1 EURO		Mode	Balance end of Q4 2007	Total	Foreseen Balance	Q2	Q3	Oct-Nov	Total	Foreseen Balance
A	ENHANCE HEALTH SECTOR		889,467.62	388,949	500,518	354,954	262,657	16,051	633,662	-133,143
A 04	Quality Improvement		254,766.22	115,617	139,149	102,500	32,309	4,628	139,437	-288
A 04 01	TA Quality Improvement	€	9,358.46	2,769	6,589	2,692	2,692	1,538	6,923	-334
A 04 02	Micro interventions	€	60,215.43	18,731	41,485	26,423	11,038	0	37,462	4,023
	Introduction of CBHI			0	0	2,308	1,538	0	3,846	-3,846
	Equipment SR hospital maternity (foetal doppler)			1,538	-1,538	0	0	0	0	-1,538
	Anatomo-pathology exam			462	-462	462	462	0	923	-1,385
	Support on hygien and waste management for SR RH			577	-577	577	577	0	1,154	-1,731
	Develop and implement initiatives SR RH			769	-769	2,308	769	0	3,077	-3,846
	Develop and implement initiatives SNK RH			769	-769	1,538	769	0	2,308	-3,077
	Develop and implement initiatives in OMC RH			769	-769	1,538	769	0	2,308	-3,077
	Develop and implement initiatives in Kralanh RH			769	-769	1,538	769	0	2,308	-3,077
	Develop and implement initiatives in ALVeng			769	-769	769	769	0	1,538	-2,308
	Support ODO & PHDO to implement critical initiatives			3,846	-3,846	11,538	2,308	0	13,846	-17,692
	Supply of equipments (including paediatric)			8,462	-8,462	3,846	2,308	0	6,154	-14,615
A04 03	Incentive for achieving qualitative indicators (Quality	€	7,300.00	0	7,300	0	0	0	0	7,300
A04 04	Quality improvement at RH	€	28,187.43	11,502	16,686	18,462	9,578	0	28,040	-11,354
	Additional drug supply for RHs			6,154	-6,154	8,077	6,154	0	14,231	-20,385
	Exceptional support to RHs (in case of crisis condition)			2,308	-2,308	2,308	2,308	0	4,615	-6,923
	MoH and URG assesment for RHs in SR and in OMC			0	0	5,769	0	0	5,769	-5,769
	Conduct training on hospital assessment tools for RHs			0	0	0	0	0	0	0
	Clinical improvement at RHs			1,117	-1,117	2,308	1,117	0	3,425	-4,542
A0405	Infrastructural works at PRH-SR	€	149,704.90	82,615	67,090	54,923	9,000	3,089	67,012	77
	Infrastructure work and some equipment in SRP hospital			78,462	-78,462	50,769	4,846	0	55,615	-134,077
	Others (salary, per diem)			4,154	-4,154	4,154	4,154	3,089	11,397	-15,551
A 05	Improve Staff Skills through Capacity building		81,417.53	49,194	32,224	39,305	7,615	0	46,920	-14,696
A0501	TA-Surgeon International	€	10,519.11	2,308	8,211	8,612	0	0	8,612	-401
A05 02	Contracting in training / workshop	€	20,423.10	6,615	13,808	1,231	1,231	0	2,462	11,346
	Support quarterly/yearly review of AoP SRP and OMC			5,385	-5,385	0	0	0	0	-5,385
	Support provincial AIDS Committee meeting for SR			769	-769	769	769	0	1,538	-2,308
	Support monthly meeting of PHD and OD management team			462	-462	462	462	0	923	-1,385
A0503	Contracting in training for teachers	€	512.51	0	513	0	0	0	0	513
A0504	Contracting Out Training	€	28,990.17	36,578	-7,588	12,308	769	0	13,077	-20,665
	Training on Pediatric Nursing care at AHC including coaching			2,692	-2,692	3,846	0	0	3,846	-6,538
	Primary Nurse & Midewife training			29,538	-29,538	7,692	0	0	7,692	-37,231
	HMT for 12 Hosp staffs Samrong + Sotnikum (NIPH)			4,348	-4,348	769	769	0	1,538	-5,886
	Other (Ophthalmo building renovation at RH SR)			0	0	0	0	0	0	0
A05 05	Training activities	€	20,972.64	3,692	17,280	17,154	5,615	0	22,769	-5,489
	TA Surgeon			1,385	-1,385	1,385	1,385	0	2,769	-4,154
	Surgery training for OMC			0	0	385	385	0	769	-769
	SR-KC surgical routine exchanges			0	0	0	0	0	0	0
	Staff retreat for review an AOP			0	0	3,846	0	0	3,846	-3,846
	Various training and workshop participation to conference			2,308	-2,308	11,538	3,846	0	15,385	-17,692
A06	Institutional and Capacity Building		59,783.64	13,385	46,399	10,923	25,846	3,385	40,154	6,245
A0601	TA-PHA	€	16,984.66	3,462	13,523	3,846	3,846	3,385	11,077	2,446
	PHA-TA			3,462	-3,462	3,462	3,462	2,615	9,538	-13,000
	Short term consultancy (Dr. Ir Por)			0	0	385	385	769	1,538	-1,538
A0602	TA Financial Planning-International	€	4,684.01	0	4,684	1,923	1,923	0	3,846	838
	Consultancy on Health financing and contracting			0	0	1,923	1,923	0	3,846	-3,846
A0603	Supervision on the job training	€	920.13	462	459	462	462	0	923	-464
	Monthly PHD Integrated Supervision team			462	-462	462	462	0	923	-1,385
A0604	HMIS Auditing/Monitoring	€	20,302.54	4,154	16,149	4,231	4,231	0	8,462	7,687
	Strenthening monitoring team in SRP			3,462	-3,462	3,462	3,462	0	6,923	-10,385
	Strenthening monitoring officers in OMC			692	-692	769	769	0	1,538	-2,231
A0605	Central level intervention	€	16,892.30	5,308	11,585	462	15,385	0	15,846	-4,262
	Support to central level department			4,154	-4,154	462	15,385	0	15,846	-20,000
	Membership Medicam			1,154	-1,154	0	0	0	0	-1,154

AOP / Budget Year 2008 with 3-month no-cost extension (2 PBHS budgets combined)										
in Euro			Plan Q1 2008		Plan Q2-Q3-Q4 2008					
1.3 USD = 1 EURO		Mark	Balance end of Q4 2007	Total	Foreseen Balance	Q2	Q3	Oct-Nov	Total	Foreseen Balance
B	Strengthening Monitoring & Evaluation		44,705.93	18,500	26,206	25,423	808	0	26,231	-25
B0101	TA Planning/Finance Local	⊖	3,230.51	808	2,423	808	808	0	1,615	807
B0102	TA M&E International	⊖	1,330.49	0	1,330	0	0	0	0	1,330
B0103	External HMIS Auditing	⊖	548.11	0	548	0	0	0	0	548
B0104	External Monitoring Quality Seal	⊖	923.08	0	923	0	0	0	0	923
B0105	Survey	⊖	36,995.63	15,385	21,611	23,077	0	0	23,077	-1,466
B0106	Steering Committee Meeting	⊖	1,678.11	2,308	-630	1,538	0	0	1,538	-2,168
Z	Technical Assistance and Direct Costs		115,985.10	57,313	58,672	49,023	48,485	35,333	132,842	-74,169
	Technical Assistance		103,725.82	49,813	53,913	43,038	42,501	31,164	116,703	-62,790
Z.01.01	Secretary (2)	⊖	27,585.48	6,166	21,419	6,600	6,166	4,977	17,743	3,676
Z.01.02	Office Assistant / Drivers (2)	⊖	2,272.80	565	1,707	669	565	590	1,825	-117
Z.01.04	Team Leader - Co-director - International Expert	⊖	57,326.89	36,158	21,169	30,000	30,000	20,000	80,000	-58,831
Z.01.05	Assistant Team Leader - National expert	⊖	16,540.65	6,923	9,618	5,769	5,769	5,597	17,135	-7,518
	Direct Costs		12,259.28	7,500	4,759	5,985	5,985	4,169	16,138	-11,379
Z.01.06	Local staff mission costs	⊖	1,412.88	692	721	769	769	0	1,538	-818
Z.01.07	National air tickets	⊖	3,386.56	462	2,925	462	462	0	923	2,002
Z.01.08	Office equipment	⊖	0.00	0	0	0	0	0	0	0
Z.01.09	Office running costs	⊖	-600.02	923	-1,523	1,154	1,154	769	3,077	-4,600
Z.01.10	Vehicle running costs	⊖	3,478.17	4,538	-1,060	2,831	2,831	2,631	8,292	-9,353
Z.01.11	Office furniture/supplies	⊖	1,322.19	538	784	385	385	385	1,154	-370
Z.01.12	Moto Running costs	⊖	3,043.41	346	2,697	385	385	385	1,154	1,543
Z.01.15	Vehicle purchase (co-director, assist co-director, 2 TA)	⊖	216.09	0	216	0	0	0	0	216
Z.01.16	Moto purchase (one per supervisor)	⊖	0.00	0	0	0	0	0	0	0
	Total		1,050,158.65	464,762	585,397	429,400	311,950	51,384	792,734	-207,337
	REGIE		87,025.00	38,466	48,559	40,535	31,923	20,000	92,458	-43,899
	COGESTION		963,133.65	426,296	536,837	388,865	280,027	31,384	700,275	-163,438

9 CONCLUSIONS

9.1 Activities and Finance

Overall activity plan is on schedule. Some specific activities did not take the expected intensity or did not match the expected level of quality. This appears to be in relation to an under-estimation of the required inputs (in resource person and in time) and/or in relation to the project approaches not pro-active enough to sub-contract some activities.

Finance-wise the project expenditure rate is matching the plan with however some recurrent reasonable delay.

9.2 Monitoring criteria

9.2.1 Efficiency

On the 2 main project components (Performance Contracting and Health Equity Fund) the efficiency is good. On other components it can be improved (see above)

9.2.2 Effectiveness

Effectiveness is satisfactory given the fact that the expected contextual development (governmental initiatives in salary increase or performance rewarding and social health insurance framework) was delayed and only took place at the end of the project period. The consolidation phase will then develop in a more favorable context.

9.2.3 Sustainability

Although it was very ambitious to expect some level of sustainability for the proposed approach within 4 years, 2007 data indicates that several sustainability aspects are taking place. The consolidation phase shall build up on these and then, put sustainability at a much better feasibility rate than in the current project.

9.3 Advice of the JLCB on the recommendations

See attached 6th Steering Committee meeting report.

The main advice is to proceed with the proposed consolidation phase for which the Belgian Government already made a commitment for an amount of 3,000,000 Euros.

Two important steps are to enforce a budget revision with financial mode changes and to synchronize the 2 PBHS projects with a no-cost (2 PBHS budget combined) extension till end of November 2008.

10 ANNEXES

- Tracking Gantt view / Activities (So far not in use on this project)
- Baseline report/Activities (AdeptTracker) (So far not in use on this project)
- Input in PIT(So far not in use on this project)
- Logical framework(No alteration)

10.1 Measuring indicators

Selected graphs and tables extracted from the 2007 Project report for steering Committee (see annexe 10.6)

Table 1

HEF Inpatient Beneficiaries at Referral Hospitals:

Yearly HEF 2007	Siem Reap RH	Kralanh RH	Sotonikum RH	Samrong RH	Anlong Veng HCwBeds	Total	% incr. /2006
Total IPDs	9,866	2,545	2,729	2,919	2,704	20,763	28%
HEF-paid patients	1,957	1,030	1,224	1,262	1,587	7,060	11%
Self-paying patients	7,909	1,515	1,505	1,657	1,117	13,703	39%
<i>% of HEF supports</i>	<i>20%</i>	<i>40%</i>	<i>45%</i>	<i>43%</i>	<i>59%</i>	34%	

Figure 1

Siem Reap hospital is steadily increasing its volume of activity with a quite even repartition across the departments. Pediatric care is not available anymore but Gyn/Ob is progressively regaining utilization. HEF patients represent 20% of all admitted patients.

Siem Reap Provincial Hospital
Monthly Average Discharge
by Department, 2000- 2007

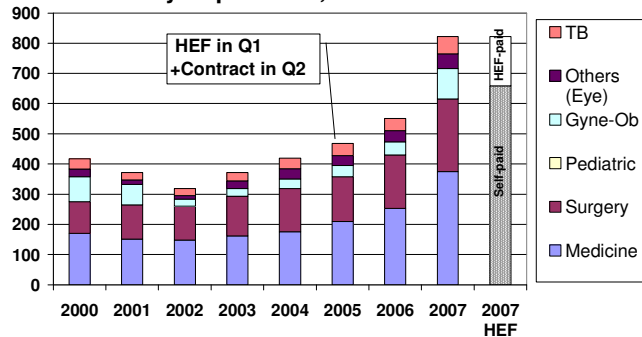
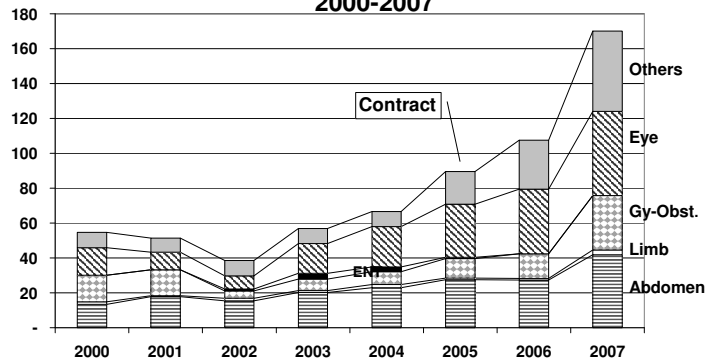


Figure 2

Also shows the continued increasing trend in surgical activities from 2003 and 2007 even more active.

In 2007 the proportion of planned surgery increased substantially showing that the surgical department is building up a reputation and is not only used for emergency/trauma cases.

Siem Reap Provincial Hospital
Average Monthly Surgical Cases per category
2000-2007



10.2 Checklist efficiency

Checklist 1.	Efficiency	N°
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Efficiency refers to the way in which the resources of the cooperation intervention are converted through the project activities into the expected results.

To be completed by the Project

1. Facts about the result indicators:

	% expected realisation	actual % of realisation	comments
Indicators for Result 1	0	0	progressing well
Indicators for Result 2	0	0	progressing well
Indicators for Result 3	0	0	progressing well
Indicators for Result 4	0	0	progressing well
Indicators for Result 5	0	0	progressing well
Indicators for Result 6	0	0	progressing well

* (% expected realisation - actual % of realisation)

2. Achievements of the results referring to the indicators.

	Yes	No	NA
Are these indicators formulated in a 'smart' way ?	<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
Are all indicators monitored ?	<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
Is there a baseline to compare with for each indicator ?	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>

3. Facts about activities:

	Implementation is on schedule	Implementation is delayed	Implementation is in advance	Explanation
for Result 1	on schedule			
for Result 2	on schedule			but low intensity
for Result 3	on schedule			
for Result 4	on schedule			but low intensity
for Result 5	on schedule			
for Result 6	on schedule			

4. The activities are implemented as planned.

	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Some activities will need more time to be completed	<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
Some activities can be implemented within a shorter period of time	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
Any occurred delay will be caught-up before the project ends	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
Detected deviations will influence seriously the achievement of results	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>

5. The general quality of the project activities is perceived as:

	<input type="checkbox"/>	<input type="checkbox"/>	
satisfactory	<input type="checkbox"/>	<input type="checkbox"/>	
sufficient	<input type="checkbox"/>	<input type="checkbox"/>	sufficient could be better especially results 2 and 4
problematic	<input type="checkbox"/>	<input type="checkbox"/>	

6. Do activities contribute to reach the planned results ?

	<input type="checkbox"/>	Yes <input type="checkbox"/>	<input type="checkbox"/>
If not, explain why:			

7. Is it possible to plan the activities in a more optimal way ?

	<input type="checkbox"/>	<input type="checkbox"/>	No <input type="checkbox"/>
If so, explain how:			

8. Facts about the expenses:

	% of total budget	% of annual budget	date of latest adjustment	Explanation	% of financial planning year X
for Result 1	78%	83%	Jul-07		
for Result 2	67%	68%	Jul-07		low intensity
for Result 3	78%	88%	Jul-07		
for Result 4	55%	59%	Jul-07		low intensity
for Result 5	78%	56%	Jul-07		
for Result 6	74%	55%	Jul-07		
Total budget	77%	73%	Jul-07		

		Yes	No	NA
9. Financial resources are managed as planned.				
	Some estimated costs are not sufficient, extra resources are needed	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
	Important financial means remain, they need to be replanned	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
	Some financial risks have been identified regarding expenses (crédits,...)	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
	Detected financial risks are under control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Activities could be implemented with less financial resources	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
	Partner contribution in financial terms is respected	<input type="checkbox"/>	partly <input type="checkbox"/>	partly <input type="checkbox"/>
10. Is it possible to manage financial resources in a more optimal way? If so, explain how:		<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
11. Human resources are managed as planned.		<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
	The project staff is complete	<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
	The project staff is not stable	<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
	The planned personnel is not sufficient, extra resources are needed	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
	Some personnel execute tasks not conform to their job description	<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
	Activities could be implemented with less human resources	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
	There is a gender balance within the project staff	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
12. Is it possible to manage human resources in a more optimal way ? If so, explain how:		<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
13. Goods and equipment are managed as planned.		<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
	The equipment is inventorised and insured	<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
	Important amounts of goods will not be used	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
	Insufficient goods and equipment, extra resources are needed	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
	Some equipment or goods are not adapted to local conditions/use	<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
14. Is it possible to manage goods and equipment in a more optimal way ? If so, explain how:		<input type="checkbox"/>	<input type="checkbox"/>	no <input type="checkbox"/>
15. The organisational structure of the project is perceived as:			satisfactory	
	satisfactory <input type="checkbox"/>			
	sufficient <input type="checkbox"/>			
	problematic <input type="checkbox"/>			
17. Have unexpected problems regarding the planning been solved ? If so, explain how the planning has been adapted:		<input type="checkbox"/>	yes <input type="checkbox"/>	<input type="checkbox"/>
16. Can the efficiency of the project be improved ? If so, explain how:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lessons learned	1- The project under-estimated the need for specialized resource persons/institutions in developing activities in Communication, clinical quality and construction work.			
Best practices				
Recommendations	Now coming to end of project. However some short term arrangements must still be considered: sub-contracting of some activities to identified specialized persons/institutions.			

10.3 Checklist effectiveness

Checklist 2.	Effectiveness	N°																				
Effectiveness assesses if the results of the project are delivered and if they contribute to the achievement of the specific objective. It investigates if the occurred changes within the project area are caused by the project. It also assesses if the beneficiaries use the results delivered by the project.																						
To be completed by the project		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 33%;">Yes</th> <th style="width: 33%;">No</th> <th style="width: 33%;">NA</th> </tr> </table>	Yes	No	NA																	
Yes	No	NA																				
<p>1. Concerning the indicators of the specific objective:</p> <p style="margin-left: 20px;">Are there any indicators for the specific objective ? <input type="checkbox"/> yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p style="margin-left: 20px;">Are the indicators of the specific objective 'smart' ? <input type="checkbox"/> yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p style="margin-left: 20px;">Are the indicators of the specific objective monitored ? <input type="checkbox"/> yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p style="margin-left: 20px;">Is there a base-line to be compared with ? <input type="checkbox"/> yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>																						
<p>2. Are the indicators of the specific objective reached ?</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-left: 20px;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 10%;">% expected realisation</th> <th style="width: 10%;">actual % of realisation</th> <th style="width: 50%;">Comment</th> </tr> </thead> <tbody> <tr> <td>Indicator 1</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="background-color: #d9ead3;">progressing well</td> </tr> <tr> <td>Indicator 2</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="background-color: #d9ead3;">progressing well</td> </tr> <tr> <td>Indicator 3</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="background-color: #d9ead3;">progressing well</td> </tr> <tr> <td>Indicator 4</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="background-color: #d9ead3;">progressing well</td> </tr> </tbody> </table> <p style="text-align: center; font-size: small;">* (% expected realisation - actual % of realisation)</p>		% expected realisation	actual % of realisation	Comment	Indicator 1	0	0	progressing well	Indicator 2	0	0	progressing well	Indicator 3	0	0	progressing well	Indicator 4	0	0	progressing well		
	% expected realisation	actual % of realisation	Comment																			
Indicator 1	0	0	progressing well																			
Indicator 2	0	0	progressing well																			
Indicator 3	0	0	progressing well																			
Indicator 4	0	0	progressing well																			
<p>3. Will the specific objective be realised purely thanks to the results delivered ? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p>4. Are there any side effects caused by the results ? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p style="margin-left: 20px;">If there are any side effects, do they influence the specific objective ?</p> <p style="margin-left: 40px;"><input type="checkbox"/> in a positive way <input type="checkbox"/> in a negative way</p> <p>5. Are there any external factors influencing the specific objective ?</p> <p style="margin-left: 40px;"><input type="checkbox"/> in a positive way <input type="checkbox"/> in a negative way</p> <p>6. What are the characteristics of the beneficiaries involved in the project ? the poor, with a focus on women and children: Beneficiaries are not involved in the project as such, they benefit from it</p> <p>7. The groups who are (or who will be) benefiting from the specific objective are: intended: poor get free access to health services, others get access to more available, better quality services</p> <p>8. Do the beneficiaries have access to the results delivered by the project ? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA If not, explain why (for the results in question):</p> <p>9. Are the beneficiaries using the results delivered by the project ? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA If not, explain why (for the results in question):</p>																						
<p>10. Are the beneficiaries satisfied with the results delivered by the project ? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA If not, explain why:</p> <p>11. Is the project implementation responding to:</p> <p style="margin-left: 20px;">- the problems of the beneficiaries <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p style="margin-left: 20px;">- the priorities of the beneficiaries <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p> <p>12. Do the proposed solutions solve the problems of the beneficiaries ? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA</p>																						
Lessons learned	The project combine demand side and provider side mechanisms to improve the utilization and the availability/quality of services. Demand side mechanisms are essential to ensure the benefits reach the targeted beneficiaries.																					
Best practices																						
Recommendations	Further strengthen demand side mechanisms in preparation of future Social Health Systems																					

10.4 Checklist sustainability

Checklist 3.	Sustainability	N°
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Sustainability refers to the likelihood that the benefits from a development cooperation intervention will be maintained and reproduced after the withdrawal of donor support.

To be completed by the project	Yes	No	NA
1. Is the partner institution participating actively in:			
reporting	yes		<input type="checkbox"/>
decision-making	yes		<input type="checkbox"/>
planning of activities	yes	<input type="checkbox"/>	<input type="checkbox"/>
financial management	yes	<input type="checkbox"/>	<input type="checkbox"/>
implementing the project	yes	<input type="checkbox"/>	<input type="checkbox"/>
monitoring and evaluation	yes	<input type="checkbox"/>	<input type="checkbox"/>
human resource management	yes	<input type="checkbox"/>	<input type="checkbox"/>
management of material resources	yes	<input type="checkbox"/>	<input type="checkbox"/>
2. Are resources and capacities available for the maintenance and reproduction of the results ?			
Human resources		not yet	
Financial resources		not yet	
Equipment			
3. Is the partner institution taking the necessary dispositions to take over the project ?	yes	<input type="checkbox"/>	<input type="checkbox"/>
4. Is there a plan for the integration of the project in the partner institution ? If so, explain.	yes	<input type="checkbox"/>	<input type="checkbox"/>
5. Is the project providing institutional training for the partner institutions ?	yes	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the trained personnel staying in place ?	yes	<input type="checkbox"/>	<input type="checkbox"/>
7. Is the project providing capacity building for organisations regarding ?			
Management of systems			
Process management			
Transfer of knowledge			
Networking			
	yes to all		
8. Is the project providing the necessary capacity building for individuals regarding ?			
Transfer of knowledge			
Exchange of experiences			
Exchange of values			
Empowerment			
Networking			
	yes to all		

9. Is the project supported by the following local institutions ?		Political institutions		
		Partner institutions	yes to all	
		Civil society institutions		
		Cultural institutions (religious, ethnic, traditional,...)		
10. Are the aid modalities strengthening the sustainability ?		yes	<input type="checkbox"/>	<input type="checkbox"/>
11. Are the execution modalities strengthening the sustainability ?		yes	<input type="checkbox"/>	<input type="checkbox"/>
12. Is the project contributing to the sustainability in following dimensions ?		Political		
		Social		
		Institutional		
		Organisational	yes to all	
		Cultural		
		Economic		
		Technical		
13. Is the project linked to donor conditions ?		<input type="checkbox"/>	no	<input type="checkbox"/>
If so, are these conditions deducted from national strategies ?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Is the project respecting the principle of untied aid ?		yes	<input type="checkbox"/>	<input type="checkbox"/>
15. Is the Partner Institution respecting its contribution ?		yes	<input type="checkbox"/>	<input type="checkbox"/>
Remarks	Sustainability is a main issue in the approach developed by the project. This is acknowledged by the partner institution and jointly and progressively addressed, with however some delay on the initial schedule. This applies to financial, organizational and technical aspects of sustainability. Sustainability is the main objective of a proposed 4-year Consolidation Phase to be confirmed. Based on the results, the MoH is taking the project as a model for reproduction under other cooperation agreements.			

10.5.Overview public contracts

PROJECT REGISTER OF CONTRACTS

Sequential number PBHS-SROM	Ref. Number BTC register	Third Party	Type	Sending Date of spec.	Date of award	Authorized person responsible	Manager charge In- of document	Navision code/ Project Code	Project Title	Budget Line	Mode	ex- rate	Budget of specifications in (€)	Amount of final contract (+currency)	Amount of final Invoice (+currency)	Amount of final Invoice (in €)
PBHS-SR/OM 01		IAPSO Procurement Agency	Public Bid + IAPSO Prof. Inv.	7-Dec-06	8-Mar-07	Dr. Dy Bunchhem, Dr. Frederic Bonnet & Dr. Ouk Kimsoeun	Mr. Than Vuth	KAM/02/007/11	(CIF) for 2 Landcruiser Ambulances	A_04_04	CO	1.3	€ 46,564	\$60,533	\$59,838	€ 46,820
PBHS-SR/OM 02		Neeka Limited	> 3 quotations		1-Jan-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Ms. Khoun Lina	KAM/02/007/11	11 maintenance contract for PMU Office	Z_01_09	CO	1.3	€ 869	\$1,130	\$1,130	€ 869
PBHS-SR/OM 03		Advantec sources	> 3 quotations	6-Dec-06	22-Jan-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Dr. Frederic	KAM/02/007/11	2 Solar electricity system for Health centres	A_04_02	CO	1.252	€ 3,264	\$4,086	\$4,086	€ 3,264
PBHS-SR/OM 04		National Institute of Public Health (NIPH)	Public Bid		15-Feb-07	Dr. Dy Bunchhem & Dr. Dirk Horemans	Ms. Khoun Lina	KAM/02/007/11	HEF Assessment Consultancy Services	A_01_02	RE		€ 6,600	\$6,600		€ 6,600
PBHS-SR/OM 05		FORTE	> 3 quotations		28-Feb-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Ms. Khoun Lina	KAM/02/007/11	Four Vehicules Insurance	Z_01_10	CO	1.3	€ 1,959	\$2,546	\$2,546	€ 1,959
PBHS-SR/OM 06		FORTE	> 3 quotations		28-Feb-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Ms. Khoun Lina	KAM/02/007/11	Staff insurance	Z_01_01	CO	1.3	€ 5,769	\$7,500		
PBHS-SR/OM 07		Women Organisation for Modern Economy & Nursing (WOMEN)	Negotiated with local NGO		15-Mar-07	Dr. Ouk Kim Soeun & Dr. Dirk Horemans	Mr. Kong Chheng Lee	KAM/02/007/11	To improve access to quality health care for People Living with HIV/Aids in OMC	A_03_07	CO	1.3	€ 19,662	\$20,073		
PBHS-SR/OM 08		Cambodian Health and Human Rights Alliance	Extension, local NGO		30-Mar-07	Dr. Dy Bunchhem, Dr. Ok Kim Soeun & Dr. Dirk Horemans	Mr. Kong Chheng Lee	KAM/02/007/11	Health Equity Fund contract for SR & KLN RH, SNK RH & 5 HCs, OMC RH & Anlong Veng HC	A_01_05	CO	1.3	€ 28,608	\$37,191	\$29,906	€ 23,004
PBHS-SR/OM 09		Mondol Mit Chouy Mit (MMM)	Negotiated, local NGO		30-Mar-07	Dr. Dy Bunchhem & Dr. Dirk Horemans & Dr. Sok Chamroeun	Mr. Kong Chheng Lee	KAM/02/007/11	Provide social supports to the People Living With HIV/Aids (PLWHA) in SR	A_03_07	CO	1.3	€ 8,077	\$10,500		
PBHS-SR/OM 10		MOHAPRUM Co., Ltd.	Public Bid	23-Mar-07	18-Apr-07	Dr. Dy Bunchhem & Dr. Dirk Horemans	Mr. Pim Vanna	KAM/02/007/11	Upgrading of the Stormwater and Waste-water Drainage at SR RH Renovation and Extension	A_04_05	CO	1.3	€ 56,910	\$73,983	\$75,718	€ 58,245
PBHS-SR/OM 11		Belayse Construction Enterprise	Public Bid	3-Apr-07	20-Apr-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Pim Vanna	KAM/02/007/11	Imaging/ Operating Theater of SR RH	A_04_05	CO	1.3	€ 32,419	\$42,145	\$42,414	€ 32,626
PBHS-SR/OM 12		KOSAN Engineering	Negotiated	22-May-07	3.5 days	Dr. Dy Bunchhem & Dr. Dirk Horemans	Mr. Than Vuth	KAM/02/007/11	Managing Health Equity Fund Consultancy Services	A_01_05	CO	1.3	€ 808	\$1,050		
PBHS-SR/OM 13		Startec ARC	Public Bid Bruxelles		31-May-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Dr. Frederic	KAM/02/007/11	Mid-Term Review Consultant	B_01_02	RE	1	€ 15,064	\$15,064	\$15,064	€ 15,064
PBHS-SR/OM 14		Cambodian Health and Human Rights Alliance	Selection based on qualification		30-Jun-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Kong Chheng Lee	KAM/02/007/11	Health Equity Fund for SRP RH & Angkor Chum OD and Kralanh RH	A/01/05 + 04	CO	1.3	€ 37,492	\$48,739		
PBHS-SR/OM 15		Cambodian Health and Human Rights Alliance	Selection based on qualification		30-Jun-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Kong Chheng Lee	KAM/02/007/11	Health Equity Fund for Somroang RH and Anlong Veng HC	A/01/05 + 04	CO	1.3	€ 29,983	\$38,978		
PBHS-SR/OM 16		Cambodian Health and Human Rights Alliance	Selection based on qualification	1-Jul-07	30-Jun-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Kong Chheng Lee	KAM/02/007/11	Health Equity Fund in Sotmkum RH and 5 HCs	A/01/05 + 04	CO	1.3	€ 29,152	\$37,898		
PBHS-SR/OM 17		Jean-Marc THOME	Negotiated		9-Jul-07	Dr. Frederic Bonnet	Ms. Khoun Lina	KAM/02/007/11	Consultancy Service for Health Financing Advising	A_06_02	RE		€ 3,098	\$3,098		€ 3,098
PBHS-SR/OM 18		KOSAN Engineering	Negotiated	18-Apr-07	11-Jul-07	Dr. Dy Bunchhem & Dr. Dirk Horemans	Mr. Than Vuth	KAM/02/007/11	Supervision the Drainage Rehabilitation works in SR RH	A_04_05	CO	1.3	€ 2,115	\$2,750		
PBHS-SR/OM 19		SDV	> 3 quotations	6-Jul-07	11-Jul-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Than Vuth	KAM/02/007/11	2 ambulances custom clearance	A_04_04	CO	1.4	€ 1,295	\$1,813	\$1,813	€ 1,295
PBHS-SR/OM 20		National Institute of Public Health	Public Bid		30-Jul-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Dr. Tuot Bunnareth	KAM/02/007/11	Hospital Management Training 12 pax	A_05_04	CO	1.3	€ 20,308	\$26,400	\$26,400	€ 20,308
PBHS-SR/OM 21		Tan Tan Shop	Public Bid	28-Aug-07	27-Sep-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Than Vuth	KAM/02/007/11	MCH Equipment for Health Centres	A_04_04	CO	1.35	€ 10,632	\$14,354	\$6,541	€ 4,846
PBHS-SR/OM 22		Regional Training Center of Battambang (BTC-BB)	Negotiated		15-Oct-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Than Vuth	KAM/02/007/11	Midwifery Training for 12 Siem Reap PHD staffs	A_05_04	CO	1.3	€ 8,031	\$10,440	\$10,440	€ 8,031
PBHS-SR/OM 23		Neeka Limited	> 3 quotations	15-Oct-07	19-Oct-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Than Vuth	KAM/02/007/11	IT equipment for PHD	A_04_02	CO	1.3	€ 1,766	\$2,296	\$2,296	€ 1,766
PBHS-SR/OM 24		Dynamic	Public Bid	3-Sep-07	29-Oct-07	Dr. Dy Bunchhem & Dr. Frederic Bonnet	Mr. Than Vuth	KAM/02/007/11	MCH Equipment for Health Centres	A_04_04	CO	1.3	€ 12,114	\$15,748		
PBHS-SR/OM 25		DCC Co., Ltd.	Public Bid	15-Oct-07	13-Nov-07	Dr. LO Veasna Kiry & Ann Dedeurwaerdere	Mr. Than Vuth	KAM/02/007/11	Renovation and Extension of OPD in Siem Reap Referral Hospital	A_04_05	CO	1.3	€ 37,000	\$49,167		

10.6 2007 Report/2008 Plan: preparatory document to
the 6th Steering Committee (Attached)

10.7 6th Steering Committee Report (Attached)