

업무자료  
평가심사 2014-33-056

ISBN 978-89-6469-221-9 93320

2014

업무자료 평가심사 2014-33-056

Ex-post Evaluation Report on the 3th Phase of the Project for Upgrading the Korea-Vietnam Friendship Clinic in Hanoi

한국국제협력단

발간등록번호

11-B260003-000321-01

# Ex-post Evaluation Report on the 3th Phase of the Project for Upgrading the Korea-Vietnam Friendship Clinic in Hanoi

2013. 12



461-833 경기도 성남시 수정구 대왕판교로 825  
Tel.031-7400-114 Fax.031-7400-655  
<http://www.koica.go.kr>



Ex-post Evaluation Report on the 3th Phase  
of the Project for Upgrading the  
Korea-Vietnam Friendship Clinic in Hanoi

2013. 12

**KOICA**  
한국국제협력단

 **WORLD  
FRIENDS**  
KOREA



The Korea International Cooperation Agency (KOICA) performs various types of evaluation in order to secure accountability and achieve better development results by learning.

KOICA conducts evaluations within different phases of projects and programs, such as ex-ante evaluations, interim evaluations, end-of-project evaluations, and ex-post evaluations. Moreover, sector evaluations, country program evaluations, thematic evaluations, and modality evaluations are also performed.

In order to ensure the independence of evaluation contents and results, a large amount of evaluation work is carried out by external evaluators. Also, the Evaluation Office directly reports evaluation results to the President of KOICA.

KOICA has a feedback system under which planning and project operation departments take evaluation findings into account in programming and implementation. Evaluation reports are widely disseminated to staffs and management within KOICA, as well as to stakeholders both in Korea and partner countries. All evaluation reports published by KOICA are posted on the KOICA website. ([www.koica.go.kr](http://www.koica.go.kr))

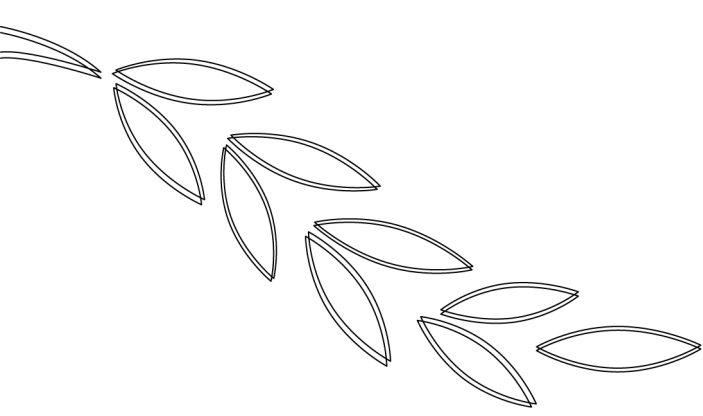
This evaluation study was entrusted to Kyunghee University by KOICA for the purpose of independent evaluation research. The views expressed in this report do not necessarily reflect KOICA's position.



# Contents

<b>I . Introduction .....</b>	<b>1</b>
1. Evaluation Background .....	3
2. Evaluation Purpose and Scope .....	4
3. Evaluation Subject .....	5
<b>II . Methodology and Evaluation Process .....</b>	<b>7</b>
1. Evaluation Criteria and Methodologies .....	9
2. Limitations and Constraints of Evaluation .....	10
3. Internal and External Research and Investigation Methodologies .....	11
<b>III . Evaluation Results .....</b>	<b>21</b>
1. Relevance .....	23
2. Efficiency .....	29
3. Effectiveness .....	32
4. Impact .....	39
5. Sustainability .....	41
6. Cross-cutting Issue .....	46
<b>IV . Conclusion and Recommendation .....</b>	<b>49</b>
1. Main evaluation results and lessons .....	51
2. Project-related recommendations (for sector/country) .....	52
3. Policy Recommendation .....	53





# I . Introduction

1. Evaluation Background
2. Evaluation Purpose and Scope
3. Evaluation Subject







# I Introduction



## 1. Evaluation Background

- Hospital construction is a component of Korea International Cooperation Agency (KOICA)'s health sector development projects. Implementing hospital construction projects, KOICA seeks to fulfill its purpose of promoting people's health in developing countries both by enhancing the health and medical environment and by improving the access to health and medical services. It is therefore, necessary to conduct an ex-post evaluation for terminated hospital construction projects, analyzing the success factors as well as the limitations thereby drawing future-oriented recommendations for health projects.
- The“3rd Phase Project for Upgrading the Korea-Vietnam Friendship Hospital” (hereinafter referred to as “the Project”) finds its root in the 1st Phase Project implemented in 1995. The Project has been sustained in various forms of support including construction, equipments provision, specialist dispatch, and trainee invitation for many years. Since the termination of the 3rd Phase Project, KOICA continued its effort for an ex-post management mainly in the form of dispatching doctors and volunteers. Hence, it is necessary to conduct an ex-post evaluation not just to see the short term outcomes of the Project but to check and predict the long term impacts as well as the possible ripple effects.



## 2. Evaluation Purpose and Scope

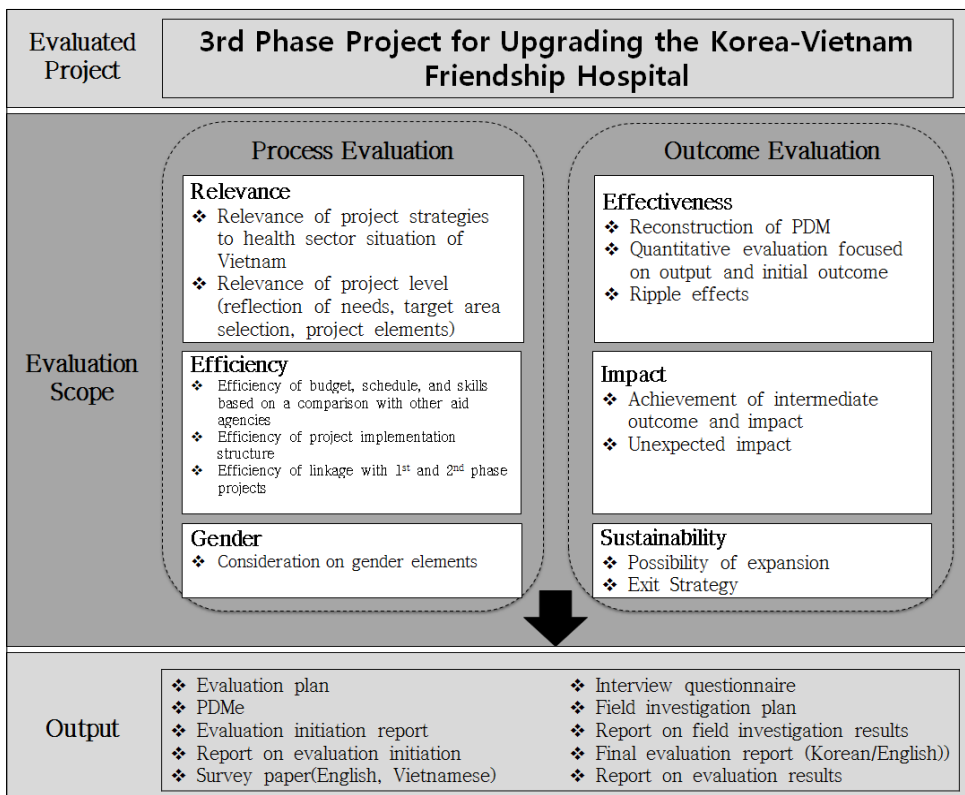
### A. Purpose

- Drawing the short term outcomes and foreseeing the long term impact and the ripple effects of the Project through an ex-post evaluation
- Drawing recommendations and strategic lessons for successful implementations of future health projects in the partner countries including Vietnam

### B. Scope

- The scope of this ex-post evaluation is as follows.

<Image 1> Evaluation Scope of the Project





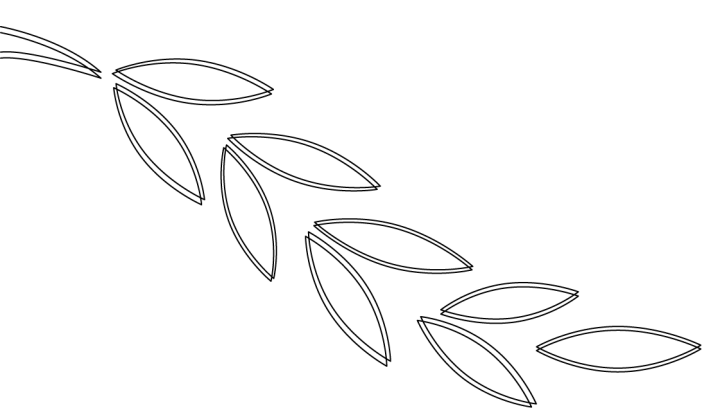
### **3. Evaluation Subject**

#### **A. Project Background**

- National Development Strategies and Goals of Vietnam
  - In accordance with its 10-Year Socioeconomic Development Plan (2001-2010), the Vietnamese Government is endeavoring for the health sector development specifically by ① strengthening efficiency and fairness of health services, ② eradicating widespread social factors causing ill health, ③ converging traditional and modern means of medical services, and ④ harmonizing public and private roles in the health sector.
- Necessity to Improve the Competitiveness of Vietnam's Public Health Services
  - Since the Doi Moi economic reform program in 1986, Vietnam's healthcare system has been vastly changing. The government support for public health services is continuously decreasing; thus, the public hospitals are in urgent need for improvement in terms of competitiveness.
- Aims to Enhance the Health and Medical Environment of Vietnam
  - Following the previous 2 phases, the Project aimed to enhancing the health and medical environment of Vietnam through a comprehensive assistance involving hospital reconstruction, equipment provision, and medical administration technical transfer.

## **B. Project Objectives**

- Goal: To improve the health and medical services and the quality of lives in the target area
  
- Purpose
  - To expand the access to the medical services by establishing an outpatient clinic
  
  - To enhance the medical techniques, medical administration abilities, and healthcare benefits through provision of advanced medical equipments and medical administration consulting services
  
- Expected Outcomes
  - Providing quality healthcare services to the residents of Hanoi
  
  - Providing quality healthcare services by upgrading medical facilities and equipments



## II . Methodology and Evaluation Process

1. Evaluation Criteria and Methodologies
2. Limitations and Constraints of Evaluation
3. Internal and External Research and Investigation Methodologies





## II

# Methodology and Evaluation Process



### 1. Evaluation Criteria and Methodologies

#### Criteria

- The 5 evaluation criteria recommended by OECD DAC, i.e. relevance, efficiency, effectiveness, impact (ripple effect), and sustainability, are followed along with considerations on gender and environment
- Being an ex-post evaluation, this evaluation focuses on the effectiveness, impact, and sustainability of the Project. Relevance and efficiency are evaluated when necessary while conducting the evaluation. Recommendations and lessons are proposed for similar projects in the future.

#### Method

- This evaluation incorporates participatory evaluation method, which contributes to drawing highly relevant questions, and to improving the performance of the program.
- The evaluation method may as well strengthen the voice and capacity of the participants and improve the organizational learning in terms of sustainability.
- Thus, analyses on each criterion will be based on a reconstructed PDM for Evaluation (PDMe), mainly focusing on the measurement of medium to long term impacts and sustainability.





## **2. Limitations and Constraints of Evaluation**

### Relevance

- Being an extension of the previous phases, the Project was designed with a reflection of the previous project plans. Thus it involves some limitations to evaluating the target regions and groups.
- The current Country Partnership Strategy (CPS) provides limited basis for evaluating the Project, as the Project was initiated before the CPS was established.

### Efficiency

- The initial PDM developed in the designing stage of the Project incorporates highly conceptual phrases that are difficult to measure. Hence, there are limitations and difficulties in establishing indicators for evaluation.

### Impact/Sustainability

- The employees survey on impact and sustainability was conducted in the local language, for which a senior staff in the target institution offered assistance. Conducting the survey in the presence of a senior staff served as a limitation as the junior staff may have been pressured to bias the survey results.
- Requests for the documents on Korea-Vietnam Friendship Hospital's financial status, financial support from St. Paul Hospital, current status regarding the number of patients using the Korea-Vietnam Friendship Hospital, and the local regulations on handling the medical wastes were unattended, serving as another limitation to the evaluation.



### **3. Internal and External Research and Investigation**

#### **Methodologies**

##### **A. Literature Investigation**

- Comprehending the development goals of the Vietnamese Government together with the current context, policies, and main problems in the health sector of Vietnam.
- Collecting and analyzing the information and documents regarding Korea's partnership strategy towards Vietnam

##### **B. Internal and External Interviews**

- In-depth interviews were conducted to relevant persons from KOICA, PMC, recipient government, recipient institution, implementer, and other donor agencies.

##### **C. Surveys**

- Overview

Item	Surveys targeting recipient government personnel, project stakeholders, and the users of the recipient institution
Contents	Relevance, efficiency, effectiveness, impact (ripple effect), sustainability, and crosscutting issues of the Project
Targets	Vietnamese Government bodies, St. Paul Hospital employees, and the patients using St. Paul Hospital
Methods	Complementary use of both On-line and Off-line methods; Collecting survey papers prior to the visit interviews

## D. Field Investigation

### □ Overview

Item	Korea-Vietnam Friendship Hospital Field Investigation
Date	2013.07.21.~2013.07.26
Procedure	Field investigation launching report→Launching meeting of evaluation team→Begin field investigation→Wrap-up field investigation
Contents	<ul style="list-style-type: none"><li>- Situation analysis on the use of medical facilities in the target region</li><li>- Maintenance and management status of hospital facilities, administrative problems and improvement suggestions</li><li>- Level of health condition improvement in the target region</li><li>- Contribution to health and medical capacity building in the target region</li><li>- Self-reliance of recipient institution</li><li>- Contribution to promoting friendship between Korea and Vietnam</li></ul>
Breakdown	<ul style="list-style-type: none"><li>- Collecting local information and conducting local interviews</li><li>- Checking survey results and collecting responses</li><li>- Reflecting on the field investigation results; sharing results with recipient government and KOICA</li></ul>

## E. PDMe

Criteria	Sub-Questions	Performance Indicators	Sources of Information	Information Collection
Relevance	Does the Project correspond with the sector priorities and policies of the partner country?	<ul style="list-style-type: none"> <li>• Correspondence with the national development strategy of Vietnam</li> <li>• Correspondence with the healthcare system development plan of Vietnam</li> </ul>	<ul style="list-style-type: none"> <li>• Vietnam Poverty Reduction Strategy Paper</li> <li>• Vietnam Comprehensive Poverty Reduction and Growth Strategy</li> <li>• Vietnam 5 Year Healthcare System Development Plan</li> </ul>	<ul style="list-style-type: none"> <li>• Literature Investigation</li> </ul>
	Does the Project correspond with health sector policies of KOICA as well as the country partnership strategy of the Korean Government?	<ul style="list-style-type: none"> <li>• Correspondence with the country partnership strategy of Korea</li> <li>• Correspondence with the health sector aid policies of KOICA</li> </ul>	<ul style="list-style-type: none"> <li>• KOICA Country Partnership Strategy and the evaluation report for the Project</li> <li>• KOICA Health Sector Mid-Term Plan, Vietnam 2009</li> <li>• KOICA Grants Statistics</li> </ul>	<ul style="list-style-type: none"> <li>• Literature Investigation</li> <li>• Statistical Analysis</li> </ul>
	Are the directions and strategies of the Project in an harmony with the development policies of other partners in international development? Relevance of the target region and group selection - Does the selected beneficiaries correspond with the demand for health and medical services?	<ul style="list-style-type: none"> <li>• Harmony with the health projects of other aid agencies</li> <li>• Relevance to the demand for health and medical service in the recipient country</li> </ul>	<ul style="list-style-type: none"> <li>• Health project proposals and reports of other aid agencies</li> <li>• Persons in charge of other aid agencies</li> </ul>	<ul style="list-style-type: none"> <li>• Literature Investigation</li> <li>• Interview</li> </ul>

Criteria	Sub-Questions	Performance Indicators	Sources of Information	Information Collection
	<p>In the planning stage, was there an appropriate process to accommodate the opinions of the beneficiaries?</p> <p>- Was there a sufficient consultation with the recipient government?</p>	<ul style="list-style-type: none"> <li>Frequency of meetings with the recipient government and the degree to which the recipient government's opinions were reflected</li> </ul>	<ul style="list-style-type: none"> <li>Preliminary Survey Report</li> <li>Record of Discussion</li> <li>Interim Evaluation Report</li> <li>Completion Evaluation Report</li> <li>Persons in charge from both Korea and Vietnam</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> <li>Interview</li> </ul>
	<p>Are the project plans and compositions logical and relevant enough to fulfill the goals of the Project?</p>	<ul style="list-style-type: none"> <li>Relevance of the project target</li> <li>Relevance of the target region and group</li> <li>Relevance of the project timeframe</li> <li>Relevance of the project budget</li> <li>Relevance of the project scope</li> <li>Relevance of the inputs</li> </ul>	<ul style="list-style-type: none"> <li>Record of Discussion</li> <li>Interim Evaluation Report</li> <li>Project Completion Report</li> <li>Persons in charge from PMC and other implementing institutions</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> <li>Interview</li> </ul>
Effectiveness	<p>Does the output correspond with the plans of the Project?</p>	<ul style="list-style-type: none"> <li>Outpatient clinic expansion (Floor space relative to the initial plan))</li> <li>Number of additional patient beds</li> <li>Number and quality of supported equipments</li> </ul>	<ul style="list-style-type: none"> <li>Interim Evaluation Report</li> <li>Completion Evaluation Report</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> <li>Direct Observation</li> </ul>

Criteria	Sub-Questions	Performance Indicators	Sources of Information	Information Collection
		<ul style="list-style-type: none"> <li>• Capacity building for operational staff of the hospital</li> <li>• Relevance of the basic plans and systems of hospital operation</li> <li>• Effectiveness and quality of the consulting program</li> </ul>		
	<p>Have the initial outcomes achieved through the Project?</p> <ul style="list-style-type: none"> <li>- Are the supported medical facilities and equipments utilized appropriately?</li> <li>- Has the administrative capacity of the target hospital been strengthened?</li> </ul>	<ul style="list-style-type: none"> <li>• Change in the number of outpatients and inpatients</li> <li>• Patients' level of satisfaction</li> <li>• Change in number of operations</li> <li>• Change in financial status and capacity</li> <li>• Correspondence between the demand in the target region and the hospital's medical services</li> <li>• Utilization of the hospital and the users' level of satisfaction</li> </ul>	<ul style="list-style-type: none"> <li>• Internal statistics from the hospital</li> <li>• Health and medical staff of the target hospital</li> <li>• Patients</li> </ul>	<ul style="list-style-type: none"> <li>• Literature Investigation</li> <li>• Survey</li> <li>• Statistical Research</li> <li>• Interview</li> </ul>

Criteria	Sub-Questions	Performance Indicators	Sources of Information	Information Collection
Efficiency	Did the Project terminate within the planned frame of time and budget?	<ul style="list-style-type: none"> <li>Conformity and efficiency of planning and implementing stages</li> </ul>	<ul style="list-style-type: none"> <li>Project Completion Report</li> <li>Completion Evaluation Report</li> <li>Persons in charge from PMC and other implementing institutions</li> </ul>	<ul style="list-style-type: none"> <li>Literature Investigation</li> <li>Interview</li> </ul>
	Were the input elements well-timed?	<ul style="list-style-type: none"> <li>Timeliness of labor input</li> <li>Timeliness of capital input</li> <li>Relevance of time allocation</li> </ul>	<ul style="list-style-type: none"> <li>Preliminary Survey Report</li> <li>Record of Discussion</li> <li>Project Completion Report</li> <li>Interim Evaluation Report</li> <li>Completion Evaluation Report</li> <li>Persons in charge from PMC and other relevant institutions</li> </ul>	<ul style="list-style-type: none"> <li>Literature Investigation</li> <li>Interview</li> </ul>
	Was an efficient channel for mediation and communication established among the stakeholders?	<ul style="list-style-type: none"> <li>Presence of a communication channel among KOICA, Vietnamese Ministry of Health, and PMC</li> </ul>	<ul style="list-style-type: none"> <li>Project Completion Report</li> <li>Completion Evaluation Report</li> <li>Persons in charge from PMC and other relevant institutions</li> </ul>	<ul style="list-style-type: none"> <li>Literature Investigation</li> <li>Interview</li> </ul>

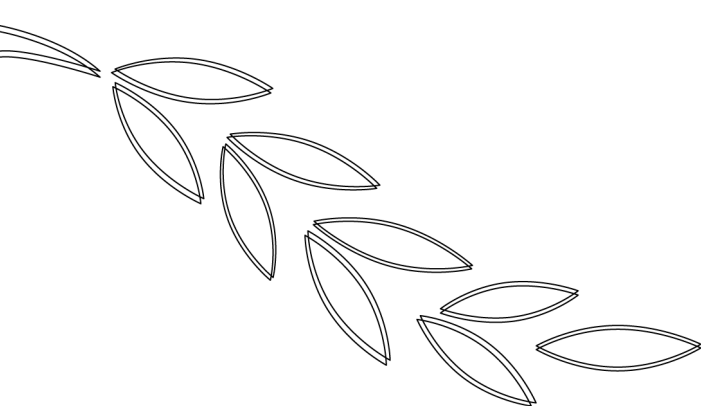
Criteria	Sub-Questions	Performance Indicators	Sources of Information	Information Collection
	What are the structural factors negatively affecting efficiency?	<ul style="list-style-type: none"> <li>The role of Vietnamese Ministry of Health</li> <li>The role of Hanoi board of health</li> <li>Leadership to the Project</li> </ul>	<ul style="list-style-type: none"> <li>Completion Evaluation Report</li> <li>Persons in charge from PMC and other relevant institutions</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> <li>Survey</li> <li>Interview</li> </ul>
	Was the Project efficiently linked to the 1st and 2nd phase projects?	<ul style="list-style-type: none"> <li>Linkage and synergy effects with the 1st and 2nd phase projects</li> </ul>	<ul style="list-style-type: none"> <li>Reports about 1st and 2nd phase projects</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> </ul>
	Was the quality of health and medical services enhanced in the target region?	<ul style="list-style-type: none"> <li>Positive change in regional health indicators</li> <li>Increase in the number of doctors / nurses for every 1000 people</li> <li>Improvement in the capacity of health workers</li> </ul>	<ul style="list-style-type: none"> <li>Statistics from the hospital and the Vietnamese Ministry of Health</li> <li>General Statistics Office of Vietnam</li> <li>WHO Vietnam</li> <li>Global Health Fact</li> <li>Hospital users</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> <li>Statistical Research</li> <li>Interview</li> </ul>
Impact	Did the Project make an impact to the indirect or potential beneficiaries?	<ul style="list-style-type: none"> <li>Improvement in indirect or potential beneficiaries' access to quality healthcare services</li> </ul>	<ul style="list-style-type: none"> <li>General Statistics Office of Vietnam</li> <li>WHO Vietnam</li> <li>Global Health Fact</li> <li>Regional residents</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> <li>Statistical Research</li> <li>Interview</li> <li>Survey</li> </ul>
	Did the Project make any direct or indirect impact to Korea?	<ul style="list-style-type: none"> <li>Provision of quality healthcare services to the Korean residents in Hanoi and the nearby cities</li> </ul>	<ul style="list-style-type: none"> <li>Completion Evaluation Report</li> <li>Internal statistics of the hospital</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> <li>Statistical Research</li> </ul>



Criteria	Sub-Questions	Performance Indicators	Sources of Information	Information Collection
		<ul style="list-style-type: none"> <li>• Spread of favorable image towards Korea</li> <li>• New business opportunities for Korean corporations to enter the Vietnamese market</li> </ul>	<ul style="list-style-type: none"> <li>• Korean residents in Hanoi and nearby cities</li> <li>• Regional residents</li> </ul>	<ul style="list-style-type: none"> <li>• Interview</li> <li>• Survey</li> </ul>
	Does the Ministry of Health of Vietnam have financial and institutional strategies and capacity to continuously support and maintain the Project?	<ul style="list-style-type: none"> <li>• Financial statement of the target hospital</li> <li>• Possession of skilled workers</li> <li>• Support plan for the friendship hospital</li> </ul>	<ul style="list-style-type: none"> <li>• Preliminary Survey Report</li> <li>• Record of Discussion</li> <li>• Project Completion Report</li> <li>• Person in charge from Vietnamese Ministry of Health</li> </ul>	<ul style="list-style-type: none"> <li>• Survey</li> <li>• Interview</li> </ul>
Sustainability	Are there appropriate strategies for the maintenance of supported facilities and equipments?	<ul style="list-style-type: none"> <li>• Utilization and condition of the facilities and medical equipments</li> <li>• Presence of maintenance firms or personnels</li> <li>• Breakdown on maintenance history</li> <li>• Status of doctors and volunteers dispatch</li> </ul>	<ul style="list-style-type: none"> <li>• Documents related to hospital operation</li> <li>• Person in charge from relevant local enterprises</li> <li>• Documents related to ex-post maintenance</li> </ul>	<ul style="list-style-type: none"> <li>• Literature Investigation</li> <li>• Interview</li> </ul>
	Possibility of self-reliant future growth of the Project	<ul style="list-style-type: none"> <li>• Financial system of the hospital</li> <li>• Financial status of the hospital</li> </ul>	<ul style="list-style-type: none"> <li>• Documents related to the financial status and management of the hospital</li> </ul>	<ul style="list-style-type: none"> <li>• Literature Investigation</li> <li>• Survey</li> <li>• Interview</li> </ul>

Criteria	Sub-Questions	Performance Indicators	Sources of Information	Information Collection
		<ul style="list-style-type: none"> <li>Capacity of the medical, technical and managerial staff</li> <li>Cooperation status with the civil society and the private sector</li> </ul>	<ul style="list-style-type: none"> <li>Annual budget and expenditure breakdown of the hospital</li> <li>Relevant persons in the hospital</li> </ul>	
Others	(Gender Mainstreaming) Did the Project give considerations on gender mainstreaming since its planning stage?	<ul style="list-style-type: none"> <li>Presence of strategies for gender mainstreaming</li> <li>Presence of efficient pollution-control system</li> </ul>	<ul style="list-style-type: none"> <li>Record of Discussion</li> <li>Plan of Execution</li> <li>Project Completion Report</li> </ul>	<ul style="list-style-type: none"> <li>Literature</li> <li>Investigation</li> <li>Visiting</li> <li>Research</li> <li>Interview</li> </ul>
	(Environmental Impact) Were there any anti-environmental acts polluting the surrounding environment?			





## III. Evaluation Results

1. Relevance
2. Efficiency
3. Effectiveness
4. Impact
5. Sustainability
6. Cross-cutting Issue





## Evaluation Results



### 1. Relevance

- The Project is highly correspondent to the National Development Strategy of the Vietnamese Government as well as to the sectoral development priorities of providing appropriate healthcare service, improving the quality of healthcare service, and harmonizing public and private healthcare services
- The Strategy for Socio-Economic Development 2001-2010<sup>1)</sup> prioritizes providing of appropriate healthcare services to the patients, reducing the rate of malnutrition among children under age of 5 to 20%, and increasing the life expectancy upto 71 years.
- Based on the Culture and Social Development part of the Strategy for Socio-Economic Development, the Vietnamese Government has been endeavoring for health sector development specifically by 1) strengthening efficiency and fairness of health services, 2) eradicating widespread social factors causing ill health, 3) converging traditional and modern means of medical services, and 4) harmonizing public and private roles in the health sector.
- Moreover, the Comprehensive Development Design for the Health System in Viet Nam to 2010 and vision by 2020 emphasizes strengthening the access to health and medical services, improving the quality of healthcare services,

---

1) The Project was implemented from 2005 to 2007, hence the relevant national development strategy of Vietnam at the time would be the Strategy for Socio-Economic Development 2001-2010. The evaluation team, therefore, evaluated the relevance of the Project based on this strategy.

and construction of medical infrastructure.

- According to the survey conducted to 13 relevant personnels from Hanoi Board of Health and 52 persons from St. Paul Hospital, the number of respondents who gave positive answers to the question on the correspondence between the Project and the health sector policy of the Vietnamese Government reached upto 92% (12 out of 13) and 100% (52 out of 52) respectively. This implies that most people are giving favorable considerations to the Project.
- The Project is correspondent to KOICA's health sector policy and country partnership strategy.
  - KOICA's health sector policy aims for strengthening healthcare system mainly through the provision of healthcare service, healthcare labor force, information, equipments, medicines, finance and governance. The policy's specific plan of implementation are construction and expansion of health and medical facilities, provision of medical equipments, specialist disptach and invited trainings.
  - Health is one of the 5 main sectors mentioned in the country partnership strategy to Vietnam. The relevant objectives to the Project would be social development, poverty reduction, policy reform and capacity building. These objectives are relevant to the overall aid purpose of social and economic development as well.
- The direction of the Project falls short in terms of harmony with the development policies of other aid agencies.
  - According to the literature investigation and the results from local interviews, most of the aid agencies choose small to medium sized cities as the target area, and the poorest strata or socially disadvantaged class as the target group.


- The Project, however, is basically directed to improve the quality of healthcare service for the citizens of Hanoi; and its target group is more general rather than being focused on the poor strata or socially disadvantaged class.
- Also, considering that the Project was first designed upon the request from the Vietnamese Government, and that it has continued since 1995, the Project seems to be a Stand Alone project which lacks effort for programmatic approach and for a balance with other donor agencies.
- Relevance of target group, region and beneficiaries
  - Due to the Vietnamese Government's privatization policy of health sector, private health institutions have increased in number while the government support for public health service has decreased. Consequently, the quality of public healthcare service has deteriorated and the household expenditure for healthcare services has increased.
  - For an improvement of the efficiency in health sector and for a balance between public and private health services, the Vietnamese Government tried to achieve self-reliance of the public health sector. Through an additional support to the Korea-Vietnam Friendship Hospital, the government aimed to enhance the quality its healthcare service as well as to increase the revenue of the hospital. The government then planned to utilize the revenue for the purchase of medical equipments and building maintenance of St. Paul Hospital, which is a medical institution and a health policy-making institution at the same time.
  - Hence the Korea-Vietnam Friendship Hospital aims to benefit all citizens of Hanoi, thereby contributing to the improvement of public healthcare environment by providing various outpatient services and by complementing the role of the public health institutions in Hanoi, the capital of Vietnam.



- Considering the local situation at the designing stage of the Project, it was inevitable that the Korea-Vietnam Friendship Hospital provided a high-end service for the maintenance of public health institutions. In that sense, the target group, region, and beneficiaries were relevant.
- Nonetheless, the Project's purpose and beneficiaries neither correspond to the original purpose and beneficiaries of ODA projects nor consider the gap between the health services of rural and urban areas. Also considering the health sector priorities for an achievement of MDGs, small cities in rural area would have been more relevant as the target region rather than Hanoi.
- The input, objective and goal displayed on the PDM lacked organic connections with each other, but the implementation process was harmonious.

<Image 2> Initial PDM & PDM for Evaluation

Narrative Summary			
Goal	Enhanced quality of lives and healthcare services in the target region		
Initial Outcomes	1. Improved access through outpatient clinic construction 2. Enhanced medical techniques, hospital management skills, and expanded healthcare benefits through provision of advanced medical equipments and consulting service on hospital operation		
Output	1. Expansion of outpatient clinic	2. Purchase of advanced medical equipments	3. Consulting service on hospital operation
Activities	1. Outpatient clinic construction	2. Medical equipment support	3. Hospital operation consulting service
Input	1.1 Preliminary survey and discussion 1.2 Selection and establishment of service enterprise	2.1 Provision and installment of equipments 2.2 Training on equipment utilization	3.1 Survey, data analysis, workshop, report on consulting results

<Initial PDM>  


Narrative Summary			
Goal	Improved health level of residents in the target region		
Intermediate Goals	1. Improved health of Hanoi residents through enhanced access to health and medical services 2. Better established healthcare service capacity to meet the demand in Hanoi, Vietnam		
Initial Outcomes	1. Access to health and medical services in the target region is enhanced through expansion of the outpatient clinic 2. Healthcare service capacity of the Korea-Vietnam Friendship Hospital is strengthened through provision of advanced medical equipments and hospital operation consulting service		
Output	1. Outpatient clinic is expanded	2. Health facilities are enhanced	3. Hospital operation capacity is strengthened
Activities	1. Outpatient clinic construction	2. Medical equipment support	3. Hospital operation consulting service
Input	1.1. Situation analysis on St. Paul Hospital 1.2 Investigation on conditions for hospital expansion 1.3 Design for hospital expansion 1.4 Construction	2.1 Purchase of equipments 2.2 Installation of equipments 2.3 Dispatch of specialist for equipment utilization	3.1. Invitation of trainees (persons related to hospital operation, emergency and international health sector) 3.2. Dispatch of specialist in hospital administration 3.3. Dispatch of partner doctors 3.4. Dispatch of volunteers

<PDM for Evaluation (PDMe)>

○ View on the initial PDM

- In the initial PDM, from input to the objectives are organically connected, but the gap between the objectives and the goal seem excessively wide. Hence, a consideration on an additional support for the socially disadvantaged class as well as on capacity building for healthcare service should have taken place in between the objectives and the goal.

- Moreover, improved quality of healthcare service and improved quality of lives are two different goals that are hard to be tackled in the same level. Also, as mentioned in the completion evaluation report, improving the “quality of lives” is an excessively macroscopic goal which involves not just health but other sectors like nutrition, education, and increase in income. Hence, improving the quality of lives would not be an appropriate goal for the Project, the main component for which is rather an enhancement of health infrastructure.
  - Therefore, it is necessary to establish a project plan through which the healthcare service in the target region is enhanced, thereby inducing an improvement in health level of the residents of the target region.
- The new PDMe has an intermediate goal in between the goal and the objectives, amending the macroscopic goal of the initial PDM and narrowing the gap between the goal and the objectives. Also, by omitting the quality of lives, now the focus is on the linkage among infrastructure support, technical support, and improvement in health level of the residents of target region.
  - Nonetheless, all survey respondents from St. Paul Hospital said that the health service provided through the Project was highly correspondent with the local demand for health service in Hanoi, and that the Project’s implementation process was relevant. It implies that although the organic connection among input, objectives, and goals was weak, the project implementation process was harmonious.
- Presence of an appropriate process to reflect the opinions of the recipient country and the beneficiaries
  - Looking at the preliminary investigation and discussion, it is noticed that the Project was implemented after periodic discussions among KOICA, Hanoi Board of Health, and St. Paul Hospital, since the Project’s target institution is on the top priority among the public hospitals in Hanoi, the local needs

were grasped through a field research, and the direction of the Project was determined with a reflection of the recipient government's opinions.

- However, considering that the beneficiaries of the Project are the local and foreign residents of Hanoi, a mutual communication channel was necessary, but was never established.



## 2. Efficiency

- Construction approval was little delayed, but other components were implemented within the planned timeframe. The expenditure exceeded the planned budget by USD300,000 due to cost increases in construction and technology transfer.
  - After signing the Record of Discussion, the Project was delayed by about a year due to complicated construction approval process. However, the actual construction and equipment provision were completed within the planned timeframe and in conformity with the floor plan.<sup>2)</sup>
  - In the stage of execution planning, the budget increased from USD 1 Million to USD 1.3 Million. This is rooted in the cost increase in construction and in hospital consulting capacity.<sup>3)</sup>
- The PMC and the CM mentioned that the preliminary investigation, design, construction, change-over, and construction expenditure were injected in a timely manner.

---

2) Interview with the local CM of Posililama

3) KOICA (2011) 3<sup>rd</sup> Phase Project for Upgrading the Korea-Vietnam Friendship Hospital Completion Evaluation Report

- The construction of new 4-storey building and the installation of advanced equipments were done in relatively lower costs due to the margin from difference in exchange rate.
- The medical equipments were supported after KOICA and St. Paul Hospital jointly examining the list of equipments requested by the Vietnamese Government.
- Hospital operation consulting service was done in 2 different forms of invited training and specialist dispatch. Seeing the strong will of the Vietnamese Government on the improvement of healthcare system, the consulting service focused mainly on the capacity building of hospital operations.
- An effective mediation and communication channel was established among the stakeholders.
  - During the implementation period, Posilama and KOICA gathered once or twice every week; and the CM visited the target area every month to well-manage the construction process.
  - Also, as 2 specialists from the PMC were dispatched for 1 month for the management of the Project, the communication among KOICA, PMC, CM, and the local implementer was quite smooth.
  - 94% of the survey respondents from St. Paul Hospital gave a positive answer to the question asking “Were the role allocation and communication system among KOICA, PMC, and other stakeholders efficient?” Hence, the recipient country seems to have a positive perception on the efficiency of the communication system as well.

- Structural constraints to the efficiency are as follows:
  - In the preliminary investigation and discussion, KOICA failed to grasp and take actions for lengthy process for construction approval. Consequently, the initial PDM included pre-conditions that the recipient government fulfills its offer to provide land, and that there would be an additional cooperation from the recipient government on budget and labor force.
  - Administrative support and document provision from the Vietnamese Government did not work smoothly, and thus, the demolition of the old building was delayed for a year while no appropriate solution was found.
  - The two countries had enough time to communicate; however, lack of understanding on the administrative regulations of Vietnam hindered proper action to take place.
- The linkage with the 1<sup>st</sup> and 2<sup>nd</sup> phase projects was efficient.
  - The Project is a representative case among the KOICA projects targeted at Vietnam in terms of sustainability of impact.
  - The Project had supported the biggest public hospital in Hanoi, St. Paul Hospital, for more than 10 years. Over 3 project phases, the Project dealt with the demand for healthcare service in Hanoi, which had increased rapidly with the urbanization of the region.

Classification	1st Phase	2nd Phase	3rd Phase
Period	1995-1996	1998-2000	2005-2006
Scale	250,000 USD	250,000 USD	1,300,000 USD
Content	Equipment provision, invited training program	Equipment provision, invited training program, doctors/nurses dispatch	Reconstruction (4 floors on ground, 1 floor underground), equipment provision, hospital operation consulting service
Operating Status	Ex-post management is still ongoing through a dispatch of cooperative doctors (physician, dentist, oriental doctor)		

Source : KOICA Vietnam Office (2012) Evaluation on Health Sector Projects in Vietnam

- The previous phases were implemented with the purpose of maximizing the access to healthcare services through a modernization of local health facilities. In addition to such a purpose, the 3rd phase project involved an hardware factor such as the reconstruction of the hospital as well as a technical assistance factor such as the hospital operation consulting service.



### 3. Effectiveness

#### (1) Conformity of the output to the initial plan

- The Project expanded quality health service to the local and foreign residents of Hanoi through reconstruction of the Korea-Vietnam Friendship Hospital, provision of advanced medical facilities, invited training program, and dispatch of specialists.
  - **[Construction]** The actual construction was nearly identical to the blueprint. However, some parts of the building are now being used for a different purpose, and there were some cases where the blueprint was not drawn properly.
  - **[Equipments]** The medical equipments provided were overall helpful in 2007, but as time has passed, most of the equipments are now outdated that they are no longer used in the hospital.
  - **[Technical Assistance-Specialist Dispatch]** Consulting on solutions to improve public hospital management efficiency of Vietnam<sup>4)</sup> was provided to

---

4) Budget reduction of the Vietnamese Government deteriorated the financial status of local hospitals, so St. Paul Hospital established a plan to utilize the new building as an international medical center, thereby increasing the revenue of the hospital.

relevant persons from the Korea-Vietnam Friendship Hospital; and consulting on hospital operation was provided to St. Paul Hospital and Hanoi Board of Health.

- **[Technical Assistance-Invited Training]** The invited training program was implemented in two types: 1) “emergency and international medical treatment training” for 2 doctors from St. Paul Hospital, and 2) “hospital management training program” for 1 health policy department employee and 2 hospital managers from St. Paul Hospital. The invited trainees then provided additional training to the indirect beneficiaries with specialized contents on hospital administration, making a positive contribution on the improvement of overall administration of the hospital.
- The limitations of the training program were as follows:
  - The training programs were not notified in advance
  - Time constraint
  - The program was general, not divided in to specialized departments
  - The contents of the program are yet to be applied due to the situational gap between Vietnam and Korea

(2) Were the initial outcomes achieved through the Project?

- According to the revised PDMe, the degree to which the initial outcomes were achieved are as follows:

<Table 2> Project Summary - PDMe

Narrative Summary	
Goal	Improved health level of residents in the target region
Intermediate Goals	1. Improved health of Hanoi residents through enhanced access to health and medical services 2. Better established healthcare service capacity to meet the demand in Hanoi, Vietnam



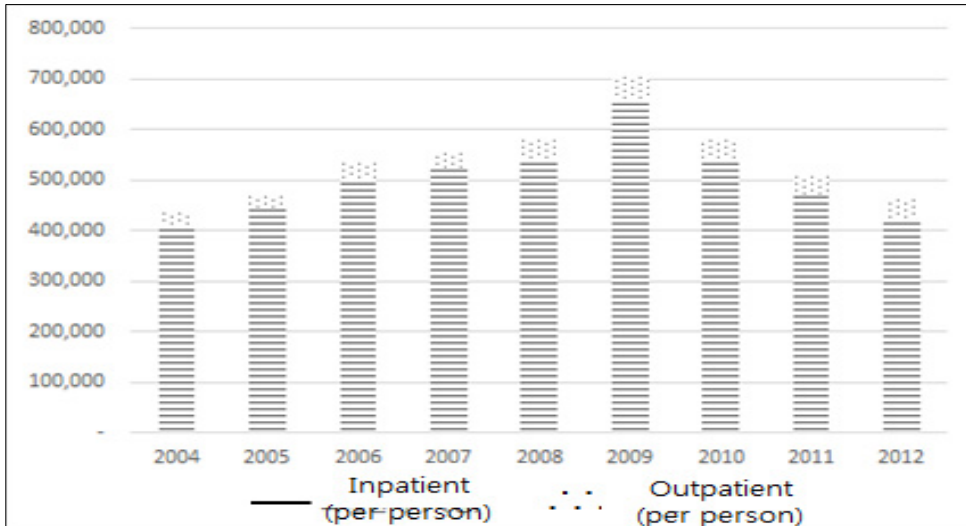
Initial Outcomes	1. Access to health and medical services in the target region is enhanced through expansion of the outpatient clinic 2. Healthcare service capacity of the Korea-Vietnam Friendship Hospital is strengthened through provision of advanced medical equipments and hospital operation consulting service		
Output	1. Outpatient clinic is expanded	2. Health facilities are enhanced	3. Hospital operation capacity is strengthened
Activities	1. Outpatient clinic construction	2. Medical equipment support	3. Hospital operation consulting service
Input	1.1. Situation analysis on St. Paul Hospital 1.2 Investigation on conditions for hospital expansion 1.3 Design for hospital expansion 1.4 Construction	2.1 Purchase of equipments 2.2 Installation of equipments 2.3 Dispatch of specialist for equipment utilization	3.1. Invitation of trainees (persons related to hospital operation, emergency and international health sector) 3.2. Dispatch of specialist in hospital administration 3.3. Dispatch of partner doctors 3.4. Dispatch of volunteers

□ Access to health and medical services in the target region is enhanced through expansion of the outpatient clinic.<sup>5)</sup>

○ According to the statistical data provided by St. Paul Hospital, the number of patients had rapidly increased right after the termination of the Project, and is gradually decreasing as time passes.

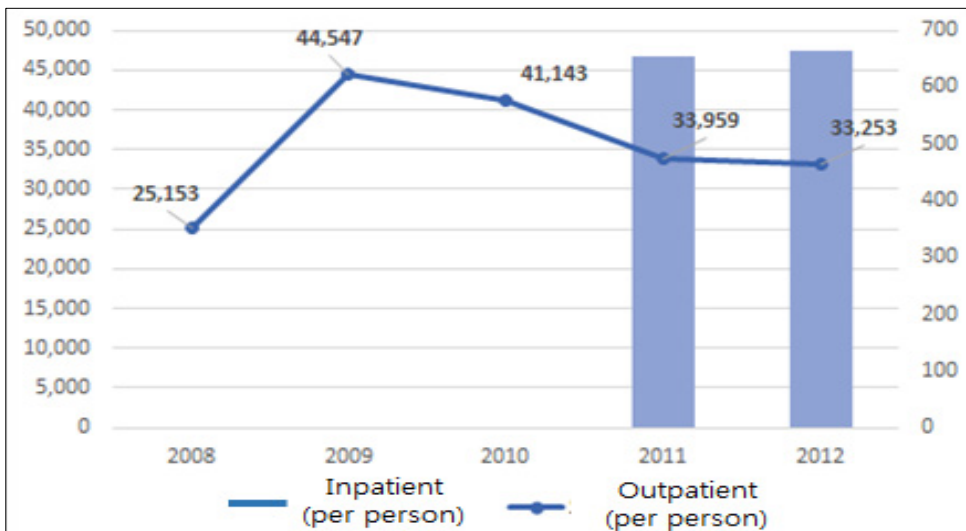
<sup>5)</sup> Established based on the statistical data provided by St. Paul Hospital.

<Image 3> Change in the number of outpatients and inpatients of St. Paul Hospital



Source : Reconstituted based on St. Paul Hospital's statistical data

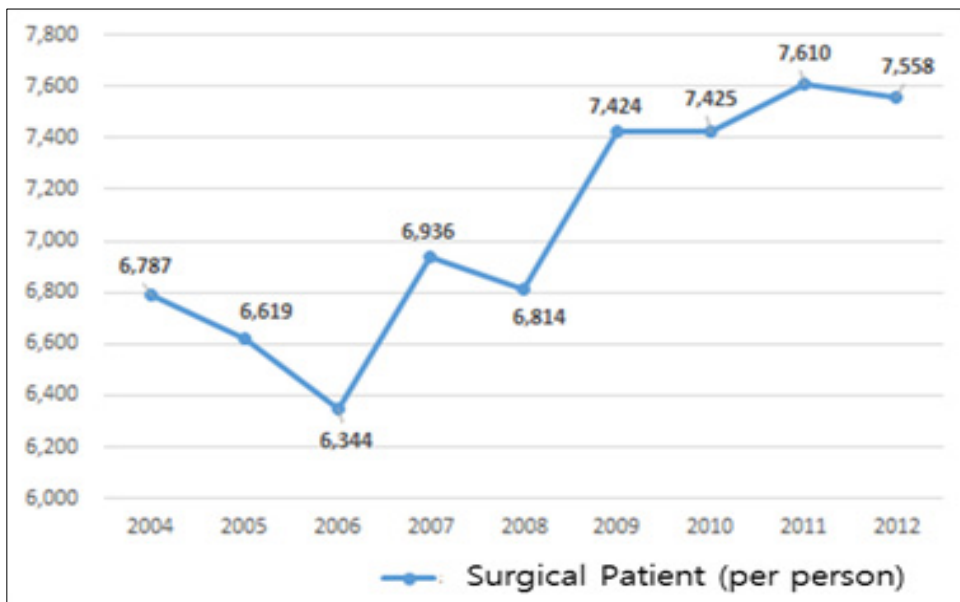
<Image 4> Change in the number of outpatients of Korea-Vietnam Friendship Hospital



Source : Reconstituted based on St. Paul Hospital's statistical data

- The number of outpatients of Korea-Vietnam Friendship Hospital had also recorded an increase of 20,000 from 2008 to 2009, but is gradually decreasing since 2010.
- A possible cause of the decrease would be a deterioration of medical facilities and equipments, downgrading the quality of health service of the hospital.

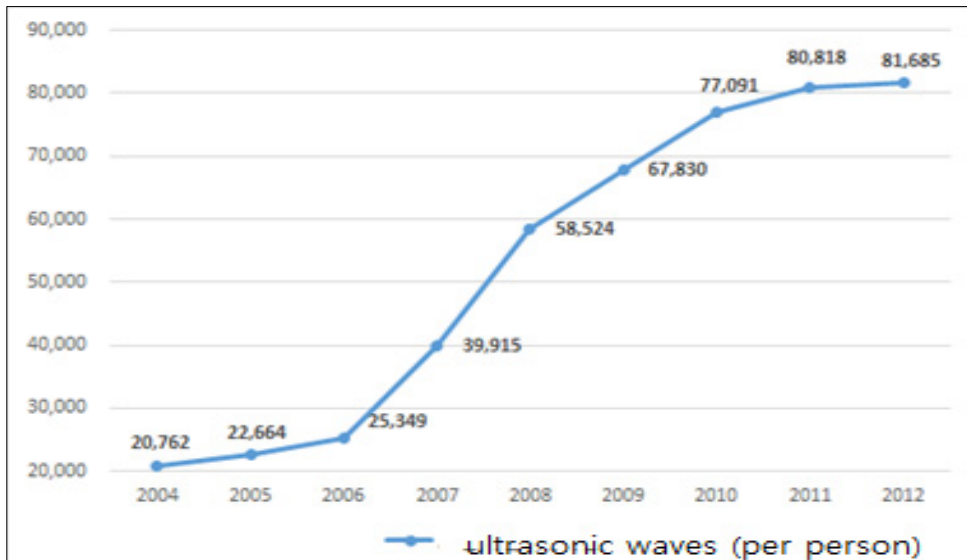
<Image 5> Change in the number of surgical patients of St. Paul Hospital



Source : Reconstituted based on St. Paul Hospital's statistical data

- The number of surgical patients had sharply increased since 2008, and had stayed constant between 2009 to 2012.

<Image 6> Change in the number of patients diagnosed with ultrasonic waves in St.Paul Hospital



Source : Reconstituted based on St. Paul Hospital's statistical data

- The number of patients diagnosed with ultrasonic waves has also increased rapidly, implying that the access to health services has been maximized,
- The results of the survey with the patients of Korea-Vietnam Friendship Hospital are as follows:<sup>6)</sup>
  - **[Purpose of Visit]** The patients' main purposes of visit were medical treatment and consultation.
  - **[Expected Service]** The major roles expected to Korea-Vietnam Friendship Hospital are provision of general medical service, and specialized treatment for specific diseases.
  - **[Positive View]** The views of the patients were overall positive on factors such as convenience of access to health services, cleanliness of the hospital, information on the health services provided, and attitude of the hospital staff.

6) The results are from the survey conducted on July 23, 2013 to 36 Vietnamese patients and 19 foreign patients (including Koreans) using the Korea-Vietnam Friendship Hospital.

- **[Negative View]** The main difficulties that the patients experience are the long waiting time after medical examination, and the absence of wanted health services. The foreign patients pinpointed on the poor medical facilities and insufficient number of medical staff as the main difficulties.
- **[Improvement Suggestions]** The respondents' suggestions for improvement were as follows: 1) Repair of and investment on the facilities (ex. improvement of hygiene facilities, installation of solitary patient rooms, and purchase of advanced medical equipments) 2) Improvement on the attitudes of few unkind staff 3) Improvement on the payment plan 4) Increase in medicine holding amount 5) Prompt business processing 6) Daily change of bed sheets and blankets.
- According to the director of Korea-Vietnam Friendship Hospital, the reasons why the patients' level of satisfaction is high are because the hospital is a newly built facility compared to the old buildings of St. Paul Hospital, and the capacities of the medical staff are superior to the ones working in the Vietnam-Singapore and Vietnam-France Hospitals located in the same region.

□ Healthcare service capacity of the Korea-Vietnam Friendship Hospital is strengthened through provision of advanced medical equipments and hospital operation consulting service.

○ As of the termination of the Project, more advanced medical services were made available. Also, contributions to capacity building are still being made through a continued relationship between the dispatched doctors and the local doctors.

○ Nonetheless, 7 years have passed since the termination of the Project, so the medical facilities and equipments provided are now outdated and are of little use.

- The main factors for improvement are the confined hospital site which gets too crowded when there are many patients, and the deterioration of the quality of services due to depreciation of equipments and increase in the demand of the

patients.

- Most of the respondents of the survey pointed at the enhancement of medical facilities as the main suggestion for improvement.
- It was found that the hospital is purchasing some of the necessary equipments using the internal budget of the Vietnamese Government or the financial aid from other aid agencies.



#### 4. Impact

- Degree of contribution to quantitative/qualitative improvement of health and medical services in the target region
  - The respondents of the survey gave positive views that the Project contributed to strengthening the health system of the target region.

<Table 4> Korea-Vietnam Hospital's degree of contribution to quantitative/qualitative improvement of health service

Question	Government Officials	Hospital Staff	Patients
Did the project make a positive impact on the improvement of health and medical environment of Hanoi?	100% (13/13)	96% (50/52)	80% (44/55)
Do you think the Project enhanced the access to medical services in the Vietnamese society?	92% (12/13)	94% (49/52)	N/A
Do you think the health of the residents of Hanoi has improved?	N/A	91% (48/52)	73% (40/55)

○ Health capacity building

- The establishment of Korea-Vietnam Friendship Hospital made a positive impact to Hanoi Board of Health both quantitatively and qualitatively.
- The increase in the number of foreign patients (including Koreans) and the increase in the revenue of the hospital made a positive impact to the finance of Hanoi Board of Health.
- An active exchange of specialists between Korea and Vietnam also made a positive impact in terms of capacity building, improving the quality of health services.
- According to a person from the Vietnamese Ministry of Health, a capacity building is critical at the moment for an improvement of overall health environment of Vietnam. Hence, he emphasized on the necessity of additional support from Korea.

□ Impact to indirect and potential beneficiaries

- The price level of the health services provided in Korea-Vietnam Friendship Hospital is little too high for the poor people. Hence, it is difficult for the poor people to use the hospital's services. However, the staff of St. Paul Hospital explained that a part of the hospital's revenue is utilized to support the poor people. In such a way, the hospital is making an indirect contribution to the improvement of the poor people's health in the region.
- Nonetheless, it is hard to conclude that the hospital has contributed to the improvement of overall quality of lives of the residents of the target region.

□ Contribution to improvement of Korea's national reputation

- Unlike other institutions, 1) St. Paul Hospital posts a notice of being built with a support from the Korean Government on its main entrance. Thus, it positively affects the national reputation of Korea in the region. 2) A continuous support and dispatch of cooperative doctors over 3 project

phases 3) Medical support to the Vietnam veterans (joint support from Korea-Vietnam Friendship Hospital and KOICA)

- To the question, “Does the Project carry an important role in promoting friendship between Korea and Vietnam?”, 100% (13 out of 13) of the Hanoi government officials, 98% (51 out of 52) of the St. Paul Hospital staff, and 76% (42 out of 55) of the patients gave positive answers.



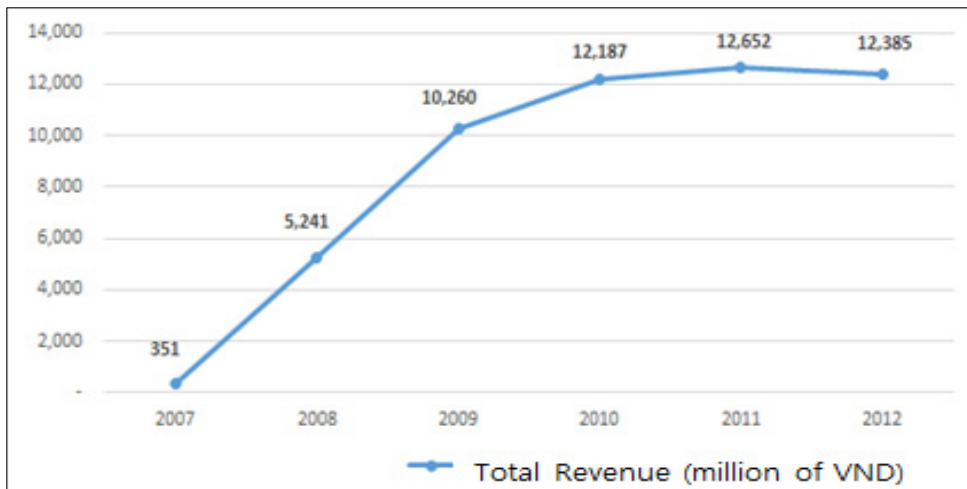
## 5. Sustainability

- Based on the survey on the hospital staff, though St. Paul Hospital can continue to operate Korea-Vietnam Friendship Hospital, it has no strategy to financially support and maintain the Project. It is also doubtful whether the Vietnamese Government has a capacity to financially support the Project.
- According to a person from St. Paul Hospital, Korea-Vietnam Friendship Hospital is operated on the policies of St. Paul Hospital. Moreover, 100% of the survey respondents from both hospitals made positive evaluations on the sustainability of Korea-Vietnam Friendship Hospital.
- Based on the interviews, however, St. Paul Hospital’s management masterplan to 2015 does not include any plan related to Korea-Vietnam Friendship Hospital. Also, Korea-Vietnam Friendship Hospital neither has an independent development strategy nor a specific development strategy.
- The overall condition of Korea-Vietnam Friendship Hospital is relatively favorable compared to other public hospitals. Thus, it is at a low priority of the support plans of Hanoi Board of Health.



- St. Paul Hospital, therefore, can hardly request for a financial support for Korea-Vietnam Friendship Hospital to Hanoi Board of Health. (No financial support from Hanoi Board of Health to Korea-Vietnam Friendship Hospital for the past 7 years 2007-2013)

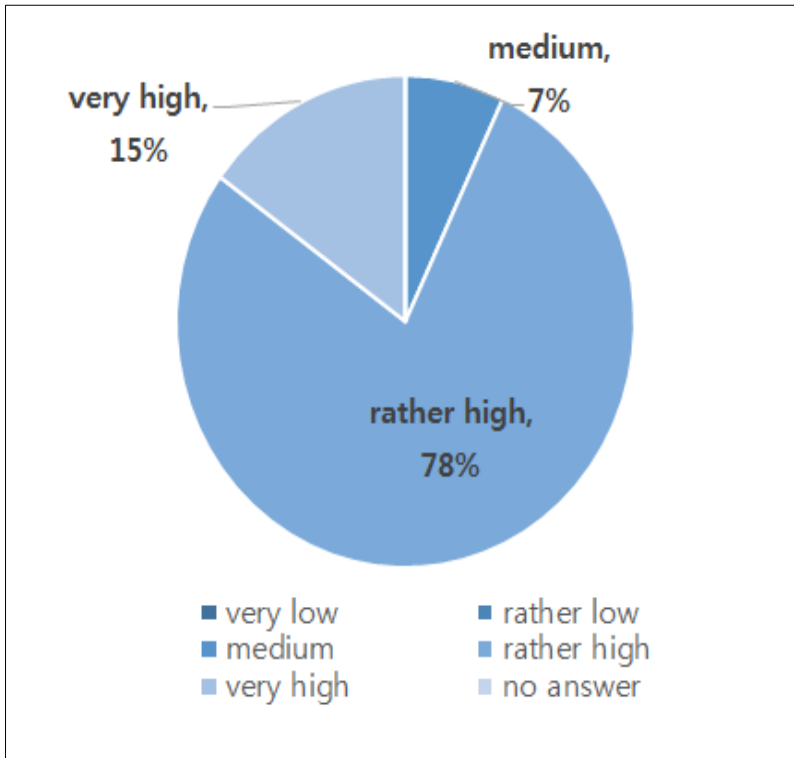
〈Image 7〉 Total Revenue of Korea–Vietnam Friendship Hospital



Source : Reconstituted based on St. Paul Hospital’s statistical data

- According to an interview, the revenue of Korea-Vietnam Friendship Hospital is continuously increasing (refer to Image 7), and a significant portion of the revenue is used for the maintenance of St. Paul Hospital. It implies that the revenue of Korea-Vietnam Friendship Hospital cannot be fully invested to support the management of the hospital itself.

<Image 8> Does St. Paul Hospital have a long-term plan/policy/financial support plan for the development of Korea-Vietnam Friendship Hospital?



Note. The survey was conducted to 39 St. Paul Hospital staff, and 13 Korea-Vietnam Friendship Hospital staff.

- The majority of the respondents said that there are plan, policy, or financial support plans for Korea-Vietnam Friendship Hospital. However, according to the interview with a person from St. Paul Hospital, the plan is to request for an aid from Korea or other donor countries when additional financial support is needed.
- Thus, it seems that St. Paul Hospital will manage its finance and policies for Korea-Vietnam Friendship Hospital based on the external support rather than on an internal source.

- St. Paul Hospital lacks an institutional support strategies for the maintenance of the Project, but has a minimum capacity for maintenance.
  - St, Paul Hospital has a masterplan to 2015, but it does not include any plans related to Korea-Vietnam Friendship Hospital.
    - Absence of ① Future management plans for Korea-Vietnam Friendship Hospital, ② Preparation for termination of support from KOICA including a dispatch of cooperative doctors, ③ Action plans for equipment depreciation and other constraint factors, ④ Capacity building programs for hospital staff
  - According to the Vietnamese Ministry of Health, Hanoi Board of Health, and St. Paul Hospital staff, they are going to establish future plans by the termination of KOICA's dispatch of cooperative doctors.
  - The facts that the Vietnamese Government established masterplans for each public hospitals, that supported equipments are repaired and maintained locally, and that invited trainees have conducted reeducation to the non-participants of the training program, imply that the local institutions have at least a minimum capacity to build a masterplan and continue to manage Korea-Vietnam Friendship Hospital in the future.
- Strategies for the maintenance of the supported facilities are absent, but capacities to repair and maintain the equipments are present.
  - Appropriate strategies for the maintenance of the supported facilities are absent.
    - 7 years have passed since the construction of Korea-Vietnam Friendship Hospital, so number of areas are currently in need of renovation. St. Paul Hospital, however, is not willing to renovate the facilities by itself, but rather wants KOICA's help for the renovation.
  - Appropriate strategies for the maintenance of the equipments are absent, but a local capacity for the maintenance is present.

- Some of the manufacturers of the supported equipments have offices in Vietnam, so they introduced the way of using some of the equipments and provided spare parts for the equipments.
  - The hospital sometimes showed an active attitude for the maintenance of equipments such as expanding the capacity of an emergency generator.
  - However, to strengthen the sustainability of Korea-Vietnam Friendship Hospital, a continued effort for maintenance is critical.
- It is hard to say that the Vietnamese Government has a plan for a completely independent development of the Project.
- St. Paul Hospital has a macroscopic plan for a long-term development of Korea-Vietnam Friendship Hospital, but has no specific implementation plans.
  - A possible reason for the absence of specific plans would be a difficulty in securing necessary financial source for the implementation of each specific plan.
  - To secure the financial source, St. Paul Hospital is desiring for an assistance from the international society rather than from a cooperation with the local civil society and local businesses.



## 6. Cross-cutting Issue

### 1) Gender Mainstreaming

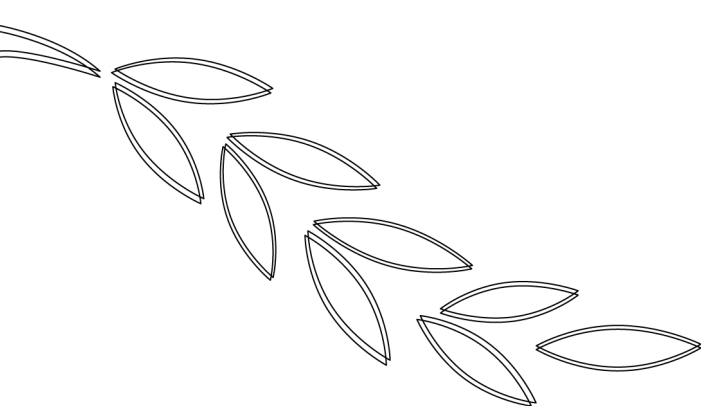
- Strategies for gender mainstreaming were not established in the project designing stage. However, the working environment of Vietnam seems to provide an appropriate condition for women to work in.
- The project has no direct impact on gender mainstreaming. However, Vietnam is claiming itself to be a socialist country, so it stresses on the considerations for women in terms of positions and working environment.
  - The proportion of female staff in St. Paul Hospital is as high as 70-80%. Based on the regulations of the Vietnamese Ministry of Labor, these female staff are benefitted with 1) No nighttime work for pregnant women, 2) No nighttime work for 1 year since giving birth, 3) Late clock in, and early clock out for nursing and feeding their babies.

### 2) Environmental Impact

- A person in charge from the hospital said that the medical wastes are well handled, and some of the wastes are recycled for other purposes. However, it is observed that the wastes are not separately collected.
- According to a staff of St. Paul Hospital, the hospital provides a manual for the handling of medical wastes, and conducts training on medical waste collection and pollution prevention.
- Based on our observation, however, the wastes in Korea-Vietnam Friendship Hospital are not separately collected, but rather collected and disposed all together.

- Environmental problems were observed within Korea-Vietnam Friendship Hospital.
  - To the survey question, “were there any anti-environmental behavior possibly causing environmental pollution in the process of hospital expansion?”, 31% (4 out of 13) of the respondents from Hanoi Board of Health answered “Yes”; and 37% (19 out of 52) of the respondents from Korea-Vietnam Friendship Hospital answered “Yes”, implying that there were issues regarding environmental pollution to a certain degree.
  - A construction of passage between Korea-Vietnam Friendship Hospital and St. Paul Hospital is currently ongoing, but the construction site is only covered with a tent that the patients might be exposed to noise and dusts.
  - Another environmental issue observed was that the staff gowns, a refrigerator, and a drinking water container were placed inside the X-ray room in the dentist clinic. There is a danger of radioactive contamination; thus, a staff training on the issue would be necessary.





## IV. Conclusion and Recommendation

1. Main evaluation results and lessons
2. Project-related recommendations (for sector/country)
3. Policy Recommendation





1. Main evaluation results and lessons

- The overall evaluation results of the Project are (3 is the perfect score): 2 for Relevance, 3 for Efficiency, 2 for Effectiveness and Impact, and 2 for Sustainability. In total, the Project scored 9 out of 12, evaluated to be a “successful” project.
- Nonetheless, the Project does not correspond to the original nature of ODA in some points that it lacks consideration for the poor and socially disadvantaged class, that relatively richer people are mainly using the hospital, and that the Project was implemented in a big city instead of a remote area. Thus, when designing similar projects in the future, there needs to be a careful consideration on these issues.
- The facility of Korea-Vietnam Friendship Hospital is no constraint to the works of the hospital. However, the building was not constructed by a hospital construction specialist, so it lacks specialty in some parts. (ex. joint between the wall and the floor, automatic door in the entrance of the operating room)
- The reason why the sustainability of the Project is relatively weak is because the recipient country set low priority to the Project with regards to financial support. It is still possible to strengthen the sustainability of the Project through ex-post maintenance with relevant technical assistance.



## **2. Project-related recommendations (for sector/country)**

- Vietnam has a national development strategy and a sectoral strategy; it is also one of the countries with highest aid efficiency. Hence, a programmatic project with a comprehensive consideration on policy makers, hospital staff, direct and indirect beneficiaries could be implemented.
- To improve effectiveness and sustainability an additional support is needed with regards to capacity building and equipment provision.
  - First, according to the evaluation results, the impact of capacity building programs is not limited only to the direct participants, but rather spilled over to the indirect beneficiaries. This is because the contents of capacity building programs are shared through various means such as internal workshops.
  - Second, a unanimous opinion of the government personnel, the hospital staff, and the patients was that the old equipments largely deteriorate the quality of the health services, so an urgent action is required. Thus, appropriate medical equipments should be provided replacing the old ones, and a training on the utilization of the provided equipments should be conducted in order to improve the Project's effectiveness and sustainability.
- It would be highly effective to conduct additional training sessions for capacity building on hospital administration, such as building a database on patient information.
  - Vietnamese hospitals generally do not hold on to the patient information, but rather the patients bring their own record of treatment when they visit the hospitals.
  - When the record of treatment is carried by the patients themselves, there

is a higher risk of losing the record, thereby increasing a risk of misdiagnosis. This would then deteriorate the effectiveness in terms of time and cost.

- Hence, it would be highly effective to conduct additional training sessions for capacity building on hospital administration, such as building a database on patient information.



### **3. Policy Recommendation**

- As a prerequisite for ODA projects in health sector, selecting a relevant target region and group would be of utmost importance. The nature of the project should be well examined to select a relevant counterpart.
- Due to its rapid socioeconomic development, Vietnam is currently suffering from some side effects such as an enlarging gap between the rural and urban areas, and an increasing poverty rate in the city. Hence, a figuring out the project, target area, and target group with the highest demand is highly important.
- According to the literary investigations and interviews, other donors including ADB, Germany, and Japan give higher regard to maintaining good relationships with the regional government rather than the central government. This is because regional governments tend to display higher efficiency than the central government due to 1) simplified administrative procedures for ODA projects, 2) higher effectiveness and efficiency of ODA projects in smaller cities, and 3) higher demand and more active cooperation for ODA projects.

- Therefore, the nature of the project should be well examined to select a relevant counterpart.
- To improve the project's sustainability, the recipient country (i.e. health administrator and healthcare providers) should be encouraged to participate from as early as the designing stage of the project.
- Strategies to strengthen the software factors such as human capacity building and health system improvement are more desirable than to support the hardware factors such as hospital constructions. Also, a maternal and child health project should be implemented considering the enlarging gap of rural and urban areas' access to antenatal care system in Vietnam.
- The evaluation team recommends the implementation of 1) capacity building project for Vietnam's healthcare providers, and 2) maternal and child health project which display larger ripple effects.
- Capacity building project for Vietnam's healthcare providers
  - An access to health services has improved in Vietnam, due to its rapid economic growth. Hence, the demand for healthcare providers is soaring, but the supply is not meeting the demand. A regional disparity of healthcare providers is increasing as the rural areas tend to have more untrained labor force than the urban areas.
  - The Vietnamese Minister of Health and Social Affairs said that the government has a plan to increase its supply of doctors, but the country is suffering from both qualitative and quantitative shortage of doctors at the moment. Thus, both qualitative and quantitative capacity building programs for healthcare providers is needed.
  - Moreover, many hospitals have been recently constructed upon a partnership with the regional governments. Most of the hospitals have advanced facilities, but lack qualified doctors. Hence, it is desired that Korea provides a comprehensive assistance comprising of capacity building, equipment provision, specialist dispatch, invited training, and scholarship provision in the future.

- Maternal and child health project in Vietnam
  - A maternal and child health project is highly effective in reducing the social cost, as it is directly relevant to the health and survival of mothers and infants.
  - The maternal and child health indicators of Vietnam are rapidly improving, recording a faster improvement rate than the regional average of Asia since 2011.
  - Maternal and child health, however, is closely related to HIV/AIDs, which is an emerging social problem. Also, antenatal care system tend to have a gap between the rural and urban areas, implying a regional disparity in maternal and child health.
  
- When designing a health projects in the future, a careful consideration of the environmental problems should be included. The overall plan must be safe and must include a strategy to minimize environmental pollution.
  
- A law on medical wastes management was implemented in 2012. However, 350-400 tons of medical wastes are discharged daily, and wastes are not collected and recycled appropriately. Also, only 44% of Vietnamese health institutions were found to have a disposal facility for medical waste water.<sup>7)</sup>
  
- It is predicted that medical wastes will double by 2015, so future health projects should be designed and implemented with a consideration on the environmental problems related to medical wastes.

---

7) Vietnam News (May 30, 2012)



---

**Ex-post Evaluation Report on the 3th Phase of the Project for Upgrading  
the Korea-Vietnam Friendship Clinic in Hanoi**

---

Copyright © 2013 by KOICA

Published by the Korea International Cooperation Agency (KOICA)

825 Daewangpangyo-ro, Sujeong-gu, Seongnam-si,

Gyeonggi-do, Korea 461-833

C.P.O Box 2545

Tel: 82-31-740-0114, Fax: 82-31-740-0693

Website: <http://www.koica.go.kr>

ISBN : 978-89-6469-221-9 93320