

Third Party Evaluator's Opinion on Rural Health Infrastructure Strengthening Project

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Criteria -1 Relevance

The Project aimed to provide necessary medical equipments for regional and provincial hospitals. Needless to say, these regional and provincial hospitals have heavy responsibilities to provide secondary and tertiary care to the population in the province and region. Many patients that could not be treated by community hospitals or private clinics will normally be referred to these regional and provincial hospitals. Therefore, the ability to provide tertiary care to the population is imperative and essential for life savings of people in the province. Strengthening of rural health services by improving the ability of provincial health services was emphasized and seen in all national health development plans. However, there were never enough budget to carry out the plan. These hospitals usually lack of advanced and modern medical equipments. Therefore, provision of necessary equipments to support tertiary care and intensive care services such as radiation equipments, endoscopy, ophthalmology equipments, laboratory equipments, dialysis equipments are considered as high priority for improvement of hospital services. Moreover, since many of regional and provincial hospitals were assigned to be teaching hospitals for medical students and medical residency training program, improvement of medical equipments will help for medical education too. The project is considered to be very relevance to the need of the people as well as to the need of the country.

Criteria 4 Impacts

The project was originally planned to procure medical equipment during January 1997-December 1998. The medical equipments were planned to be distributed to the hospital during January 1997 – December 1998. However, due to certain circumstances, the project was implemented during February 1999 to August 2002. Procurement of equipments was done during January 1999- December 2000 and distributed to the hospitals during May 2000-December 2001 this resulted in the delay of the project for almost 4 years. However, the delay of the project turned out to produce more positive impacts to the provincial hospitals rather than execution during the year 1997-1998. Because since the year 2000, it has been the period that the Thai health cares delivery system had undergone drastic change for both health care accessibility and hospital finance. Before the year 2000, about 12 % of people had access to provincial hospital services through government health insurance and social insurance. However, since the year 2000 to the present , almost 100 % of the Thai population have access to provincial hospitals through the combination of government health insurance, social insurance and the national health insurance (the 30 bath for treatment of every diseases initiated by Thaksin cabinet). The 30 Baht Project had accelerated the utilization of provincial hospital services. However, the provincial hospital had to face much of budget constraints due to the new budget allocation system (allocation of budget based on the number of registered patients rather than on the request basis as in the previous years). With the increased utilization and budget constraint starting from the year 2000, it is very unlikely that any provincial hospital would be able to invest for new and modern medical equipments. Therefore, it was conceived that the provision of modern medical equipments to provincial hospital during May 2000 to December 2001 where most hospitals were in difficult situations were very necessary to the hospitals. The provision of new medical equipment to provincial hospital during this period had helped a lot for provision of good medical services to the people in the region. It also facilitated the learning of medical students and medical residents who took their training at those hospitals. It is considered that the project has positive impact to both the hospitals and the people in the region.