

**MINUTES OF MEETINGS
BETWEEN
JAPAN INTERNATIONAL COOPERATION AGENCY
AND
NATIONAL INSTITUTE FOR EMERGENCY MEDICINE
AND
MINISTRY OF PUBLIC HEALTH
FOR AMENDMENT OF THE RECORD OF DISCUSSIONS
ON
PROJECT FOR STRENGTHENING THE ASEAN REGIONAL CAPACITY ON
DISASTER HEALTH MANAGEMENT**

The Japan International Cooperation Agency (hereinafter referred to as "JICA") and National Institute for Emergency Medicine (hereinafter referred to as "NIEM") and the Ministry of Public Health (hereinafter referred to as MOPH) hereby agree that the Record of Discussions (hereinafter referred to as the R/D) on Project for Strengthening the ASEAN Regional Capacity on Disaster Health Management (hereinafter referred to as "the Project") signed on 19 February, 2016 and the Minutes of Meetings (hereinafter referred to as the MM) for the amendment of the R/D signed on 30 August, 2017, will be amended again as follows;

1. The article II-8 in the R/D: Duration

Before	Amended Version
The duration of the Project will be three (3) years from the first arrival of JICA expert(s) in Thailand	The duration of the Project will be extended until the end of March, 2021
Reason: In accordance with the recommendation based on the Project evaluation and discussions in the 3 rd JCC and the 4 th RCC, the three parties in this MM have agreed to extend the cooperation period until the Plan of Action(POA) to operationalize the ASEAN Leaders' Declaration on Disaster Health Management (ALD DHM,) which was adopted on the occasion of the 31 st ASEAN Summit in Philippines on 13 Nov. 2017, is approved and the main Mechanism of the POA can start and get its actual activities on track so that the Project can ensure the Impact and Sustainability.	

2. The article II-4 in the R/D. Activities

Before	Amended Version
1-1 Regional coordination meetings are organized every year to share the progress and discuss the direction of the Project. 2-1 Develop and prepare the program of the regional collaboration drill with project working group	Besides the activities mentioned in the left box, the following activities will be added. 1-2 Discuss on the Work Plan of the POA and the part of disaster health management under next Work Program 2021-2025 for Health Cluster 2

<p>2-2 Conduct the regional collaboration drill every year in AMS</p> <p>2-3 Compile recommendations on regional collaboration on disaster health management based on the discussion and knowledge sharing through project activities</p> <p>2-4 On site practice is conducted when disaster occurs in ASEAN (if possible).</p> <p>3-1 Formulate project working groups for regional collaboration tools at the beginning of the project</p> <p>3-2 Develop a draft regional SOP and minimum requirements for disaster health management with the project working group</p> <p>3-3 Prepare databases of emergency medical teams of AMS</p> <p>3-4 Draft framework of health needs assessment in emergencies with the project working group</p> <p>4-1 Present outcomes of the Project activities at academic conferences such as JADM, APCDM and WDEM</p> <p>5-1 Prepare training plan, curriculum and materials on disaster health management and emergency medical system based on needs survey with the project working group</p> <p>5-2 Conduct trainings on disaster health management and emergency medical service for AMS</p> <p>5-3 Conduct monitoring survey and evaluation on capacity development on disaster health management in each AMS</p> <p>5-4 Conduct a study tour in Japan for AMS</p> <p>5-5 Conduct training program in Japan for the Thai counterpart personnel</p>	<p>2-5 Collect & Share Lessons Learned from responses for actual disasters in ASEAN</p> <p>3-5 Facilitate the endorsement process of all regional collaboration tools that were developed in this phase by ASEAN SOMHD or relevant ASEAN sectoral bodies</p> <p>3-6 Study on possibilities of ASEAN Collective Approaches for ASEAN-EMT</p> <p>4-2 Hold an academic seminar</p> <p>On the other hand, some of the activities in the left box have been already completed during the original project period, such as 3-2, 3-3, 3-4, 5-4, 5-5. Therefore, other additional efforts for these activities won't be necessary during the extension phase. Regarding the activity 3-1, the project working groups 1 & 2 shall be continuously organized and hold necessary meetings in the extension period.</p>
<p>Reason: In accordance with the recommendation based on the Project evaluation and discussions in the 3rd JCC and the 4th RCC, three parties in this MM have agreed to add the above activities for the Project.</p>	



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3. The article II-5 in the R/D: Input

Before (R/D and MM on 30 Aug., 2017)	Amended Version
<p>(1) Input by JICA</p> <ul style="list-style-type: none"> (a) Dispatch of Experts (b) Dispatch of Long Term Expert for ASEAN Coordination in Disaster Health Management to the Bureau of Public Health Emergency Response (c) Provision of necessary equipment (if necessary) <p>(2) Input by NIEM</p> <p>NIEM will take necessary measures to provide at its own expense:</p> <ul style="list-style-type: none"> (a) Services of NIEM's counterpart personnel and administrative personnel as referred to in II-6; (b) Suitable office space with necessary equipment; (c) Supply or replacement of machinery, equipment, instruments, vehicles, tools, spare parts and any other materials necessary for the implementation of the Project other than the equipment provided by JICA; (d) Information as well as support in obtaining medical services (e) Credentials or identification cards; (f) Available data (including maps and photographs) and information related to the project (g) Part of running expenses necessary for the implementation related to the Project, but limited to only Thai personnel which are needed for activities in Thailand (Regarding international travel, the number of Thai personnel whose cost will be covered by JICA is equivalent to other AMS); (h) Expenses necessary for transportation within Thailand of the equipment referred to in II-5(1) as well as the installation, operation and maintenance thereof; and (i) Necessary facilities to the JICA experts for the remittance as well as utilization of the funds introduced into Thailand from Japan in connection with the implementation of the Project 	<p>(1) Input by JICA</p> <ul style="list-style-type: none"> (a) Dispatch of Long Term Experts <ul style="list-style-type: none"> i. Chief Advisor ii. Project Coordinator (b) Dispatch of Short Term Experts (c) Hiring necessary project staff (d) Provision of necessary equipment (if necessary) (e) Expenses necessary for the implementation of the Project activities <p>(2) Input by NIEM</p> <p>Same as the descriptions in the left box</p> <p>(3) Input by MOPH</p> <p>The same description as the NIEM)</p>

<p>(3) Input by MOPH</p> <p>MOPH will take necessary measures to provide at its own expense:</p> <p>(a) Services of MOPH's counterpart personnel as referred to in II -6;</p> <p>(b) Suitable office space with necessary equipment for the long term expert;</p> <p>(c) Part of running expenses necessary for the implementation of the Project, but limited to only MOPH personnel;</p>	
<p>Reason: During the extension period, the project should focus more on the activities which could enhance the sustainability of the outputs by the project until now and start the preparation for the next step toward the establishment of the regional collaboration mechanism on Disaster Health Management in ASEAN. Based on the above recognition, <u>JICA decided to dispatch two long term experts and hire necessary project staff in order to strengthen the relationship with various stakeholders in Thailand and international society and then to work more flexibly for effective implementation of the above activities. JICA will also continue to dispatch short term experts for some specific works necessary for the activities during the extension period. In spite of the fact that JICA has borne the expenses necessary for the implementation of the Project activities, this was not mentioned in the R/D. Therefore, here in this MM, it was stipulated clearly. NIEM and MOPH will also consider to strengthen their contribution, especially the administrative support for the implementation of the Project.</u></p>	

4. The article II-6 in the R/D: Implementation Structure and Responsibility

Before (R/D and MM on 30 Aug., 2017)	Amended Version
<p>((1) NIEM</p> <p>(a) Project Director Secretary General, NIEM</p> <p>(b) Counterpart Personnel Counterpart Personnel of NIEM will be assigned.</p> <p>(2) MOPH</p> <p>(a) Co-Project Director Permanent Secretary, Ministry of Public health</p> <p>(b) Counterpart Personnel Counterpart Personnel of MOPH will be assigned.</p> <p>(3) Project Manager(s) Project Manager, who is responsible for overall administration and implementation of the Project, will be assigned by the Project Director and Co-Project Director, and to be informed to JICA. Also, Co-Project Manager will be assigned by the Project Director and Co-Project Director</p>	<p>(1) NIEM</p> <p>(a) Project Director Secretary General, NIEM</p> <p>(b) Project Manager The Project Manager who is responsible for overall administration and implementation of the Project will be assigned.</p> <p>(c) Counterpart Personnel (CP) Counterpart Personnel who are working with JICA experts for the implementation of the activities of the Project will be assigned by the Project Director</p> <p>(d) Administrative Personnel Administrative Personnel who are supporting CPs and JICA experts will be assigned.</p> <p>(2) MOPH</p> <p>(a) Co-Project Director Permanent Secretary, Ministry of Public health (MOPH)</p> <p>(b) Co-Project Manager</p>

<p>when necessary.</p> <p>(4) Other organizations Other organizations will be added when necessary. Also, Co-Project Manager will be selected from organizations other than NIEM and MOPH when the Project Director and the co-Project Director mutually assign.</p>	<p>The Co-Project Manager who is responsible for overall administration and implementation of the Project will be assigned.</p> <p>(b) Counterpart Personnel Counterpart Personnel who are working with JICA experts for the implementation of the activities of the Project will be assigned by the Co-Project Director</p> <p>(d) Administrative Personnel Administrative Personnel who are supporting CPs and JICA experts will be assigned.</p> <p>(4) Other organizations The Project Director and the Co-Project Director can appoint some personnel from other organizations as the CPs, if necessary.</p> <p>(5) Demarcation of Responsibilities (a) NIEM is responsible for the activities 1-1, 2-1, 2-2, 2-3, 3-1(PWG2), 4-1, 4-2, 5-1, 5-2, 5-3 (B) MOPH is responsible for the activities 1-2, 2-4, 2-5, 3-1(PWG1), 3-5, 3-6</p>
<p>Reason; (1) Role of the CP was clarified. (2) As it is stipulated in the above article, assignment of necessary administrative personnel is essential for the implementation of the Project and it is stipulated here. (3) Division of Public Health Emergency Management (DPHEM) of MOPH was officially established last year and Director of DPHEM was appointed as Co-Project Manager. (4) NIEM and MOPH are the main implementing agencies of the Project and it is not expected that any other organization as a whole will be added as the implementation agency during the extension period. However, it is often necessary to use expertise in other organizations. Therefore, it is clearly stipulated in this MM that the Project Director and the co-Project Director can appoint some personnel from other organizations as the CPs. (5) Although NIEM and MOPH work together for the project, they should respectively clarify the activities which each of them will be mainly responsible for in the extension period.</p>	

5. The article II-6 in the R/D Annex IV: Proposed member of joint Coordinating Committee (JCC)

Before (R/D and MM on 30 Aug., 2017)	Amended Version
<p>2. Chairperson and Members</p> <p>(1) Chairperson Secretary General, National Institute for Emergency Medicine (NIEM)</p> <p>(2) Co-Chairperson, Permanent Secretary, Ministry of Public Health</p> <p>(2) Members The Thai side</p>	<p>2. Chairperson and Members</p> <p>(1) Chairperson Secretary General, National Institute for Emergency Medicine (NIEM)</p> <p>(2) Co-Chairperson, Permanent Secretary (PS), Ministry of Public Health PS can delegate the Co-Chairpersonship to his deputy or other high ranking official of the MOPH, if necessary</p>

<ul style="list-style-type: none"> (a) Focal point of SOMHD, Thailand (b) Director General, Department of Medical Services, MOPH (c) Director General, Department of Disease Control, MOPH (d) Director, Bureau of Public Health in Emergency Response (BPHER), Ministry of Public Health (MOPH) Thailand (e) Director, Bureau of International Health, MOPH (f) Deputy Secretary General, National Institute for Emergency Medicine (NIEM) (g) Director, Bureau of Academic Affairs and Quality Management, NIEM (h) Director, Bureau of Policy and Strategy, NIEM (i) Officer, Thailand International Cooperation Agency (TICA) (j) President, College of Emergency Physician (k) President of Nursing Association (l) Representative from Paramedic Council <p>The Japanese side</p> <ul style="list-style-type: none"> (a) Chief Representative, JICA Thailand Office (b) Leader, JICA Expert Team (c) Long Term Expert (d) Embassy of Japan in Thailand (Observer) 	<ul style="list-style-type: none"> (2) Members <p>The Thai side</p> <ul style="list-style-type: none"> (a) Deputy Secretary General, National Institute for Emergency Medicine (NIEM) (b) Director, Global Health Division, MOPH (c) Director, Division of Public Health Emergency Management (DPHEM), MOPH (d) Focal point of Thailand for ASEAN Health Cluster 2 meeting (e) Representative (Officer in charge of I-EMT), Department of Medical Services, MOPH (f) Representative, Department of Disease Control, MOPH (g) Director, Bureau of Academic Affairs and Quality Management, NIEM (h) Director, Bureau of Policy and Strategy, NIEM (i) Representative, Thailand International Cooperation Agency (TICA) (j) Representative, Department of Disaster Prevention and Mitigation (DDPM), Ministry of Interior (k) Representative, ASEAN Centre of Military Medicine <p>The Japanese side</p> <ul style="list-style-type: none"> (a) Chief Representative and other Representatives, JICA Thailand Office (b) Long Term Experts (c) Short Term Experts (d) Members of Japanese Advisory Committee (Observer) (d) Embassy of Japan in Thailand (Observer)
<p>Reason: In Fact, it is very difficult for PS to attend the JCC meeting in the specific project. Therefore, it is stipulated that PS can delegate the Co-Chairpersonship to other official. Likewise, it is not realistic for Director Generals of the Departments of MOPH to attend the meeting. Therefore, it is modified from DG to representative of the relevant department. As the DDPM is also a very important organization to collaborate for response of the disaster, representative of the DDPM should be official member of the JCC. It is modified the members of the Japanese side according to the actual situation and implementation in the extension period.</p>	

6. PDM

Before (R/D and MM on 30 Aug., 2017)	Amended Version
PDM version 2.0	PDM version 3.0
Reason: In accordance with the recommendation based on the Project evaluation and discussions in the 3 rd JCC and the 4 th RCC, three parties in this MM have agreed to add the activities as	

reflect to the boxes of the Activity and Objectively Verifiable Indicators/ Means of Verification for the Output. In addition, Inputs by three parties were slightly modified as stipulated in the above article II-5 & 6.

This amendment will become effective as of 6 June , 2019.

Annex 1 : PDM (ver. 3.0)

Annex 2 : Record of Discussions (signed on 19th February, 2016)

Annex 3 : Minutes of Meetings for Amendment of the RD(signed on 30th August, 2017)

Bangkok, 6 June , 2019



Ms. Katsura Miyazaki
Chief Representative
Thailand Office
Japan International
Cooperation Agency



Dr. Atchariya Pangma
Secretary General
National Institute
for Emergency Medicine



Dr. Sukhum Karnchanapimai
Permanent Secretary
Ministry of Public Health, Thailand

Project Design Matrix (PDM): PROJECT FOR STRENGTHENING THE ASEAN REGIONAL CAPACITY ON DISASTER HEALTH MANAGEMENT			AS of 31 March 2023
Narrative Summary	Objectively Verifiable Indicators	Means of Verification	Important Assumption
<p>Overall Goal</p> <p>ASEAN and Japan collaboration mechanism on disaster health management is developed.</p>	<p>1. Roadmap of ASEAN regional collaboration mechanism on disaster health management is finalized and proposed to SOMHD.</p> <p>2. Hub organization in-charge of coordination of ASEAN and Japan collaboration mechanism is identified, and its role is clarified.</p> <p>3. Necessary staff and budget of hub organization of ASEAN and Japan collaboration mechanism are proposed.</p> <p>4. Activities based on ASEAN and Japan collaboration mechanism works if large scale disaster occurs.</p>	<p>1 Monitoring/review survey report</p> <p>2 Agreement documents in ASEAN SOMHD</p> <p>3 Summary of related meetings/ conferences (SOMHD or Summit etc)</p>	<p>1 Policy of ASEAN on disaster health management is not changed.</p> <p>2 Commitment from AMS is assured.</p> <p>3 Serious political problem will not happen among ASEAN.</p>
<p>Project Purpose</p> <p>Regional coordination on disaster health management is strengthened in ASEAN.</p>	<p>1 Coordination meetings on disaster health management in ASEAN are held at regular basis</p> <p>2 Activities needed for regional collaboration are clarified and approved in the coordination meeting.</p> <p>3 Recommendations for developing regional collaboration mechanism in disaster health management is proposed to SOMHD.</p> <p>4 Regional collaboration tools are developed and approved in the coordination meeting.</p>	<p>1 Agreement and/or summary of coordination meeting</p>	<p>1 Commitment of AMS for is assured.</p>
<p>Output</p> <p>Output 1 Coordination platform on disaster health management is set up.</p>	<p>1-1 Number of regional coordination meetings during the Project, including meetings for RCC under ALD</p> <p>1-2 Clarification of focal point of each AMS</p> <p>1-3 Agreement of set-up of regional coordination platform on disaster health management in ASEAN</p> <p>1-4 Draft Work Plan for POA on DHM</p>	<p>1-1,1-3, 1-4 Records of coordination meetings</p> <p>1-2 List of focal points</p> <p>1-4 Minutes of HC2/SOMHD</p>	
<p>Output 2 Framework of regional collaboration practices is developed.</p>	<p>2-1 Regional collaboration drill is conducted. (basically, once a year)</p> <p>2-2 Recommendations/Lessons learned for the regional collaboration drills are concluded.</p> <p>2-3 Mechanism of regional collaboration among emergency medical teams in disaster affected area is clarified.</p> <p>2-4 Lessons Learned from an actual case if any</p>	<p>2-1 Records of the regional collaboration drills</p> <p>2-2 Monitoring/review survey report</p> <p>2-3 Draft regional agreement of the regional collaboration on disaster health management</p> <p>2-4 Report on Disaster Medical Response</p>	
<p>Output 3 Tools for effective regional collaboration on disaster health management are developed.</p>	<p>3-1 Standard Operating Procedure (SOP) (draft)</p> <p>3-2 Minimum requirements for disaster health management personnel (draft)</p> <p>3-3 Framework of health needs assessment in emergencies (draft)</p> <p>3-4 Preparation of database of emergency medical teams in ASEAN</p> <p>3-5 Endorsement of All developed regional collaboration tools by SOMHD/ACDM and integration of SOP into ASEAN SASOP</p> <p>3-6 Recommendations for ASEAN standards or methods on some necessary issues for deployment of ASEAN-EMT</p>	<p>3-1, 3-2, 3-3, and 3-4 Regional collaboration tools such as SOP, minimum requirement, framework of health needs assessment, database,</p> <p>Records of coordination meetings (including for 3-6)</p> <p>Monitoring/review survey report</p> <p>3-5 Minutes of SOMHD/ ACDM and revised SASOP</p>	
<p>Output 4 Academic network on disaster health management in AMS is enhanced.</p>	<p>4-1 Number of presentation(s) made at academic conference(s) (Target: at least 1 paper/year)</p> <p>4-2 One Academic Seminar is held and development of network for academic/training centers on DHM in AMS is agreed.</p>	<p>4-1 Academic conference/Journal such as JADM, APCDM, and WADEM</p> <p>Monitoring report</p> <p>4-2 Academic Seminar Proceedings</p>	
<p>Output 5 Capacity development activities for each AMS are implemented.</p>	<p>5-1 Number of trainings (Target: 4 courses)</p> <p>5-2 Number of participants to attend to the training courses (Target: 150 pax)</p> <p>5-3 Lessons learned from the training courses was utilized in each AMS</p> <p>5-4 Number of participants to attend to the counterpart training courses (Target: 20 pax)</p> <p>5-5 Needs and potential core training institutes on DHM in each AMS are identified</p> <p>5-6 Standard Training Curriculum</p>	<p>5-1,5-2,5-4 Training report(s)</p> <p>5-3 Monitoring/review survey report</p> <p>5-5 Study Report on CD on DHM in AMS</p> <p>5-5, 6 Minutes of meetings for the PWG2</p>	
<p>Activities</p> <p>1-1 Regional coordination meetings are organized every year to share the progress and discuss the direction of the Project.</p> <p>1-2 Discuss on the Work Plan of the POA and the part of disaster health management under next Work Program 2021-2025 for Health Cluster 2</p> <p>2-1 Develop and prepare the program of the regional collaboration drill with project working group</p> <p>2-2 Conduct the regional collaboration drill every year in AMS</p> <p>2-3 Complete recommendations on regional collaboration on disaster health management based on the discussion and knowledge sharing through project activities</p> <p>2-4 On site practice is conducted when disaster occurs in ASEAN (if possible).</p> <p>2-5 Collect & Share Lessons Learned from responses for actual disasters in ASEAN</p> <p>3-1 Formulate project working groups for regional collaboration tools at the beginning of the project</p> <p>3-2 Develop a draft regional SOP and minimum requirements for disaster health management with the project working group</p> <p>3-3 Prepare databases of emergency medical teams of AMS</p> <p>3-4 Draft framework of health needs assessment in emergencies with the project working group</p> <p>3-5 Facilitate the endorsement process of all regional collaboration tools that was developed in this phase by ASEAN SOMHD or relevant ASEAN sectoral bodies</p> <p>3-6 Study on possibilities of ASEAN Collective Approaches for ASEAN-EMT</p> <p>4-1 Present outcomes of the Project activities at academic conferences such as JADM, APCDM and WADEM</p> <p>4-2 Hold an academic seminar</p> <p>5-1 Prepare training plan, curriculum and materials on disaster health management and emergency medical system based on needs survey with the project working group</p> <p>5-2 Conduct trainings on disaster health management and emergency medical service for AMS</p> <p>5-3 Conduct monitoring survey and evaluation on capacity development on disaster health management in each AMS</p> <p>5-4 Conduct a study tour in Japan for AMS</p> <p>5-5 Conduct training program in Japan for the Thai counterpart personnel</p>	<p>Inputs</p> <p>Japanese side</p> <p>[Experts]</p> <p>(1) Long-term Expert</p> <p>1. Chief Advisor</p> <p>2. Project Coordinator</p> <p>(2) Short-term Experts (Expert Consultant team)</p> <p>1 Leader</p> <p>2 Specialist in medical system</p> <p>3 Specialist in disaster health management/emergency medicine</p> <p>4 Specialist in planning/organizing regional collaboration drill</p> <p>5 Specialist in planning/organizing trainings</p> <p>6 Project coordinator</p> <p>7 Others, if necessary</p> <p>(b) Provision of necessary equipment (if necessary)</p> <p>(2) Japanese Advisory Committee</p> <p>1. Provide advice and technical support to JICA on the project management.</p> <p>2. Join the project working groups</p> <p>3. Participate in the regional collaboration drills</p> <p>4. Conduct advisory survey</p> <p>[Local cost]</p> <p>1. Expense mutually agreed upon as necessary</p>	<p>Thailand side</p> <p>[Personnel]</p> <p>1. Project Director (NIEM), Co-Project Director (MOPII)</p> <p>2. Project Manager (NIEM), Co-Project Manager (MOPH)</p> <p>3. Counterpart Personnel (CPs) who are working with JICA experts for the implementation of the activities of the Project</p> <p>4. Administrative Personnel who are supporting for CPs and JICA experts</p> <p>[Facilities and Equipment]</p> <p>1. Project office space for JICA experts</p> <p>2. Facilities and equipment necessary for trainings/regional drills</p> <p>3. Equipment mutually agreed upon as necessary [Available data and information related to project] [Local cost]</p> <p>1. Expense mutually agreed upon as necessary</p>	