

**The Partnership Project for
Global Health and Universal Health Coverage**

Phase 2

Mid-Term Review Report

August 2022

Japan International Cooperation Agency (JICA)

**The Partnership Project for Global Health and
Universal Health Coverage Phase 2,**

IC Net Asia Co., Ltd.

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Abbreviations

AAAH	The Asia Pacific Action Alliance on Human Resources for Health
AI	Artificial Intelligence
ASSA	ASEAN Social Security Association
CCS	Country Cooperation Strategy
CPD	Continuing Professional Development
DAC	Development Assistance Committee
DRG	Diagnosis-Related Group
GH	Global Health
GLO+UHC	The Partnership Project for Global Health and Universal Health Coverage
HF	Health Finance / Health Financing
HW	Health Workforce
HQ	Headquarters
iGHP	Institute for Global Health Policy Research
IHPP	International Health Policy Program
IPE	Interprofessional Education
JCC	Joint Coordinating Committee
JICA	Japan International Cooperation Agency
JPMT	Joint Project Management Team
MCH	Maternal and Child Health
MOPH	Ministry of Public Health
MTR	Mid-Term Review
NCDs	Noncommunicable Diseases
NHPE	The National Health Professional Education Foundation
NHSO	National Health Security Office
OECD	Organization for Economic Co-operation and Development
OVI	Objectively Verifiable Indicator
PDM	Project Design Matrix
PMAC	Prince Mahidol Award Conference
PSU	Prince of Songkla University
SDGs	Sustainable Development Goals
TNMC	Thailand Nursing and Midwifery Council
UCS	Universal Coverage Scheme
UHC	Universal Health Coverage
UNGA	United Nations General Assembly
WHO	World Health Organization

Executive Summary

1. Outline of the Mid-Term Review (MTR)

JICA technical cooperation on “The Partnership Project for Global Health and Universal Health Coverage (GLO+UHC)” has been conducted since 2016. During the Phase 1 of the project in 2016-2020, the project has achieved various results. With the understanding on the efficiency of the UHC activities by the partnership of Japan and Thailand, Phase 2 of the partnership project (GLO+UHC Phase 2) was launched in December 2020 for the project period of 3 years aiming to strengthen the capacity on UHC implementation particularly in health financing and health workforce as well as global health of Thailand and other countries.

As GLO+UHC Phase 2 reached to the mid-point of the project period, the project designed the Mid-term Review (MTR) of the project to review the current situation, outcomes, and management of the project neutrally and impartially in order to take measures to improve the quality of the project in the second half of the project.

2. Overview of the Progress

The strengthening of the capacity on UHC implementation, particularly on health financing and health workforce, and global health of Thailand and other countries is on the right track. The project has implemented various online activities, including those for participating countries, under the constraint of COVID-19 pandemic. There were no serious obstacles/constraints recognized in the MTR to achieve the Project Purpose.

Eight countries were selected as main participating countries for international cooperation programs. The project has also conducted country specific online meetings/workshops with some countries, such as Lao PDR, Sudan, and Vietnam. More activities are planned and expected for the second half of the project.

The project organized/participated several events to share and promote UHC practice at national, regional, and international levels. Online UHC resource centers have been launched on the websites of IHPP and NHSO with the support of the project.

3. Results of MTR by Six Criteria

Relevance of the project is remained very high. Thailand highlights UHC and global health in the national policy. Institution/ experience/ know-how on UHC and global health of Japan is remained relevant for institutional/human resource development in Thailand. Expectations of participating countries to learn from the experience of Thailand supported by Japan is also remained high.

Coherence of the project is remained very high in terms of consistency with the policy of Japan as well as synergy effects/interactions with other programs/projects. Expectation of Japan to establish dynamic cooperation mechanism in partnership with Thailand is remained high.

Effectiveness of the project is high. Various activities have been implemented to strengthen the capacity on UHC implementation and global health of Thailand and other countries under the constraints of COVID-19 pandemic. Some activities have been affected by the pandemic and will be focused in the second half of the project.

Efficiency of the project is high without serious concern on the project management and implementation of project activities. Joint Project Management Team (JPMT) functions well for the monitoring of project activities as well as decision-making for the project operation. Project coordination has not been much affected by the work-from-home and online communication under the pandemic situation. Resources from Project Phase 1, such as outcomes from research as well as materials for UHC resource centers, have been, and will be, effectively utilized for the project activities.

Impact of the project to achieve the Overall Goal is expected, but approach should be further discussed. Outcomes of the project as well as human resources and network gained through the project activities are considered as assets to promote UHC and global health at nation, region, and global levels. However, degree of the contribution by the project may depend on the policy/institutional set-up and long-term commitments from Japanese and Thai sides.

Sustainability of the project outcomes is expected. UHC is a core health and health insurance policy in Thailand and to be maintained in the long run. It's commitment to the global health is also stipulated in the 'Thailand Global Health Action Plan (2021-2027)'. It is important for the project to consider sustainability for the network with personnel/ organizations in participating countries.

4. Contributing and Inhibiting Factors

MTR identified several contributing and inhibiting factors of the project implementation as provided below.

Contributing Factors:

- 1) Use of online tools
- 2) Increase in the relevance of UHC in the pandemic situation
- 3) Assets from the Project Phase 1
- 4) Utilization of network of participating organizations
- 5) Strong commitments of project members
- 6) Selection of UHC targets subjects and countries for the cooperation

Inhibiting Factors:

- 1) Lost/ Postponed opportunities of onsite activities
- 2) Heavy workload of project members
- 3) Yet-to-be-identified responsible persons in some activities
- 4) Unclear setting of achievement targets

5. Conclusion

It is fair to say the project is on the right track to achieve the project purpose to strengthen the capacity on UHC implementation (health financing and health workforce) and global health of Thailand and other countries. Project activities constrained under the pandemic situation will be focused in the second half of the project to generate project outputs, particularly of Output 2 (Capacity development for UHC implementation and global health in other countries) and Output 3 (Sharing of practices and lessons learnt in UHC implementation and global health). Planning, monitoring, and decision-making process for the implementation of project activities is considered appropriate. Communication and coordination among project members as well as with concerned personnel in participating countries have been effective and efficient with the use of online communication tools under the pandemic situation.

As the project is a part of a long-term partnership initiative by Japan and Thailand, more discussion between Japanese and Thai sides is expected for the post-project approach as well as for the policy/institutional set-up to strengthen/sustain the cooperation with other countries.

6. Recommendations for the Second Half of the Project

Based on the findings from the MTR, there are recommendations for the second half of the project as presented below.

1) Strengthening of Each Project Component

1-1 Health Finance

- Application of technical issues for the fee schedule
- Sharing of monitoring results on the nation-wide application of the fee schedule
- Consideration for the health finance service to the elderly through the local government

1-2 Health Workforce

- Discussion on the approach/activity for the outcomes of the project
- Further interactions with participating countries through CPD workshops

1-3 UHC Resource Centers

- Further development of UHC resource centers to provide more materials
- Exposure to stakeholders to make the centers as hubs for long-term promotion of global health

1-4 Cooperation to participating countries

- Efficient coordination and implementation of programs (combination of onsite/online tools)

2) Monitoring of Project Activities

- Continuing use of monitoring process and format of JPMT meeting
- Documentation/preparation for indicators of the Project Purpose

3) Review/Revision of the Project Framework

- Highlight of responses to COVID-19 in the project design
- Setting of the indicators of the Overall Goal linked with the achievement targets of related policies, such as 'Thailand Global Health Action Plan (2021-2027)

4) More Exposure and Strengthening of the Japan-Thailand Partnership Initiative

- Intensive preparation for UNGA 2023 and other relevant initiatives
- Generation of articles and other materials for publication

5) Discussion for Post-Project Long-Term Approach

- Discussion for the long-term partnership, which may include high level policy dialogue/ interaction to strengthen network for joint actions
- Policy/institutional framework to establish a solid base of the network with other countries, in addition to the network of personnel, which may include the development of triangular cooperation model and Japanese -Thai UHC and global health consortium

1. Outline of the Mid-Term Review (MTR)

1.1. Background and Objective

Technical cooperation of Japan International Cooperation Agency (JICA) on “The Partnership Project for Global Health and Universal Health Coverage (GLO+UHC)” has been conducted since 2016. During the Phase 1 of the project in 2016-2020, the project achieved various results, such as introduction of the fee schedule in Bangkok and dissemination of information on the mother and child health book at international conferences. With the understanding on the efficiency of Universal Health Coverage (UHC) activities by the partnership of Japan and Thailand, Phase 2 of the partnership project (GLO+UHC Phase 2) was launched December 2020 for the project period of 3 years based on the request from the government of Thailand aiming to strengthen the capacity on UHC implementation in particular health financing and health workforce and global health of Thailand and other countries.

As GLO+UHC Project Phase 2 reached to the mid-point of the project period, the project designed the Mid-term Review (MTR) of the project to review the current situation, outcomes, and management of the project neutrally and impartially, in order to take measures to improve the quality of the project in the second half of the project. Accordingly, IC Net Asia, was assigned as an external consultant to conduct the MTR during June-July 2022 according to the instruction of the project. The objectives of the MTR were set by the project as below.

- (1) To improve the quality of the project, especially the decision-making process, by learning from the experience of the first half
- (2) To ensure transparency and accountability of the project by disclosing its information extensively.

1.2. Methods of Mid-Term Review

The MTR applies the six OECD-DAC¹ Criteria for evaluating development assistance (relevance, coherence, effectiveness, efficiency, impact and sustainability). The summary of the GLO+UHC Phase 2 is provided below.

Project Title	The Partnership Project for Global Health and Universal Health Coverage Phase 2
Implementing Agencies	Ministry of Public Health (MOPH), and National Health Security Office (NHSO)
Target Groups	Personnel from counterpart, relevant and other related organizations in Thailand and participating countries - all countries which the Project will share information and knowledge with, including Priority countries, Thailand and Japan.
Project Period	December 2020 – December 2023 (3 years)
Project Site	Bangkok, Thailand
Overall Goal	Partnerships between Thailand and Japan on UHC and global health are strengthened and used to support other countries.
Project Purpose	Capacity on UHC implementation in particular health financing and health workforce and global health of Thailand and other countries are strengthened.
Output 1	Experiences on UHC are learnt and shared between Thailand and Japan to contribute to improving the UHC in both countries.
Output 2	Capacity development for UHC implementation and global health in other countries is organized.
Output 3	Practical practices and lessons learnt in UHC implementation and global health (mainly from Japan and Thailand) are shared and promoted at national, regional and global levels.

¹ The Organization for Economic Cooperation and Development (OECD) Development Assistance Committee (DAC) is an international forum of the providers of development assistance. Its evaluation criteria are commonly used for the project evaluation of development projects.

The MTR team of IC Net Asia assigned by the project collected necessary information through the review of related project documents and interview with concerned personnel of Japan, Thailand, and participating countries of the project, with coordination support from the project staff. The list of main project documents provided and reviewed in the MTR is provided below.

<List of Main Project Documents>

➤ Minutes of Meeting (MM)
➤ Record of Discussion (R/D)
➤ Project Design Matrix (PDM) and Plan of Operation (PO)
➤ Monitoring Reports
➤ Joint Coordinating Committee (JCC) Meeting Minutes
➤ The Joint Project Management Team (JPMT) Meeting Minutes and related materials
➤ Situation Analysis Report
➤ Technical Brief: Health Finance Volume 1 Fee Schedule
➤ Minutes of Online Workshop Series on Continuing Professional Development (CPD) for Nurses
➤ Meeting Minutes with participating countries
➤ Technical Brief: PMAC 2022 Side Meeting: Where is our doctor? Measures for the future distribution of health workforce
➤ Technical Brief: PMAC 2022 Side Meeting: Protect our Future: Mitigating the impact of COVID-19 on Maternal and Child Health

The MTR team conducted 15 interviews with Japanese and Thai project members, JICA HQ/ Thailand Office, and JICA Experts/ Counterpart personnel in participating countries (Cambodia, Lao PDR, Sudan) and received 1 written response to questionnaires from a project member with the coordination of the project. The MTR team developed interview questions prior to the interview to collect information systematically and comprehensively. The list of interviewees are provided in the table below in the next page.

Interview questions and classification of interviewees are provided in the Attachment 1 'Interview Questions and Targets of the Interview' and information collected through document review and interview are summarized in the Attachment 2 'Mid-Term Review/ Achievement Grids' of this MTR report.

<Interview Schedule for Mid-Term Review of GLO+UHC Project Phase 2>

Date		Interviewee	Venue
Jun 20, 2022	1	Dr. Takuma Kato/ Ms. Yumiko Miyashita/ Ms. Meguru Yamamoto (JICA Expert Team, GLO+UHC Phase 2)	JICA Thailand
Jun 22, 2022	2	Ms. Wilailuk Wisasa (Policy Advocacy Unit (PAU), NHSO)	NHSO
Jun 28, 2022	3	Ms. Somsri Sukumpantanasan/ Ms. Noriko Maeda (JICA Thailand Office)	Online
	4	Ms. Yukie Yoshimura (Sudan JICA UHC Project)	Online
Jun 30, 2022	5	Dr. Hironori Okabayashi (JICA Expert in Lao PDR)	Online
	6	Dr. Walaiporn Patcharanarumol (Global Health Division, Office of the Permanent Secretary, MOPH)	Online
Jul 1, 2022	7	Dr. Warisa Panichkriangkrai (Global Health Division, Office of the Permanent Secretary, MOPH)	Online
	8	Dr. Panarut Wisawatapnimit (The Asia Pacific Action Alliance on Human Resources for Health (AAAHH))	Online
Jul 4, 2022	9	Dr. Suwit Wibulpolprasert (Minister's Advisory Committee on Global Health, MOPH)	Online
Jul 5, 2022	10	Dr. Lalitaya Kongkam (Deputy Secretary-General, NHSO)	NHSO
Jul 5, 2022	11	Dr. Kriddhiya Sriprasert (Fund Management Unit , NHSO)	NHSO
Jul 6, 2022	12	Ms. Mizue Hiura (The Project for Strengthening In-service Training System in Cambodia, JICA)	Online
	13	Mr. Tatsuya Ashida/ Ms. Asumi Endo (JICA HQ)	Online
Jul 12, 2022	14	Dr. Laddavanh Sengdara (National Health Insurance Bureau, Ministry of Health, Lao PDR)	Online
Jul 18, 2022	15	Dr. Seddig Altayeb (Director of General Directorate of Planning, National Health Insurance Fund (NHIF), Sudan)	Online
-	16	Dr. Jadej Thammatacharee (Secretary- General, NHSO)	In written

The findings of the MTR were compiled in the presentation material and presented at the Joint Project Management Team (JPMT) meeting held on July 25, 2022 and the 2nd Joint Coordinating Committee (JCC) meeting on July 27, 2022, respectively. The material presented in the 2nd JCC meeting is provided in the Attachment 3 'Presentation material at the 2nd Joint Coordinating Committee (JCC) Meeting.

2. Overview of the Progress

2.1. Progress/Achievement of the Project Purpose

Project Purpose:

Capacity on UHC implementation in particular health financing and health workforce and global health of Thailand and other countries are strengthened

Indicators:

Number of recommendations on UHC implementation proposed to policy decision and/or practices process by this project.

It is understood from the result of the MTR that the strengthening of the capacity on UHC implementation (health financing and health workforce) and global health of Thailand and other countries is on the right track. The project has implemented various online activities, including those for participating countries, under the constraint of COVID-19 pandemic. There were no serious obstacles/constraints recognized in the MTR to achieve the Project Purpose.

It is challenging for the project to clearly identify and monitor the indicator of the Project Purpose; ‘Number of recommendations on UHC implementation proposed to policy decision and/or practical process by this project’. The MTR team proposes to develop a list of the project outcomes, including policy recommendations/implementation, analysis and technical outputs, and others, with the explanation of the contribution of the project, to monitor and examine the achievements of the project.

2.2. Generation of Output 1

Output 1:

Experiences on UHC are learnt and shared between Thailand and Japan to contribute to improving the UHC in both countries.

Indicators:

- 1-1) Outcomes (including recommendations) of the capacity development program in the area of health financing and health workforce are documented.
- 1-2) Recommendations on UHC implementation of Thailand are submitted to policy-makers.

Project has conducted various activities to share the UHC experience of Japan and Thailand, particularly in the field of Health Finance and Health Workforce, through online activities under the constraint of COVID-19.

<Health Finance>

- The project set 5 areas under UHC financing management and planned /implemented activities accordingly; 1. Fee schedule, 2. Claim and Audit, 3. DRG, 4. Consumer Protection Service, and 5. Primary Health Care.
- After the pilot project in Bangkok, the fee schedule was launched nationwide in Oct 2021 by NHSO. Function of the fee schedule is still limited and further improvement is expected with the support of the project in the areas such as claim management and audit system.

<Health Workforce>

- Three working teams were formed, i.e., 1) Health Workforce Education Working Team for Interprofessional Education (IPE), 2) Health Workforce Management Working Team for health workforce distribution (registry) and 3) Health Workforce Management Working Team for health workforce quality improvement (CPD: Continuing Professional Development).
- Compared with health finance, progress and outcomes in the field of the health workforce are still not clearly identified. Although the issue is more conceptual and not easy to see the

tangible outcomes in the short period, approaches to generate outcomes with the support of the project should be discussed.

<Other>

- In the field of Health Information System, Four researchers of the second batch are working on the proposals on some issues. NHSO and the Prince of Songkla University are preparing aggregated data for iGHP.

There are outcomes of the capacity development program, such as the draft of technical brief on health workforce Volume 1 in “Physicians’ Distribution and Registry” issued in July 2022, which was developed based on presentations, discussions, comments and feedbacks from PMAC 2022 Side Meeting with the purpose to share lessons learnt and challenges of physician distribution among countries.

2.3. Generation of Output 2

Output 2:

Capacity development for UHC implementation and global health in other countries is organized.

Indicators:

- 2-1) Collaboration plan of UHC implementation including country specific situation is completed.
- 2-2) Global health diplomacy workshops are partially supported.
- 2-3) Other meetings, trainings and activities related to UHC, in particular health financing and health workforces are partially supported.

Eight countries were selected as main participating countries for international cooperation programs, namely Vietnam, Lao PDR (priority countries), Cambodia, Myanmar, Malaysia, Indonesia, the Philippines, and Kenya (target countries). The project also has coordination/communication with several countries for country-specific programs.

Outputs of the project, such as technical papers, have been shared with participating countries. Country specific online meetings/workshops have been conducted with some countries, such as Lao PDR, Sudan, and Vietnam, even under the constraints of COVID-19. More activities are planned and expected for the second half of the project.

Information shared in the interview with concerned personnel of from participating countries, namely Cambodia, Lao PDR, and Sudan, are provided below.

<Health Finance>

- According to the interviewees in Lao PDR, cooperation with the GLO+UHC Phase 2 is effective and efficient as the country has similar health system and understands the language of each other. The result of the workshop with the Project contributed to the development of a guideline and online database for claim management (under development). Discussion to improve health financing is also going on among concerned personnel.
- For Sudan, counterpart personnel shows the interest to learn from the experience of Thailand and cooperation activities, including in-country training in Thailand. More cooperation is expected in the second half of the project upon the completion of MoU between organizations in Thailand and Sudan.

<Health Workforce>

- Participation to the series of workshop on Continuing Professional Development (CPD) has been a good opportunity for the learning experience of participants as well as to consider the situation of their own countries through the response to the questionnaires and preparation of presentation material.

- After the participation to the workshop, counterpart organization in Cambodia started communication with Thailand Nursing and Midwifery Council (TNMC) with the support of Japanese experts. Country specific activities in the second half of the project are expected.

2.4. Generation of Output 3

Output 3:

Practical practices and lessons learnt in UHC implementation and global health (mainly from Japan and Thailand) are shared and promoted at national, regional and global levels.

Indicators:

- 3-1) Resource center for UHC & global health is established. (Materials of study visits; recommended materials e.g., books, papers, videos)
- 3-2) Practical practice and lessons learnt in UHC implementation and global health are shared through international forums e.g., Prince Mahidol Award Conference (PMAC), ASEAN, WHO governing body

Project organized/participated several events to share and promote UHC practice at national, regional, and international level, such as series of CPD workshops organized by AAAH, UHC Journey, Global Health Diplomacy Workshops, and JICA UHC Open House. Project also organized the webinar on ‘Mitigating the impact of COVID-19 on MCH health’ in Dec 2021 as PMAC side meeting.

Online UHC resource centers have been launched on the websites of International Health Policy Program (IHPP) and NHSO ahead of the schedule. Information at resource centers are updated/maintained respectively. Materials accumulated from the Project Phase 1 are available on the sites. Further development of the resource centers is expected to provide online self-study resources and material for stakeholders in Thailand, Japan, and participating countries. The centers also can be hubs of Japan-Thailand partnership.

Project participated programs in Thailand and online programs during the restriction of international travel ban to share and promote the practice at national, regional, and international levels. More active participation, including participation to the UNGA UHC High-level meeting 2023, is expected in the second half of the project. Compared with the Project Phase 1, interaction between high level officers has been weak in the Phase 2 mainly due to the effects of COVID-19. Interaction at the higher level between Japan and Thailand is expected in the second half of the project to strengthen the partnership for joint approach to global health.

2.5. Progress to Overall Goal

Overall Goal:

Partnerships between Thailand and Japan on UHC and global health are strengthened and used to support other countries.

Indicators:

Assets (e.g., resource center, human capacity, networks) from the project continue to contribute to strengthen UHC and global health movements

Utilization of network between concerned persons and organizations established/ strengthened during the project is expected to strengthen the partnership between Thailand and Japan. Experience gained through the project activities are also expected to contribute to fostering personnel leading global health movement of Thailand. Establishment of long-term policy/institutional framework is considered important to ensure/accelerate the movements for the partnership.

It is also important to collaborate with international networks, such as WHO regional networks and UHC 2030, to support other countries effectively and efficiently. Use of online tools/platforms, including document and video materials through the resource centers, as well as strengthening of

network with international platforms/networks may be considered to make movement to the overall goal stronger.

Achievement targets of the overall goal of the project are not clearly defined. Achievement targets of related policy, such as ‘Thailand Global Health Action Plan (2021-2027)’, may be referred to consider the indicators of the overall goal.

3. Results of Review by Six Criteria

The results of the MTR are provided below in terms of Relevance, Coherence, Effectiveness, Efficiency, Impact, and Sustainability.

3.1. Relevance

Relevance of the project is remained very high in terms of national policy of Thailand, needs of Japan, Thailand and participating countries, and project framework.

< Relevance in the National Policy of Thailand >

- Relevance of UHC and global health is maintained in the national policy of Thailand. Importance on enhancing efficiency of public health service system and improving the health financing system are also highlighted in the ‘12th National Economic and Social Development Plan (2017-2022)’. In the 13th Plan (2023-2027), promotion of the global health is highlighted in the Strategy 2 of Mission 4 to drive Thailand as a Global Health Promotion Service Center. With the participation to the global health events through the project and other channel, Thai side is getting more interested and confident to promote global health based on its experience.
- ‘Thailand Global Health Action Plan (2021-2027)’ has been published and enforced by the Ministry of Public Health (MOPH). Although COVID-19 pandemic has not affected the national policy level towards the project, attention to the UHC is also increasing at each level.

< Relevance of Cooperation /Needs of Japan, Thailand, and Participating Countries >

- Institution/experience/know-how on UHC and global health of Japan is remained relevant for institutional/human resource development in Thailand. Importance to localize the healthcare system learnt from Japan to apply in Thailand was also highlighted in the interview to be coherent with the contexts of the Thai healthcare system.
- The fee schedule has been expanded nationwide in Thailand with the contribution of the project by sharing experience of Japan. However, scope of the service is still limited and there are many fields to further learn to improve the service. The role of project remained relevant for the promotion of UHC and global health in Thailand.
- Cooperation between Japan and Thailand is expected to be a good model to share the experience of an advanced country and a middle-income country which learnt and practically applied the experience of the advanced country. Asset of Japan, such as rich experience and human resources as well as operation bases (JICA offices) and network for international cooperation, can be utilized for the joint cooperation program by Japan and Thailand. Expectations of participating countries to learn from the experience of Thailand supported by Japan is also remained high.
- Partnership between Thailand and Japan for the approach to the international platforms, including UNGA 2023, will be a good chance to enhance the presence of Japan on the health diplomacy. There are various opportunities to teach/learn from each other both for Thai and Japanese sides through various project activities.

<Relevance of Project Framework>

- The framework of the project is considered appropriate. It is reasonable for the project to focus on selected UHC subjects, i.e., health finance and health workforce as well as target countries from the experience of the last phase of the project to mobilize resources effectively and efficiently.
- With the nature of the project, which is a long-term partnership between Japan and Thailand to deal with global issues, the project framework should be flexibly adjusted with the situation/needs/opportunities at country, region, and global levels. However, from the perspective of the project management, it is considered necessary for the project to clarify the achievements target of the overall goal as well as the approach to achieve the target with the outcomes of the project.

3.2. Coherence

Coherence of the project is remained very high in terms of consistency with the policy of Japan as well as synergy effects/interaction with other programs/projects.

<Consistency with the Policy of Japan>

- The project was formulated as a partnership program of Japan and Thailand to support other countries on UHC and the policy is sustained. Expectation to establish dynamic cooperation mechanism in partnership with Thailand is remained high. The project is also consistent with the policy of Japan to support SDGs, particularly on the Goal 17 ‘Partnerships for the Goals’. Commitment of Japanese government on the global health is maintained, as represented in the speech of the Prime Minister Suga in May 21, 2021 at the Global Health Summit in which he emphasized the importance of the global health.
- Though response on COVID-19 and future pandemic have not been clearly integrated in the UHC and global health policy of Japan, COVID-19 pandemic also highlighted the worldwide importance on UHC and international cooperation in the global health issue. JICA takes initiatives for programs, including COVID-19 Crisis Response Emergency Support which also targets Thailand.

<Synergy Effects/Interactions with other Programs/Projects>

- Cooperation with other technical cooperation projects in UHC fields in other countries are the advantage of the project. This is expected to establish/ strengthen networking with health administration of other countries.
- JICA country offices also function as focal points for the networking with the project, and could continue to be focal points of the Japan-Thailand partnership for the global health approach in other countries.

3.3. Effectiveness

Effectiveness of the project is high. Strengthening of the capacity on UHC implementation and global health is on the right track.

<Achievement of the Project Purpose >

- As mentioned in the section 2 ‘Overview of the Progress’ above, various activities have been implemented to strengthen the capacity on UHC implementation (health financing and health workforce) and global health of Thailand and other countries under the COVID-19 pandemic. No serious obstacles/constraints /concerns were recognized in the MTR to achieve the Project Purpose. Some activities have been affected by the pandemic, such as in-country activities, visit by Japanese short-term experts, and study visit to Japan. As planned by the project, these activities could be focused in the second half of the project.

- As the strengthening of the capacity is the results of collective activities with various initiatives, it is challenging to measure the achievement of the project separately. It is also challenging for the project to set quantitative indicators due to the characteristics of the project.

<Generation of Project Outputs >

- As also presented in the section in the section 2 ‘Overview of the Progress’, the project has been conducting/involved in the activities to generate project Output 1, Output 2, and Output 3. With the ease of restriction by the COVID-19, generation of Outputs 2 and Output 3 could be focused with more international onsite activities in the second half of the project. Various activities have been already planned to generate each project outputs by project members.
- For the fields of activities, approach to generate outcomes for the health workforce would be more focused in the second half of the project. Field of health workforce in Thailand may require the paradigm shift of health workers as the health workforce in Thailand is struggling to provide healthcare services effectively. It is a huge challenge which requires long-term strategic approach, but will also be a good practice for other countries in the long run.

3.4. Efficiency

Efficiency of the project is high without serious concern on the project management and implementation of project activities.

<Management of the Project>

- There are no serious constraints/concerns identified in the MTR on the implementation and monitoring of project activities as well as overall management of the project. JPMT functions well for the monitoring of project activities as well as decision-making for the project operation. Project activities are monitored systematically based on the project design by JPMT members.
- It is understood from the interview with project members that the project coordination has not been much affected by the work-from-home and online communication under the pandemic situation. The project members use online tools to minimize the delay in the project operation. With COVID-19, more online communication is used by stakeholders in Japan, Thailand and participating countries. This has made international coordination easier. NHSO staff had to concentrate on the response to COVID-19 temporarily at the time of expansion of new variants, but it did not significantly affect the operation of project activities.
- Concept/ framework of the project, including logic and indicators, is shared among JPMT members. Approach to achieve overall goal as well as indicators of the project purpose can be further discussed at the early stage of the second half of the project.
- Communication with participating countries is going well with the support of Japanese experts. With the expected increasing demand for country-specific programs, particularly in-country activities in Thailand, from participating countries, capacity of the project for international coordination/communication may be challenged.

<Implementation of Project Activities>

- Although some delays in the project activities were reported in the interview of the MTR, such as AI development for audit system, there are no significant constraints/delays to implement project activities. Project activities, including activities with participating countries, have been conducted flexibly and efficiently within the constraints under the pandemic.
- It is understood from the interview results that there are pros and cons for on-site and online to implement activities. Activities with online can reduce the travel and administrative/

coordination costs and invite more and various participants, though relations-building and concentration to the activities are remained as challenging issues. On-site activities are good to deepen the relationship and more effective in terms of learning due to the direct talk/observation and more concentration, but need more coordination and costs for the organizer. Some facilities, particularly health facilities, may be remained reluctant to accept international visitors for a while.

<Utilization of Resources and Outcomes of Phase 1>

- Resources from Project Phase 1 have been, and will be, effectively utilized for the project activities. These include outcomes from research and materials for resource centers. Outcomes of the Project Phase 1 are also compiled and published through the websites of IHPP and NHSO.

3.5. Impact

Achievement of the Overall Goal is expected, but approach should be further discussed. There are no negative impacts of the project identified in the MTR.

<Achievement of Overall Goal>

- As mentioned in the section 2 ‘Overview of the Progress’ above, utilization of network between concerned persons and organizations established/ strengthened during the project is expected to strengthen the partnership between Thailand and Japan. Experience gained through the project activities are also expected to contribute to fostering personnel leading global health movement of Thailand. Establishment of the long-term policy/institutional framework is considered important to ensure/accelerate the movements for the partnership.
- The project has cooperation with other international development partners on UHC and aims to establish international platform in Thailand to support the cooperation for UHC in other countries. The cooperation should be strengthened by the end of the project to utilize various resources flexibly and effectively.
- In the second half of the project, picture of the long-term goal and approach/commitments to achieve the goal should be discussed. This may include the networking between executive officers of Japan and Thailand to strength the partnership in UHC and global health to contribute at the international level.

<Contribution of the Project>

- Outcomes of the project as well as human resources and network gained through the project activities are considered as assets to promote supports UHC and global health at nation, region, and global levels. Degree of the contribution by the project outcomes may depend on the policy/institutional set-up and long-term commitments from Thai/ Japanese sides.
- Utilization of network and advantage of JICA, i.e., technical cooperation projects in the related fields, and JICA country offices as focal points of coordination/ networking can be continued and fully utilized to achieve the overall goal. Efforts to enhance the awareness on the Japan- Thailand partnership approach to UHC and global health by the international platform should be strengthened through publication of materials, participation to related events, commitment to the platform activities, and others. Outcomes of the project can be utilized in other policy/initiative, such as ‘Thailand Global Health Action Plan (2021-2027)’ and ‘Thailand and WHO Country Cooperation Strategy (CCS) (2022-2026)’ to generate synergy effect.

<Other Impacts>

- Project has contributed to the response to COVID -19 through online seminar, workshop on health workforce measures, and other activities. As the project committed much to the response to COVID -19 and as the issues is quite important during the project period,

contribution of the project on the response to the pandemic could be additionally highlighted in the project design and outcomes.

3.6.Sustainability

Sustainability of the project outcomes is expected, though it also depends on the policy/institutional arrangement by the end of the project.

<Policy/Institution>

- UHC is a core health and health insurance policy in Thailand and to be maintained in the long run. It's commitment to the global health is also stipulated in the 'Thailand Global Health Action Plan (2021-2027)'. Although NHSO's mandate is serve for the Thai nationals and non-Thai nationals living in Thailand, it will maintain the policy to learn from other countries and to support other countries, particularly neighboring countries.
- Networks between concerned persons and organizations established/ strengthened during the project will be utilized to strengthen the partnership between Japan and Thailand through formal and informal communication channel. Network established between persons and organizations during the project will be maintained. Further discussion for the policy/ institutional framework for long-term partnership is expected during the project.

<Outcome of the Project>

- Capacity of Thailand to support UHC implementation and global health in other countries is expected to be maintained and further strengthened with the policy and more experience of concerned organization and personnel. Functions of UHC resource centers will be sustained under the responsibility of IHPP and NHSO. Both resource centers are under sufficient capacity for the maintenance and updates of information.
- It is also important for the project to consider sustainability for the network with personnel/ organizations in participating countries. Approaches for post-project systematic cooperation/ coordination with existing platform such as WHO, ASEAN Social Security Association (ASSA) and The Asia Pacific Action Alliance on Human Resources for Health (AAAH) may be highlighted with the initiatives of Thai project team member.

4. Contributing and Inhibiting Factors

MTR identified several contributing and inhibiting factors of the project implementation as provided below.

4.1.Contributing Factors

1) Use of online tools

With the use of the online communication platform, the project has more chance to attend international programs and invite more participants to the project activities. The coordination and communication through online platform also enabled project staff to work more time-efficiently.

2) Increase in the relevance of UHC in the pandemic situation

It is understood from the interview with the project members that personnel in the health sector are keen to learn, though the workload increased due to the pandemic, the current situation in the country as well as experience and response in of other countries. This eventually enhanced the interest on UHC and project activities by the concerned personnel in Thailand and participating countries.

3) Assets from the Project Phase 1

Resources from the Project Phase 1 have been effectively utilized for the Project Phase 2 activities. These include outcomes from research supported by the project, materials for resource

centers, and network with participating countries. Experience and lessons learnt from the Project Phase 1 have been also utilized in the operation of the Project Phase 2.

4) Utilization of network of participating organizations

Network of participating organizations of the project, including, but not limited to, JICA, AAAH, NHPE, and Gunma University, has been effectively utilized for the project activities and promotion of UHC in national, regional and global levels.

5) Strong commitments of project members

Strong commitments of key project members both of Japanese and Thai sides were highlighted during the MTR for the smooth operation of project activities and management. Japanese and Thai project members work together through JPMT meeting to plan and monitor the project activities.

6) Identification of targets fields and countries

The project selected target UHC fields to be focused in the project, namely health finance and health workforce, as well as propriety countries to approach (8 countries) in the project design. It is considered this has contributed to more intensive and efficient planning and implementation of project activities.

4.2. Inhibiting Factors

1) Lost/ Postponed opportunities of onsite activities

COVID-19 countermeasures and international travel bans in Japan and Thailand have led to postponement and cancellation of some activities, including in-country training in Thailand, study visits to Japan, visit by Japanese experts, participation to international conference, and direct person-to-person communication between executive officers. It is expected that the implementation of these activities will be more focused in the second half of the project with the ease of COVID-19 countermeasures. Online platform has advantages for easier participation, but it is still difficult to have intensive talk/discussion, and relationship building compared to onsite programs.

2) Heavy workload of project members

Due to the impacts of COVID-19 in Thailand, many of the project stakeholders have encountered increasing workload to respond to high demand for healthcare and health security services. It is understood the impact have not significantly affected the overall operation of the project, but it has, more or less, caused difficulty for project stakeholders to intensively and timely commit to the project as originally anticipated.

3) Yet-to-be-identified responsible persons in some activities

For example, after the pilot project in Bangkok with the support of Project Phase 1, the fee schedule under the NHSO was applied nationwide in October 2021. However, it is understood from the result of MTR, the information on the situation of the nationwide application, including constraints/challenges, have not been shared with the project sufficiently. It will be good if the monitoring results of the nation-wide application of the fee schedule is shared with the project in a timely manner for further possible contribution from the project.

4) Achievement targets

As mentioned in the section above, the achievement targets of the project outcomes are not clearly set. With the clear setting of the achievement target and monitoring on the progress, it will become easier for the project to consider and take necessary actions to achieve the target.

5. Conclusion

With the results of the MTR, it is fair to say that the project is on the right track to achieve the project purpose to strengthen the capacity on UHC implementation (health financing and health workforce) and global health of Thailand and other countries. Various project activities have been conducted effectively and flexibly under the difficulties of COVID-19 pandemic situation. Project activities constrained under the pandemic situation, will be focused in the second half of the project to generate project outputs, particularly of Output 2 (Capacity development for UHC implementation and global health in other countries) and Output 3 (Sharing of practices and lessons learnt in UHC implementation and global health). There are no severe inhibiting factors for the project operation identified by the MTR team.

Judging from the results of documents review and interview, planning, monitoring, and decision-making process for the implementation of project activities is considered appropriate. Communication and coordination among project members as well as with concerned personnel in participating countries have been effective and efficient with the use of online communication tools. It is expected combination of online and face-to-face communication are appropriately and flexibly used for the project management even after the ease of COVID-19 countermeasures in the rest of the project period. At the same time, further discussion among project team members would be required for some issues, such as the sharing of monitoring results of overall nationwide application of the fee schedule and approach for the outcome of the health workforce to enhance the effectiveness of the project.

As the project is a part of a long-term partnership initiative by Japan and Thailand, more discussion between Japanese and Thai project team members is also expected for the post-project approach as well as for the policy-institutional set-up to strengthen/sustain the cooperation with other countries.

6. Recommendations for the Second Half of the Project

Based on the findings from the MTR, there are recommendations for the second half of the project as presented below.

1) Strengthening of Each Project Component

1-1 Health Finance

As already planned by the project, further application of technical issues for the fee schedule, such as claim management and audit, is encouraged for the second half of the project period. It is also important for the project to monitor and share the situation, including challenges in terms of accessibility by the people as well as financial management, of the fee schedule among project members to consider further possible contribution from the project.

As raised by the several interviewees in the MTR, strengthening of health finance service to the elderly, particularly for intermediate care through the local government, may be a considered with the support of the project. Materials, lessons learnt as well as network of JICA S-TOP Project could be assets for this movement.

1-2 Health Workforce

As the outputs of the project to strengthen capacity development of health workforce to support UHC implementation is still not clearly identified, it is suggested to the project to clarify the achievement targets and approach for the targets to be achieved by the end of the project.

A series of CPD workshop was highly praised by the interviewees of participating countries in the MTR. Therefore, further interactions with participating countries through CPD workshops is recommended. There are also suggestions from the interviewees of participating countries for the CPD workshop to; 1) summarize/analyze/synchronize the situations of participating countries in the workshop, and 2) have follow-up session with specific countries.

1-3 UHC Resource Centers

Two UHC online resource centers on UHC and global health issues have been established with the support of the project on the websites of IHPP and NHSO. As the resource centers have a potential to be regional and global platforms for UHC, further development to provide more resources such as online trainings and modules, is expected. More exposure of the resource centers to stakeholders is also expected to make the centers as hubs for long-term promotion of global health.

1-4 Cooperation to participating countries

With the networking and ease of COVID-19 countermeasures, demands for country-specific programs, particularly in-country activities, from participating countries may increase. Accordingly, capacity of the project for international coordination/communication may be challenged. Therefore, it is considered important for the project to apply efficient coordination and implementation methods of international cooperation programs with the combination of onsite and online tools.

2) Monitoring of Project Activities

The JPMT meeting functions effectively to plan and monitor activities among project stakeholders. It is considered appropriate to continue monitoring process, including the monitoring format, and framework of JPMT meeting. It is also considered important for the project to clarify and monitor the achievement target of the Project Purpose.

3) Review/Revision of the Project Framework

Although the response to COVID-19 was not included in the original project design, as the project contributed largely to the response to the pandemic as a part of UHC implementation, it is fair to additionally highlight the contribution of the project in the response to the pandemic. It is also hinted to set the indicators of the Overall Goal of the Project linked with achievement targets of related policies, such as ‘Thailand Global Health Action Plan (2021-2027) to examine the long-term impact of the project.

4) More Exposure and Strengthening of the Japan-Thailand Partnership Initiative

The MTR team recommends more activities in the second half of the project to expose and strengthen the Japan-Thailand partnership initiative. Activities may include intensive preparation for UNGA 2023 and other relevant initiatives, which is already highlighted in the project plan, and generation of articles and other materials for publication.

5) Discussion for Post-Project Long-Term Approach

The MTR team considers the discussion for post-project long-term approach should be focused in the second half of the project to achieve the long-term goal of the partnership. Discussion for the long-term partnership may include high level policy dialogue and interaction to strengthen network for joint actions with participating countries. It is also important to discuss and set policy/institutional framework for a solid base of the network, in addition to the network of personnel, which may include the development of triangular cooperation model and/or Japanese-Thai UHC/global health consortium.

Attachment 1

Interview Questions and Targets of the Interview

Attachment 1: Interview Questions and Targets of the Interview

Classification of Interviewees

A: High Rank Officers/Advisors

B: Management Personnel of the Project

C: Working Team Members

D: Priority/Target/Participating Countries

E: JICA Head Office and Thailand Office

F: Chief Advisor and other Japanese Experts

Subject	Interview Questions	Interviewee						Summary of Findings
		A	B	C	D	E	F	
RELEVANCE								
R1. Relevance in the national policy of Thailand	R1.1 Is the Global Health (GH) and UHC remained relevant in the national policy of Thailand? Are there changes in the relevance from the start of the Project Phase 1 in 2016 and Phase 2 in 2020? Are there changes in the relevance expected in the future?	<input type="radio"/>						
	R1.2 Are there succeeding policies of 'Thailand's Global Health Strategic Framework (2016-2020)'?	<input type="radio"/>						
	R1.3 Has COVID-19 pandemic affected, or is the pandemic going to affect, the policy of Thailand on GH and UHC particularly on health finance and health workforce?	<input type="radio"/>						
	R1.4 Are GH and UHC issues relevant as a cooperation program of Thailand for other countries? Are there changes in the relevance from the start of the Project Phase 1 in 2016 and Phase 2 in 2020? Are there changes in the relevance expected in the future?	<input type="radio"/>						
R2. Relevance of cooperation /needs of Japan, Thailand, and participating countries	R2.1 Is the institution/experience/know-how of Japan on GH and UHC remained relevant for the institutional/human resource development of GH and UHC in Thailand?		<input type="radio"/>	<input type="radio"/>				
	R2.2 Is the role of project remained relevant for the promotion of GH and UHC in Thailand? What are expectations to the project?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
	R2.3 Is the project relevant to improve GH and UHC of other countries? What are expectations to the project?				<input type="radio"/>			
	R2.4 Has the COVID-19 pandemic affected, or is the pandemic going to affect, the expectations to the project?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			
	R2.5 Is the project relevant to improve the approach to GH and UHC in Japan? What are expectations?					<input type="radio"/>	<input type="radio"/>	
R3. Relevance of project framework	R3.1 Is the project framework appropriate to support the institutional/human resource development of Thailand and other countries, in terms of target (including priority/target/participating countries), logic, approach, inputs/resources, and others?		<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	

Subject	Interview Questions	Interviewee						Summary of Findings
		A	B	C	D	E	F	
	R 3.2 Are the logic of the narrative summary and OVIs clearly set?		○	○		○	○	
COHERENCE								
C1. Consistency with the policy of Japan	C1.1 Is the project consistent with the development assistance policy of Japan/JICA?					○		
	C1.2 Has the COVID-19 pandemic affected, or is the pandemic going to affect, the policy of Japan on the partnership for GH and UHC with Thailand?					○	○	
C.2 Synergy effects/interaction with other programs/Projects	C2.1 Are there synergy effects/interactions with other JICA programs/projects in Thailand, including those with S-TOP Project, and participating countries? What are expected effects?		○	○		○	○	
EFFECTIVENESS								
EFE1. Objectives of the Project	EFE1.1 How do you assess the progress to achieve the Project Purpose (strengthening of the capacity for UHC implementation) in Thailand and other countries?	○	○			○	○	
	EFE1.2 How do you assess the progress to achieve the Project Purpose (strengthening of capacity for GH in Thailand and other countries)?	○	○			○	○	
	EFE1.3 How can the achievement of the project purpose be assessed? Does OVI (number of recommendations on UHC implementation proposed to policy decision/or practical process by the project) indicate the achievement of the project?	○	○			○	○	
	EFE1.4 Are there any obstacles/constraints/concerns to achieve the Project Purpose?	○	○			○	○	
	EFE1.5 What are the issues to be focused/prioritized in the rest of the project period?	○	○			○	○	
EFE2. Output 1 of the Project	EFE2.1 How do you assess the progress to generate the Output 1 (Learning and sharing of UHC experience between Thailand and Japan to contribute to improving UHC in both countries)?	○	○	○			○	
	EFE2.2 Have the Outcomes (including recommendations) of the capacity development program been documented (OVI 1)?			○			○	
	EFE2.3 Have the recommendations on UHC implementation of Thailand been submitted to policy makers (OVI 2)?			○			○	
	EFE2.4 Are there any obstacles/constraints/concerns to learn/share experience on UHC between Thailand and Japan and apply in Thailand/Japan?		○	○			○	
	EFE2.5 What are the issues to be focused/prioritized in the rest of the project period?		○	○			○	
EFE3. Output 2 of the Project	EFE3.1 How do you assess the progress to achieve the Output 2 (organization of capacity development for UHC implementation and GH in other countries)?	○	○	○	○		○	
	EFE3.2 Has the collaboration plan of UHC implementation including country specific situation been completed (OVI 1)? For how many and how many are left?			○			○	
	EFE3.3 Have the GH diplomacy workshops been partially supported (OVI 2)? How are the effects of the workshops?			○	○		○	

Subject	Interview Questions	Interviewee						Summary of Findings
		A	B	C	D	E	F	
	EFE3.4 Are there other meetings, trainings, and activities related to UHC, in particular health financing and health workforce, partially supported (OVI 3) ? How are the effects of the activities?			○	○		○	
	EFE3.5 Are there any obstacles/constraints/concerns to organize capacity development of UHC implementation and GH in other countries?		○	○	○		○	
	EFE3.6 What are the issues to be focused/prioritized in the rest of the project period?		○	○	○		○	
EFE4. Output 3 of the Project	EFE4.1 How do you assess the progress to achieve the Output 3 (sharing and promotion of practical practices and lessons learnt in UHC implementation and GH (mainly from Japan and Thailand) at national, regional, and global levels?	○	○	○			○	
	EFE4.2 Are Resource Centers for UHC and GH available for the materials of study visits, recommended materials, e.g., books, papers, and videos (OVI1)?			○			○	
	EFE4.3 Do you use the materials/information available at the Resource Centers for UHC and GH? Are there recommendations for development?				○			
	EFE4.4 Have practical practice and lessons learnt in UHC implementation and GH been shared through international forums, e.g., PMAC, ASEAN, WHO, government body (OVI2)?			○			○	
	EFE4.5 Are there any obstacles/constraints/concerns to share and promote practical practices and lessons learnt in UHC implementation and GH at national, regional, and global levels?		○	○			○	
	EFE4.6 What are the issues to be focused/prioritized in the rest of the project period?		○	○			○	
	EFFICIENCY							
EFI1. Management of the Project	EFI1.1 Is coordination/communication among project members appropriate? If there are obstacles/constraints in the coordination, what are they?		○	○	○		○	
	EFI1.2 Is the decision-making process for project activities/management appropriate? If there are obstacles/constraints in the decision making process, what are they?		○	○			○	
	EFI1.3 Is the monitoring (mechanism and implementation) of project progress appropriate? If there are obstacles/constraints in the monitoring, what are they?		○	○			○	
	EFI1.4 Are concept/ framework of the project clearly shared among project members?		○	○			○	
	EFI1.5 Does the project have sufficient capacity and clear structure to communicate/ coordinate with a number of priority/target/participating countries?		○	○			○	
	EFI1.6 Have the WFH and online communication under COVID-19 pandemic affected management of the project? How the project has been affected, and how to deal with it in the rest of the project period?		○	○			○	
EFI2. Implementation of project activities	EFI2.1 Are there constraints/delays to implement project activities? What are the reasons (input, time, etc.) and how are they affecting overall project progress?		○	○	○		○	

Subject	Interview Questions	Interviewee						Summary of Findings
		A	B	C	D	E	F	
	EFI2.2 Have the COVID-19 and countermeasures (WFH, online communication/ coordination/ implementation, infection by staff, etc.) affected the implementation of project activities? How the project has been affected, and how to deal with it in the rest of the project period?		<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	
	EF2.3 Are there concerns on the implementation of project activities in the second half of the project? If yes, what are they?		<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	
EFI3. Utilization of resources and outcomes of Phase 1	EFI3.1 Are the resources and outcomes of the Project Phase 1 being utilized in the Project Phase 2?		<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	
IMPACT								
I1. Achievement of Overall Goal	I1.1 How the partnership between Thailand and Japan on UHC and GH can be strengthened in the long run? How can the achievements be measured?	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	
	I1.2 How the partnership between Thailand and Japan on UHC and GH can be used to support other countries? How can the achievements be measured?	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	
	I1.3 Does the Overall Goal of the project and OVI (contribution of assets from the project to strengthen UHC and GH movements) represent the expectation?	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	
I2. Contribution of the Project	I2.1 How is the project expected to contribute to realize the overall goal?	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	
	I2.2 Are synergy effects with other initiatives expected to realize the overall goal?	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	
I3. Other impacts	I3.1 Has the project contributed to the countermeasures on COVID-19? Is the project going to contribute to the countermeasures on COVID-19 or other future pandemics?	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	
	I3.2 Are there other positive/negative impacts of the project generated, or going to be generated?	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	
SUSTAINABILITY								
S1. Policy/Institution	S1.1 Are policies/ institutions to support UHC and GH to be sustained in Thailand?	<input type="radio"/>						
	S1.2 Are policies for cooperation to other countries on UHC and GH sustained?	<input type="radio"/>						
S2. Outcome of the Project	S2.1 Does the capacity of Thailand to support UHC implementation and GH in other countries maintained/further strengthened?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
	S2.2 Do the Resource Centers for UHC and GH have sufficient financial and human resources to be sustained?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				

Attachment 2

Mid-Term Review/ Achievement Grids

Attachment 2: Mid-Term Review/ Achievement Grids

Mid-Term Review Grid

Subject	Questions	Summary of Findings
RELEVANCE		
R1. Relevance in the national policy of Thailand	R1.1 Is the GH and UHC remained relevant in the national policy of Thailand?	<ul style="list-style-type: none"> • Relevance of GH and UHC is maintained in the national policy of Thailand. Importance on enhancing efficiency of public health service system and improving the health financing system are also highlighted in the ‘12th National Economic and Social Development Plan (2017-2022)’. In the 13th Plan (2023-2027), promotion of the GH is highlighted in the Strategy 2 of Mission 4 to driving Thailand as a Global Health Promotion Service Center. • When the GLO+UHC Project Phase 1 started in 2016, global health issue was still fresh in Thailand. With the participation to the global health events through the project and other channel, Thai side is getting more interested and confident to promote global health based on its experience. • Awareness for UHC has increased. NHSO’s benefit package on UHC is expanding. There are more universities started activities on the global health.
	R1.2 Are there succeeding policies of ‘Global Health Strategic Framework (2016-2020)’?	<ul style="list-style-type: none"> • ‘Thailand Global Health Action Plan (2021-2027)’ has been published and enforced by MOPH.
	R1.3 Has COVID-19 pandemic affected, or is the pandemic going to affect, the policy of Thailand on GH and UHC particularly on health finance and health workforce?	<ul style="list-style-type: none"> • Although COVID-19 pandemic has not affected the national policy level towards the project, attention to the UHC is also increasing at each level. • People are more aware on UHC with COVID-19. NHSO’s 1330 hotline has been used to respond to COVID-19 patients.
	R1.4 Are GH and UHC issues relevant as a cooperation program of Thailand for other countries?	<ul style="list-style-type: none"> • It is important for Thailand to learn health care system management from other countries to improve the system and to cooperate with other countries. For instance, as Thailand is facing increasing migrant workers from neighboring countries, NHSO has to consider the development of comprehensive health security mechanism in cooperation with these countries.
R2. Relevance of cooperation /needs of Japan, Thailand, and participating countries	R2.1 Is the institution/experience/know-how of Japan on GH and UHC remained relevant for the institutional/human resource development of GH and UHC in Thailand?	<ul style="list-style-type: none"> • Institution/experience/know-how on GH and UHC of Japan is remained relevant for institutional/human resource development in Thailand. Importance to localize the system learnt from Japan to apply in Thailand was also highlighted in the interview to be coherent with the contexts of the Thai healthcare system. • Fee schedule has been expanded nationwide with the contribution of the project by sharing experience of Japan. But it is still limited scope and there are many fields to learn including experience from Japan, to improve the program, particularly Audit System. There are also challenges for UHC, such as increase in NCDs and support for the elderly (intermediate care), application of health tech. Further cooperation with Japan is effective to support the initiatives in Thailand.

Subject	Questions	Summary of Findings
	R2.2 Is the role of project remained relevant for the promotion of GH and UHC in Thailand?	<ul style="list-style-type: none"> • Role of project remained relevant for the promotion of GH and UHC in Thailand. High priority has been given to UHC at country, region, and global levels. Expectations to the project to promote GH and UHC is high.
	R2.3 Is the project relevant to improve GH and UHC of other countries?	<ul style="list-style-type: none"> • Cooperation between Japan and Thailand is expected to be a good model to share the experience of an advanced country and a middle-income country which learnt and practically applied the experience of the advanced country. • Asset of Japan, such as rich experience and human resources as well as operation bases (JICA offices) and network for international cooperation, can be utilized for the joint cooperation program by Japan and Thailand. Thai side aims to strengthen the cooperation with JICA, including those for cooperation to other countries, based on the long-term partnership. • Expectations of participating countries to learn from the experience of Thailand supported by Japan is high, particularly of countries having similar socioeconomic background as well as challenge with Thailand.
	R2.4 Has the COVID-19 pandemic affected, or is the pandemic going to affect, the expectations to the project?	<ul style="list-style-type: none"> • With the COVID-19 pandemic, attention to the UHC is also increasing at each level. Demands of health personnel to learn from the experience of other countries are increasing with the pandemic.
	R2.5 Is the project relevant to improve the approach to GH and UHC in Japan?	<ul style="list-style-type: none"> • Partnership between Thailand and Japan for the approach to the international platforms, including UNGA 2023, will be a good chance to enhance the presence of Japan on the health diplomacy. • There are various opportunities to learn each other both for Thai and Japanese sides through the project activities.
R3. Relevance of project framework	R3.1 Is the project framework appropriate to support the institutional/human resource development of Thailand and other countries, in terms of target (including priority/target/participating countries), logic, approach, inputs/resources, and others?	<ul style="list-style-type: none"> • The framework of the project is considered appropriate. It is also reasonable to focus on the selected subject, i.e., health finance and health workforce as well as target countries from the experience of the last phase of the project. • With the nature of the project, which is a long-term partnership between Thailand to deal with global issues, the project framework should be flexibly adjusted with the situation/needs/opportunities at country, region, and global levels. • However, from the perspective of the project management, it is considered necessary for the project to clarify the achievements target of the overall goal as well as the approach to achieve the target with the outcomes of the project.
	R 3.2 Are the logic of the narrative summary and OVIs clearly set?	<ul style="list-style-type: none"> • Overall goal of the project as well as achievement target of the project have not been clearly set yet.
COHERENCE		
C1. Consistency with the policy of Japan	C1.1 Is the project consistent with the development assistance policy of Japan/JICA?	<ul style="list-style-type: none"> • The project was formulated as a partnership program of Japan and Thailand to support other countries on UHC and the policy is sustained. Expectation to establish dynamic cooperation mechanism in partnership with Thailand is

Subject	Questions	Summary of Findings
C.2 Synergy effects/interaction with other programs/Projects		<p>remained high. The project is also consistent with the policy of Japan to support SDGs, particularly on the Goal 17 ‘Sustainable development knowledge platform’</p> <ul style="list-style-type: none"> Commitment of Japanese government on the GH is maintained, as represented in the speech of the Prime Minister Suga in May 21, 2021 at the Global Health Summit in which he emphasized on the importance of the global health.
	C1.2 Has the COVID-19 pandemic affected, or is the pandemic going to affect, the policy of Japan on the partnership for GH and UHC with Thailand?	<ul style="list-style-type: none"> Though response on the COVID-19 and future pandemic have not clearly integrated in the GH and UHC policy of Japan, COVID-19 pandemic also highlighted the world-wide importance on UHC and international cooperation in the global health issue. JICA takes initiatives for programs, including COVID-19 Crisis Response Emergency Support which also targets Thailand.
	C2.1 Are there synergy effects/interactions with other JICA programs/projects in Thailand, including those with S-TOP Project, and participating countries?	<ul style="list-style-type: none"> A collaborative activity on IPE with S-TOP Project was conducted in Aug 2021 Cooperation with other technical cooperation projects in the UHC fields in other countries are the advantage of the JICA projects. This is expected to establish/strengthen the networking with health administration of other countries. JICA country offices also function as focal points for the networking with the project, and could continue to be focal points of the Japan-Thailand partnership global health approach in other countries.
EFFECTIVENESS		
EFE1. Objectives of the Project	EFE1.1 How do you assess the progress to achieve the Project Purpose (strengthening of the capacity for UHC implementation) in Thailand and other countries?	<ul style="list-style-type: none"> Strengthening of the capacity is on the right track. The project managed to conduct various online activities, including those for participating countries, under the COVID-19 pandemic, despite increasing work load in the health sector. Several factors were raised in the interview for effective and flexible implementation of project activities as below; <ol style="list-style-type: none"> Use of online tools, Relevance of UHC in the pandemic situation, Assets from Phase 1, Utilization of assets of network, Commitment by project members Focus on the selected issues/ countries
	EFE1.2 How do you assess the progress to achieve the Project Purpose (strengthening of capacity for GH in Thailand and other countries)?	
	EFE1.3 How can the achievement of the project purpose be assessed? Does OVI (number of recommendations on UHC implementation proposed to policy decision/or practical process by the project) indicate the achievement of the project?	<ul style="list-style-type: none"> It is understood that there are positive and significant contribution by the project to be a trigger and/or booster to accelerate the movements. However, as the strengthening of the capacity is the results of collective activities with various initiatives, it is challenging to consider the achievement of the project separately. It is also challenging for the project to set quantitative indicators due to the characteristics of the project. The publication in international journals or other publication on the achievements of GLO+UHC project operation can be tangible outputs for public access.
	EFE1.4 Are there any obstacles/constraints /concerns to achieve the Project Purpose?	<ul style="list-style-type: none"> The project is on the right track according to the project design and there are no serious obstacles/constraints /concerns to achieve the Project Purpose.

Subject	Questions	Summary of Findings
	EFE1.5 What are the issues to be focused/prioritized in the rest of the project period?	<ul style="list-style-type: none"> • Picture of the long-term goal and approach/commitments to achieve the goal should be discussed and necessary actions can be taken accordingly. This may include the networking between executive officers of Japan and Thailand to strength the partnership in GH and UHC to contribute at the international level. • It is also important for the project to consider sustainability for the network with personnel/ organizations in participating countries. Approaches for post-project systematic cooperation/coordination with existing platform such as WHO, ASSA and AAAH may be highlighted with the initiatives of Thai project team members. • Generation of Outputs 2 and Output 3 could be more focused with more international onsite activities. For the fields of activities, progress/activities on the Health Workforce should be more focused in the second half of the project.
EFE2. Output 1 of the Project	EFE2.1 How do you assess the progress to generate the Output 1 (Learning and sharing of UHC experience between Thailand and Japan to contribute to improving UHC in both countries)?	<p><Health Financing (HF)></p> <ul style="list-style-type: none"> • Project set 5 areas under UHC financing management and plan/implement activities accordingly; 1. Fee schedule, 2. Claim and Audit , 3. DRG, 4. Consumer Protection Service, and 5. Primary Health Care. After the pilot project in Bangkok, fee schedule was launched nationwide in Oct 2021. Function of the fee schedule is still limited and further improved in the areas such as Audit/ reimbursement system, and clam management. <p><Health Workforce (HW)></p> <ul style="list-style-type: none"> • Three working teams were formed, i.e., 1) Health Workforce Education Working Team for Interprofessional Education (IPE), 2) Health Workforce Management Working Team for health workforce distribution (registry) and 3) Health Workforce Management Working Team for health workforce quality improvement (CPD: Continuing Professional Development). • Compared with HF, progress and outcomes in the field of the HW are still not clearly identified. Although the issue is more conceptual and not easy to see the tangible outcomes in the short period, approaches to generate outcomes with the support of the project should be discussed. • Field of HW in Thailand may require reform the paradigm of health workers as the health workforce in Thailand is struggling to provide healthcare services effectively. It is big challenge, buy will also be a good practice for other countries in the long run. <p><Other></p> <ul style="list-style-type: none"> • Health Information System: 4 researchers of the second batch ae working on the proposals on some issues. NHSO and PSU are preparing aggregated data for iGHP.

Subject	Questions	Summary of Findings
	EFE2.2 Have the Outcomes (including recommendations) of the capacity development program been documented (OVI 1)?	<ul style="list-style-type: none"> The draft of technical brief on HW Volume 1 in “Physicians’ Distribution and Registry” was issued in June 2022 based on presentations, discussions, comments, feedbacks from PMAC 2022 Side Meeting with the purpose to share lessons learnt and challenges of physician distribution among countries.
	EFE2.3 Have the recommendations on UHC implementation of Thailand been submitted to policy makers (OVI 2)?	<ul style="list-style-type: none"> There have policy recommendations/implementations regarding UHC supported by the project, such as nationwide application of the fee schedule. Development of more recommendations are expected in the second half of the project.
	EFE2.4 Are there any obstacles/constraints/ <concerns to learn/share experience on UHC between Thailand and Japan and apply in Thailand/Japan?	<ul style="list-style-type: none"> The project has constraints to monitor the overall progress of the nationwide application of fee schedule without clear communication channel, though there are clear responsible persons and for each subject (claim review and audit system, consumer protection service, etc.).
	EFE2.5 What are the issues to be focused in the rest of the project period?	<p><Health Financing></p> <ul style="list-style-type: none"> Application of technical issues for the fee schedule, such as claim review and audit system including Real-time On-Screen Review System, etc. to operate the fee schedule more effectively and efficiently. Sharing of monitoring results of nation-wide application of the fee schedule in terms of health care access and budget effectiveness with the project for further contribution from the project. Service for intermediate care through the fund program of local government may be considered in cooperation with the S-TOP project. <p><Health Workforce></p> <ul style="list-style-type: none"> Discussion for the outcomes of the project and approach. Further interaction with participating countries through CPD workshop and network from the workshop.
EFE3. Output 2 of the Project	EFE3.1 How do you assess the progress to achieve the Output 2 (organization of capacity development for UHC implementation and GH in other countries)?	<ul style="list-style-type: none"> 8 target countries were selected and remained as main target for international programs. Project also has coordination/communication with several countries for country-specific programs. Situation analysis report have been documented to analyze Thailand and 8 priority/target countries. Outputs of the project, such as technical papers, have been shared with participating countries. Country specific online meetings/workshops have been conducted with some country, such as Lao PDR, Sudan, and Vietnam, even under the constraints of COVID-19. More activities are planned for the second half of the project. According to the interviewees in Lao PDR, cooperation with the GLO+UHC project is effective and efficient as the country has similar health system and understand the language each other. The result of the workshop with the GLO+UHC Project contributed to the development of a guideline/online database

Subject	Questions	Summary of Findings
		<p>for claim management (under development). Discussion is also going on how health financing should be improved.</p> <ul style="list-style-type: none"> • For Sudan, counterpart personnel show the interest to learn from the experience of Thailand and cooperation activities, including in-country training in Thailand. More cooperation is expected in the second half of the project upon the completion of MoU between the projects. • Participation to the series of workshop on CPD has been a good opportunities for learning experience of participants as well as to consider the situation of their own countries through the response to the questionnaires and preparation of presentation material. • After the participation to the workshop, counterpart organization in Cambodia started communication with Thailand Nursing and Midwifery Council (TNMC) with the support of Japanese experts and country specific activities are expected.
	EFE3.2 Has the collaboration plan of UHC implementation including country specific situation been completed (OVI 1)?	<ul style="list-style-type: none"> • Discussion is going on with several countries, such as Lao PDR, Sudan, and Cambodia.
	EFE3.3 Have the GH diplomacy workshops been partially supported (OVI 2)?	<ul style="list-style-type: none"> • The activities implemented in the 2nd phase of the project operation mainly concentrates on the particular issues and challenges in healthcare system to support GH such as health finance and health workforce. There is an expectation for further project implementation in diplomacy workshop in GH in overview before project completion.
	EFE3.4 Are there other meetings, trainings, and activities related to UHC, in particular health financing and health workforce, partially supported (OVI 3) ?	<ul style="list-style-type: none"> • For CPD system improvement, the AAAH has planned to organize 5 online workshops (webinar) bimonthly based on the comments and suggestions from the participants with 13 counterpart countries, maximum 5 participants from each country. It is expected to complete in November 2022.
	EFE3.5 Are there any obstacles/constraints/ concerns to organize capacity development of UHC implementation and GH in other countries?	<ul style="list-style-type: none"> • With the development of online platform (websites) and gained knowhow from the Phase 1 project, communication/coordination are more systematically and efficiently done, even in the COVID-19 pandemic situation. This includes provision of online material, online training module, etc. • With the networking with other countries and ease COVID-19 countermeasures, demands for country-specific programs, particularly in-country activities, from participating countries may increase. Accordingly, capacity of the project for international coordination/communication may be challenged.
	EFE3.6 What are the issues to be focused in the rest of the project period?	<ul style="list-style-type: none"> • Activities for participating countries can be continued. In-country activities may be planned/implemented after the ease of countermeasures for COVID-19.

Subject	Questions	Summary of Findings
		<ul style="list-style-type: none"> • There are suggestions from the participating countries on the CPD workshops; 1) session to summarize/analyze/synchronize the situations of participating countries, 2) follow-up session with specific countries. • Sustainability for the network with participating countries should be considered, including establishment of institutional framework for cooperation as well as strengthening of relationship with existing platforms such as ASSA and AAAH.
EFE4. Output 3 of the Project	EFE4.1 How do you assess the progress to achieve the Output 3 (sharing and promotion of practical practices and lessons learnt in UHC implementation and GH (mainly from Japan and Thailand) at national, regional, and global levels?)	<ul style="list-style-type: none"> • Project organized/participated events to share and promote practice at national, regional, and international level, such as series of CPD workshops organized by AAAH, UHC Journey, GH Diplomacy Workshop, JICA UHC Open House, etc. • Project also organized the webinar on ‘Mitigating the impact of COVID-19 on MCH health’ in Dec 2021 as PMAC side meeting.
	EFE4.2 Are Resource Centers for UHC and GH available for the materials of study visits, recommended materials, e.g., books, papers, and videos (OVI1)?	<ul style="list-style-type: none"> • Online resource centers have been launched on the websites of IHPP and NHSO. Both are updated/maintained respectively. Materials accumulated from Phase 1 project have been available on the sites. • Further development of the resource centers are expected to provide online self-study resources and material for stakeholders in Thailand, Japan, and participating countries. The centers also can be hubs of Japan-Thailand partnership.
	EFE4.3 Do you use the materials/information available at the Resource Centers for UHC and GH?	<ul style="list-style-type: none"> • Japanese experts in Cambodia and Sudan are aware of the centers and expect the use by counterpart personnel in the countries. However, interviewees from Lao PDR were not aware of the centers. More PR of resource centers is required.
	EFE4.4 Have practical practice and lessons learnt in UHC implementation and GH been shared through international forums (OVI2)?	<ul style="list-style-type: none"> • Project participated programs in Thailand and online programs to share and promote the practice at national, regional, and international level, such as UHC Journey, GH Diplomacy Workshop, JICA UHC Open House, etc. More active participation, including UNGA 2023, is expected in the second half of the project.
	EFE4.5 Are there any obstacles/constraints/concerns to share and promote practical practices and lessons learnt in UHC and GH at national, regional, and global levels?	<ul style="list-style-type: none"> • Compared with the Phase 1, interaction between high level officers has been weak in the Phase 2. COVID-19 is one of constraints. Interaction at the higher level is expected in the second half of the project to strengthen the partnership for joint approach to GH.
	EFE4.6 What are the issues to be focused/prioritized in the rest of the project period?	<ul style="list-style-type: none"> • Further development and more exposure to the stakeholders, particularly those in other countries, of RC is expected to make the RC as hubs for long-term promotion center for GH. Generation of tangible outcomes, such as publication at the international journals and publication through the RCs are considered important. • Networking with other international partners and platforms, such as WHO country office, as well as policy-institutional set-ups to strengthen partnership is also important to maximize the outcome of the cooperation in the long run.

Subject	Questions	Summary of Findings
EFFICIENCY		
EFI1. Management of the Project	EFI1.1 Is coordination/communication among project members appropriate?	<ul style="list-style-type: none"> • There are no serious constraints on the implementation and monitoring of project activities as well as management of the project. JPMT functions well for the monitoring of project activities as well as decision level at the activity level. • Project activities are monitored systematically based on the project design by JPMT members. There has been concern on the sharing of monitoring results of the Fee Schedule after nationwide application. • From Thai side, it will be good if turnover rate of Japanese experts is reduced. • Concept/ framework of the project, including logic and indicators, is shared among JPMT members. Approach to achieve overall goal as well as indicators of the project purpose can be further discussed in the second half of the project. • Communication with participating countries is going well with the support of Japanese experts. Online communication has been an effective tool. • With the expected increasing demand for country-specific programs, particularly in-country activities, from participating countries, capacity of the project for international coordination/communication may be challenged. • Coordination has not been much affected by the WFH and online communication. Project uses online meeting to make progress of activities to minimize the delay. • With COVID-19, more online communication are being used both in Thailand and participating countries. This has made international coordination easier. • NHSO staff had to concentrate on the response to COVID-19 temporarily at the time of expansion of new variants, but it did not significantly affect the operation of project activities.
	EFI1.2 Is the decision-making process for project activities/management appropriate?	
	EFI1.3 Is the monitoring (mechanism and implementation) of project progress appropriate?	
	EFI1.4 Are concept/ framework of the project clearly shared among project members?	
	EFI1.5 Does the project have sufficient capacity and clear structure to communicate/ coordinate with a number of priority/target/participating countries?	
	EFI1.6 Have the WFH and online communication under COVID-19 pandemic affected management of the project?	
EFI2. Implementation of project activities	EFI2.1 Are there constraints/delays to implement project activities?	<ul style="list-style-type: none"> • Although some delays in the project activities were reported in the interview of MTR, such as AI development for audit system, there are no significant constraints/delays to implement project activities. Resource Centers on the websites of IHPP and NHSO have been launched ahead of the planned schedule.
	EFI2.2 Have the COVID-19 and countermeasures (WFH, online communication/ coordination/ implementation, infection by staff, etc.) affected the implementation of project activities?	<ul style="list-style-type: none"> • Project activities, including activities with participating countries, have been conducted flexibly and efficiently under the pandemic. • There are Pros and Cons for on-site and online to implement activities. Activities with online can reduce the travel and administrative/coordination costs and invite more and various participants, though relations-building and concentration to the activities are remained as challenging issues. On-site activities are good to deepen the relationship and more effective in terms of learning due to the direct talk/observation and more concentration, but needs more coordination and costs for the organizer. Some facilities, particularly health facilities, may be remained reluctant to accept visitors for a while.

Subject	Questions	Summary of Findings
	EFI2.3 Are there concerns on the implementation of project activities in the second half of the project?	<ul style="list-style-type: none"> • There are no serious concerns on the implementation of project activities in the second half of the project recognized in the MTR.
EFI3. Utilization of resources and outcomes of Phase 1	EFI3.1 Are the resources and outcomes of the Project Phase 1 being utilized in the Project Phase 2?	<ul style="list-style-type: none"> • Resources from Project Phase 1 have been effectively utilized for the project activities, such as outcomes from research as well as materials for resource centers. Outcomes of the Phase 1 project are also compiled and published through the websites of NHSO and IHPP.
IMPACT		
I1. Achievement of Overall Goal	I1.1 How the partnership between Thailand and Japan on UHC and GH can be strengthened in the long run? How can the achievements be measured?	<ul style="list-style-type: none"> • Utilization of network between concerned persons and organizations established/ strengthened during the project is expected to strengthen the partnership between Thailand and Japan. Experience gained through the project activities are also expected to contribute to fostering personnel leading global health movement of Thailand. However, establishment of long-term policy/institutional framework is considered important to ensure/accelerate the movements for the partnership.
	I1.2 How the partnership between Thailand and Japan on UHC and GH can be used to support other countries? How can the achievements be measured?	<ul style="list-style-type: none"> • Personnel network strengthened through the project can be an asset for further cooperation, however establishment of policy/institutional framework is also considered important to strengthen the partnership to support other countries. • Formation of Thailand-Japanese GH/UHC consortium may be considered based on the partnership of two countries. Number of participating countries to the consortium may also be a measurable achievement target. • It is also important to collaborate with international network, such as WHO regional network and UHC 2030 to support other countries effectively and efficiently. Use of online tools/platform, including document and video materials through the resource centers, as well as strengthening of network with international platform/networks may be considered.
	I1.3 Does the Overall Goal of the project and OVI (contribution of assets from the project to strengthen UHC and GH movements) represent the expectation?	<ul style="list-style-type: none"> • Overall goal of the project, as well as project purpose, are broadly set and achievements targets are not clearly defined. • Achievement targets of related policy, such as ‘Thailand Global Health Action Plan (2021-2027), may be referred to consider the indicators of the overall goal.
I2. Contribution of the Project	I2.1 How is the project expected to contribute to realize the overall goal?	<ul style="list-style-type: none"> • Outcomes of the project as well as human resources and network gained through the project activities are considered as assets to promote supports GH and UHC at nation, region, and global levels. Degree of contribution may depend on policy/institutional set-up and long-term commitments from Thai/ Japanese sides.
	I2.2 Are synergy effects with other initiatives expected to realize the overall goal?	<ul style="list-style-type: none"> • The project has cooperation with other international development partners on UHC and aims to establish international platform in Thailand to support the cooperation for UHC in other countries. The cooperation should be strengthened by the end of the project to utilize various resources flexibly and effectively.

Subject	Questions	Summary of Findings
		<ul style="list-style-type: none"> Utilization of network and advantage of JICA, i.e., technical cooperation projects in the related fields, and JICA country offices as focal points of coordination/networking can be continued and fully utilized to achieve the overall goal. Efforts to enhance the awareness on partnership approach to UHC and GH by the international platform should be strengthened through publication of materials, participation to related events, commitment to the platform activities, etc. Outcomes of the project can be utilized in other policy/initiative, such as ‘Thailand Global Health Action Plan (2021-2027) and ‘Thailand and WHO Country Cooperation Strategy (CCS) (2022-2026) to generate synergy effect.
I3. Other impacts	I3.1 Has the project contributed to the countermeasures on COVID-19? Is the project going to contribute to the countermeasures on COVID-19 or other future pandemics?	<ul style="list-style-type: none"> Project has contributed to the response to the COVID -19 through online seminar, workshop on health workforce measures, etc. As the project committed much to the response to the COVID -19 and as the issues is quite important during the project period, contribution of the project on the response to COID-19 could be additionally highlighted in the project design and outcomes.
	I3.2 Are there other positive/negative impacts of the project generated, or going to be generated?	<ul style="list-style-type: none"> As UHC and GH issues are broad, many of the contributions of the project, including response to COVID-19, are included as the impacts of the project. There are no negative impacts of the project identified in the MTR.
SUSTAINABILITY		
S1. Policy/Institution	S1.1 Are policies/ institutions to support UHC and GH to be sustained in Thailand?	<ul style="list-style-type: none"> UHC is a core health and health insurance policy in Thailand and to be maintained in the long run. It’s commitment to the GH is also stipulated in the ‘Thailand Global Health Action Plan (2021-2027)’
	S1.2 Are policies for cooperation to other countries on UHC and GH sustained?	<ul style="list-style-type: none"> Policies for cooperation to other countries on UHC and GH are sustained. Although NHSO’s mandate is serve for the Thai nationals and non-Thai nationals living in Thailand, it will maintain its policy to learn from other countries and to support other countries, particularly neighboring countries.
	S1.3 How does the partnership between Thailand and Japan contribute to the movement toward UHC after this project?	<ul style="list-style-type: none"> Networks between concerned persons and organizations established/ strengthened during the project will be utilized to strengthen the partnership between Thailand and Japan through formal and informal communication channel.
	S1.4 How should the two countries keep or promote the partnership to support other countries toward UHC after this project ends?	<ul style="list-style-type: none"> Network established between persons and organizations during the project will be maintained. Further discussion for policy/institutional framework for long-term partnership is expected during the project.
S2. Outcome of the Project	S2.1 Does the capacity of Thailand to support UHC implementation and GH in other countries maintained/further strengthened?	<ul style="list-style-type: none"> Capacity of Thailand to support UHC implementation and GH in other countries is expected to be maintained/further strengthened with the policy and more experience of concerned organization and personnel.
	S2.2 Do the Resource Centers for UHC and GH have sufficient financial and human resources to be sustained?	<ul style="list-style-type: none"> Resource Centers will be sustained under the responsibility of IHPP and NHSO. Both Resource Centers established at IHPP and NHSO have sufficient capacity for the maintenance and updates of information.

Achievement Grid

Narrative Summary	Indicators	Progress to the Indicator at the time of MTR
Project Overall Goal		
Partnership between Thailand and Japan on UHC and global health are strengthened and used to support other countries	Assets (e.g., resource center, human capacity, networks) from the project continue to contribute to strengthen UHC and global health movements	There are outcomes of the project, which potentially contribute to strengthen UHC and global health movements in the long run, such as UHC online resources centers established NHSO and IHPP, and human resource network between Japan, Thailand, and participating countries.
Project Purpose		
Capacity of UHC implementation in particular health financing and health workforce and global health of Thailand and other countries are strengthened	Number of recommendations on UHC implementation proposed to policy decision and/or practical process by the project	<p>There are recommendation papers on UHC implementation developed with the support of the project as provided below. The project has not systematically identified/compiled the outcomes of the project.</p> <p><u><Health Finance></u> The project issued technical report titled “Technical brief, Health Finance Volume 1 Fee Schedule” to review and share experiences of Thailand in the transformation from capitation basis and DRG system into expanding Fee Schedule system for Thai UCS in collaboration with the project as a reference for policymakers in participating countries. The report published in January 2022.</p> <p><u><Health Workforce></u> The project issued technical report titled “Technical brief, Health Workforce Volume 1 Physician Distribution and Registry” as a summary of the PMAC side event in 2022. The report was aimed to share lessons learnt and lead to the improvement of physician distribution among countries. The report published in June 2022.</p>
Project Outputs		
1.Experiences on UHC are learnt and shared between Thailand and Japan to contribute to improving the UHC in both countries	1.1. Outcomes (including recommendations) of the capacity development program in health financing and health workforce are documented	The comprehensive report of each thematic training and activity are not completely documented at the period of mid-term review yet. Discussion on the utilization of collaborative research among iGHP-NHSO-PSU is going on.
	1.2. Recommendations on UHC implementation of Thailand are submitted to policy makers	Same as the progress to the indicators of the Project Purpose.

Narrative Summary	Indicators	Progress to the Indicator at the time of MTR
2. Capacity development for UHC implementation and global health in other countries is organized	2.1. Collaboration plan of UHC implementation including country specific situation is completed.	Report of the 1 st capacity development program through the visit to Japan including the findings from Study trip on Claim Review and Audit in July 2022 and the comparison of health insurance system, claim review, and guidance and audit system between Japan and Thailand. The comprehensive report of collaboration plan and its implementation are not available at the period of the MTR yet.
	2.2. Global health diplomacy workshops are partially supported	Global Health Diplomacy Workshops were conducted online on May 5-7, 2021 and April 28-29, 2022 organized by International Health Policy Program (IHPP). Source: Official Facebook page of project
	2.3. Other meetings, trainings, and activities related to UHC, in particular health financing and health workforce, are partially supported	<p><Health Finance></p> <ul style="list-style-type: none"> - Online workshop between Thailand and Lao PDR on e-claim system (Dec 16, 2021) - Online workshop on policy options on financial matters to support the reform of health financing in Lao PDR (Mar 4, 2022) - Online meeting to identify collaboration areas: Claim review and health information; payment mechanisms, contribution, and research to support the reform of health financing in Sudan (May 19, 2022) <p><Health Workforce></p> <ul style="list-style-type: none"> - 2 online workshops on CPD system for nurses - Online lecture from Thailand Nursing and Midwifery Council (TNMC) to JICA project based in Cambodia - IPE session in the training of S-TOP Project (Aug 2021) <p>Source: GLO+UHC Phase2, Progress of activities as of July 2022</p>
3. Practical practices and lessons learnt in UHC implementation and global health (mainly from Japan and Thailand) are shared and promoted at national, regional, and global levels	3.1. Resource centers for UHC & global health are available (materials of study visits; recommended materials, e.g., books, papers, videos)	Online resources center established by the project published on the website of the 2 key counterpart organizations; NHSO and IHPP NHSO Resource Center: https://eng.nhso.go.th/view/1/Home/EN-US IHPP Resource Center: https://resourceihpp.com/site/home
	3.2. Practical practice and lessons learnt in UHC implementation and global health are shared through international forums, e.g., PMAC, ASEAN, WHO, government body.	PMAC 2022 Side Meeting: Webinar on measures to improve the distribution of Human Resource in Healthcare and then issued a technical brief titled “Health Workforce Volume 1 Physician Distribution and Registry” aimed to share lessons learnt of physician distribution among countries and as a reference for policy framework.

Narrative Summary	Indicators	Progress to the Indicator at the time of MTR
		PMAC 2022 Side Meeting: Webinar on MHC under the COVID-19 pandemic. (Technical brief is in preparation)

Attachment 3

***Presentation Material at the 2nd Joint
Coordinating Committee (JCC) Meeting***

Partnership Project for Global Health and Universal Health Coverage Phase 2

Mid-Term Review (MTR) Results

July 27, 2022
IC Net Asia Co., Ltd

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 - 2.4 Efficiency
 - 2.5 Impact
 - 2.6 Sustainability
- 3. Recommendations for the Second Half of the Project**

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1. Outline of the Mid-Term Review (MTR)

Objectives and Methods

- Objective**
- (1) To improve the quality of the project, especially the decision-making process, by learning from the experience of the first half.
 - (2) To ensure transparency and accountability of the project by disclosing its information extensively.

- Methods**
- Document Review
 - Interview with concerned personnel (15 interviews)
 - ✓ Japanese and Thai project members
 - ✓ JICA HQ/ Thailand Office
 - ✓ JICA Experts/ Counterpart personnel in participating countries (Cambodia, Lao PDR, Sudan)

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2. Review by 6 criteria

Relevance, Coherence, Effectiveness

1. Relevance & 2. Coherence (Remained Very High)

- In terms of policies of Thailand/Japan, Expectation of Thailand/Japan/Other countries, Project Framework
- Synergy effects with other technical cooperation projects and JICA offices to establish the networking

3. Effectiveness (High)

- Strengthening of the capacity of UHC implementation and GH : **On the Right Track**
- Implementation of various online activities under the COVID-19 pandemic
- Launch of Resource Centers at IHPP and NHSO
- Contributing Factors**
 - Effective and flexible use of online tools
 - Increase in the relevance of UHC in the pandemic situation
 - Assets from Project Phase 1
 - Utilization of network of participating organizations (JICA, AAAH, NHPE, Gunma Univ. etc)
 - Strong commitments of project members
 - Project design (focus on the selected issues and target countries)

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2. Review by 6 criteria

Efficiency, Impact, Sustainability

4. Efficiency (High)

- ❑ No serious constraints/concerns, delay in the implementation of the project activities
- ❑ Effective and efficient decision-making/coordination through online communication

5. Impact (Achievement of the Overall Goal is Expected, but approach should be discussed)

- ❑ Contribution for capacity development and networking for further partnership/cooperation
- ❑ Contribution to foster personnel leading global health movement
- ❑ Synergy with other policies/initiative, such as 'Thailand Global Health Action Plan (2021-2027) and 'Thailand and WHO Country Cooperation Strategy (CCS) (2022-2026)
- ✓ Degree of contribution of the project to achieve the overall goal **depends on the policy/ institutional set-up and long-term commitments from both sides**

6. Sustainability (Sustainability of project outcomes is Expected)

- ❑ Consistent with core health and health insurance policies of Thailand
- ❑ Expectation for further development/sustainability of institutional and human resource capacity

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3. Recommendations for the Second Half of the Project

Recommendations 1

1. Strengthening of Each Project Component

1-1 Health Finance (HF)

- Application of technical issues for the Fee Schedule, such as claim management and audit
- Sharing of monitoring results on the nation-wide application of the Fee Schedule
- Consideration for the health finance service to the elderly through local government

1-2 Health Workforce (HW)

- Discussion on the approach/activity for the outcomes of the project
- Further interactions with participating countries through CPD workshops

1-3 Resource Centers

- Further development of Resource Centers to provide online trainings, modules, etc.
- Exposure to stakeholders to make the centers as hubs for long-term promotion of GH

1-4 Cooperation to participating countries

- Efficient coordination and implementation of programs (combination of onsite/online tools)

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3. Recommendations for the Second Half of the Project

Recommendations 2

2. Monitoring of Project Activities

- Continuing use of monitoring process and format of JPMT meeting
- Documentation/preparation for indicators of the Project Purpose

3. Review/Revision of the Project Framework (Project Design Matrix)

- Highlight of responses to COVID-19 in the project design
- Setting of the indicators of the Overall Goal linked with the achievement targets of related policies, such as Thailand Global Health Action Plan (2021-2027)

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3. Recommendations for the Second Half of the Project

Recommendations 3

4. More Exposure and Strengthening of the Japan-Thailand Partnership Initiative

- Intensive preparation for UNGA 2023 and other relevant initiatives
- Generation of articles and other materials for publication

5. Discussion for Post-Project Long-Term Approach

- Discussion for the long-term partnership, which may include high level policy dialogue/ interaction to strengthen network for joint actions
- Policy/institutional framework to establish a solid base of the network with other countries, in addition to the network of personnel, which may include the development of triangular cooperation model and Japanese-Thai UHC/GH consortium

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