



Republic of the Philippines
Department of Health

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OFFICE OF THE SECRETARY

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ADMINISTRATIVE ORDER

No. 15, s. 1999

SUBJECT: Reorganization of the Integrated Community Health Services Project (ICSHP) Structure

The Integrated Community Health Services Project (ICHSP) is a foreign-assisted project of the Department of Health funded by the Asian Development Bank (ADB) and the Australian Agency for International Development (AusAID). Its overall objectives are to improve LGUs, communities, and NGOs capabilities to plan, manage, monitor and finance health programs and services; to develop and implement provincial health sub-systems, namely health services planning, cost recovery, health information, hospital regulations and management, human resource management for efficient local management and delivery of health services; to strengthen DOH capability to implement and support sub-systems. The Project has three (3) Components namely, the Community Health Delivery System, the Provincial Health Delivery Support and the DOH and RFO Capability Strengthening. The Project is implemented in six (6) priority provinces – Kalinga, Apayao, Palawan, Guimaras, Surigao del Norte and South Cotabato.

On the 2nd year of the Project implementation, the need to modify the existing governing organizational structure of the Project emerged as pressing issue during the Administrative Interfacing Workshop held at Puerto Azul, Cavite on February 25-27, 1998. The reorganization of the Project Structure will address the growing needs of the various components of the Project.

The Modified Project Structure

The Project organizational chart shown as Figure 1 shall be the Project Management Structure of the ICSHP. The composition, tasks and functions of each box of the Project Structure are described as follows:

1. Department of Health Secretary

The Secretary of Health is the highest responsible official in the management and operations of the Project. The Secretary of Health together with the Undersecretary, Office of the Chief of Staff shall provide the general and strategic directions for the overall implementation of the Project. The Secretary is the highest approving authority

of all transactions unless delegated to the Project Director or other officials of the Department.

2. Project Steering Committee (ADB)/ Project Coordinating Committee (AA)

This body is the Oversight Committee of the Project. The Project Steering Committee (ADB) and the Project Coordinating Committee (AA) shall have the following responsibilities and accountabilities:

- a) Provide overall policy guidance to the Project implementation in conjunction with the annual budget;
- b) Suggest measures and activities to improve Project implementation;
- c) Recommend to appropriate government agencies and organizations policies formulated as offshoots of Project implementation;
- d) Review and approve policy directions and guidelines for the following:
 - 1) Project life implementation
 - 2) Annual operational plan and budget
 - 3) Mid-term project reviews
 - 4) Final project evaluation
- e) Periodically assess the Project until its completion and recommend measures to ensure sustainability.

The Project Steering Committee shall be composed of the Secretary of Health and/or the Undersecretary and Chief of Staff, Senior Officials of National Economic and Development Authority (NEDA), Department of Finance (DOF), Department of Budget and Management (DBM), Department of Interior and Local Government (DILG) and representative of the Coordinating Council of the Public Assistance Program (CCPAP), Governors of the six (6) pilot provinces, Regional Health Directors of Regions CAR, IV, VI, XI and Caraga and an NGO representative to be identified by the Community Health Service (CHS-DOH).

3. Project Director and Deputy Project Director

The Project shall have a Project Director who shall be an Undersecretary. He shall provide policy and strategic directions to the Project. He should also ensure the Project link to the overall directions, thrusts and priorities of the DOH. He shall be responsible for overall supervision of the Project. He shall be the Chairperson of the Project Steering Committee and Project Coordinating Committee. The Project Director directly oversees the administrative and technical implementation of the Project. He/she ensures the prudent management of the project financial resources; all Project outputs are produced on time, at least cost and with the optimal level of quality. He/she should also ensure that Project reports are submitted regularly for purposes of internal monitoring of the project implementation. The Deputy Project Director who shall be an Assistant Secretary shall assist him.

4. Project Coordinator

The Project Coordinator is the focal coordinating officer of all activities of the Project relating to its technical and administrative concerns. He/she shall be responsible for the establishment of an effective liaison system between and among the consultants and their

counterparts in the DOH and LGUs as well as the donor agencies and other donors of projects in the DOH.

5. Technical Coordinating Committee

The Technical Coordinating Committee (TCC) is composed of the Component Managers and Technical Coordination Team (TCT) Team Leaders of the Project. The TCC shall be responsible for the following:

- a) Provide strategies/technical direction of the Project;
- b) Formulate program policies and standards;
- c) Identify technical inputs and outputs of the components of the Project;
- d) Identify needs, boundaries, resources and benchmarks of the TCTs and Components;
- e) Manage and provide administrative support to the work of the technical components in terms of monitoring and evaluation of compliance to program policies and standards, and shared responsibility with RHOs/PHOs;
- f) As Component Managers, he/she shall approve the technical inputs and outputs of the Consultants and TCTs;
- g) Shared responsibilities with the Team Leader of the Consulting and Managing Firms in terms of the technical interfacing and coordination of the Project.

7. Project Management Office

The Project Management Office shall be responsible for the following:

- a) Assist in the formulation of policies and development of programs for efficient and effective administrative operations of the Project;
- b) Provide directions to the day to day operations of the Project;
- c) Coordinate national, regional and provincial activities of the Project including meetings;
- d) Monitor the activities and performance of those involved in Project implementation based on agreed project benchmarks or indicators;
- e) Facilitate the provision of the necessary administrative and logistic support;
- f) Submit regular reports and provide feedback to the Secretary of Health, Project Director, TCC and concerned offices or authorities.

8. Consultants

The Consultants in various capacities and expertise and in close collaboration with the Technical Coordination Teams and Component Managers shall provide technical direction to the Project. They shall be responsible for the identification of technical inputs and outputs per component, formulation of work plans, conduct of situational analysis, design and development of systems, pilot testing of these systems and identification and facilitation of concomitant training.

8. Technical Coordination Teams

The Technical Coordination Teams (TCT) shall be composed of the Consultants and technical staff of various DOH services and programs involved in the Project. The roles of the TCTs are as follows:

- a) Formulate program policies and standards;
- b) Identify technical inputs and outputs of components;
- c) Identify needs, boundaries, outputs resources and benchmarks of each component;
- d) Monitor and evaluate compliance with policies and standards and implementation of component activities;
- e) Determine and/or validate the needs of other components in terms of technical support;
- f) Administration and management of the work of the technical components of the Project.

9. DOH Regional Field Offices

The DOH Regional Field Offices shall be responsible for the following:

- a) Provide technical assistance to the LGUs in the management and implementation of the Project;
- b) Act as advocate for the ICHSP goals and objectives with the LGU officials;
- c) Assist the LGUs develop their annual operation plans;
- d) Review annual operation plans submitted by the LGU for endorsement to the Project Director;
- e) Ensure that LGUs have allocated counterpart funds in their provincial budget to carry out ICHSP activities;
- f) Oversee construction activities according to approved standard architectural and engineering plans;
- g) Conduct periodic monitoring of the participating LGUs to assess progress of the implementation plan and relay LGU concerns to appropriate authorities/bodies;
- h) Collect reports and submit to ICHSP-DOH;
- i) Assist in strengthening working relationship between municipal and provincial levels that are essential in the implementation of Project activities.

10. Local Government Unit (Provincial Health Office and Project Support Unit)

The Project Implementation Unit shall now be known as the Project Support Unit. The Project Support Unit shall provide the administrative and logistic support to all Project activities in the provinces. The roles and responsibilities of the local government units are as follows:

- a) Prepare for approval a Work and Financial Plan which shall be the basis for quarterly releases of funds;
- b) Monitor status of activities based on approved provincial benchmarks including the assurance of availability of local government counterpart;
- c) Submit a financial operations report for replenishment/liquidation of cash advance;
- d) Review and recommend adjustments in the annual implementation plan;
- e) Submit periodic financial and physical reports;
- f) Prepare area/community for consultations, visits and other activities;
- g) Facilitate bids and awards for civil works;
- h) Conduct/facilitate provincial health planning;
- i) Establish support system network;
- j) Gather and collate baseline data;
- k) Follow and apply ADB procedures and guidelines on procurement;

- l) Designate point persons specific for the following – civil works, HRD, service delivery, planning, HMIS, community/NGO partnership;
- m) Provide logistic support to visiting TCTs such as vehicle; arrange accommodation and schedule of activities.

11. Community Component Staff

The Community Component staff shall be responsible for the establishment of systems for the improvement of community participation in health throughout the six (6) Project provinces. They shall be in-charge of the disbursement of community grants and monitoring of resulting community projects from these grants. Trainings to improve community participation shall also be under the responsibility of this project group.

12. Resident Advisor

There shall be one Resident Advisor for each of the two (2) Mindanao provinces. The RA shall provide all aspects of health advice necessary to Australia's contribution to the Project. They will assist provinces to establish health management systems and to establish and manage training support programs in health referral and delivery.

The Project Components

The ICHSP has three (3) components each headed by a Component Manager. Each Component is composed of Technical Coordinating Teams namely:

1. Component I. PROVINCIAL HEALTH DELIVERY SUPPORT

- a) Health Planning System Team
- b) Hospital Regulations and Management Team
- c) Health Care Financing Team
- d) Referral System and Support System (Telecommunications Specialist, Infrastructure Development Specialist, Equipment Maintenance Specialist)

2. Component II. COMMUNITY AND NGO MOBILIZATION

- a) Community and NGO Mobilization Team

3. Component III. DOH and RFO CAPABILITY STRENGTHENING

- a) Financial Management System team
- b) Logistics Management Team
- c) Planning and Budgeting Team
- d) Reorganization and Re-engineering Team

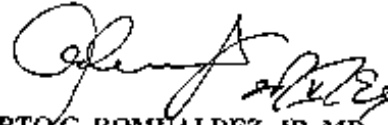
ACROSS COMPONENTS TCTs:

- a) Human Resource Management and Development Systems Team
- b) Health and Management Information System Team
- c) Benefit Monitoring and Evaluation Team

Details on the operating procedures of the Integrated Community Health Services Project will be spelled out in the Manual of Operations, which shall be developed by the Project before the end of 1998.

Under this Order, the Project Director is authorized to issue Project Directives to facilitate timely coordination of the various components of the Project. The Project Directives issued by the Project Director shall comply with the DOH administrative and financial Standard Operating Procedures to ensure consistency and that it facilitates/supports prompt action of Project implementation concerns.

This Order shall take effect immediately after its approval. All other Department issuances related to the ICHSP Organizational Structure are rescinded upon approval of this Order.



ALBERTO G. ROMUALDEZ, JR. MD
h Secretary of Health

ICHSP Organogram

