

The 9th Progress Report & Coordination Meeting (PRCM) was convened on the 13th of February 2009 at the Hon'ble Lyonpo's Chamber at 1530 Hours. The Hon'ble Lyonpo chaired the meeting with Dasho Secretary as the vice chair.

General Discussions:

Hon'ble Lyonpo while extending his appreciation for the efforts put up to make the PRCM a success, pointed out that within a couple of months, with the dedication and full cooperation amongst the Departments and the Secretariat, enhanced cooperation and information sharing has been strengthened as manifested by improving coordination.

However, the Hon'ble Chair stated that there should be no room for complacency. He pointed out that unlike other Ministries, the MoH is one of the Social Service Providers and if complacent, will have adverse influence to the Bhutanese population at large. "Let us initiate what has to be undertaken before others' initiate or work upon" remarked the Hon'ble Chair emphasizing the importance of initiatives. He urged the members to think out of the box.

Hon'ble Chair shared information concerning the meeting between the Hon'ble Prime Minister & the Doctors of JDWNRH which was held on 11th February 2009.

The Hon'ble Chair also made the forum aware that the issue of Position Classification will be thoroughly discussed during the 1st sitting of the RCSC.

Specific Discussions:

1. The Hon'ble Chair directed that hitherto the agenda of the PRCM has not been structured properly. In line with this, since the PRCM has matured, a structured agenda has to be in place and submit to Secretary three days prior to commencement of PRCM. – ***All PRCM Members***
2. The Hon'ble Chair and the floor directed that all the recommendations that have not been undertaken as endorsed during the 8th PRCM should be undertaken immediately and report the status during the coming PRCM - ***All PRCM Members***
3. In line with the recommendation of the 8th PRCM, the floor once again directed that the HRD in conjunction with Jigme Dorji Wangchuck National Referral Hospital should come out with realistic and basic minimum HR requirements for optimally and effectively functioning of 350 bedded Hospital.- ***HRD/JDWNRH & DMS***

4. It was agreed that the departments have to work in close collaboration with the Quality Assurance & Standardization Division (QASD) related to delivery of services to maintain uniform standardizations. – **All PRCM Members**
5. Though obtaining leave is a prerogative of any employee, the Hon'ble Chair voiced concern related to the modus operandi of the leave. The Chair pointed out that subsequently; day to day work is being hampered resulting into decreased efficiency. To this effect, the floor once again urged the Administration & Finance Division (AFD) to develop a mechanism for obtaining leave which should not hamper the work. Upon completion, the Chair instructed AFD to issue a circular at the earliest.- **CAO, AFD/HRM**
6. The forum felt that to improve coordination and monitoring of activities, the Quarterly Progress Review Meeting (QPRM) should be once again revived. To this effect, the PPD was directed to come up with a new terms of reference (ToR) related to QPRM and submit it to the Hon'ble Chair and Vice Chair at the earliest. - **PPD**
7. The issue related to conducting the Annual Health Conference (AHC) 2009 was also discussed. The Vice Chair stated that since the MoH & JDWNRH will be conducting the Annual Clinical Conference (ACC), only issues related to policy, finance and administration will be deliberated from the coming AHC. The forum agreed with the Vice Chair and directed PPD to start initiating AHC 2009 scheduled to be held at April 2009 in Mongar.- **PPD**
8. Since the MoH is going to initiate the ACC along with JDWNRH, the Hon'ble Chair directed that the following issues be carried out immediately by PPD & JDWNRH.

The PPD and JDWNRH to draw up how best the ACC can be conducted and submit the proposal to Secretary at the earliest

- Mobilize extra funds to conduct the activity
 - Invite only relevant clinicians to attend the conference &
 - Make sure that the hospitals should not be kept empty – the ACC should not compromise the delivery of services in the districts
9. The Chair and the Vice Chair reiterated that the Personal Information System (PIS) has to be strengthened. It was felt that strengthening of PIS will have multiple advantages especially related to training, transfer of personnel and work performance. Thus, as agreed by the DG, DMS during the 7th PRCM, the

floor recommended that the HRD should work on the mechanism of strengthening PIS under the stewardship of DG, DMS. – **HRD/DG, DMS**

- 10.** The Hon'ble Chair instructed the HRD that any transfer of personnel should not be transferred for the sake of transferring. The HRD has to study the transfer exercises judiciously. – **HRD/M**
- 11.** The house also directed that the HRD should share the HR Master Plan with all the relevant divisions and at the same time posts it in web. Further, the forum agreed that any placement of staff should be discussed with the Head of Departments (HoD). – **HRD/M**
- 12.** The Hon'ble Chair directed that a proposal for Continuing Medical Education (especially doctors) needs to be developed by JDWNRH with technical support from DMS and submit the report to Secretary. – **JDWNRH/DMS**
- 13.** As RWSS is one of the important components of the current government, the Hon'ble Chair once again reminded that a letter be sent to all the Dzongkhags to identify a dedicated or focal engineer. – **DoPH/PHED**
- 14.** The floor also directed that a detailed dzongkhag wise comprehensive inventory report related to RWSS be developed and submit to Secretary at the earliest and share the report with Dzongkhags & Geogs respectively - **DoPH/PHED**
- 15.** The Chair also directed that the 1st comprehensive RWSS booklet be developed and submit it to the Hon'ble Chair who in turn will put up to the Cabinet. The Chair further pointed out that a presentation related to RWSS coverage by made during the 2nd Week of March. - **DoPH/PHED**