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Workshop on Multidisciplinary Team Care in Cambodia

Chugai

Submitted as part of Access Accelerated

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The information in this report has been submitted by the company concerned to the Access Observatory at Boston University. The information will be updated regularly. For more information about the Observatory go to www.accessobservatory.org

The information contained in this report is in the public domain and should be cited as: Chugai, Workshop on Multidisciplinary Team Care in Cambodia (2021), Access Observatory, Boston, US 2021 (online) available from www.accessobservatory.org

Program Description

Program Overview

1 Program Name

Workshop on Multidisciplinary Team Care in Cambodia

2 Diseases program aims to address

- Cancer (Childhood, General)

3 Beneficiary population

- Age Group: All ages
- Gender: All genders
- Special Populations: People with low income, Rural populations

4 Countries

- Myanmar

5 Program start date

February 22, 2020

6 Anticipated program completion date

Completion date not specified

7 Contact person

1. Management Serves Center : Kato Noriaki (no-kato@msc-net.co.jp)

<http://www.msc-net.co.jp/en/>

2. Chugai Pharmaceuticals co., ltd: Katsuya Yano (yanokty@chugai-pharm.co.jp)

8 Program summary

In order to promote multidisciplinary team care in Cambodia, Chugai held a workshop for local healthcare professionals as an approach to address this issue. The two-day workshop, a collaboration with the non-profit organization International Medical Volunteers Japan Heart* (hereinafter, Japan Heart), was held at Japan Heart Children's Medical Center, a medical facility operated by Japan Heart in Cambodia. 21 healthcare professionals including Japanese staff participated. People working at the medical center felt that they were too busy with daily routines and unable to communicate with each other enough, resulting in loss of a sense of being a team. The objective of the program was to improve medical care quality by learning problem-solving skills related to communication. Khmer members were trained on the first day and Japanese members followed on the second day. As the training on the first day was conducted in Khmer with the help of interpreters, participants were able share their everyday feelings and thoughts in their native language. The second online Workshop on Multidisciplinary Team Care for Healthcare Professionals was held. We conducted online style because of COVID-19. 17 healthcare professionals including Japanese staff participated. We continue to held Workshop for developing their human skill. We have not decided when we finish our support.^{1,2}

*International Medical Volunteers Japan Heart <https://www.japanheart.org/en/en-about/>

Program Strategies & Activities

9 Strategies and activities

Strategy 1: Health Service Strengthening

ACTIVITY	DESCRIPTION
Training	The workshop leverages Chugai's accumulated know-how in promoting multidisciplinary team care for better medical treatment in Cambodia. In other words, it embodies the philosophy of our global health activities. Participants said that the workshop was very helpful because it provided specific know-hows to deepen communication among various professionals at the busy medical site including physicians, nurses and midwives. Countries and regions face different challenges in medical front. We will continue working on sustainable improvement of healthcare by leveraging our own strength prioritizing the local needs.

10 Strategy by country

STRATEGY	COUNTRY
Health Service Strengthening	Myanmar

Companies, Partners & Stakeholders

11 Company roles

COMPANY	ROLE
Chugai	The workshop leverages Chugai's accumulated know-how in promoting multidisciplinary team care for better medical treatment.

12 Funding and implementing partners

PARTNER	ROLE/URL	SECTOR
Management Service Center Co., Ltd.	Our partner provides several programs for developing human skill include a leadership. We also has been collaborating with the partner in Japan. http://www.msc-net.co.jp/en/	Private

13 Funding and implementing partners by country

PARTNER	COUNTRY
Management Service Center Co., Ltd.	Myanmar

14 Stakeholders

STAKEHOLDER	DESCRIPTION OF ENGAGEMENT	REQUESTED OR RECEIVED FROM STAKEHOLDER
Other	Chugai doesn't interact with local government, but NPO Japan Heart has long term commutation with local stakeholders.	N/A.

Local Context, Equity & Sustainability

15 Local health needs addressed by program

One of the issues that should be addressed is how to enhance cooperation between physicians, nurses and other various healthcare professionals to deliver high quality medical care given limited human resource and facilities available in medical settings. We provide the training program for solving the issue. 21 healthcare professionals including 8 Japanese and 13 Khmer staff participated.

1) People working at the medical center felt that they were too busy with daily routines and unable to communicate with each other enough, resulting in loss of a sense of being a team.

2) The objective of the program was to improve medical care quality by learning problem-solving skills related to communication.

3) The program does not align country strategic plan. However we think the program is connected the direction to the country strategy which is improving quality of cancer care.

Japan Heart was founded in 2004 as a volunteer-based international health care organization. Dr. Hideto Yoshioka, the President, launched Japan Heart. Many medical professionals – particularly doctors, nurses and volunteers are sent from Japan for providing hygiene care, training local health care professionals. Japan heart expect local medical staff treat Cambodia patients by themselves in the future.

a How needs were assessed

We didn't use any official needs assessments.

We have done our depth interview from the below 3 members to understand their strengthen and needs.

1. General manager for Japan Heart Children's Medical Center
2. Medical Center Director, Physician/board member/medical doctor/hospital project director
3. Pediatric medical oncologist

We don't have information regarding what health sector and geographical region the medical staff come from.

b Formal needs assessment conducted

b Formal needs assessment conducted

No.

16 Social inequity addressed

[No response provided]

Local Context, Equity & Sustainability

17 Local policies, practices, and laws considered during program design

POLICY, PRACTICE, LAW	APPLICABLE TO PROGRAM	DESCRIPTION OF HOW IT WAS TAKEN INTO CONSIDERATION
National regulations	No	N/A.
Procurement procedures guidelines	No	N/A.
Standard treatment	No	N/A.
Quality and safety requirements	No	N/A.
Remuneration scales and hiring practices	No	N/A.

18 How diversion of resources from other public health priorities is avoided

The number of Oncologists is very much limited in the Medical center. Other healthcare professionals help them with multidisciplinary team care skills. This program aims to help to deliver higher quality of medical care to patients as a multidisciplinary team.

19 Program provides health technologies (medical devices, medicines, and vaccines)

No.

20 Health technology(ies) are part of local standard treatment guidelines

N/A.

21 Health technologies are covered by local health insurance schemes

N/A.

22 Program provides medicines listed on the National Essential Medicines List

N/A.

23 Sustainability plan

We have not been planned but they have own strategy which is 10 years vision.

NPO Japan Heart Children Medical hospital has been established by Japanese. They expect run the hospital by Cambodian staff in the near future.

Additional Program Information

24 Additional program information

[No response provided]

a Potential conflict of interest discussed with government entity

No.

25 Access Accelerated Initiative participant

Yes.

26 International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) membership

Yes.

Resources

1. https://www.chugai-pharm.co.jp/english/sustainability/activity/detail/20200313150000_47.html?year=&category=2
2. https://www.chugai-pharm.co.jp/english/sustainability/activity/detail/20210423000000_65.html

Program Indicators

PROGRAM NAME

Workshop on Multidisciplinary Team Care in Cambodia

27 List of indicator data to be reported into Access Observatory database

INDICATOR	TYPE	STRATEGY	2020
1 Number of People Trained	Output	Health Service Strengthening	21 people

INDICATOR **Number of people trained**

STRATEGY HEALTH SERVICE STRENGTHENING

ITEM	DESCRIPTION
Definition	Number of trainees
Method of measurement	Counting of people who completed all training requirements Calculation: Sum of the number of people trained
28 Data source	Non-routine program data
29 Frequency of reporting	Once per year

	RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30 Data collection	Management Service Center Co., Ltd.	We check who attend the training program from our registration form. It is important to follow up their improvement and providing continuous training for same attendees. Chugai members also attended the Workshop in Cambodia. We could see attendee's behavior has been changed after the WS. We asked managers how they could improve their behavior after 3months. They said some leaders had a small meetings with members to understand each other. We continue providing other modules to improve their human and communication skill with members and patients.	Once per year
31 Data processing	[No response provided]	[No response provided]	[No response provided]
32 Data validation	[No response provided]	[No response provided]	[No response provided]

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR

2020

1	Number of people trained	21 people
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Comments: 2021: 17 people.

Appendix

This program report is based on the information gathered from the Access Observatory questionnaire below.

Program Description

PROGRAM OVERVIEW

1 Program Name

2 Diseases program aims to address:

Please identify the disease(s) that your program aims to address (select all that apply).

3 Beneficiary population

Please identify the beneficiary population of this program (select all that apply).

4 Countries

Please select all countries that this program is being implemented in (select all that apply).

5 Program Start Date

6 Anticipated Program Completion Date

7 Contact person

On the public profile for this program, if you would like to display a contact person for this program, please list the name and email address here (i.e. someone from the public could email with questions about this program profile and data).

8 Program summary

Please provide a brief summary of your program including program objectives (e.g., the intended purposes and expected results of the program; if a pilot program, please note this). Please provide a URL, if available. Please limit replies to 750 words.

PROGRAM STRATEGIES & ACTIVITIES

9 Strategies and activities

Based on the BUSPH Taxonomy of Strategies, which strategy or strategies apply to your program (please select all that apply)?

10 Strategy by country

If you have registered one program for multiple countries, this question allows you to provide a bit more specificity about each country (e.g. some countries have different strategies, diseases, partners, etc.). Please complete these tables as applicable. For each portion you have you selected from above (program strategies), please identify which country/countries these apply.

COMPANIES, PARTNERS AND STAKEHOLDERS

11 Company roles

Please identify all pharmaceutical companies, including yours, who are collaborating on this program:

What role does each company play in the implementation of your program?

12 Funding and implementing partners

Please identify all funding and implementing partners who are supporting the implementation of this program (Implementing partners is defined as either an associate government or non-government entity or agency that supplements the works of a larger organization or agency by helping to carry out institutional arrangements in line with the larger organization's goals and objectives.)

a. What role does each partner play in the implementation of your program? Please give background on the organization and describe the nature of the relationship between the organization and your company. Describe the local team's responsibilities for the program, with reference to the program strategies and activities. (response required for each partner selected).

b. For each partner, please categorize them as either a Public Sector, Private Sector, or Voluntary Sector partner. (Public Sector is defined as government; Private Sector is defined as A business unit established, owned, and operated by private individuals for profit, instead of by or for any

government or its agencies. Generation and return of profit to its owners or shareholders is emphasized; Voluntary Sector is defined as Organizations whose purpose is to benefit and enrich society, often without profit as a motive and with little or no government intervention. Unlike the private sector where the generation and return of profit to its owners is emphasized, money raised or earned by an organization in the voluntary sector is usually invested back into the community or the organization itself (ex. Charities, foundations, advocacy groups etc.).

c. Please provide the URL to the partner organizations' webpages

13 Funding and implementing partners by country

If you have registered one program for multiple countries, this question allows you to provide a bit more specificity about each country (e.g., some countries have different strategies, diseases, partners, etc.). Please complete these tables as applicable. For each portion you have selected from above (funding and implementing partners), please identify which country/countries these apply.

14 Stakeholders

Please describe how you have engaged with any of these local stakeholders in the planning and/or implementation of this program. (Stakeholders defined as individuals or entities who are involved in or affected by the execution or outcome of a project and may have influence and authority to dictate whether a project is a success or not (ex. Ministry of Health, NGO, Faith-based organization, etc.). Select all that apply.

- Government, please explain
- Non-Government Organization (NGO), please explain
- Faith-based organization, please explain
- Commercial sector, please explain
- Local hospitals/health facilities, please explain
- Local universities, please explain
- Other, please explain

LOCAL CONTEXT, EQUITY & SUSTAINABILITY

15 Local health needs addressed by program

Please describe how your program is responsive to local health needs and challenges (e.g., how you decided and worked together with local partners to determine that this program was appropriate for this context)?

a How were needs assessed

b Was a formal need assessment conducted

(Yes/No) If yes, please upload file or provide URL.

16 Social inequity addressed

Does your program aim to address social inequity in any way (if yes, please explain). (Inequity is defined as lack of fairness or justice. Sometime 'social disparities,' 'structural barriers' and 'oppression and discrimination' are used to describe the same phenomenon. In social sciences and public health social inequities refer to the systematic lack of fairness or justice related to gender, ethnicity, geographical location and religion. These unequal social relations and structures of power operate to produce experiences of inequitable health outcomes, treatment and access to care. Health and social programs are often designed with the aim to address the lack of fairness and adjust for these systematic failures of systems or policies.*)

*Reference: The definition was adapted from Ingram R et al. Social Inequities and Mental Health: A Scoping Review. Vancouver: Study for Gender Inequities and Mental Health, 2013.

17 Local policies, practices, and laws considered during program design

How have local policies, practices, and laws (e.g., infrastructure development regulations, education requirements, etc.) been taken into consideration when designing the program?

18 How diversion of resources from other public health priorities is avoided

Please explain how the program avoids diverting resources away from other public health priorities? (e.g. local human resources involved in program implementation diverted from other programs or activities).

19 Program provides health technologies

Does your program include health technologies (health technologies include medical devices, medicines, and vaccines developed to solve a health problem and improve quality of lives)? (Yes/No)

20 Health technology(ies) are part of local standard treatment guidelines

Are the health technology(ies) which are part of your program part of local standard treatment guidelines? (Yes/No) If not, what was the local need for these technologies?

21 Health technologies are covered by local health insurance schemes

Does your program include health technologies that are covered by local health insurance schemes? (Yes/No) If not, what are the local needs for these technologies?

22 Program provides medicines listed on the National Essential Medicines List

Does your program include medicines that are listed on the National Essential Medicines List? (Yes/No) If not, what was the local need for these technologies?

23 Sustainability plan

If applicable, please describe how you have planned for sustainability of the implementation of your program (ex. Creating a transition plan from your company to the local government during the development of the program).

ADDITIONAL PROGRAM INFORMATION

24 Additional program information

Is there any additional information that you would like to add about your program that has not been collected in other sections of the form?

a Potential conflict of interest discussed with government entity

Have you discussed with governmental entity potential conflicts of interest between the social aims of your program and your business activities? (Yes/No) If yes, please provide more details and the name of the government entity.

25 Access Accelerated Initiative participant

Is this program part of the Access Accelerated Initiative? (Yes/No)

26 International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) membership

Is your company a member of the International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)? (Yes/No)

Program Indicators

INDICATOR DESCRIPTION

27 List of indicator data to be reported into Access Observatory database

For this program, activities, please select all inputs and impacts for which you plan to collect and report data into this database.

28 Data source

For this indicator, please select the data source(s) you will rely on.

29 Frequency of reporting

Indicate the frequency with which data for this indicator can be submitted to the Observatory.

30 Data collection

- a. Responsible party: For this indicator, please indicate the party/parties responsible for data collection.
- b. Data collection — Description: Please briefly describe the data source and collection procedure in detail.
- c. Data collection — Frequency: For this indicator, please indicate the frequency of data collection.

31 Data processing

- a. Responsible party: Please indicate all parties that conduct any processing of this data.
- b. Data processing— Description: Please briefly describe all processing procedures the data go through. Be explicit in describing the procedures, who enacts them, and the frequency of processing.
- c. Data processing — Frequency: What is the frequency with which this data is processed?

32 Data validation

Description: Describe the process (if any) your company uses to validate the quality of the data sent from the local team.

33 Challenges in data collection and steps to address challenges

Please indicate any challenges that you have in collecting data for this indicator and what you are doing to address those challenges.

