

PERFORMANCE AGREEMENT

BETWEEN

PRIME MINISTER

AND

Bhutan Medical and Health Council

(July 1, 2019 - June 30, 2020)

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Preamble

The Performance Agreement is entered into between the Prime Minister and Registrar General, Bhutan Medical and Health Council.

The objectives of this Performance Agreement are:

a) To establish clarity and consensus about annual priorities for the consistent with the 12th Five Year Plan, and Government's other priorities;

b) To make the fully responsible for driving implementation and delivering the results against the annual priorities;

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c) To provide an objective and fair basis for evaluating the overall performance at the end of the year;

The Performance Agreement represents an important accountability mechanism for inculcating a performance based culture at all levels of government.

THEREFORE, the parties hereto agree as follows:

Section 1: Vision, Mission and Objectives

Vision

Best Healthcare delivery by competent Medical and Health Professional.

Mission

Assure the safety and quality of services delivered by qualified and competent Medical and Health Professionals through effective Regulations and Standards .
Setting and maintaining highest standards of Medical and Health Education, Training and Practices.

Objectives

- 1) To regulate the Medical and Health Professionals and Healthcare Services
- 2) To enhance service delivery to the registered members
- 3) To regulate the quality of Medical and health education and training program
- 4) To ensure full budget utilization
- 5) To institutionalize and strengthen Government Performance Management System
- 6) Transparent, accountable & integrity consciousness and culture strengthened
- 7) गल्- गे गर्दग हे र ह र मा भारत का के के र मा भारत के के र मा भारत के के र मा भारत के र मे भारत के र मा भारत के र मे भारत के र भारत क

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Objective	Weight	Action	Success Indicator	Unit	Weight	Excellent [100%]	Very Good [90%]	Good [80%]	Fair [70%]	Poor [60%]
To regulate the Medical and Health	50	Enforce the Act and regulations	Timeline by which action is taken on the complaints received against health professionals and Health centers	Days	8	4 working days	5 working days	6 working days	7 workin g days	8 workin g days
Professionals and Healthcare		16.43	% of Medical Professionals registered	Percent	3	100	95	90	85	80
Services		Participate for a participate of the	% of Health Professionals registered	Percent	3	100	95	90	85	80
			Number of Standard Operating Procedures developed	Number	6	4	3	2	-	1
		Conduct Meetings	Proportion of recommendations/directives of the GBC and Executive Committee meeting followed-up/implemented	Percent	6	100%	95%	90%	85%	80%
		Monitor & Evaluate Health Facilities and Private Diagnostics Centers	Number of Private Diagnostic Centers monitored for quality compliance	Number	8	12	_ 10	8	6	4
			Number of Hospitals monitored for adequate categories of relevant medical and health professionals	Number	8	5	4	3	2	1
		Amendment of Bhutan Medical and Health Council Act 2002	Timeline by which Medical and Health Council Act 2002 of the Kingdom of Bhutan is amended and submitted to Cabinet	Date	8	January 2020	-	-	2502	June 2020
To enhance	25	Provide prompt Services	TAT for CME Approval	Days	5	3	4	5	6	7
service delivery to the		for Medical and Health Professionals.	TAT for Issuance of new Registration	Days	6	3	5	7	9	11
registered members			TAT for Renewal of Registration	Days	6	3	5	7	9	11

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Objective	Weight	Action	Success Indicator	Unit	Weight	Excellent [100%]	Very Good [90%]	Good [80%]	Fair [70%]	Poor [60%]
To enhance service delivery to the	25	Conduct Sensitization on Risk Management and Patient Safety	Number of Health Facilities sensitized on patient safety	Number	8	10	8	6	4	2
To regulate the quality of Medical and	15	Monitor & Evaluate Medical and Health institutes	Number of Medical & Health institutions and approved teaching hospitals monitored for ensuring quality compliance	Number	9	5	4	3	2	1
health education and training program		New Institute and Program approved	TAT for approval of Medical Education Program upon receiving the proposal by Council	Days	6	120 days (4 months)	150 days (5 months)	180 days(6 months)		240 days (8 months)
To ensure full budget utilization	. 5	Ensure full budget utilization	Percentage of budget utilized	Percent	5	>94%	90-94%	85-89%	80- 84%	<70%
To institutionalize and strengthen Government Performance Management System	2	Strengthen APA Implementation	Timely submission of APA implementation updates	Date	2	On the deadline communi cated by GPMD	-	-	-	After the deadlin e commu nicated by GPMD
Transparent, accountable & integrity consciousness and culture strengthened	2	Enhance integrity system by implementing OIP	Integrity score improved	Percent	2	50% of OIP Implemen ted	40% of OIP Implemented	30% of OIP Implem ented	20% of OIP Imple mente d	<20% of OIP Implem ented
વાલ- વોવાર્જીવા શે જે વ− ≇ં⊂ાવવે વ્યથાયેલ કો કોન્ વાન- લી	1	ॻऺॿऀऀऀऀॱॱय़ऀऀड़॓॓ग़ऀॻॖऀॱऄॵय़य़ॖॵॱख़ॖॖ॔ॱॾॕॖऀऀऀऀॱग़ऄऀॱड़ऀऀॱॱय़ॖऀॱड़ऀऻ	ૡૼૹૻૻૡૺૡૼૼૼૼૼૼૡઌૡૻૻૡૻૡૺૡ૽ૻઌૺૺૡ૽૿ૡૺૺૹ૾૾ૣૡૻ૽ૹૻૡૻૡૻૡૻૡૺૡૡૻૡ૽ૼૡૡ૽ૺૡૡૻૡૡ૽ૺૡૡ૽ૻૡૡ૽ૺૡૡ૽ૻૡૡ૽ૺૡૡ૾ૻૡૡ૽૿ૡૡ૾ૻૡૡ૾ૺૡૡ૾ૻૡૡ૾ૻૡૡ	Percent	1	<i>9</i> 00	22 122 131-3	20 20 00 - 10 00 - 10		<700

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Objective	Action	Success Indicator	Unit	Actual Values [FY 2018-19]	Target Values [FY 2019-20]	Projected Values [FY 2020-21]	Projected Values [FY 2021-22]	Projected Values [FY 2022-23]
To regulate the Medical and Health Professionals and Healthcare Services	Enforce the Act and regulations	Timeline by which action is taken on the complaints received against health professionals and Health centers	Days	4 working days	4 working days	4 working days	4 working days	4 working days
		% of Medical Professionals registered	Percent	100	100	100	100	100
		% of Health Professionals registered	Percent	100	100	100	100	100
		Number of Standard Operating Procedures developed	Number .	-	4	-	-	-
	Conduct Meetings	Proportion of recommendations/dir ectives of the GBC and Executive Committee meeting followed- up/implemented	Percent	100	100	100	100	100
	Monitor & Evaluate Health Facilities and Private Diagnostics Centers	Number of Private Diagnostic Centers monitored for quality compliance	Number	12	12	12	12	12

Section 3: Trend values of success indicators

Objective	Action	Success Indicator	Unit	Actual Values [FY 2018-19]	Target Values [FY 2019-20]	Projected Values [FY 2020-21]	Projected Values [FY 2021-22]	Projected Values [FY 2022-23]
To regulate the Medical and Health Professionals and Healthcare Services	Health Facilities and Private	Number of Hospitals monitored for adequate categories of relevant medical and health professionals	Number	4	5	6	6	6
	Amendment of Bhutan Medical and Health Council Act 2002	Timeline by which Medical and Health Council Act 2002 of the Kingdom of Bhutan is amended and submitted to Cabinet	Date	2018-19	2019-2020			
To enhance service delivery to the	Services for	TAT for CME Approval	Days	3	3	3	3	3
registered members	Medical and Health Professionals.	TAT for Issuance of new Registration	Days	3	3	3	3	3
		TAT for Renewal of Registration	Days	3	3	3	3	3
	Conduct Sensitization on Risk Management and Patient Safety	Number of Health Facilities sensitized on patient safety	Number	11	10	10	10	12
To regulate the quality of Medical and health education and training program	Monitor & Evaluate Medical and Health institutes	Number of Medical & Health institutions and approved teaching hospitals monitored for ensuring quality compliance	Number	5	5	5	5	5
	New Institute and Program approved	TAT for approval of Medical Education Program upon receiving the proposal by Council	Days	4 months	4 months	4 months	4 months	4 months
To ensure full budget utilization	Ensure full budget utilization	Percentage of budget utilized	Percent					

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Objective	Action	Success Indicator	Unit	Actual Values [FY 2018-19]	Target Values [FY 2019-20]	Projected Values [FY 2020-21]	Projected Values [FY 2021-22]	Projected Values [FY 2022-23]
To institutionalize and strengthen Government Performance Management System	Strengthen APA Implementation	Timely submission of APA implementation updates	Date	10. da nastrono mud Podra nastrono mud	generati generation pro-	Rénov		
Transparent, accountable & integrity consciousness and culture	Enhance integrity system by implementing OIP	Integrity score improved	Percent			Casola Casola		aero sessenoj
strengthened ণ্ৰু-গীণাৰ্ডগ্ৰইঞ্জ'ৰু- ' <i>ইন</i> 'জবি'অগ' એৰ'ক্ট ৰি' 'গচ-'বী	ावतेःव्हः द्वीवाः द्वीवाः द्वीवाः द्वी बाह्य-द्वीवा द्वी	Ĕૡૻૡૡૺ૱ૡૡૼૢૻૡઌૼૻઌૡ૽ૺઌૡ૾ૢૢ૱ૡ ૻૼૡૡૺ૱ૡૡૼઌઌૼૻઌૡ૽ૺઌૡ૾ૢ૱ૡૼ	Percent				and a second and a second a s	
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Section 4: Definition of Success Indicators

Success Indicator	Description	Data Collection Methodology	Data Collection Frequency	Data Source
Timeline by which action is taken on the complaints received against health professionals and Health centers	This indicator measures the timeline by which the council takes action on the complaints received against health professionals and Health centers.	Data record maintained by Administration , BMHC	Quarterly	Legal/Planning Services, BMHC
Proportion of recommendations/directives of the GBC and Executive Committee meeting followed-up/implemented	This indicators measures the Proportion of recommendations/directives of the General Body of Council and Executive Committee meeting followed-up/implemented	Data record maintained by Administration , BMHC	Annually	Planning and Policy, BMHC
Number of Private Diagnostic Centers monitored for quality compliance	This indicator measure the number of Private Diagnostic Centers monitored for quality compliance	Data record maintained by Administration , BMHC	Quarterly	Registration and Licensing Services, BMHC.
Number of Hospitals monitored for adequate categories of relevant medical and health professionals	This indicator measures Number of Hospitals monitored for adequate categories of relevant Medical and Health professionals as per the service standard.	Data record maintained by Administration , BMHC.	Quarterly	Registration and Licencing Services, BMHC
% of Medical Professionals registered	This indicator measures percentage of new Medical Professional registered.	Data record maintained by Administration , BMHC	Quarterly	Registration and Licensing Services, BMHC
% of Health Professionals registered	This indicators measures the percentage of new Health Professionals registered	Data record maintained by Administration , BMHC	Quarterly	Registration & Licensing Services, BMHC
Timeline by which Medical and Health Council Act 2002 of the Kingdom of Bhutan is amended and submitted to Cabinet	This indicator measure the timeline by which Medical and Health Council Bill is submitted to the Cabinet.	Data record maintained by Administration , BMHC	Biannually	Legal/Planning , BMHC

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Success Indicator	Description	Data Collection Methodology	Data Collection Frequency	Data Source
Number of Standard Operating Procedures developed	This indicator measures the number of Standard Operating Procedures developed. 1. Sop on Procedure for Investigation, 2. SoP on Monitoring & Evaluation of Private and Government Health facilities, 3. SoP on Recognition of 150 bedded Teaching Hospital and 4. SoP on minimum standard for establishment of Medical and Health Institute	BMHC Administration	Annually	Registration and Licensing Services, Education and Professional Services and Legal & Planning Services of BMHC
TAT for CME Approval	This indicator measures the number of days taken for approval/response of online CME.	Data record maintained by Administration , BMHC	Quarterly	Registration and Licensing Services of BMHC.
TAT for Issuance of new Registration	This indicator measures the number of days taken for issuing new Registration Certificate.	Data record maintained by Administration , BMHC	Quarterly	Registration and Licensing Services of BMHC
TAT for Renewal of Registration	This indicator measures number of days taken to issue Renewal Certificate.	Data record maintained by Administration , BMHC	Quarterly	Registration and Licencing Services of BMHC.
Number of Health Facilities sensitized on patient safety	This indicator measures the number of Health facilities sensitized on patient safety.	Data record maintained by Administration , BMHC	Quarterly	Education & Professional Services of BMHC
Number of Medical & Health institutions and approved teaching hospitals monitored for ensuring quality compliance	This indicator measures number of Medical and Health Institutions providing Medical and Health Education monitored for ensuring compliance with the standard.	Data record maintained by Administration , BMHC	Quarterly	Education & Professional Services of BMHC
TAT for approval of Medical Education Program upon receiving the proposal by Council	This indicator measures the TAT for approval of medical education program upon receiving the proposal by Council. This indicator will have to depend on the Proposal submitted by the Proponent.	Administration, BMHC	Quarterly	Education and Professional Services, BMHC

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Description	Data Collection Methodology	Data Collection Frequency	Data Source
This indicator measures the variance between the Revised Budget and the Actual Expenditure at the end of the FY.	Assessment of variance between annual budget and expenditure	Annually	Department of National Budget
"This SI shall be evaluated based on the following parameters: 1. Timeline by which "monthly issue/no issue reported on GPMS. 2. Timeline by which "timeline SIs and other achieved SIs are verified and evidence submitted." 3. Timeline by which "MYR and year-end self-assessment report is submitted to GPMD." 4. "Timely action taken on all the MYR directives." "	Review of administrative data/documents/records	Quarterly	GPMD
This indicator measures the implementation status of Organisational Integrity Plan (OIP) as determined as Anti-Corruption Commission.	Survey and Field Monitoring of OIP implementation by ACC	Annually	Administrative report by ACC
الجات المعرفة الحالية الحالي	ૡૼૹઌ౾ૻૼૡૻૡઌૡૻૻઌૻૡૻૻૡૡૺ૽૿ઌ૽૿ઌૡ૿૾ૢૹૡૻૻૼૼૼૼૼૼૼૼૡઌૺૼ૽ૡૼ૽ૻૹૻ૾ૡૻૻૻૻઌૡ૽ૺ ૾ૻૡ૿ૢ૾ૹૺ	Annually	ણવા છ ેત. છે. સ. નંદર, છવા જાટ
	This indicator measures the variance between the Revised Budget and the Actual Expenditure at the end of the FY. "This SI shall be evaluated based on the following parameters: 1. Timeline by which "monthly issue/no issue reported on GPMS. 2. Timeline by which "timeline SIs and other achieved SIs are verified and evidence submitted." 3. Timeline by which "MYR and year-end self-assessment report is submitted to GPMD." 4. "Timely action taken on all the MYR directives." " This indicator measures the implementation status of Organisational Integrity Plan (OIP) as determined as Anti-Corruption Commission. 호디미 목도 함 도히 도입 전에 요명자 한 도이 가지 (OIP) as determined as Anti-Corruption Commission.	This indicator measures the variance between the Revised Budget and the Actual Expenditure at the end of the FY. Assessment of variance between annual budget and expenditure "This SI shall be evaluated based on the following parameters: Review of administrative data/documents/records 1. Timeline by which "monthly issue/no issue reported on GPMS. Review of administrative data/documents/records 2. Timeline by which "timeline SIs and other achieved SIs are verified and evidence submitted." Review of administrative data/documents/records 3. Timeline by which "MYR and year-end self-assessment report is submitted to GPMD." Survey and Field Monitoring of OIP implementation status of Organisational Integrity Plan (OIP) as determined as Anti-Corruption Commission. EnraceBraficAl@magn@Brance.maps.mars.ing (Appointment Order) [magn@frammars.ing (Appointment Order) [magn@frammars.ing (Relieving Order)] magn@frammars.ing (Relievin	This indicator measures the variance between the Revised Budget and the Actual Expenditure at the end of the FY. Assessment of variance between annual budget and expenditure Annually "This SI shall be evaluated based on the following parameters: Review of administrative data/documents/records Quarterly "This SI shall be evaluated based on the following parameters: Review of administrative data/documents/records Quarterly "This SI shall be evaluated based on the following parameters: Review of administrative data/documents/records Quarterly "This inlice by which "monthly issue/no issue reported on GPMS. Timeline by which "MYR and year-end self-assessment report is submitted to GPMD." Annually 4. "Timely action taken on all the MYR directives." " Survey and Field Monitoring of Organisational Integrity Plan (OIP) as determined as Anti-Corruption Commission. Survey and Field Monitoring of OIP implementation by ACC Annually % match are first admagnance age age age age age age age age age ag

Organisation Name	Relevant Success Indicator	Requirement from the Organisation	Justification for the Requirement	Requirement detail	Impact (If Not Met)
MINISTRY OF HEALTH	Timeline by which action is taken on the complaints received against health professionals and Health centers	Nomination of Professional Experts as and when requested from the District and Referral Hospitals.	To ensure that complaints received against Medical and Health professionals and Health centers including Private Centers addressed and Corrective measures put in place	Professional Experts as and when requested	Relevant Professional experts as required shall be sourced from KGUMSB, RBA and Retired Professional Expert. Further, if not met, the decision will be delayed.
Khesar Gyalpo University of Medical Sciences	Timeline by which action is taken on the complaints received against health professionals and Health centers	Technical Expert	To avoid conflict of interest, may need to involved professional expertise from University	release of Professional Experts when requested	need to seek alternative expertise from other hospital. Further, if not met, the decision will be delayed.
CABINET SECRETARIAT	Timeline by which Medical and Health Council Act 2002 of the Kingdom of Bhutan is amended and submitted to Cabinet	Send for Legal vetting to OAG Send to National Assembly as an agenda.	Put up to the Parliament for deliberation and endorsement.	During the Parliament session.	The Amendment of Bhutan Medical and Health Council Bill cannot be enacted.
MINISTRY OF HEALTH	TAT for approval of Medical Education Program upon receiving the proposal by Council	Technical Expert from Districts and Referral Hospitals	To review the Program Proposal	It will depend on the Specific programs	Approval of program will be delayed.

Section 5: Requirements from other Ministries, Agencies & Dzongkhags

Organisation Name	Relevant Success Indicator	Requirement from the Organisation	Justification for the Requirement	Requirement detail	Impact (If Not Met)
Khesar Gyalpo University of Medical Sciences	TAT for approval of Medical Education Program upon receiving the proposal by Council	Technical expert	To review the Program Proposal	It will be depend on specific program	Approval of Programs proposal will be delayed.
JIGME DORJI WANGCHUCK NATIONAL REFERRAL HOSPITAL	TAT for approval of Medical Education Program upon receiving the proposal by Council	Technical Expert	To review the Program Proposal	It will depend on specific program proposal	Approval of Program proposal will be delayed
MINISTRY OF HEALTH	Number of Private Diagnostic Centers monitored for quality compliance	Technical expertise from District and Referral Hospitals.	Release of the technical member expertise.	As and when required	Monitoring will be delayed and substandard monitoring report.
JIGME DORJI WANGCHUCK NATIONAL REFERRAL HOSPITAL	Number of Private Diagnostic Centers monitored for quality compliance	Technical member expertise	To release technical member expertise.	Ginese Bi	Monitoring will be delayed and substandard monitoring report.

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Whereas,

We, on behalf of Bhutan Medical and Health Council, commit to the Prime Minister, the Government and the people of Bhutan to deliver the results described in this Annual Performance Agreement.

I, the Prime Minister, commit to the Bhutan Medical and Health Council, on behalf of the Government and the people of Bhutan, to provide the necessary support for delivery of the results described in this Annual Performance Agreement.

SIGNED:

7/10/19

Date

Prime Minister gdi

Sonam Dorji Registrar General

Dr. Lotay Tshering

410/2019 Date