1. Basic Information

1.1. **Désirée No.:**

1.2. **Title:** Strengthening Capacities to manage Public Health System in compliance with EU regulation

1.3. **Sector:** Public Health

1.4. **Location:** Ministry of Health of Lithuania, State Public Health Centre and related institutions

2. Objectives

2.1. **Overall Objective**

The Wider Objective of **1.14 Million Euro** institutional building and investment project, of which 140,000 Euro is provided from national co-financing is to:

- Strengthen public health surveillance institutions both at national and local levels aimed at supporting harmonization and enforcement of EC acquis in the public health sector.

2.2. **Project Purpose**

The purpose of the Project is to:

- Enhance implementation of Public Health Strategy and Public Health Reform Action Plan by improving public health management, preparing public health programs and strengthening intersectoral collaboration.

- Further harmonize existing national legislation on public health with the Acquis.

- Facilitate participation in EU Public Health Action Programs, such as health monitoring, health promotion, pollution-related diseases, injury prevention.

- Further develop expertise in public health planning and management, evidence based decision-making, risk assessment and management, health impact assessment, public health monitoring/information and public communication.

2.3. **Accession Partnership and NPAA Priorities.**

There are several sectors in the National Programme for the Adoption of the Acquis in which the Ministry of Health and sub-ordinated institutions have to play their role. These are the following: free movement of goods; free movement of persons; statistics (reporting to EUROSTAT – health, environment (noise)); quality of living conditions and environmental protection; consumer rights protection; social security and employment.

Establishment of State Public Health Service (89/48/EEC), training of civil servants English and French languages are among the measures related to health and are included in NPAA.

In the Summarized Plan for Priority NPAA Measures (SPPP, 1999) development of National Environmental Health Action Plan (NEHAP) and preparation for its implementation is foreseen. Strengthen capacities to implement Acquis on local level in the field of health and environment.
(and manage big investment projects). At present final draft of the NEHAP is being developed and prepared for submission to the Government.

The Government Program (1997 – 2000) has foreseen several important measures in public health field, such as the development and adoption of a Law on Poisonous Substances and a Law on Public Health Surveillance. Though the Law on Poisonous substances has been developed, it is not adopted yet. The Law on Public Health Surveillance has been elaborated too and submitted to the Government. It was returned from the Government for revision and further development.

A number of Laws are already adopted and define responsibilities of public health institutions. These laws are the following: Law on health Care System: Law on Health Care Institutions, Law on Food, Law on Product Safety, Law on Radiation Safety, Act on Human Safety, Act on Professional Health Surveillance, Act on Communicable Disease Prevention and Control, Law on Mental Health Surveillance. Besides, a Health Concept was adopted in 1992 and the Lithuanian Health Program was adopted by Parliament in 1998.

3. Description

3.1. Background and Justification

Lithuania is one of the European Union pre-accession countries. In the Accession Partnership program, public health plays an important role. One of the major tasks is the harmonization of existing national legislation on public health with the Acquis Communautaire requirements. The Law on Public Health has been drafted and is under consideration in the Government. Furthermore, a Public Health Strategy was drafted, which should be a leading document for the on-going reform process of the Public Health Sector. About 350 hygienic norms dealing with public health have to be revised or prepared. The main ministry responsible for public health is the Ministry of Health, together with the Ministry of Environment and the Ministry of Social Security and Labor.

The State Public Health Centre (SPHC) is one of the leading institutions in the Lithuania involved in co-ordination of public health activities, public health monitoring and expertise, harmonization of legal acts related to public health and public health reform. SPHC is responsible for filling in TAIEX harmonogram. One of its other activities is the co-ordination of elaboration and the implementation of the National Environmental Health Action Plan (NEHAP), which has been developed on intersectoral basis and according to the Government program is going to be approved in the second quarter of year 2001. NEHAP preparation and implementation is considered as an important tool in EU accession process, as it deals with actions in legislation harmonization and elaboration, especially related to Environment sector of the Acquis, building enforcement systems, building capacities for efficient environmental health management. The NEHAP document, with contributions of more than 80 Lithuanian experts in the field of public health, environmental protection and other concerned sectors proposes a wide array of objectives and activities to improve the current situation. One of the major proposals is the development of an environmental health monitoring and information system as a basis for further action and decision-making. This would also include a review of current environmental health legislation in view of EU Accession, as insight is lacking in the amount of legislation related to environmental health. In order to meet the requirements for EU Accession, as well as the development of a sound Public Health strategy, it is essential to perform such an analysis at short notice. In the process of harmonization of legal acts, the preparation of an Public Health Legislation Approximation Strategy is foreseen, in addition to the National Public Health Strategy. Consequently, new legislation has to be drafted and accepted, and assistance is needed to prepare selected public health acts.

In order to support management and policy decisions, an public health information and management system is essential. We especially would like to develop a system in which to link the existing
databases, as well as developing procedures for selecting and analyzing at different levels in the system. This would also include data on health care institutions, demography, planning, etc.

3.2. Linked Activities

Relatively little EU or bilateral assistance has been provided to assist in the development of public health policies, management operations. The Ministry of Health has received PHARE assistance for Primary Health Care Reform and Management, dealing mainly with personal health care strategy in Lithuania, which in terms of functions and institutions, is separated from public health surveillance system. However, the following major projects relating to the public health sector have been or are being implemented:

- EU PHARE project “Support to the European Integration in Lithuania” (SEIL) has provided support to the public health sector on the following issues aimed at compliance with relevant Directives and Regulations: support for control of hazardous substances, radiation directives, infectious disease prevention, genetically modified organisms;

- EU PHARE support for occupational health, food safety projects;

- EU PHARE support for Twinning project “Occupational Health and Safety”;

- Within Dutch Government MATRA Pre-accession Projects Program: TNO Prevention and Health project “Institutional Strengthening of the State Public Health Centre in Lithuania (2000 – 2001)”. Phare funding is seen as continuation for MATRA project ensuring sustainability and further development of Dutch project results.


3.3. Results

The anticipated Results to be achieved and Outputs to be delivered via this Project include:

- Public Health Reform Bureau established

- National Public Health Economics and National Public Health Monitoring Programs elaborated

- By-law acts for the Public Health Law developed

- The structure of public health service analysed, assessed, improved and modernised

- Public health management capacities analysed, assessed and improved

- Public health specialists' education and training needs assessed and strategy developed

- Training, continuous training and re-training curricula and methodologies for public health specialists elaborated and adopted.

- Capacity building activities in the fields of public health management, risk assessment and management, health impact assessment, monitoring/information and public communication carried out

- Relevant equipment purchased and public health information system developed.

- The Project related reports and manuals produced and disseminated within the sector

3.4. Activities

Two tenders/sets of contract are foreseen to be concluded under this Project: Twinning and Training package and an Investment component.
3.4.1. **Twinning and Training Package**

**Guaranteed results/Expected outputs**

♦ In order to ensure the implementation of a Public Health strategy, a National Public Health Monitoring Program and National Health Economics Program will be elaborated.
♦ Public health management capacities will be assessed and improved.
♦ Public Health Reform Bureau will be established to ensure sustainability of the Project.
♦ The creation of a sound legislative base for public health system will require the review of existing public health legal acts, the identification of priorities, and the development of the new legal acts or amendment of existing or “old” ones which need to be revised for compliance with EU legislation.
♦ To ensure capabilities of public health institutions and specialists to carry out the functions delegated to them, seminars and training activities shall be organized for capacity building in the following fields based on EU expertise: public health management and decision making, risk assessment and management, health impact assessment, public health monitoring/information, public communication. (For such fields as health impact assessment and risk assessment and management, provisions of software and modeling would be necessary).
♦ Relevant training manuals and curricula will be developed for continuous training of public health specialists.
♦ Detailed assessment of existing office and laboratory equipment at national and regional public health centers and their branches will be carried out and provisions for the necessary improvement to fulfil their functions will be made.

**Scope of the twinning and profile of the PAA**

The PAA will assist MoH, SPHC, local PHC and other relevant institutions from senior to operational levels by advising and providing support to them and working in close partnership with them. The PAA will work closely with Lithuanian counterparts involved in the PHARE support activities. The PAA together with STAs will estimate the existing legislation on public health, the infrastructure, public health resources, needs for office and laboratory equipment, management procedures and relations with other sectors. Furthermore, the expert together with STAs will present advice, suggestions and recommendations for education and training of public health specialists in public health management, risk assessment and management, public communication, health impact assessment, creation of public health monitoring/information system based on the findings during the project. Working command in English and at least 5 years of experience in public health policy and management field in the light of best EU practice are essential.

**Required inputs**

The EU PAA will have an input of 16 person months and be based in Vilnius.

**Short and medium term experts**

A series of short-term experts (totally 15 p/m) covering a wide range of expertise: management, law, information management, education and training, software development, risk assessment and management, public communication, public health monitoring, health impact assessment, etc. The experts should be fluent in English and have at least 2 years of experience in working in EU countries in the field of public health.

**Other services**

Other services, for the purposes of interpretation, provision of documentation, preparation of workshops and seminars etc. will be necessary.
Operating environment of the twinning

The Twinning component will be carried out at the Ministry of Health, within the infrastructure of state public health surveillance institutions. Premises will be located at the State Public Health Centre, Kalvariju str. 153, LT-2042, VILNIUS, Lithuania. Contact person: Ms. I. Zurlyte – Head of Public Health Monitoring Division, State Public Health Centre, tel. +370 2 700 140, fax +370 2 737 397, e-mail ingrida@post.omnitel.net.

3.4.2. Investment Component

For the investment component, a detailed analysis of necessary investment in institutional building/equipment for the public health institutions including regional and local centres will be carried out by twinning team within 6 months of project start. Preparation of technical specifications and tender dossier and equipment purchase will be carried out by the Ministry of Health with support from the CFCU. The investment component is mostly directed at public health information systems and public health monitoring units. Investment purchase will include monitoring and laboratory equipment, computers and other equipment identified by twinning team as necessary.

4. Institutional Framework

The Project will be co–ordinated by the Public Health Department in the Ministry of Health. Contact person for Project co-ordination will be Mr. R. Sabaliauskas, Head, Public Health Division, Ministry of Health. There are three divisions in this Department: Environmental Health, Foreign Relations and European Integration and Health Programs. There are 17 persons working in the Public Health Department. Mainly specialists from Environmental Health Division (7 specialists) and Foreign Relations and European Integration will be involved in the Project.

The infrastructure of the public health institutions in Lithuania consists of national, regional and local level. The total number of people employed within the system is about 2500.

The State Public Health Centre, subordinated to the Ministry of Health, will be involved in the project as national public health institution which is directly involved in preparation of public health legal acts, public health monitoring, public health management, hygiene expertise, preventive toxicology. SPHC is a center for public health expertise and monitoring; it is an initiator and leader of development of a number of legal acts and programs. The Ministry of Health has delegated responsibilities to co-ordinate the development and implementation of the National Environmental Health Action Plan to the SPHC. SPHC is responsible for filling in TAIEX harmonogram for public health sector. The total number of staff working in this institution is 90 persons.

There are 10 regional public health centres situated in Alytus, Kaunas, Klaipeda, Marijampole, Panevezys, Siauliai, Taurage, Telsiai, Utena, Vilnius. They are responsible for public health surveillance within the region (apskritis). Each of these centres have their local branches in the districts of the region.

The Project will not lead to a change in the institutional framework described.
5. Budget (in € million)

<table>
<thead>
<tr>
<th>Project Components</th>
<th>Phare Support</th>
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<th></th>
<th></th>
<th>IFI</th>
<th>TOTAL</th>
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<tbody>
<tr>
<td></td>
<td>Investment Support</td>
<td>Institution Building</td>
<td>Total Phare (= I + IB)</td>
<td>National Co-finance</td>
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<tr>
<td>Twinning and Training Package</td>
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<td>0.75</td>
<td>0.75</td>
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</tr>
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<tr>
<td>TOTAL</td>
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<td>0.75</td>
<td>1.0</td>
<td>0.14</td>
<td>1.14</td>
<td></td>
</tr>
</tbody>
</table>

The Phare amount is binding as a maximum amount available for the project. The ratio between the Phare and national co-finance amounts is also binding and has to be applied to the final contract price. The national co-financing commitment is a tax-excluded net amount.

An amount not exceeding 5% of the total project budget can be used for supervision activities concerning the investment component of the project.

6. Implementation Arrangements

6.1. Implementing Agency

**PAO:** Žilvinas Pajarskas, Director of CFCU

Address: J. Tumo-Vaižganto 8A/2 – 241  
2600, Vilnius  
Lithuania  
Telephone: +370 2 226621  
Fax: +370 2 225335  
E-mail: info@cfcu.lt

**For the Twinning component**

**SPO:** Viktoras Meižis, Head of Foreign Affairs and European Integration Division

Address: Vilniaus 33  
2001, Vilnius  
Lithuania  
Telephone: +370 2 611724  
Fax: +370 2 224601  
E-mail viktoras.meizis@sam.lt

**For the investment component of the Project**

**SPO:** Viktoras Meižis, Head of Foreign Affairs and EU integration Division

Address: Vilniaus 33  
2001, Vilnius  
Lithuania  
Telephone: +370 2 611724  
Fax: +370 2 224601  
E-mail viktoras.meizis@sam.lt

6.2. Twinning

Prepared and updated by the MoH 09/03/01
The CFCU is the Implementing Agency responsible for tendering, contracting and accounting. The Project recipient institutions shall be the Ministry of Health and the State Public Health Centre. Responsibility for technical preparation and control will remain with the Ministry of Health in close co-operation with other relevant institutions within health sector and in other sectors (Ministry of Environment). Main contact person for Twinning arrangements will be Mr. R. Sabaliauskas – Head, Public Health Division, Ministry of Health, tel. +370 2 224 740, fax +370 2 224 601, e-mail romualdas.sabaliauskas@sam.lt

6.3. Non-standard aspects
There are no non-standard aspects. PRAG rules and procedures and Twinning Manual guidelines will be applied fully.

6.4. Contracts
Two contracts will be concluded under this Project:
1. Twinning and Training package for 0.75 MEUR
2. Supplies contract for 0.39 MEUR.

7. Implementation Schedule

<table>
<thead>
<tr>
<th>Component</th>
<th>Start of Tendering</th>
<th>Start of Project Activity</th>
<th>Project Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Twinning</td>
<td>4Q/01</td>
<td>2Q/02</td>
<td>3Q/03</td>
</tr>
<tr>
<td>Investment</td>
<td>2Q/02</td>
<td>4Q/02</td>
<td>2Q/03</td>
</tr>
</tbody>
</table>

8. Equal Opportunity
Equal opportunity principles and practices in ensuring equitable gender participation in the Project will be guaranteed.

9. Environment
The investment components of this Project all relate to Institution Building activities.

10. Rates of Return
The investment components of this Project all relate to Institution Building activities.

11. Investment Criteria
The investment components of this Project all relate to Institution Building activities.

12. Conditionality and Sequencing
- Full commitment of the Ministry of Health and State Public Health Centre available.
- Necessary staff and office space and other facilities provided for the Twinning Project.
- The Ministry of Health committed to allocate money as co-financing for the Investment Project.
• National Environmental Health Action Plan (NEHAP) adopted by the Government. NEHAP operational plan prepared and adopted by NEHAP Steering Committee.
• WHO/DEPA Project on NEHAP implementation successfully completed.
• Links established between national health programs and EU public health action programs, for example on health monitoring. It would enhance the possible outcomes and increase capacity building and improve adoption of the health acquis.
ANNEXES TO PROJECT FICHE

1. Logical framework matrix in standard format
2. Detailed implementation chart
3. Contracting and disbursement schedule
4. Reference to feasibility /pre-feasibility studies
5. All other annexes considered necessary
**LOGFRAME PLANNING MATRIX FOR**

**Strengthening Capacities to Manage Public Health System in compliance with EU regulations**

<table>
<thead>
<tr>
<th>Overall Objective</th>
<th>Objectively Verifiable Indicators:</th>
<th>Source of Verification</th>
<th>Assumptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strengthen public health surveillance institutions both at national and local levels aimed at supporting harmonization and enforcement of EC acquis in the public health sector</td>
<td>Improved management and administration of Public Health institutions Public Health institutions and staff capable to carry out their functions in compliance with EU requirements and standards</td>
<td>Ministry of Health State Public Health Centre National Health Board Health Statistics Regular Commission Progress Report</td>
<td>Relevant National strategic legislation developed and adopted</td>
</tr>
<tr>
<td><strong>Project Purpose:</strong></td>
<td><strong>Objectively Verifiable Indicators:</strong></td>
<td><strong>Source of Verification:</strong></td>
<td><strong>Assumptions:</strong></td>
</tr>
<tr>
<td>Enhance implementation of Public Health Strategy and Public Health Reform Action Plan by improving public health management, preparing public health programs and strengthening intersectoral collaboration. Further harmonize existing national legislation on public health with the Acquis. Facilitate participation in EU Public Health Action Programs, such as health monitoring, health promotion, pollution – related diseases, injury prevention. Further develop public health expertise in public health planning and management, evidence based decision-making, risk assessment and management, health impact assessment, public health monitoring/information and public communication.</td>
<td>Public health strategy implemented according to Public Health Reform Plan By-law acts for the Public Health Law developed Participation in EU Public Health Action Programs Institutional capacities strengthened</td>
<td>Ministry of Health National, regional and local public health institutions EU Programmes in the field of public health</td>
<td>Relevant National strategic legislation developed and adopted</td>
</tr>
<tr>
<td><strong>Programme Name:</strong> PHARE AP 2001 <strong>Number:</strong> LT 01 08 01</td>
<td><strong>Strengthening Capacities to Manage Public Health system in compliance with EU regulations.</strong></td>
<td><strong>Contracting Period Expires:</strong> 3rd Q/2003</td>
<td><strong>Phare Budget:</strong> 1.0 MEUR</td>
</tr>
<tr>
<td><strong>Disbursement Period Expires:</strong> 3rd Q/2004</td>
<td><strong>Total Budget:</strong> 1.14 MEUR</td>
<td><strong>Phare Budget:</strong> 1.0 MEUR</td>
<td></td>
</tr>
<tr>
<td>Results</td>
<td>Objectively Verifiable Indicators</td>
<td>Source of Verification</td>
<td>Assumptions</td>
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</tr>
<tr>
<td><strong>Institutional Building (Twinning component)</strong></td>
<td>Legislation and relevant programs drafted, structures and procedures for enforcement developed Report on public health institutions elaborated Training curricula developed and recommendations provided Approximately 250 public health specialists trained Information system developed and operational</td>
<td>Project quarterly progress reports Reports to Joint Monitoring Committee State Journal Training evaluation forms</td>
<td>Government resources allocated to the project according to the defined time-scale Effective inter-ministerial co-ordination and co-operation achieved</td>
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<tr>
<td>- Public Health Reform Bureau established (partly, INV component)</td>
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<tr>
<td>- National Public health Economics and National Public Health Monitoring Programs elaborated</td>
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<td>- By-law acts for the Public Health Law developed</td>
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<tr>
<td>- The structure of public health service analysed, assessed, improved and modernised</td>
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<tr>
<td>- Public health management capacities analysed, assessed and improved</td>
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<tr>
<td>- Public health specialists education and training needs assessed and strategy developed</td>
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<tr>
<td>- Training, continuous training and re-training curricula and methodologies for public health specialists elaborated and adopted.</td>
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<tr>
<td>- Capacity building activities in the fields of public health management, risk assessment and management, health impact assessment, monitoring/information and public communication carried out</td>
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<tr>
<td>- The Project related reports and manuals produced and disseminated within the sector</td>
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<tr>
<td><strong>Investment component:</strong></td>
<td>Relevant equipment purchased and public health information system developed.</td>
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</tbody>
</table>

**Objectively Verifiable Indicators**:
- Legislation and relevant programs drafted
- Structures and procedures for enforcement developed
- Report on public health institutions elaborated
- Training curricula developed and recommendations provided
- Approximately 250 public health specialists trained
- Information system developed and operational
<table>
<thead>
<tr>
<th>Activities</th>
<th>Means:</th>
<th>Source of Verification</th>
<th>Assumptions:</th>
<th>Preconditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Review and assessment of current situation in public health sector (legislation, management capacities, infrastructure, administration, information flows);</td>
<td>Twinning and Training package) with long-term PAA (16 p/m), short-term experts team (15 p/m), other supplies, services and training activities</td>
<td>Reports of STEs missions Project reports and documentation</td>
<td>Commitment of Ministry of Health and State Public Health Centre available. Necessary staff, office space and facilities provided.</td>
<td>Co-financing in place Public Health Strategy adopted by the Government New Draft Public Health Law is adopted by Parliament National Environmental Health Action Plan (NEHAP) adopted by the Government. NEHAP operational plan prepared and adopted by NEHAP Steering Committee. WHO/DEPA Project on NEHAP successfully completed. Links established between national health programs and EU public health action programs.</td>
</tr>
<tr>
<td>- Elaboration of National Public Health Monitoring Program and National Health Economics Program;</td>
<td>Investments in equipment for information system and computerised database; and for strengthening public health monitoring unit</td>
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<tr>
<td>- Drafting or revising public health legal acts;</td>
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<tr>
<td>- Organization of capacity building seminars in the following fields based on EU expertise: public health management and decision making, risk assessment and management, health impact assessment, public health monitoring and information, public communication;</td>
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<tr>
<td>- Provision of software and modelling application for public health needs;</td>
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<tr>
<td>- Development of relevant training manuals and curricula for continuous training of public health specialists;</td>
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<tr>
<td>- Detailed assessment of existing office and laboratory equipment at national, regional public health centres and their branches;</td>
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<tr>
<td>- Contracting for necessary equipment and purchasing it.</td>
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</table>
### Detailed Implementation Chart for the Project

**Strengthening Capacities to manage public health system in compliance with EU regulations**

<table>
<thead>
<tr>
<th>Year</th>
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<th>2003</th>
<th>2004</th>
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<td>1 2 3 4 5 6 7 8 9 10 11 12</td>
<td>1 2 3 4 5 6 7 8 9 10 11 12</td>
<td>1 2 3 4 5 6 7 8 9 10 11 12</td>
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<tr>
<td>Twinning</td>
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<tr>
<td>Supply</td>
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</tbody>
</table>

*Design* - light grey shade
*Tendering* - medium grey shade
*Implementation* - dark grey shade

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Prepared and updated by the MoH 09/03/01
CUMULATIVE CONTRACTING AND DISBURSEMENT SCHEDULE (Phare Contribution only - € Million)

Strengthening capacities to manage public health system in compliance with EU regulations

<table>
<thead>
<tr>
<th>Contracting</th>
<th>2001</th>
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<tr>
<td>Equipment Supply</td>
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<tr>
<td>Total contracting (cumulative)</td>
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<table>
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<td>Twinning</td>
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<tr>
<td>Equipment Supply</td>
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<td>Total disbursement (cumulative)</td>
<td>0.28</td>
<td>0.40</td>
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</table>
Reference to feasibility /pre-feasibility studies

Within Dutch Government MATRA Pre-accession Projects Program:


Achievements already provided in the Dutch project:

- Comments for draft Public Health Law are under preparation;
- Recommendations of Sunset Commission are reviewed and comments provided;
- Comments on re-organization of public health institutions are under elaboration;
- Training Curricula for public health specialists at Vilnius, Kaunas, Klaipeda and Siauliai are analyzed;
- Program for the course on project preparation and management is under development;
- Inventory of health indicators according to WHO Health for All strategy indicators is prepared;
- Presentation of Dutch consultant at the 3rd National Health Policy Conference on harmonization of Lithuanian health legal basis with EU requirements.

Phare project will not duplicate Dutch project. It is seen as logical extension of Dutch project, ensuring sustainability of public health development in Lithuania.

Comment on Environment Impact Assessment (EIA)

EIA is not relevant for this project.