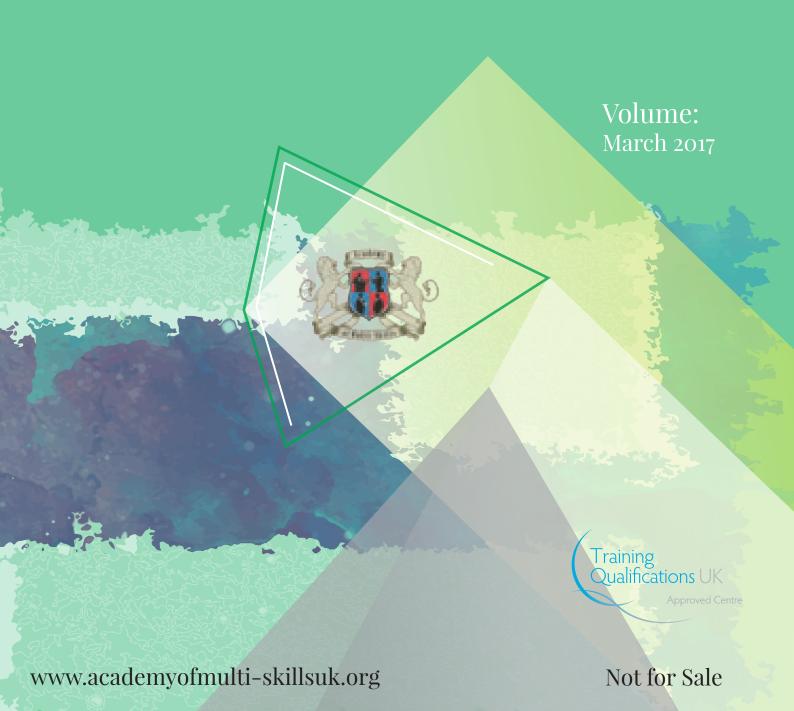
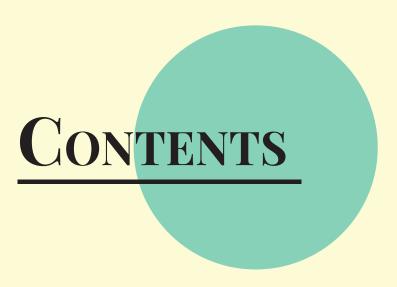
ACADEMY OF MULIT-SKILLS UNITED KINGDOM

AMS The Academy Journal







	Page
Editorial	1
Welcome from Vice-President	2
AMS - TQUK Approved Centre	3
Financing mechanisms for public-private-partnership in the public health sector in developing countries	4
Doctorate Fellow Awardee in 2017	9
Level 6 Diploma in Business Management	10
Membership, Designation and Professional Courses	11



Editorial

by Dr. David Benjamin / Matthew Tsang

Welcome to the March Volume of the Academy Journal for Academy of Multi-Skills (AMS). It is our honour to share with all of you the ideas we had, what we have done for education and vocational sectors and what we achieved for our learners. But most important part is the feedback and ideas from our scholars, partners, learners, industrial practitioners and readers, through their valuable contribution, we know the world better, we know the industries better and we know what we should do better.

At the beginning of 2017, we have fruitful achievements in our development that our Level 6 Diploma in Business Management (RQF) (Qual No.:603/1143/5) has already become the regulated qualification under OFQUAL, UK with the help of Training Qualifications UK. It will for sure be beneficial to every learners and members that they can enjoy qualified qualification with high recognition in UK and worldwide.

However, we will never stop our steps for improving ourselves and we shall believe that we are deserved to have even better development in the future.

Last of all, we would appreciate Journals and articles from members and readers for next volume of this Academy Journal to be published in September 2017. Please let us have your thoughts by submitting the Journals and articles by mid-July 2017 at the latest for inclusion.

Thanks for everything!

The Academy of Multi-Skills (AMS) is registered as a Professional Institute. It is the leading institution in multi-skills since Year 1995 with 15,000 memberships worldwide. AMS aims to provide professional recognition to multi-skilled personnel, skilled trades, crafts and professions. The Academy encourages a positive and energetic attitude to the challenges of careers that require diversity, creativity and intellect, and recognizes the valuable contribution that these skills provide to society.

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- Association of International Education Administrators (AIEA)
- UK Register of Learning Providers (UKRLP)
- Confederation of Professional Awarding Bodies (COPAB)
- Institute of Professional Financial Managers (IPFM)
- Listed in British Qualifications
- Training Qualifications UK Approved Centre



Welcome from Vice-President

by Prof. Patrick C.

Good Morning, Members,

Thank you all for joining us today. We are pleased to be able to welcome those of you that have been with us for as long as twenty five years, as well as those of you who are new to our academy. We are one family of 15,000 worldwide members.

I would like to express my gratitude to all of you who so generously helped us make the academy developed so smoothly, especially with the participating of the new management team.

You have all chosen to be a part of our academy because of our mutual passion for multi-skills development. Your passions help us all to come together as one and the energy we create as one allows us to achieve our individual as well as group goals. We need you as much as you need us and this is why we are so happy to have you join us here at the Academy of Multi-skills, United Kingdom.

In the future, you will be getting to know more about our different initiatives through our planned activities and special events where you will be able to join in and get your very own hands on experiences. I hope that these will prove to be memorable and fulfilling for you...

These are of course not the only things that are important here to us – you will also be meeting lots of new people and making new friends along the way.

Here at the Academy of Multi-skills, United Kingdom, we value and cherish the friendships we make as they more often than not prove to be formed on a strong common ground which in turn makes them last for many many, years to come!

Wish you all the best.





AMS - TQUK Approved Centre

CONGRATULATIONS to ourselves that we become the Training Qualifications UK (TQUK) Approved Centre in 2016 which drives us to work even harder for providing more opportunities for global learners and members to be more professional and multi-skilled.

Training Qualifications UK (TQUK) is regarded as Top 20 Awarding Organization for qualification in UK which is under the regulation of UK Parliament and OFQUAL (Office of Qualifications and Examination Assessment, UK Government)(Ofqual Recognition Number: RN5355). TQUK has been benefited by its remarkable recognition that there are over 100,000 learners from 50 countries worldwide and over 400 partner institutes enjoying the services from TQUK (Website: www.tquk.org).

Currently, the following professional qualifications are endorsed by TQUK ensuring more quality provision to global learners:

of Volti-Skills

- 1. Professional Doctorate Diploma for Executive (Research Focus) (Level 8) (NVQ)
- 2. Postgraduate Diploma in Business Administration (Level 7) (NQF)
- 3. Advanced Diploma in Business Management (Level 5) (NQF)

Professional qualifications regulated by OFQUAL:

1. Level 6 Diploma in Business Management (RQF)

What is OFQUAL?

CFQUAL (Office of Qualifications and Examinations Regulation, UK) is the national qualification regulating institute under UK Parliament, responsible for the quality assurance of various qualifications, examinations(e.g. GCSEs), and assessments, with the reference of Education Act 2011.

(Website: www.gov.uk/government/organisations/ofgual)

Financing mechanisms for public-private-partnership in the public health sector in developing countries

by Dr. Samuel Malone, PhD

The aim of this study is to evaluate the financing mechanisms for the **public-private-partnerships (PPPs)** in the health sector in developing countries. "Many governments have financial constraints that force them to consider the PPPs" (Mzumara 2012). My objectives are to: examine the PPPs financing mechanisms for infrastructural development in the public health sector; analyse the challenges affecting effective implementation of the PPPs in the health sector; and propose a framework for ensuring effective implementation of the PPPs in the public health sector.

Public-private-partnerships as financing models

"PPPs are contracts between government institutions and private entities that aim at providing financial resources for infrastructural development" (Aboubakr 2013). In the PPPs, it is essential to develop risk-sharing mechanisms that enhance financial returns to both the public and private sector. "The PPPs base on the stewardship model in which the entrepreneur takes a more aggressive role in aspects of the project, such as design, financing, operations and maintenance" (Gqoli 2004).

There are many PPPs that an entity can adopt. These include the following:

Build-and-transfer scheme

Under the build-and-transfer scheme, the private sector player sources the finance and

constructs the infrastructure. Upon completion, the company hands over the assets to government or responsible government agency, which then takes over all the roles (ownership and operation roles). In turn, the government would pay the company an agreed amount of money.

Build-operate-and-transfer scheme

Under a build-operate-and-transfer model, a private sector player undertakes the construction of the infrastructure, financing the construction as well as the operation and maintenance. The company would then operate the facility for a fixed term, during which the private player would be allowed to impose on users of the infrastructure fees or rates, such as user fees and rentals. The charges to consumers must be in line with the contract and should enable the company to recover its costs as well as earn a reasonable return. "At the end of the fixed term contract, there is the transfer of the assets to the govern-ment" (www.blakemorgan.co.uk).

Build-own-operate-and-transfer scheme

The build-own-operate-and-transfer model is when the private sector company finances, constructs, owns and operates the infrastructure for a fixed term. Ownership implies that the business is allowed to make any decisions it sees fit during the control tenure, with minimal or no government interference. It also gets the opportunity to recover its total investment through collecting tolls (for highways), fees, rentals or other charges. "At the expiry of the fixed term, the

infrastructure is handed over to the government, which would then take all responsibilities" (www.blakemorgan.co.uk).

Build-lease-and-transfer

Under a build-lease-and-transfer model, the private sector constructs the infrastructure and once complete, it hands the operation issue to the government on a lease arrangement, where the government agency would be paying for the lease. The lease payments would give the company an opportunity to recover its costs, and after an agreed term, the government stops paying the lease and assumes ownership and control over the facility.

Build-transfer-and-operate

A build-transfer-and-operate scheme entails the private sector company building the infrastructure and upon completion, transfers the assets to the government. However, despite not having ownership, the company is allowed to operate the infrastructure on behalf of the government, with the distribution of proceeds being as per contract agreement.

Rehabilitate-operate-and-transfer

The rehabilitate-operate-and-transfer arrangement involves a system where the infrastructure that is already in existence but in a sorry state is handed over to the private sector player for refurbishing, maintenance and reconditioning. The individual player is allowed to operate the infrastructure for a period, recoup investment costs and get a reasonable return, following which the facility is handed back.

Lease-develop-and-operate

Under a lease-develop-and-operate scheme, the private sector player leases an existing facility from the government, renovates, modernises or expands it before assuming operation rights for a fixed term. In that process, the company gets an opportunity to recover costs, with the government benefiting from the lease payments.

Public-private-partnerships in the health sector

"Developing countries are looking to the PPPs to solve problems in healthcare delivery" (Andersen and Schroder 2010). While the provision of health is the primary responsibility of the government, private capital and expertise are essential for efficiency and innovation. "An example of the PPPs in the health sector is the prevention and control of non-communicable diseases in Pakistan, where the government leverages on the technical strength of the business partner for addressing an emerging health challenge" (Bloom 2010). "In India, the PPPs combined both the social objectives of universal healthcare access and the purpose of running a profitable healthcare facility" (Bloom 2010). The four areas where private sector contribution proved very beneficial were infrastructure development, management, quality assurance and capacity building. In Africa, the PPPs have the potential to solve health infrastructure problems. "For instance, in Lesotho, Netcare (one of Africa's largest private health care providers) constructed three hospitals under the build-lease-and-transfer scheme" (Aboubakr 2013). "The PPPs are essential if Africa is to manage and ultimately overcome the healthcare challenges facing the continent like the fight against HIV/AIDS, malaria and cancer" (Aboubakr 2013). If the PPPs are a success, Africa could be able to unlock its massive human resource potential for achieving sustainable development.

Challenges to the public-private-partnerships

There is a need to consider some risks in the PPPs. These problems need management to ensure the smooth financing of the health projects. "If the PPPs lack proper design, there

is a danger that they may reorient the mission of the public sector, interfere with organisational priorities, and weaken their capacity to uphold norms and regulations" (www.heartfile.org). "Such a shift is likely to displace the focus from the marginalised and may, therefore, be in conflict with the fundamental concept of equity in health" (www.springer.com). "Another dilemma is that of social safety nets because engaging in a partnership provides the public sector with an opportunity to renounce its responsibilities (www.heartfile.org). "Failure to maintain the role of the state in such arrangements may result in a laissez-faire attitude, prejudicial to the interest of the most vulnerable groups" (www.health-policy-systems.biomedcentral.co m). There are also concerns that skewed power relationships can impede successful PPPs. Governments tend to assume overall control of the joint initiative and take charge of the weaker partner.

Mechanisms for promoting the success of PPPs in the health sector

A clear definition of roles is paramount for the successful implementation of the PPPs. "There should be a clear division of responsibilities and risk sharing" (www.mtn.com). The success of the PPPs depends on the clarity of the government's aims. "The public sector has to understand what it needs and what it wants to achieve" (Minnow and Jody 2009). Flexibility is also essential in the PPPs. "The business has some-thing new to offer to the public sector, and it can bring a different approach" (www.theguardian.com). The United Nations (2008) also proposed some principles for ensuring the success of the PPPs. The succeeding paragraphs highlight the elements.

Principle 1: Coherent policies

The process of implementing the PPPs requires consistent policies that lay down clear objectives and principles, identifies projects and sets realistic targets. The means of achieving the goals also need to be clear. A comprehensive policy is paramount so that there is a 'roadmap' for implementation. Without it, there will be no mechanism to enable visions to materialise into concrete projects. A policy for the implementation of the PPPs should begin by stating clear economic objectives. One of the essential aims of the PPPs is to provide services through the most efficient method.

Principle 2: Capacity building

It is crucial for governments to build the necessary capacities for managing the new joint venture institutions. Developing skills inside governments present a major challenge but new skills are required, for example, negotiation, contractual and financial skills.

Principle 3: Comprehensive legal framework

Investors in the PPPs need a clear legal framework, which means few and simple rules. "The legal framework needs to take into account the need of the beneficiaries and empower them to participate in legal processes, protecting their rights and guaranteeing them access in decision-making" (www.gccconference.ae). A clear framework of regulation is vital, and countries need a secure, predictable, stable, consistent and commercially-oriented framework of laws so that the PPPs can be successful. The legislation for the PPPs should not be prescriptive. Instead, they need to be permissive, focusing on achieving outcomes, while setting broad parameters in which partners can design and implement the agreed projects. Dense legislation that seeks to micromanage the process of implementing the PPPs drives away prospective investors. Therefore, emphasis should be on flexibility.

Principle 4: Risk sharing

The PPPs entail that there is risk transfer to the private sector. However, governments also need to accept their share and help to mitigate those allocated to the business in mutual support. Balancing the risk is important in the implementation of the PPPs. "The main benefit of the PPPs arises from the transfer of the risks to the private sector" (Atun and McKee 2005). Nevertheless, such a transfer and the degree to which the business is ready to assume it can distort the feasibility of projects. The lenders tend to be highly risk-averse and will turn down even the most socially desirable project if they perceive it to have too many risks, a fact which disappoints and frustrates the public sector. It is important for governments to identify risks at the start of the projects. A good starting point may be to use a checklist of the risks, which typically apply to infrastructural development projects. "A useful tool to both government and the private sector is the risk matrix, which is helpful in each project phase, setting out the government's preferred position on each negative situation" (Widdus 2004). During the pre-tender and tender stages, the risk matrix assists government practitioners in listing all the relevant project risks and their proposed management strategies. During negotiations, it can act as a checklist to ensure all risks receive attention. After signing the contract, the risk matrix can be a useful summary of the risks and the mitigation measures.

Principle 5: Transparency is critical

The selection of the bidders should be transparent, neutral and non-discriminatory, which promotes competition. "There should be a balance between the need to reduce the length of time and cost of the bid process and acquiring the best proposal" (www.gccconference.ae). Transparency in the procurement process of the PPPs also means providing the relevant information to all the bidders. "Transparency encourages open and competitive procurement regimes thereby helping the government agency and the private sector entity achieve economic benefits"

(Buse 2004). The methods of evaluating suppliers and awarding contracts should be accessible to all the interested competitors.

Conclusion and recommendations

The public health sector in developing countries can benefit most from the PPP financing mechanisms where the business provides finance for health care projects. The governments are failing to meet their budget obligations, and the PPPs are paramount. However, political instability in some developing countries threatens the successful implementation of the PPPs. Corruption hinders the PPPs in the health sector, through underhand deals, inflation of prices if there is no proper legal framework. There are weak risk management and internal controls systems in most public institutions.

This paper recommends the necessary preconditions for ensuring the effective implementation of the PPPs in the health sector. These are: political will; a sound legal framework; an appropriate institutional arrangement; clear roles and duties; and transparency.

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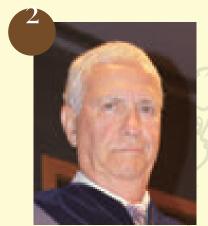
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Dr. David A. Shore

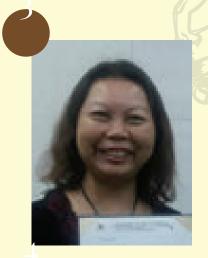
- Former Associate Dean of Harvard University's School of Public Health and Current Faculty Member PhD



Doctorate Fellow in Education

Dr. Raymond J. Striler

- Former President of Union University of California
- EdD



Doctorate Fellow in Nursing

Dr. CHANG Pei-Jen

- Professor of National Taipei University of Nursing and Health
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Doctorate Fellow in Education

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- President of Asia Pacific Institute of Management China
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- 5. Chartered / Certified Designer / Fashion Designer / Fashion Design Director
- 6. Chartered Director
- 7. Chartered Energy Engineer
- 8. Chartered Electrical Engineer
- 9. Chartered Engineer
- 10. Chartered Environmental Health Practitioner
- 11. Chartered Environmentalist
- 12. Chartered Forester
- 13. Chartered Geologist
- 14. Chartered Insurance Practitioner
- 15. Chartered Insurance Broker
- 16. Chartered IT Professional
- 17. Chartered Land Surveyor
- 18. Chartered Librarian
- 19. Chartered Linguist
- 20. Chartered Measurement and Control Technologist
- 21. Chartered Mechanical Engineer



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- 23. Chartered Psychologist
- 24. Chartered Property Manager
- 25. Certified Mobile & Satellite Communication Specialist
- 26. Chartered Manager (Casino & Shopping Mall)
- 27. Certified Manager (Casino & Shopping Mall)
- 28. Chartered Manager (Mobile Commerce)
- 29. Certified Manager (Mobile Commerce)

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- NVQ

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- RQF
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- Project Management
- Psychology
- Business Psychology
- Engineering

- Environmental Studies
- Hospitality
- Design
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- Business Administration
- Project Management
- Psychology
- Business Psychology
- Engineering

- Environmental Studies
- Hospitality
- Design
- Developmental Education



3. Level 6 Professional Diploma (Equivalent to Bachelor's Degree)

Specializations:

- Business Administration
- Project Management
- Psychology
- Business Psychology
- Engineering

- Environmental Studies
- Hospitality
- Design
- Developmental Education

4. Level 5 Professional Diploma

Specializations:

- Business Administration
- Project Management
- Psychology
- Business Psychology
- Engineering

- Environmental Studies
- Hospitality
- Design
- Developmental Education

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1. Postgraduate Diploma (Level 7)

Specializations:

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- Others

2. Advanced Diploma (Level 5)

Specializations:

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- Others

3. Diploma (Level 4)

Specializations:

- Business Administration
- 4. Diploma (Level 3)

Specializations:

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