

NORTHERN REGIONAL HEALTH AUTHORITY

24 Hillview Road

Suite 12

St. Ann

Telephone: (876) 925-8534 Fax: (876) 925-8535

Website: www.nrha.org.jm

August 2, 2006

Mr. Everton Anderson
The chief Executive Officer
The National Health Fund
The Towers, 6th Floor
25 Dominica Drive
Kingston 5

Dear Mr. Anderson,

Re: Construction of the Brooksville Health Centre in Brooksville, St. Elizabeth

The Northern Regional Health Authority hereby submits a Grant Request Application in an effort to secure funding to construct a health centre in the community of Brooksville, St. Elizabeth.

The citizens of Brooksville have to travel as far as Mandeville to access primary health care services. The nearest health facility treats approximately seven thousand (7000) persons from that community and has also reported that the institution is overwhelmed with the daily patient load. In addition, the facility has no space available to undertake an expansion and the circumstances are affecting the quality of care for the patients. It is also a financial burden for the patient of Brooksville to travel to Mandeville to access care.

A feasibility study was undertaken and it supports the hypothesis that a Type II health centre is required to serve the citizens of that community. The construction of a new health centre will have the impact of reducing:

- a. The financial burden to the citizens from travelling long distances to access health care
- b. Demand on the nearest health facility which is unable to cope with the level of patient load daily

The estimated cost of the project is \$47.25M with duration of eighteen (18) months. The NRHA does not have the financial resources to fund a project of that value and efforts to access other source of funding have not been successful. As a result, the National Health Fund is being approached with a view to obtain a grant to fully implement the project. The project proposal and other relevant supporting documents are attached for your review and we also hope that they are adequate but, if not, please do not hesitate to contact us as we would be more than happy to provide any additional information required.

We look forward to your favourable response.

Yours truly,


John Saunders
Regional Director



NHF INSTITUTIONAL BENEFIT GRANT REQUEST FORM

FOR OFFICIAL USE ONLY

Date Request Received: _____ **Project ID Number:** _____
Organisation: PVT [] PUB []
Reviewed by: IB Manager [] NHF Sub Committee [] **Decision:** Approved [] Declined []
Screening: Eligible [] Ineligible [] **Project Duration:** _____ yrs _____ mths/wks
Grant Requested: \$ _____ **Grant Approved:** \$ _____

Instructions:

- This form must be submitted with a project summary cover letter signed by the head of the requesting organisation e.g. President, Regional Director
- All sections must be completed and the relevant supporting documents be submitted for the application to be considered.
- Please append the Project Proposal at the end of the document.

(1) PROJECT INFORMATION

PROJECT TITLE: The Development & Implementation of Brooksville Health Centre

LOCATION OF PROJECT: Brooksville, ST. Elizabeth

DATE OF REQUEST: August 6, 2006

ORGANISATION NAME: Northern Regional Health Authority

ORGANISATION ADDRESS: 24 Hillview Road, Suit 12, St. Ann

TYPE OF ORGANISATION: Government NGO Private Other: _____

TEL: (876) 925-8534 / (876) 925-8535 **FAX:** (876) 925-8535

E-MAIL: rdnrha@nrha.org.jm

CONTACT PERSON: Mr. John Saunders

POSITION: Regional Director

TEL: as above **FAX:** as above

E-MAIL: as above



NHF INSTITUTIONAL BENEFIT GRANT REQUEST FORM

(2) BRIEF DESCRIPTION OF PROJECT:

The community of Brooksville has no health facility and as such the citizens have to travel far distances to access basic primary health care all the way in Mandeville. This situation creates a financial burden on the citizens in that community and also overwhelms the health facility from which they seek service as it was not designed and equipped to handle the high demand for health care service. The facility also cannot be expanded due to the limited space available.

The objectives of the project are to construct and equip a health centre in the community of Brooksville as well as to reduce the demand for services at the health facility in Mandeville. The estimated value of the project is \$47.25M with a duration of eighteen (18) months

(3) PROJECT TYPE:

- Infrastructure
- Procurement of medical & non medical equipment including furniture etc
- Health promotion and or illness prevention activities
- Service Delivery Improvement e.g. training
- Research
- Other: _____

(4) ESTIMATED PROJECT VALUE: \$47,252,500.00 _____

(5) GRANT REQUEST AMOUNT: \$47,252,500.00 _____

(6) PROJECT DURATION: 18 Months _____

(7) COUNTERPART FUNDING

List all other source of funding for the project:

Organizations	Funds J(\$)
Self-financed	NIL
Total	NIL



NHF INSTITUTIONAL BENEFIT GRANT REQUEST FORM

(8) CHECKLIST

The following represents the minimum requirements for submission. Items "a" – "d" are required for all projects and items "e" and "f" are required for any Infrastructure and Procurement of medical equipment projects respectively. Items "g" and "h" are dependent on item #7 above. Please tick the relevant items:

- a) Project summary request letter signed by the head of the organization e.g. CEO, President, Regional Director
- b) Completed Grant Request Form
- c) Project Proposal
- d) Supporting documents for the cost of the project e.g. Quotations, Per-forma Invoices, summary of Bill of Quantities or any other relevant document
- e) Architectural designs / working drawings relevant to the stage of the project (11" x 17" paper size)
- f) Specifications for any equipment to be purchased under the project
- g) Evidence of any self-financing portion of the project e.g. Bank statement or other form of commitment
- h) Approval letter or any other supporting documents from institutions providing counterpart funding

NORTHERN REGIONAL HEALTH AUTHORITY

24 Hillview Road

Suite 12

St. Ann

Project Proposal for the Development and Implementation of Brooksville Health Centre in Brooksville, St. Elizabeth

JULY 2006

(1) APPLICANT INFORMATION:

(This item may be omitted if an application form was submitted within the last 12 months)

TYPE OF ORGANISATION: Northern Regional Health Authority (NRHA)

DATE OF ORGANISATION FORMATION: April 1998

NAMES AND POSITIONS OF KEY OFFICERS IN ORGANISATION:

- a. Mr. John Saunders – Regional Director
- b. Mrs. Audrey Stewart – Director of Finance
- c. Mr. Carl James – Director of Operations and Maintenance
- d. Dr. Leslie Parker - Regional Technical Director
- e. Ms. Dawnette Rodney – Director Human Resources
- f. Mr. Joseph Lynch – Director of Management Information System

PURPOSE AND MISSION OF ORGANISATION: To deliver quality health care services within the Northern Region of Jamaica

FINANCIAL INFORMATION: Please see financial statements attached

(2) STATEMENT OF PROBLEM:

The citizens of Brookville in St. Elizabeth have to travel as far as Mandeville to access primary health care services. The nearest health facility treats approximately seven thousand (7000) persons from that community and has also reported that the institution is overwhelmed with the daily patient load. In addition, the facility has no space available to undertake an expansion and the circumstances are affecting the quality of care for the patients. It is also a financial burden for the patients of Brookville to travel to Mandeville to access care.

A feasibility study was undertaken and it supports the hypothesis that a Type II health centre is required to serve the citizens of that community. The construction of a new health centre will have the impact of reducing:

- 1. The financial burden to the citizens from travelling long distances to access health care
- 2. Demand on the nearest health facility which is unable to cope with the level of patient load daily

The estimated cost of the project is \$47.25M with duration of eighteen (18) months. The NRHA does not have the financial resources to fund a project of that value and efforts to access other source of funding have not been successful. As a result the National Health Fund is being approached with a view to obtain a grant to fully implement the project.

(3) PROJECT GOAL AND OBJECTIVES

OBJECTIVE(S)	ACTIVITIES PLANNED	EXPECTED OUTPUT	DATE
1)To provide access to Primary Health Care Services in the community	Construct, furnish and staff a new Health Centre which will deliver the necessary services to the community	Fully equipped and staffed Type III Health Centre	October 2007
2)To reduce patient the demand for services on Mandeville HC	As above	The patient load at the Mandeville Health Centre will be reduce as a result of a new health centre in Brooksville.	October 2007
3)			
4)			

(4) Project Scope

Please see below a list of activities to be undertaken for the successful implementation of the project:

- a. Prepare Project Charter for Senior management approval
- b. Secure site location including all legal requirements
- c. Obtain the necessary site information such as topographical survey and soil tests
- d. Prepare and finalize project brief with all relevant stakeholders
- e. Engage the relevant professionals to design and develop the required drawings
- f. Conduct meetings with relevant stakeholders to obtain approval of the designs and other aspects of the project
- g. Obtain the Municipal Council's approval of the project drawings
- h. Conduct procurement activities to secure the services of a General Contractor and suppliers of furniture & equipment
- i. Conduct regular site meetings and provide the necessary oversight for the successful implementation of the project
- j. Provide frequent updates to senior management regarding the status of the project
- k. Employ and train the necessary staff for the new facility
- l. Host opening ceremony for the new facility

(5) Milestones

Milestone	Description	Delivery Date	Cash-flow Required
Project Plan completed	Development of all aspects of the project which includes the hiring of professionals and completing the procurement process	March 31, 2007	\$1,000,000.00
Implementation process started	Mobilisation of the main contractor including the relocation of operational services and handing over the facility to the contractors	April 30, 2007	\$4,000,000.00
Sub & superstructure to belt beam achieved	Erection of critical structural elements including installation of the first phase of MEP services completed	June 30, 2007	\$15,000,000.00
Practical Completion achieved	All critical aspects of the project have been completed to allow the facility to be operational	September 31, 2007	\$20,000,000.00
Project closure	Defects liability period ended and all outstanding liabilities on the project as well as project closure report due.	December 31, 2007	\$1,800,000.00
Opening Ceremony	Official opening ceremony of the facility	January 31, 2008	\$300,000.00

(6) Planning Considerations

Please tick the appropriate box:

Yes No N/A

All relevant stakeholders were consulted and has signed off on the project

Project budget include provisions for F/X movement and escalation

All necessary approvals from the relevant authorities have been obtained or will be sought

Project budget includes provision to obtain professional services e.g. Quantity Surveyor, Engineer, Clerk of works

(7) Risks / Constraints

List any critical potential risks or planning constraints and state the actions to be taken to reduce the likelihood of the risk occurring or the impact should the risk eventuate. If the table is in adequate please enclose the information on a separate sheet

Risks	Description	Preventative / Contingent action
Scope creep	Uncontrolled changes and continuous growth of scope	All the necessary stake holders were included in the development of the project to minimize scope changes and a process to manage change requests have been established
Foreign exchange movement	Appreciation of the US\$ affecting items that will have to be imported	Adequate provision has been included in the project to hedge against F/X changes
Delays in Procurement	Items or services to be secured using government supplied items	All items to be supplied by the Government will have the procurement process started at least two months prior to breaking ground for the project
Decision delays	Inordinate long time for critical decisions to be made on the project	Decision turnaround times will be established to ensure that decisions are made in a timely manner
Inaccurate Estimates	Cost estimates used to develop the project budget are incorrect	A Professional Quantity Surveyor was used to develop the project cost which has been vetted by our internal project team. All equipment costs were estimated against recent purchases of similar type with adjustment for inflation

(8) METHODOLOGY: (not more than one page)

In order to ensure accountability and transparency, a committee will be formed to oversee the development and implementation of the project. The committee will be Chaired by the Project Manager and will include the main stakeholders initially. The stakeholders will be required to participate in the different stages of the project cycle, especially as it relates to their specific areas of expertise. The project unit will develop the project plan with the input of the relevant stakeholders. The project plan will be used to access grant funding, after which the relevant procurement process will be used at the different stages to engage the consultants to develop the project and to identify a suitable contractor.

During the implementation phase the Project Manager will also be responsible for the day to day administration of the project and will be supported by the Project Officer(s), Clerk of Works, Administrative Assistant and Consultants. Frequent project meetings will be held not only to address in a timely manner, issues and challenges that could put the project at risk but to also aid in the efficient execution of the project.

(9) COLLABORATION WITH OTHERS: (not more than half a page)

No other institution will be collaborated with on this project and NHF is proposed to be the sole funder

(10) PROJECT IMPLEMENTATION & MANAGEMENT: (not more than half a page)

The project will be implemented under the supervision of the Project Department. The Project Manager will be responsible for the day to day management and implementation of the project and will be supported by a Quantity Surveyor, Project Officer and an Administrative Assistant.

The Project Officer will be responsible for the oversight and coordination of different aspects of the project. His duties include, but not limited to site inspections, processing of claims, preparing reports, variation assessment etc. The Officer should hold a BSc. in Construction Management, Architectural Technology or approved equal. The Quantity Surveyor should hold at least a BSc. In Quantity Surveying and will be responsible for assessing certificates submitted by the contractor, prepare cost and variation reports, prepare comparison or internal estimates, when required. The Administrative Assistant should hold at least a BSc in Business Administration and whose duties include the efficient management of the project office through effective maintenance of records, correspondence, report writing and appointments.

(11) PROJECT FINANCING PLAN AND BUDGET:

PROJECT FINANCING

Source	Funds (\$)
Self - Financed	nil
National Health Fund	47,252,500.00
Other	nil
Project Total	47,252,500.00

PROJECT BUDGET

No	Description	Internal Estimate(\$)
1	Project Initiation	1,000,000.00
2	Project Development (include Pre & Post Contract Professional Fees)	4,000,000.00
3	Construction	30,800,000.00
4	Furniture and Equipment	10,000,000.00
5	Opening Ceremony	300,000.00
6	Contingency (2.5%)	1,152,500.00
7	Total	47,252,500.00

(12) PROJECT SUSTAINABILITY: (not more than half a page)

Post project completion, the operations to sustain the project objectives, will be supported from provisions made in the institution's yearly operational budget. This will be used to cover salaries and wages, utilities, maintenance, medical and office supplies.

(13) CAPACITY BUILDING (not more than half a page)

The project will require the services of a professional Architect, Engineer, Quantity Surveyor and a Clerk of Works, in order to finalize the development and implementation of the project. The in house project team is currently overwhelmed with other projects and will therefore not have the time to dedicate fully to the needs of this project. The in-house team is also much younger in experience and would benefit greatly from their more established and experience colleagues.

(14) IMPLEMENTATION SCHEDULE:

PROJECT SCHEDULE

Activity	Jun.06	Jul.06	Aug.06	Sept.06	Oct.06	Nov. 06	Dec.06	Jan. 07	Feb. 07	Mar.07	Apr.07	May.07	Jun.07	Jul.07	Aug.07	Sept.07	Oct.07	Nov. 07	Dec. 07	
Project Initiation																				
Secure Funding																				
Project Development																				
Procurement of Goods & Services																				
Implementation																				
Defects Liability Period																				
Project Closure																				