

## Project Proposal

### Construction of Internal Medicine Building in Nasser Medical Compound in Khan Younis City in the Gaza Strip



United Nations Development Programme  
Programme of Assistance to the Palestinian People

May 2016

**Proposal Ref.: GP-11-2016**



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## PROJECT PROPOSAL

Summary of proposal	
<b>Implementing Agency</b>	United Nations Development Programme / Programme of Assistance to the Palestinian People
<b>Project title</b>	Construction of Internal Medicine Building in Nasser Medical Compound in Khan Younis City in the Gaza Strip
<b>Duration</b>	36 calendar months
<b>Total budget</b>	USD <b>21,118,482</b>
<b>Overall goal</b>	Palestinians have better access to sustainable and quality basic services, public goods and rights through responsive and inclusive governance.
<b>Project sustainable output</b>	Empower Palestinian administrations at central and local levels have the capacity to plan, manage, and implement a framework of sustainable development
<b>Specific outputs / indicators</b>	Constructing a new Internal Medicine Buildings in Nasser Medical Compound to improve the efficiency and quality of health care delivery in the Gaza Strip for the coming 10 years
<b>Partners</b>	UNDP/PAPP in cooperation with Ministry of Health (MoH)
<b>Target group/area</b>	Khan Younis / Gaza Strip

### 1. Situation Analysis:

The health care delivery system in the Gaza strip includes primary and secondary health services with a network of 147 primary health care centers distributed among the strip's five governorates and providing health services to 1.64 million residents. Primary health care is provided by four main providers, which are MoH (54 primary health care centers), UNRWA (20 primary health care centers), NGOs (66 primary health care centers) and Palestinian Medical Services (7 primary health care centers). The Primary health care centers are linked to the general hospitals providing secondary health care, through a formal referral system.

Secondary health care is provided through 30 hospitals, of which 13 hospitals are run by MoH, 14 hospitals are run by NGOs, and 3 hospitals are run by Palestinian Medical Services. Currently, there are no hospitals run by the private sector. Two main hospitals are working as advanced secondary with tertiary service; one hospital in Gaza city and the other hospital in Khan Younis city. The referral hospitals mostly receive patients through hospital to hospital referral system.

MoH is the main provider responsible for the delivery of secondary health care in the Gaza Strip. Medical conditions that cannot be managed within MoH hospitals are referred for treatment abroad through a senior medical referral committee based in Gaza and covered financially by the MoH in Ramallah. The referral could be to private and NGOs facilities inside the state of Palestine or outside to Egypt, Jordan and few cases to Israeli Hospitals.

The number of general hospital beds in the Gaza Strip is 2,752 beds (year 2011), of which there are 2,277 inpatient beds and 475 day care beds. The ratio of general hospital beds per 10,000 populations is 17.3 and the ratio of inpatient beds per 10,000 populations is 14.3.



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The thirteen MoH working hospitals in the Gaza strip comprise a total capacity of 1,939 general hospital beds. 390 beds are assigned for day care services in all hospitals, and 1,549 beds are assigned to inpatients services and are available in seven of the thirteen hospitals. The total bed capacity for the internal medicine in MoH hospitals is 354 inpatient beds making 22.8 percent only of the total MoH inpatient bed capacity.

In addition, as MoH was responsible for 59.9 percent of the increase in the number of general hospital beds in the period 2005-2011, the responsibility for bed expansion will continue to be vested with the MoH as the main provider of the health services.

### **1.1. Existing Conditions of Internal Medicine Buildings in Nasser Medical Compound in Khan Younis**

Nasser Medical compound will serve 350,000 residents in Khan Younis Governorate by the end of year 2016. In addition, it will provide health services to more than 235,000 residents of Rafah Governorates through offering health services unavailable at the local hospitals, on a hospital-to-hospital referral basis.

#### **Internal Medicine at Nasser Medical Compound comprises the following services:**

- Emergency services for the population of Khan Younis Governorate.
- Outpatient services: 89.4 patients per day while the average of all hospitals is 1,683.
- Daycare services, which include dialysis; where the internal medicine in Nasser Medical compound and Al Najjar hospital are exclusive service provider in the southern governorates of the Gaza Strip. The average dialysis session per day is 20.6 sessions and the total number of regular dialysis patients is 94 patients.
- Inpatient services. Admissions rate is 17.1 patients per day while the average daily admissions rate for all hospitals is 451. This means that of the 451 patients admitted to all hospitals in the Gaza Strip each day, 17.1 are admitted to Nasser Medical Compound's Internal Medicine.
- Training services for internal medicine candidates and interim training for students from local schools of medicine.

#### **Measures of hospital operational efficiency show that at Nasser Internal Medicine:**

- The average length of stay (ALOS), which defines the average period patients on average stay in hospital, is 2.5 days while the average length of stay for all hospitals is 2.94.
- Bed occupancy rate, which defines the ratio between occupied and vacant beds, is 64.7 percent while the bed occupancy for all hospitals is 82.7 percent.
- The bed turnover rate, which defines how frequent a bed occupier is changed over a year, is 120 while for all hospitals it is 107.

There are two other hospitals in Nasser Medical Compound's referral basin, namely the European Gaza hospital (EGH) in Khan Younis Governorate and Al Najjar hospital in Rafah Governorate. These hospitals are general ones providing secondary services with surgical



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services being dominant leaving them dependent on Nasser Medical Compound to cover most of their unmet internal medicine needs.

The current internal medicine building at Nasser medical compound is very old and deteriorated ones constructed since 1958. It has been maintained few times without real improvement. Reports of the MoH general department for engineering and maintenance indicated that the current building is unsafe and should be demolished.

The very poor physical conditions and layout of the building is unsupportive for patient care and proper working conditions for medical, nursing and allied health workers. The layout is not conducive to proper sanitation, an acceptable level of cleanliness and more importantly, it makes assuring asepsis very questionable. It has been shown to be deficient with regard to providing a good accessibility and therapeutic environment.

To aforementioned conditions, the construction of a new internal medicine building in Nasser Medical compound is considered a top priority in the hospital sector in the Gaza Strip.

## **2. Proposed Intervention:**

### **2.1 Project Goal**

The proposed Project aims at constructing a new Internal Medicine Buildings at Nasser Medical Compound in Khan Younis city, which is expected to dramatically improve the efficiency and quality of health care delivery in the Gaza Strip for the coming 10 years.

The construction of Internal Medicine Building in Nasser Medical Compound in Khan Younis city is expected to enhance conformance to WHO guidelines regarding the development and operation of health facilities.

### **2.2 Strategy**

In line with the Palestinian National Strategic Health Plan (PNSHP) 2011-13 and in partnership with local partners, UN agencies and donors; UNDP/PAPP works to expanding the capacity and quality of healthcare facilities in accordance with international standards to develop and improve the public health services delivery in the Gaza Strip.

In 2010, UNDP/PAPP, WHO and MoH developed an incipient health needs assessment study aimed at highlighting the significant need to re-establish and develop basic infrastructure facilities required to cope with current vital needs of the health sector in the Gaza Strip. The study came out with a proposed Programme of intervention comprised of six prioritized projects of constructing new hospitals and main facilities required to improving the health services delivery. The proposed Programme was included in the UNDP/PAPP's Consolidated Plan of Assistance: 2012- 2014 for resource mobilization.



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In continuity to aforementioned efforts, UNDP/PAPP has retained in late 2012 the Engineering and Management Consulting Centre to carry out in-depth needs assessment study to identify veritable requirements for effective implementation and sustainability of the proposed six projects.

As a part of the needs assessment study, a feedback workshop attended by decision makers and professionals from MoH and different stakeholders has lately conducted in 18 February 2013, and the six projects have been prioritized in terms of their significant importunity for the Gaza Strip in the following order:

1. Construction of Internal Medicine Building in Al Shifa Medical Complex in Gaza city;
2. Construction of Internal Medicine Building in Nasser Medical Compound in Khan Younis city in the Gaza Strip;
3. Construction of National Oncology Centre in Gaza;
4. Construction of New Central Warehouses for the Ministry of Health Medical Consumables in the Gaza Strip;
5. Construction of Central Laboratories Building and Blood Bank in Gaza;
6. Construction of Central Station for Emergency and Ambulances in Gaza;

As the construction of the Internal Medicine Building in Nasser Medical Compound in Khan Younis city is classified as a significant priority for the health sector in the Gaza Strip; UNDP/PAPP exerts extensive resource mobilization efforts to secure the required fund to implement this top priority project

## **2.3 Project Description**

### **2.3.1 Outputs**

The Project expected outputs are:

- Detailed Design for the Construction of Internal Medicine Building in Nasser Medical Compound in Khan Younis city provided;
- Internal Medicine Building in Nasser Medical Compound in Khan Younis city of six stories with a total area of 12,000 square meters, accommodating 240 beds, constructed;
- Medical equipment to operate Internal Medicine Building in Nasser Medical Compound in Khan Younis city supplied, installed and commissioned;
- The operational capacity of the MoH developed by providing medical education and training of 31 concerned staff.

### **2.3.2 Project Scope and Key Activities**

The Project scope will consist of four main components. The objective of these components is to design the health facility of the Internal Medicine Building in Nasser Medical Compound in Khan Younis as per international standards, construct the health facility according to the original design scheme, provide the necessary medical equipment and electromechanical systems to perform effectively. In addition to providing capacity development in the form of staff training in subjects that are conducive to enhanced health service quality.



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The new Internal Medicine Building in Nasser Medical Compound in Khan Younis city is envisaged to accommodate 240 beds. Proposed floor space is 12,000 m<sup>2</sup>, divided into six levels as follows:

- Underground floor (-1) for a hospital warehouse and ancillary services;
- Ground floor (0) for outpatient clinics including 12 beds and related support services with 4 beds for minor operations and 4 beds for recovery, in addition to 30 beds for dialysis unit;
- First floor (1) for inpatient reception, 4 beds for intensive cardiac care unit, 8 beds for intermediate care, nursing wards with 10 beds for females and 10 beds for males, 2 beds for room action, 2 beds for ECHO and 40 beds for medical sub-specialties (neuromedicine and nephrology);
- Second floor (2) for general medical ward, 40 beds for female and 40 beds for male;
- Third floor (3) 20 beds for chest diseases unit, 10 beds for stroke unit, 2 beds for endoscopy and 2 beds for physiotherapy;
- Fourth floor (4) for administration and an educational center.

The Project outcomes and outputs will be achieved through the following activities. These activities will be achieved by UNDP/PAPP as the implementing agency, all in close cooperation with MoH and stakeholders.

- Providing Detailed Design for the Construction of the Internal Medicine Building in Nasser Medical Compound in Khan Younis
- Providing Additional Studies: EIA, Institutional Management, Investment and Operational Plan..
- Constructing the Internal Medicine Building in Nasser Medical Compound in Khan Younis
- Supplying and Installing Medical Equipment for Internal Medicine Building in Nasser Medical Compound in Khan Younis
- Providing Capacity Development
- Carrying out Construction Supervision by a Consultancy Firm

### **3. Implementation Arrangement:**

#### **3.1 Planning and Management of Activities**

UNDP/PAPP delivers through the Direct Execution (DEX) modality. UNDP/PAPP is the Executing Entity of the Programme and will be responsible and accountable for managing and implementing the Project, including the monitoring and evaluation of Project interventions and achieving Project's outputs.

Throughout the implementation processes, UNDP/PAPP plans to profoundly rely on close cooperation with local partners to achieve the Project's goals. Besides, UNDP/PAPP will utilize its full technical and financial capacities through the process to ensure quality implementation of proposed interventions.



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UNDP Programme team will carry out day-to-day management of Project activities with proper monitoring as well as quality assurance throughout the infrastructure unit. UNDP/PAPP will cooperate with relevant bodies and the donor in the implementation process at all stages in order to achieve the desired goals of early recovery initiatives.

### **3.2 Risk Mitigation Measures**

UNDP will use risk-analysis and conflict-sensitive parameters throughout the implementation of the Project. In the likely scenario of protracted, complex, and volatile conflict, the project will be adjusted according to risk and varying conditions across geographical area. Critical risks to be monitored include: a) political context, b) security situation, and c) Programmatic and operational risks. Basic principles and criteria will include:

- Political: Any support funded by the Project will adhere to the principles of international human rights and humanitarian law (especially non-discrimination and impartiality)
- Security: Legitimate security conditions and access to target area and assurances that activities will not endanger the lives of partners and of UNDP staff
- Programmatic: Presence of implementation partners
- Operational: operational capacity to do financial payments and operational feasibility to monitor Project implementation

### **3.3 Project Oversight and Assurance**

A Project Board will be established to undertake Project oversight and assurance. The Project Board is responsible for making management decisions for the Project when the Project Manager requires guidance, including recommendations for approval of Project revisions,. Project reviews by the Board are made at designated decision points during the duration of the project, or as necessary when raised by the Project Manager. The Board will be consulted by the Project Manager for decisions when Project tolerances (i.e. constraints normally in terms of time and budget) need to be revised. The Project Board will convene quarterly. The Project Board consists of representatives from following:

- Executive: UNDP, representing the Project ownership to chair the group (Country Director for Deputy Country Director, Programme),
- Senior Supplier: International partners providing resources for Project implementation
- Senior Beneficiary: to ensure the realization of Project benefits from the perspective of Project beneficiaries (MoH)

The Project board makes decisions on a consensus basis. Final decision making on Project activities and accountability however rests with UNDP in accordance with its applicable regulations, rules, policies, and procedures.

## **4. Coordination, Communication and Visibility Strategy**

UNDP is keen that a proper partnership strategy is in place to enhance synergies, partnerships and alliances with various stakeholders. Coordination and synergy is sought with bilateral and multilateral partners (donors, international NGOs, UN and local partners), through existing and



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appropriate coordination mechanisms, and according to their respective comparative advantages and technical expertise. Moreover, harmonization of practices will be sought with all partners, including UN agencies currently engaged in the target areas or working on themes addressed by the Project.

The Project is considering the importance of the communication and visibility, and therefore, includes under its budget lines for this purpose. The Project Team in close coordination with UNDP/PAPP Communication Unit will develop the communication plan to insure the following:

- a) Full participation of the initial handover and inauguration of the Project
- b) Production of press releases to cover Project news and events
- c) Production of Project fact sheets which will be included under UNDP/PAPP official website.
- d) Highlighting the funding source for the Project in all announced activities
- e) Signing and closing ceremonies
- f) Maintaining the proper logos and all related materials during the Project lifecycle that includes tendering, construction plaques, inauguration plaques, etc.
- g) Standard UNDP communication branding for donors' visibility

Effective communication with all stakeholders (Palestinian institutions, MoH, donors and beneficiaries), is fundamental to the Project's success. Information and communication needs of the stakeholders relative to the progress of the Project will be determined and highlighted as a communications plan/matrix. It will play an essential role in mitigating expected risks in ensuring advocacy.

The plan will identify the means/medium and frequency of communication between the different stakeholders. It will include List of stakeholders and their information requirements, communication mechanisms to be used (such as production of reports, press releases, workshops, awareness campaign, success stories, publications and other materials).

## **5. Reporting:**

Within the Project cycle

- On a quarterly basis, a quality assessment shall record progress towards the completion of key results, based on quality criteria.
- The Project Manager shall submit a Project Progress Reports to the Project Steering Committee on quarterly basis.
- The Project Manager will prepare annual and completion reports including financial statement of the Project and submit them to the Project Steering Committee
- A Project Lesson-learned log shall be activated and regularly updated to ensure on-going learning and adaptation within the organization, and to facilitate the preparation of the Lessons-learned Report at the end of the Project.





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## 6. Budget

No.	Project Activities	Total Cost USD	
1	Providing Detailed Design	272,500	
2	Providing Additional Studies: EIA, Institutional Management and Investment and Operational plan	125,500	
3	Constructing the Internal Medicine Building in Al Shifa Medical Complex including:	12,060,000	
	3.1 Construction Works		5,026,500
	3.2 Electrical Works		3,167,000
	3.3 Mechanical Works		3,866,500
4	Supplying, Installing and Commissioning Medical Equipment	3,117,500	
5	Providing Capacity Development	485,000	
6	UNDP Direct Implementation Cost	1,716,000	
7	Contingency (10%)	1,777,650	
	<b>Sub-total</b>	<b>19,554,150</b>	
	UNDP GMS 8%	1,564,332	
	<b>GRAND TOTAL</b>	<b>21,118,482</b>	