

TC ABSTRACT

I. Basic Project Data

▪ Country/Region:	JAMAICA/CCB - Caribbean Group
▪ TC Name:	Evaluation of the viability of the hospital infrastructure expansion in Jamaica
▪ TC Number:	JA-T1211
▪ Team Leader/Members:	PEREZ CUEVAS, RICARDO ENRIQUE (SCL/SPH) Team Leader; HENRIQUEZ CORTEZ, CARLOS ALBERTO (INE/INE); ASTORGA, IGNACIO JOSE (SCL/SPH); BROWN, NICOLE (CCB/CJA); BENEDETTELLI, VERONICA (VPC/FMP); MENDOZA BENAVENTE, HORACIO (LEG/SGO); GUERRA, MARTHA M. (SCL/SPH)
▪ Taxonomy:	Operational Support
▪ Number and name of operation supported by the TC:	Support for the Health Systems Strengthening for the Prevention and Care Management of Non-Communicable Diseases Programme – JA-L1049
▪ Date of TC Abstract:	05 May 2022
▪ Beneficiary:	Ministry of Health and Wellness Jamaica
▪ Executing Agency:	INTER-AMERICAN DEVELOPMENT BANK
▪ IDB funding requested:	US\$200,000.00
▪ Local counterpart funding:	US\$0.00
▪ Disbursement period:	24 months
▪ Types of consultants:	Firms
▪ Prepared by Unit:	SCL/SPH - Social Protection & Health
▪ Unit of Disbursement Responsibility:	CCB/CBH - Country Office Bahamas
▪ TC included in Country Strategy (y/n):	No
▪ TC included in CPD (y/n):	No
▪ Alignment to the Update to the Institutional Strategy 2010-2020:	Social inclusion and equality; Institutional capacity and rule of law

II. Objective and Justification

- 2.1 To analyze the impact of the Spanish Town Hospital's infrastructure expansion on the viability of its supply capacity to deliver in-patient services, availability of specialized health personnel, and operating costs. To achieve this goal, this TC will finance technical studies to update the current and estimate the future: (i) Spanish Town Hospital (STH) management model; (ii) Supply and demand for in-patient and surgical services; (iii) Availability and needs of health staff; and (iv) Financial resources that STH will need.
- 2.2 The objective of the upgrade of STH is to respond to the current and future health needs of the population of St Catherine Parish. Therefore, it is essential to analyze the existing hospital's productivity and project the future supply of hospital services in keeping with the infrastructure upgrades. The MOHW will expand the ambulatory and inpatient general medicine and surgical services portfolio and enhance the diagnostic capacity of STH. The new building will have 150 additional beds to the existing 403 beds and new medical and digital technology. These improvements will need more health personnel and supplies; consequently, an in-depth analysis of health staff's current and future number and skills, along with the estimate of the increase in economic costs is pertinent. This TC supports the execution of the investment loan (4668/OC-JA) "Support for the Health Systems Strengthening for the Prevention and Care Management of Non-Communicable Diseases Programme." STH is a secondary care hospital that delivers health services to the population of St Catherine Parish (522,057 inhabitants). STH's services include pediatrics, orthopedics, general surgery, obstetrics and gynecology, general medicine, and general surgery. Furthermore, it provides dietary

counseling, physiotherapy, renal care, colposcopy, diagnostic services, pharmacy, and day-care. STH's beds are insufficient compared to the demand. Between 2012 and 2017, on average, STH had 18,000 yearly admissions, and most (44%) were for obstetric care. General medicine and surgical services are overcrowded; their bed occupancy rate reaches 87.5% and 95.7%. Also, the average length of stay is 5.8 days. This data signal that STH surpassed its supply capacity, requiring infrastructure upgrades, modernization of the medical equipment, and diversification of the services portfolio. The portfolio of specialties to respond to the current epidemiological situation of St. Catherine Parish will be expanded. It has been recommended to include two new specialties in medicine: neurology and nephrology, and five surgical specialties: urology, dental, ophthalmology, maxillofacial, and otorhinolaryngology. The new diagnostic services are echocardiogram, CT scan, full microbiology, and endoscopy. In addition, the MOHW recommended including oncology, psychiatry, and gastroenterology services, expanding the E&A services and the radiology department.

- 2.3 Up to date, the MOHW and the PEU completed the building and engineering designs for infrastructure upgrade and expansion of STH, including the medical and diagnostic equipment to enhance clinical capacity. Current technical plans comprise the construction of a new six floors building that includes, on the ground floor, the Accidents and Emergency (A&E) and the Radiology departments. The first floor will comprise the ambulatory care unit, medical records, and pharmacy. The surgical block with six operating suites, the endoscopy unit, and the central sterile services department will be on the second floor. One ward with 23 beds and the laboratory will be on the third floor. The fourth floor will comprise a ward with 23 beds, the ICU (9 beds), and the High Dependency Unit. Finally, the fifth floor will have two wards of 23 and 21 beds, respectively.

III. Description of Activities and Outputs

- 3.1 **Component I: Model of hospital management and estimate the supply and demand of in-patient and surgical services.** This component will finance the technical studies to ascertain the current hospital management model and define the actions to improve the performance of the portfolio of services, organizational structure, supply capacity and demand for healthcare.
- 3.2 **Component II: Availability and needs of health personnel.** This component will finance the analysis of existing gaps and future projected HRH requirements, once the hospital's upgrades are completed. The HRH projection comprises determining the situation of the HRH under the new schemes of organization, provision of services, and availability of infrastructure and technology and estimating the future demand for HRH under a standardized operation of the hospital.
- 3.3 **Component III: Financial resources and operating costs.** This component will finance the analysis of the trends in the STH budget (income and expenses). Also, it will estimate the investments, income, and projected expenditures under the new scheme of services. In particular, the analysis comprises the trend of the economic variables concerning HRH, medical and surgical services.

IV. Budget

Indicative Budget (US\$)

Activity/Component	IDB/ OC SDP	Total Funding
Component I: Model of hospital management and estimate the supply and demand of in-patient and surgical services.	70,000.00	70,000.00
Component II: Availability and needs of health personnel	60,000.00	60,000.00
Component III: Financial resources and operating costs	70,000.00	70,000.00
Total	200,000.00	200,000.00

V. Executing Agency and Execution Structure

- 5.1 The TC will be Bank executed with support from CCB/CJA SCL/SPH.
- 5.2 The executing agency will be the IDB through SCL/SPH per the letter of request from the government of Jamaica. Procurement of consulting and non-consulting services will be carried out in accordance with the policies for the selection and contracting of consultants financed by the IDB (GN-2765-4) for firms, (AM-650 CWEs) for individuals and (GN-2303-20) for non-consulting services if required, as well as in keeping with the provisions established in the procurement plan. Through this TC, the Jamaica MOHW is receiving support to strengthen their capacity to implement the Health Systems Strengthening Program Loans (JA-L1049 & JA-L1080). While the Bank will execute the TC, the MoHW will provide general oversight on progress and on the selection and no objection of candidates for the roles identified herein.

VI. Project Risks and Issues

- 6.1 The main risk of this TC is related to the potential coordination challenges with stakeholders to obtain the information from STH, which may affect the overall implementation of the TC. The risk might be mitigated by having the Bank as executing agency and maintaining a close channel of communication with the MOHW regarding the progress of the execution. The IDB team will closely coordinate with the MoHW to ensure the most up-to-date evidence to support the development of this project.

VII. Environmental and Social Classification

- 7.1 The ESG classification for this operation is "undefined".