

Case Study: The SMART Hospital Project (a pictorial)

Implementing Agency: Pan American Health Organization (PAHO) Project Advisor: Dr. Dana van Alphen, Regional Advisor Funding Partner: United Kingdom Agency for International Development (UKAID)





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No.	Activity	Actions Performed	Evidence of Completed Works (photos, graphics, etc.)
1.	Establishment of Project Steering Committee	The Project Steering Committee was formed to help guide the implementation of the project activities. The Committee members included: Roger Bellers, DFID Simone Bannister, DFID Sally Edwards PAHO SDE Nicole Wynter PAHO PED Sharleen DaBreo, Director, DDM BVI Dr. Dana van Alphen, Project Advisor PAHO PED	SAFE + GREEN = SMART
2.	Selection of Project Consultant for Demonstration Component	A TOR was established and circulated throughout the region to determine availability of persons with sufficient skills to serve as Project Consultant/Principal Con- sultant. Mr. Ronnie Lettsome, Architect from the BVI, was chosen based on his experience in dealing with retrofitting projects involving DRR and his skill in green applications.	
3.	Application of BAT in St. Vincent and the Grenadines	Meetings were held with PAHO focal point Ms. Anneke Wilson, Health Planner and other MOH officials, representatives of the Nation- al Emergency Management Organization (NEMO), the Energy Unit and Building, Roads and General Services Authority (BRAGSA). Staff at the facilities inspected were also con- sulted. The BAT was applied to both facilities offered by MOH, Chateaubelair and George- town Hospitals.	

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4.	Selection of Consultant for Prepara- tion of Toolkit	A TOR was established and circulated throughout the region to determine availability of persons with sufficient skills to assist in the development of a compre- hensive Toolkit that can be used as a guide by countries in the adaptation of the tools developed. Ms. Marissa Da Breo was chosen based on her being a LEED AP (Accredited Professional) and experience in environmen- tal management and sustainability.	
5.	1 st Steering Committee Meeting in Barbados	Representatives from SKN and SVG were invited to join steering committee. PS MOH in SKN, Mr Andrew Skerrit and the Health Planner in SVG, Mr David Latchman, were nominated. At this meeting a decision was made to include a formal Cost Benefit Analysis (CBA) for both demonstration com- ponents of theproject. The committee also agreed that the safe vs green components should be properly documented in Annex. Compliance with building codes in the demonstration countries was considered an important criteria.	SAFE + GREEN = SMART

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6.	Submission of Inception Report for Demonstration Project	The Project Consultant/Principal Consultant developed a Baseline Assessment Tool with Criteria for selection of facilities The Meth- odology for facility assessments, tendering and works was also clearly defined and these were included in the Inception Report along with the finding from the assessment of all facilities. All technical components to support the tender process were also developed as a detailed scope of works with specifications of works to be carried out by the chosen consultant.	<section-header><section-header><section-header><section-header><section-header><section-header><text><text><text><text></text></text></text></text></section-header></section-header></section-header></section-header></section-header></section-header>
7.	Application of BAT in St. Kitts and Nevis	Meetings were held with the PAHO Focal Point, Dr. Patrice Lawrence and officials from the Ministry of Health. The Selection Criteria was applied to 5 facilities in SKN; however, only two fit the criteria; Mary Charles and Pogson Hospitals. Staff at both hospitals were consulted and the BAT was applied. It was decided that the Pogson hospital would be selected for retrofit.	

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8.	Tender launched for works at Georgetown Hospital	Expression of Interest (EOI) published in local newspapers. 8 responses were received; three (3) were short listed.	
9.	Tender documents for Georgetown Hospital presented	Tender documents inclusive of Scope of Works (Request for Proposal-RFP) were pre- pared for SVG and issued to 2 of 3 short-list- ed contractors who were asked to submit best and final offers	
10.	Contractor selected for Georgetown Hospital	Williams Electronics/Mornix Construction were selected as contractors for works at Georgetown Hospital. Contract preparation began with meeting between the Proj- ect Consultant/Principal Consultant, the Contractor and the Hospital Staff to establish a work plan and to examine the scope of works.	

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No.	Activity	Actions Performed	Evidence of Completed Works (photos, graphics, etc.)
11.	DiMAG Meeting	The tools developed for inclusion in the Toolkit were shared and discussed. In addi- tion, a presentation was made by the Project Consultant detailing the process involved in the selection of the Demonstration Sites and the works proposed for each facility. The Group also reviewed the draft Sustainable Building Annex and offered comments. It was agreed that a Peer review Group would be established from the DiMAG member- ship to review of the Toolkit Version 6 and Engineering components of the Annex. It	
		was also recommended that Architectural components be included in the Annex and reviewed by members once completed.	15/5/2013
12.	Finalized Inception Report submit- ted for preparation of Toolkit	The Consultant included methodology that will be used for literature review/research, preparing the proposed checklists an outline of the content of the Toolkit.	

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13.	Selection of Consultant for Prepara- tion of Annex	Mr. Tony Gibbs, Engineer was selected to undertake these works based on his previous work with PAHO, engineering experience in the region and knowledge of regional hazards and sustainability issues.	
14.	Selection of Consultant for Prepara- tion of Cost Benefit Analysis	A TOR was established and circulated throughout the region to identify a suitable Economist to carry out this analysis. Dr. Mark Bynoe was chosen based on his experience performing economic analyses and his work with the Caribbean Community Climate Change Centre (CCCCC).	2013 Matter Try and Matter Try and
15.	Inception Report submitted for preparation of CBA	The inception report included the proposed methodology and outlined the data needs. The Consultant identified the need for a survey of communities surrounding both fa- cilities. The survey instrument was prepared and submitted for application.	

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16.	Survey Instrument finalized	A detailed questionnaire was be issued to community members in St. Vincent and St. Kitts as part of CBA process. PAHO staff, consultant and steering committee mem- bers assisted in the administration of the questionnaires.	Cender of Information Histogram Image: state of the information of th
17.	Selection of Consultant for Public Relations Campaign	A TOR was established and circulated throughout the region to determine availability of persons with sufficient skills to serve as Public Relations expert. Ms. Tara Wilkinson was selected based on experience with PR/communications in the region. Unfortunately contract ended due to a lack of understanding of the requirements. An agreement was reached with BVI DDM to support the design and development of the PR components and Dawlin Designs was hired to graphically format these and produce the required quantities.	<image/>

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18.	PR products produced	A logo and banner was developed. Bro- chures displaying the proposed works at Georgetown and Pogson Hospitals were prepared and distributed along with flyers, t-shirts, radio and television ads/promos and billboard displays in each island.	
19.	Ceremony/Town hall meeting to launch works at Georgetown Hospital	It was agreed that a formal Town Hall Meet- ing would be held to informed community members of what will be occurring at the hospital, some of the changes envisioned and what is hoped to be achieved by the project. Dignitaries, consultant, contractor, members of the community and media were present.	
20.	Survey administered as part of CBA process for the Georgetown Hospital	Surveys undertaken to determine commu- nity's view of hospital and willingness to pay for services were administered by PAHO staff and steering committee members. Service area surveys included Georgetown and Sandy Bay. 450 questionnaires were admin- istered.	there of the household with the Physician per year Viola ber Year 1000 1010

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21.	Editing of Toolkit	Patricia Bittner wascontracted to perform technical proofreading of the Toolkit to facili- tate publishing to the web.	
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22.	Draft Toolkit published to PAHO's website	The Draft Toolkit was reviewed/ revised by core team members, members of DiMAG, regional health officials and professionals from outside the region. The Toolkit was then updated and formatted for web publication by PAHO staff.	http://www.paho.org/disasters/index. php?option=com_content&task=view&id= 1742&Itemid=911 SMART HOSPITALS TOOLKIT SMART HOSPITALS TOOLKIT Comments of the second
23.	Works start at the Georgetown Hospital, St. Vincent and the Grenadines	Retrofit works commenced at the George- town Hospital including: reconfiguration and strengthening of roof; installation of a PV system; installation of new light fixtures and faucets; replacement of windows and doors; reconfiguration of the ambulance bay; inclusion of handicapped accessible ramps; expansion of water storage capacity.	Proc Annexican Mearling Organizations Statement Hospitals Project Mearling

Project start date March 2012 See March 2012 Note March 2012 March 2012<

No.	Activity	Actions Performed	Evidence of Completed Works (photos, graphics, etc.)
24.	2 nd Steering Committee Meeting in Saint Vincent and the Grenadines	Updates were provided on the development of the Annex, Toolkit and Policy and progress of work in SVG was presented and discussed. A site visit to the Hospital was completed to see firsthand the progress of the works and to meet with hospital staff, community members and MOH personnel.	
25.	Training delivered	A Safer Building course at H. Lavity Stoutt Community College was offered for region- al participants. One module included an overview of the Smart Hospital Project. A presentation was made by the Project Con- sultant to define the connection between safe and green building techniques/meth- ods, to present the project overview and the components of the Green checklist.	
26.	Selection of Consultant for Prepara- tion of Smart Healthcare Policy	A TOR was established and circulated throughout the region to determine avail- ability of persons with sufficient skills to serve as Consultant. Dr. Vasantha Chase was chosen based on her experience with policy development in the region.	A Model Policy for SMART Health Facilities

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27.	Survey re-administered in area of Georgetown Hospital	Surveys originally included in the BAT were re-administered (40) to determine the level of satisfaction in the community with the retrofitting works and to identify lessons learned from the demonstration component of the project. The results were included in the final report prepared for the Georgetown Hospital.	Total Household Income After Taxes per Month
	· ·		
28.	Official ceremony to mark re-open- ing of Georgetown Hospital	All works were completed as scheduled. The Prime Minister, ministers of government, health officials, representatives from PAHO, contractor, media and community members attended the ceremony and toured the fa- cility. Members of the Friends of the Hospital Group were also present. They and others from the community were a significant help in the execution of additional works needed to the facility including securing a washing machine, refurbishing the hospital beds, and provision of catering services for the Open- ing Ceremony. A commitment has been made by the Group to secure an ambulance and other critical supplies and equipment for the facility.	<image/>

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No.	Activity	Actions Performed	Evidence of Completed Works (photos, graphics, etc.)
29.	Surveys administered in St. Kitts	PAHO Staff administered 260 households in St. Kitts as part of CBA development.	Histogram Histogram
30.	Tender for Works at Pogson Hospital launched	EOI published in local newspapers. 2 re- sponses received.	
31.	Tender documents presented	Tender documents inclusive of Scope of Works (Request for Proposal-RFP) were pre- pared for SKN and issued to the 2 contractors who were asked to submit best and final offers.	

Project end date March 2014 Project start date March 2012 MAR MAR APR MAY JUL AUG SEP OCT NOV DEC MAR APR MAY JUN JUL AUG SEP OCT NOV DEC FEB JUN JAN FEB

No.	Activity	Actions Performed	Evidence of Completed Works (photos, graphics, etc.)						
32.	Works start at the Pogson Hospital St. Kitts and Nevis	The Contract was awarded to Williams Elec- tronics. Retrofit works undertaken including: overhaul of electrical system; repair of backup generator; installation of spill con- tainment system; replacement of exit doors, installation of compatible fires hose connec- tions & fire extinguishers; installation of exits sign; repair of fire alarm system; upgrade of entry system to include swipe card access; installation of a rainwater capture system; repair of waste water treatment system.							
33.	Works at Pogson Hospital Complet- ed	Works completed as per Scope and in keep- ing with work schedule. Final inspection by Project Consultant/Principal Consultant was completed on 6th March, 2014. The retention period extends until later part of March 2014.							

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34.	Training Delivered	The Project overview was presented to all participants during a workshop held in the BVI. Participants were introduced to all tools developed as part of the project including Sustainable building Annex, BAT, Toolkit and Green checklist, Smart Hospital Policy, CBAs. Exercises were undertaken to demonstrate the use of the tools. 2 field trips were includ- ed as part of the workshop to highlighting the application of safe and green technol- ogies. These included a visit to the newly constructed Peebles Hospital and to Cooper Island where the latest Solar Panel System is used to provide more than 70% of power needs for the resort. Participants also viewed a number of sustainable measures applied throughout the facility.							
35.	Preparation of Final Report	Final overall draft project report was pre- pared for submission to DFID. Log frame was updated to show all components of the project that have been completed.							
	·	·							
36.	Close of Project	All works at Pogson Hospital were verified; all elements of the Toolkit upload to PAHO's website. Energy data received from the Georgetown Hospital for the past 5 months indicated a 60% reduction in energy usage at the facility.							

Annex 1 – Decrease of electrical consumption at Georgetown Hospital

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Annex 2 – SMART Hospital Demonstration Project – Georgetown Hospital, St. Vincent and the Grenadines





SMART Hospitals

		SMART Hospitals	Provision of emergency back-up power-	Strengthening and repairing of the roof
In the last decade, natural	According to the United Nations	In this context, the construction		Installation of energy efficiency devices -
disasters have caused more	Economic Commission for Latin	of health facilities must be	Enhanned among to facility with see	Photo Voltaic System & Solar Water Heaters
than 45,000 deaths in the	America and the Caribbean	revised and reoriented towards	of appropriate protective covering	Replacement of Windows and Doors to
region left 40 million injure	(ECLAC), accumulated losses due to	disaster mitigation, adapting to	A Statistical Commences of the	Improve resilience and energy conservation
er in nond of accistance, and	disasters in the health sector	climate change and reducing the		introducing natural lighting
or in need or assistance, and	reached US\$3.12 billion.	environmental footprint, the		increase ing natural an ing rung
carried a price tag—in direct	With the advent of climate change	ultimate goal is not only of	100	
damage alone-of more	it is estimated that more intense	protecting the lives, but also of		
than US\$20 billion ³ .	hurricanes, droughts, floods and	ensuring that such facilities can		
Governments are often	rising sea-level should be expected.	continue to operate at the moment when they are most		
challenged with the	Although, the Caribbean nations	needed.		
significant task of financing	contribute less than 1% to global	A first or development of the		Contract of the second s
recovery efforts after a	greenhouse gas (GHG) emissions,	Safa Hornital initiation is a		and the second se
disaster.	yet these countries are expected to	model policy on SMART	Before	After
	be among the earliest and most	Healthcare Facilities, currently	Installation of signage and evacuation	plans
ine nearth sector has prove	nimpacted by climate change in the	being prepared by the Pan	Improved first catety with installable	and a second
particularly vulnerable to the	coming decades and are least able	American Health Organization,	fire alarm system, egress and upgra	ade
havoc of disaster events. In	impacts Healthcare facilities in	which is within the CARICOM	to handicap accessibility	Establishment of water harvesting
the course of the past 20	reneral, have large carbon	regional framework for Climate		
years, as a result of natural	footorints and high utility costs.	Compatible Development. The	SMART HO	chital Domonstration Project
disasters, more than 100	The resources used to pay for	policy will provide guidance for	SIVIANT HU	spital Demonstration Project
hospitals and 650 health	energy consumption could be used	improved safety and climate		Georgetown Hospital
centers have collapsed or	in improving health services.	change mitigation to reduce the		St. Vincent & the Grenadines
been so severely damaged		vulnerability of healthcare		
that they had to be		facilities and include green		
evacuated		of natural resources and		
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