PC-1

Revamping of THQ Hospital, City Hospital Talagang District Chakwal

ORIGINAL APPROVED COST	**PKR Million. 347.423/-**
ORIGINAL APPROVED GESTATION	**72 Months** **Till June 2025**
APPROVAL FORUM	**DDSC (DDSC)**

1. NAME OF THE PROJECT

Revamping of THQ Hospital, City Hospital Talagang District Chakwal

2. LOCATION OF THE PROJECT

2.1. DISTRICT(S)

I. CHAKWAL

3. AUTHORITIES RESPONSIBLE FOR

3.1. SPONSORING AGENCY

- PRIMARY AND SECONDARY HEALTH CARE

3.2. EXECUTION AGENCY

- PRIMARY AND SECONDARY HEALTH CARE

3.3. OPERATIONS AND MAINTENANCE AGENCY

- PRIMARY AND SECONDARY HEALTH CARE

3.4. CONCERNED FEDRAL MINISTRY

- NATIONAL HEALTH SERVICES, REGULATIONS AND COORDINATION

3	**AUTHORITIES RESPONSIBLE** **3.1 Sponsoring**	Government of the Punjab, Primary and Secondary Healthcare Department
	3.2 Execution	PMU for Revamping Program of Primary and Secondary Healthcare Department and C&W Department
	3.3 Operation & Maintenance	PMU for Revamping Program of Primary and Secondary Healthcare Department and District Government
	3.4 Concerned Federal Ministry	Ministry of National Health Services, Regulation and Coordination Pakistan

4. PLAN PROVISION

Sr #	Description
1	**Source of Funding:**Scheme Listed in ADP CFY
2	**GS No:**5259
3	**Total Allocation:**0.000
4	**Comments:** Funded out of block provision reflected at G.S No.658 with an allocation of Rs. 1,800 million (Capital = Rs. 1.300 Million & Revenue = Rs. 500 Million).

5. PROJECT OBJECTIVES

Attached

5. Project objectives and its relationship with Sectorial Objectives and Components

The Government of Punjab is making strenuous efforts for a better and effective Health Care system. The Defining step in this direction was to recognize the importance of Health Care at Primary & Secondary Levels. As a first step towards better health care at primary and secondary level, the department under the guidance of Government of the Punjab has decided to launch massive revamping of 40 THQ & DHQ Hospitals in the financial year 2016-17 along with revamping of emergencies of 15 selected THQs and emergencies of all Hospitals. In addition to that, Government has assigned the task of revamping of all remaining 85 THQ Hospitals of Punjab during 2017-18. The Project Management Unit, Revamping Program, Primary and Secondary Healthcare Department has started the 2nd Phase of the said revamping program in September, 2017.

5.1 Background of Primary & Secondary Healthcare Department

Effective primary and secondary healthcare is particularly important in resource-poor countries. Effective delivery of vaccinations, maternal and child care (MCH) and treatment of common pathologies (such as malaria, gastroenteritis, respiratory tract infections and other vector borne diseases) is essential for the achievement of Sustainable Development Goals (SDGs). Effective diagnostic triage, an organized system of prescription and queue management, an effective and stringent sterilization regime, quality nursing and consultant care, implementation of minimum service delivery standards (MSDS) and delivery of care for chronic pathologies lie at the center for the provision of universal health care at a cost that the community can afford as envisaged in domains established by the 1978 Alma-Ata Declaration of WHO. Primary care serves as the cornerstone for building a strong healthcare system that ensures positive health outcomes and health equity. The deficiencies in quality of care represent neither the failure of professional compassion nor necessarily a lack of resources rather, they result from gaps in knowledge, inappropriate applications of available technology and unstructured planning. Local health care systems in our setup have practically not been able to implement department's objectives. Result is continuous lack of quality improvement to lower health outcomes.

Quality health care is actually provision of health care by timely, skillful application of medical technology in a culturally sensitive manner within the available resource constraints. Eliminating poor quality involves not only giving better care but also eliminating under provision of essential clinical services (system wide microscopy for diagnosing tuberculosis, for example); stopping overuse of some care (prenatal ultrasonography or unnecessary injections, for example); and ending misuse of unneeded services (such as unnecessary hysterectomies or antibiotics for viral infections). A sadly unique feature of quality is that poor quality can obviate all the implied benefits of good access and effective treatment. At its best, poor quality is wasteful and at its worst, it causes actual harm.

Keeping in view this basic essence of primary and secondary health care, The Government of Punjab is dedicated in making strenuous efforts for ensuring a better and effective Health Care system .The Defining step in this direction was to recognize the importance of Health Care at Primary & Secondary Levels. As a first step towards better health care at primary and secondary level, a separate department was created by bifurcating the Health department into two departments Specialized Health Care & Medical Education Department and Primary & Secondary Health Care (P&SH) Department. The principle reason for bifurcation has been to improve governance and service delivery in the spheres of health care across the province. Primary and Secondary Health Care Department has been entrusted the responsibility of primary and secondary level health facilities including preventive health services and Vertical Programs. P&SH Department accordingly has its functional responsibility in respect of 26 District Headquarter Hospitals (DHQs), 129 Tehsil Headquarter Hospitals (THQs), 322 Rural Health Centers (RHCs) and 2,504 Basic Health Units (BHUs). Moreover, specialized programs like Expanded Program for Immunization (EPI), TB Control (DOTS), Hepatitis Control Programs as well as special campaigns such as Dengue Campaign, Polio Eradication Campaigns also fall in purview of the department. The establishments like Director General Health Services (DGHS), Drug Testing Labs (DTLs) and Bio-medical Engineering Workshops also assist the department in discharge of its functions efficiently. Establishment of Internal delivery Unit at Primary and Secondary Health Care Department has been aimed for institutional strengthening and capacity building of Primary and Secondary Health Care Department. Monitoring and follow up remains one of key ingredients for good governance and is at heart of all management models. Therefore, an Internal Delivery Unit, comprising well qualified and experienced persons, is being established within P&SH Department. Internal Delivery Unit shall be manned with qualified and experienced consultants. Internal Delivery Unit shall be responsible for every such task needed to strengthen the PSHD which may range from operational matters to monitoring e.g. tracking pace of all initiatives of the Department through the process such as tracking procurement of medicines by districts, procurement of vaccine by Director EPI, pace of various development schemes and performance of Drug Testing & Bio-mechanical Labs etc.

The basic mandate of Primary & Secondary Health Department is to focus on preventive health care in primary sector along with basic diagnostics and treatment facilities at secondary level. The context is to primarily lessen the load on tertiary care health establishments and to reduce treatment costs. The major challenge for Primary & Secondary Health Department is to boost the confidence of masses and raise the level of trust in the primary health care system. The reality is that most of the health care establishments at secondary level are not currently providing health care services up to the optimal level, owing to a myriad of reasons including heavy patient load, scarcity of resources, human resource constraints and dysfunctional biomedical and allied equipment.

Due to lack of structured planning and monitoring, previous efforts did not materialize into an integrated health care regime, rather these have resulted in

haphazard construction, poor repair and maintenance, lack of basic amenities, absence of waiting areas, substandard diagnostics and therapeutics, shabby outlook and suboptimal level of patient care over all. Such state of affairs has severely jolted level of trust in health care system by common man and hence the patients prefer to visit tertiary level hospitals or even private health facilities for treatment of even very common pathologies. This subsequently has a cascade effect on socioeconomics of common man who has to spend more in shape of travelling from villages to district headquarters and then bearing costs of private treatment, secondly, this has also increased disease load on our tertiary health care establishments.

Keeping in view this importance of primary and secondary health care, the department decided to launch massive revamping program for all DHQs and THQs all over the Punjab.

5.2 Project Management Unit (PMU), Primary & Secondary Healthcare Department

In order to successfully complete the program objectives in the given timeframe, it is imperative to establish a dedicated Program Management Unit (PMU) having technical and administrative expertise and autonomy, as the regular machinery of the department is too busy with the routine work and cannot successfully steer the program. The PMU is responsible for the successful implementation of the Revamping Program through completion of all related projects. After the implementation of all these projects, the Primary & Secondary Healthcare network will be improved. The PMU shall ensure that the DHQ & THQ hospitals have a well-constructed physical infrastructure with vibrant management model for efficient service delivery and improved processes to focus on patient distress in prompt manner. It adheres to Minimum Service Delivery Standards (MSDS) to address the patients' needs in the most efficient and systematic manner.

In this regard, a dedicated team of Project Management Unit (PMU) has been established to execute the project. PMU's office is located at 31-E/1, Shahrah-e-Imam Hussain, Gulberg-III, near Qaddaffi stadium, Lahore. It is headed by a Project Director with a committed team comprising of Deputy Project Director, Finance and Administration, ICT), Project Managers, Project Officers, Engineers, supporting administrative and technical staff, experienced and qualified Health consultants., Directors (Operations, Human Resource & Planning and infrastructure, Outsourcing) as well as Procurement Specialist.

5.3 Infrastructural Interventions

The construction of various new blocks of hospital complex is constructed without any proper planning and necessary connection to existing blocks. On the whole, the complete infrastructure of hospital is quite complex and scattered, access to various blocks of hospital is quite inadequate and there is no proper connection or link between different blocks of hospital. In the revamping program of

DHQ and THQ Hospitals, the placement of various facilities of hospitals are re-planned keeping in view the layout of existing blocks for facilitation of patients and some modifications/alterations were proposed in the blocks for necessary link or connection between the blocks.

Major infrastructural interventions can be divided in the following four categories

5.3.1 External Development

5.3.2 Internal Development

5.3.3 Medical Infrastructure Development

5.3.4 Emergencies Development

5.3.1 External Development

5.3.1.1 External Platforms

In order to improve the communication between blocks, necessary interventions are taken to improve the existing internal metaled road network. Moreover, new internal metaled road network is also designed and proposed to access the blocks of hospital accordingly. Despite the improvement in metaled road network, external platforms except metaled road is also designed and proposed for patients to access the blocks by simply walking among the blocks.

5.3.1.2 Façade Improvement

In order to improve the aesthetics of hospital, façade uplift with aluminum composite panels with aluminum cladding, false steel structures, façade aluminum windows and aluminum doors are designed in order to give the feel of modern architectural era.

5.3.1.3 Sewerage System

The most important entity of a hospital lies in its cleanliness. Infrastructural interventions to keep the hospital clean were taken in the form of improvement of sewerage system of the hospital. These interventions include the re designing of sewerage system, construction of new manholes, laying of new sewer lines and connection between trunk sewer and hospital sewer.

5.3.1.4 Landscaping (Horticulture)

Landscaping in hospital adds aesthetic & beauty to the built environment as well as improves in reducing the pollution. Soft & hard landscape reduces dust particles moment in air, hence contributes in a clean environment. The hours spent

in a hospital can be stressful for patients, staff and visitors. According to research easy access to a natural environment can contribute to stress management and potentially improve health outcomes: physiological studies indicate that 3-5 minutes spent in such Hospital Outdoor Landscape Design environments reduces anger, anxiety and pain and induces relaxation. Research also shows that “positive distractions” can reduce stress and their visual forms include gardens, scenic views and artwork, which play a critical role in modern hospital design: gardens, fountains, and water features provide patients, staff and visitors with restorative experiences of nature. In this regard complete lawns development, placement of benches, dust bins, playing equipment, fruit trees, flower plants, fruit trees and gazebos are proposed in all hospitals under revamping program

5.3.1.5 Water Filtration Plant

In the modern era, the access to clean water for everyone is becoming rare day by day. Especially in hospitals, the supply of water free from any harmful impurity is one of the most basic needs. To cope up with this problem water filtration system according to the existing nature of water is designed and water filtration plant is proposed accordingly. For ease of patients, drinking water supply network was designed to provide filtered water in wards and in various drinking stations within the hospital building

5.3.1.6 External Electrification

One of the major hindrances in functionality and ineffectiveness of electro medical equipment and other facilitating electrical appliances is either interrupted power supply or power supply with lesser voltage than required. This problem was solved by providing express line or dual electrical supply in all hospitals under revamping. Despite these two facilities based, on the current and proposed electrical load of hospital new transformers were proposed to step down the voltage to desired level and complete generator backup system was designed and generators along with automatic transfer switches were proposed accordingly. Moreover, to fully lighten up the hospital for proper utilization of all facilities of hospital during the low/no-light hours of the day, external pole lights to lighten up the pathways and garden lights to lighten up the lawns were designed and proposed.

5.3.1.7 Parking and Waiting area

Non-clinical facilitation of patients and attendants were specially considered in the revamping program. One such facilitation step is designing the parking and waiting areas on basis of daily influx of vehicles and patients/attendants during the

peak hours. Parking and waiting areas on several places of hospital were then proposed according to the design.

5.3.1.8 External Signage

Eexternal signage system is designed including various signage types for complete guidance of patient attendants and to search concerned facility promptly.

5.3.2 Internal development

5.3.2.1 Aesthetic improvement

In order to improve the aesthetics of hospital wards, corridors, rooms and toilet blocks, flooring and dado design of suitable material in these areas is proposed. Despite of aesthetics, the material of flooring and dado design were chosen to provide ease in cleaning process. For further improvement in aesthetics, paint on exterior and interior part of the hospital, poly-vinyl chloride paneling to conceal the dampness damaged areas and steel cladding of columns are proposed.

5.3.2.2 Ramp and Stretcher improvement

For hospitals having more than one floor, there is a huge problem of patient transfer with stretcher. This problem is solved by proposing new ramps/stretcher ways where needed. Moreover, in order to further improve the communication between various floors of hospitals improvement of stair cases with hand rail or guard rails is proposed.

5.3.2.3 Seamless flooring and Lead Lining

To keep high risk areas like Operation theaters, I.C.U, C.C.U, and Gynecology Operation Theater bacteria free is one of the basic medical practices. In the revamping program of hospitals low epoxy paint is proposed in these areas to provide seamless flooring so that the bacterial growth within the groves can be prevented. Moreover, to make the X-Ray rooms radio-resistant and to keep the patients away from the harm of rays, interventions are taken in X-ray rooms regarding provision of lead lining in walls, ceiling and floor.

Interventions were taken regarding hazardous radiation emitting areas to make them radio-resistant in order to keep patients/attendants away from harmful radiations. These interventions were in the form of provision of lead lining in ceiling, walls and roofs of X-Ray rooms.

5.3.2.4 Aluminum doors and windows

In order to make sound and heat proof the doors and windows of wards, corridors and major health facilities are proposed as aluminum doors and windows. Which despite of above benefits are also aesthetically pleasing. Corridor wire mesh windows and rolling blinds for windows are proposed in order to invite or stop the day light within the wards according to the requirement. Moreover, existing wooden doors having shabby and dirty look are proposed to be re-polished and washroom doors are proposed to be replaced with PVC doors to make them resistant against water.

5.3.2.5 Improvement of washroom blocks

The area of hospital which can be dirty at most is its washroom or toilet blocks. To improve the cleanliness of hospital the special interventions were taken regarding the renovation of toilet block of hospital. This renovation includes the re tiling of existing damaged flooring and skirting and addition of water closets etc.

5.3.2.6 Facilitation of attendants and patients

The facilitation of attendants is also one of the most basic things to be provided in the hospital. The facilitation of attendants contributes towards the facilitation of patients. In order to facilitate the attendants, pantries are designed at that location of hospital where attendants can be effectively facilitated. These pantries include stoves and washing machines. Moreover, it is also very important to educate the patients and attendants regarding the seasonal and general diseases along with its cure and prevention. Installation of LED televisions in various locations of hospitals especially in wards and waiting areas is also proposed in the design in this regard.

5.3.2.7 Furniture and Fixtures

One more step towards the facilitation of attendants or patients is placement of benches in waiting areas. The most rush positions of hospital are chosen in this regard and placement of benches is designed according to the patient number and flow. In order to improve the efficiency of consultants or doctors, interventions regarding the renovations of doctor or consultant office are designed in this regard. The doctor room furniture is designed for this purpose keeping in view the existing area of room and necessary required equipment. To carry and dispose of the medical and general waste material of hospital, waste bin sets are designed to place at various positions of the hospital. These positions are marked by keeping in view the general circulation of the public and sensitivity of the area.

5.3.2.8 Air Conditioners, Refrigerators and LEDs

According to the different standards, there is a separate requirement of temperature to control the environment of particular place with respect to the nature of facility. In this regard, air conditioners are proposed according to the required tonnage of the specific area. For better efficiency and performance delivery, cabinet air conditioners are proposed in the wards and other facilities having larger areas. The maintenance and repair services of these air conditioners are outsourced so that uninterrupted performance can be delivered. For further facilitation of patients and attendants, placement of refrigerator is proposed on each nursing counter. These refrigerators are proposed for items requiring specific temperature for storage purposes. LEDs will also be placed at various points to facilitate the patients and attendants.

5.3.2.9 Internal Signage and Paintings

As described earlier, the information regarding the positions of major health facility especially emergency and labor room etc. is very much essential for any person entering inside the covered area of hospital. For these purposes, different types of signage are proposed including corridor hanging signage, floor map boards, room numbers and room names plaques. For general information duty rooster boards, janitorial station signage, waste bin set signage, emergency exit signage.

Different kinds of paintings are designed according to the nature of area where it is desired to be fixed. These paintings are beneficial in a sense that it improves the aesthetics of hospital and moreover, such painting patterns are designed so that it give the relaxation and soothing feelings to aid in the healing of patients. Moreover, in order to create a healthy, positive, entertaining and friendly environment for interest of children, paintings on children wards is proposed.

5.3.3 Medical Infrastructure Development

To cope with the emergency condition of clinically serious patient, oxygen supply system is designed by proposing an individual oxygen supply system for each major health facility. This oxygen supply network comprises on copper pipe line, flow meter with bed head units, cylinders and setup and individual central oxygen supply system. The contract of filling of oxygen gas in cylinders is outsourced for uninterrupted oxygen gas supply to the patients.

For patient receiving, information, guidance, appointment or for any other task, separate reception counters are proposed in various blocks so that, all necessary information regarding the block is available on the counter round the clock. In this way, utilization of clinical facilities will be optimized. For indoor patient department, complete facilitation and care of patients admitted in wards is ensured

by proposal of nursing counter in each ward. This nursing counter will be placed or constructed in such a placement that each bed can be monitored by the nurse available.

The design regarding architectural planning of above mentioned facilities are designed according to the patient facilities and architectural planning standards. These designed facilities are then designed in the existing building structure according to the patient flow and sensitivity of facility.

5.3.3.1 Emergency Department:

All THQS and DHQs are already providing emergency services to critical ill patients. As far as the existing sources including human resources & equipment are not sufficient to fulfill the requirement. Primary and secondary healthcare department is going to take the initiative to improve emergencies of hospitals by providing new equipment and human resource in form of recruitment of doctors, nurses and paramedical staff along with Infrastructure of Causality Department. Ultimate goal of revamping of emergencies is to enhance the quality of medical services to critical ill patient in golden hour to decrease the mortality and morbidity rate in causality department of each hospital.

5.3.3.1.1 General Overview of Emergency Department

In any hospital, the most important and critical area is its emergency block. Specially, if hospital is situated on a highway where there is a huge flux of rapidly moving traffic which can be a major source of causalities, if patient treatment is not proper. Besides road trauma cases, cardiac cases and burn cases etc. are also more likely to be initially treated in emergency. Proper first aid to patient reduces morbidity and mortality. The emergency department of hospital is a block where in time service delivery is so much essential that delay in proper treatment can cause lot of lives to suffer from serious diseases for rest of their life. In a nutshell, the efficiency and in time service delivery of emergency block depicts the overall efficiency of the hospital.

In order to improve the emergency department and to ensure in time service delivery of the same, special initiatives are being taken in this regard. Infrastructure of emergency department depends a lot on its service delivery and efficiency. An emergency department with all necessary medical and general equipment and equipped with all essential medical facilities but without ineffective and poorly planned infrastructure will never fulfill its need. Conclusively, such infrastructural interventions are planned in this program so that the efficiency of emergency department can be optimized. Some of the following major interventions are listed below:

5.3.3.1.2 Position of Emergency Department

It is planned that new construction of building should be avoided at most because already existing blocks with no proper utilization are existing in all of the hospitals. The emergency block should be on such a location that the distance between that department and main entrance gate should be minimum with respect to other locations or positions of complex. To fulfill this purpose, that portion of this building block is selected for re planning of emergency department which is most near to the entrance gate. The far positioning of emergency department will result the lost in time for patient during its travelling which can be crucial.

5.3.3.1.3 Access towards the Emergency Department

The route leading towards the emergency department is important in this aspect that a smooth track and a widened path will be feasible for the movement of vehicle or stretcher. Initiatives are taken in this program for construction of new pathways or renovation of existing ones leading towards the emergency department. Such material of the external platform is selected so that a smooth movement should be observed over it rather than jerks bumps. Moreover, the width of the passage from entrance gate up to emergency department is designed by keeping in view the flux of the vehicles rushing towards the emergency block.

5.3.3.1.4 Medical Infrastructure Emergency:

The existing emergency department or other block of the hospital according to its access from entrance gate, is designed and re planned according to the above described emergency facilities. The changings or amendments in the existing covered area of the hospital are proposed according space availability. Due to the rush of patients and increased number of minor surgeries performed in the emergency department make it one of the dirtiest department of the hospital. Hence, in this regards it is very much essential to keep the floors of certain area of emergency department bacteria free. Seamless flooring is proposed in this regard to avoid the groves so that the cleaning process can be made easy. Low epoxy paint is designed and proposed in this regard on Minor OT, Gurney area and specialized healthcare unit.

Provision of medical gasses is essential to facilitate the patients suffering from breathing issue due to some disease and ailment. The filling process of oxygen in the cylinders is outsourced to ensure the continuous supply of the oxygen among the beds. The oxygen system comprises on copper pipe, central oxygen supply system for pressure maintenance, oxygen cylinders and flow meter with bed head units.

5.3.3.1.5 General Building Interventions:

In order to improve the over building condition of emergency blocks following major interventions are taken:

1. Provision of flooring and skirting
2. Painting on interior and exterior side of department

3. Provision of false ceiling
4. Replacement of damaged and renovation of existing wooden doors
5. Provision of aluminum doors and windows
6. Public health work regarding supply of water and gas along with improvement of sewerage system
7. Provision of LED panel lights, ceiling fans, exhaust and wall bracket fans
8. Improvement of existing wiring and distribution including replacement of damaged equipment and proposal of new equipment

5.3.3.2 Monitoring and Quality Assurance (Process Interventions)

During construction phase, "Construction Supervision" will be carried out by the Procuring Agency (Director Infrastructure) along with Punjab Buildings department (C&W D) who will certify construction activity.

5.3.3.2.1 MSDS (Minimum Service Delivery Standards)

MSDS are minimum level of services, which the patients and service users have a right to expect. MSDS include minimum package of services, standards of care (level specific) and mandatory requirements/systems for delivery of effective health care services. The World Health Assembly in Alma-Atta in 1978 expressed the need of action to protect and promote the health for all the people of the world. Essential health is to be made universally accessible to individuals and families through their full participation and at a cost that the community and country can afford. MSDS is now being deemed to be of vital importance at Secondary HealthCare level. The THQ hospital provides promotive, preventive, curative, diagnostics, in patients, referral services and also specialist care.

THQ hospitals are supposed to provide basic and comprehensive EmONC. THQ hospital provides referral care to the patients including those referred by the Rural Health Centers, Basic Health Units, Lady Health Workers and other primary care facilities. The District Head Quarters Hospital is located at District headquarters level and serves a population of 1 to 3 million, depending upon the category of the hospital. The THQ hospital provides promotive, preventive, curative, advance diagnostics, inpatient services, advance specialist and referral services. Services package and standards of care at SHC level are also not well defined. Deficient areas include: weak arrangements to deal with non-communicable diseases, mental, geriatric problems and specialized surgical care especially at THQ. There is disproportionate emphasis on maternal and child health services at SHC facilities. Services-package being provided at PHC and SHC are also deficient in terms of Health care providers' obligations, patients' rights and obligations.

MSDS umbrella is very vast and it requires a very extensive and planned approach towards, gap analysis, planning, development, implementation,

monitoring and evaluation. MSDS comprises of 10 thematic area, 30 standards and 162 indicators. Government of Punjab has taken an initiative to standardize all hospitals of Punjab in accordance with Punjab Health Care Commission Minimum service delivery standards. PMU team segregated MSDS indicators into various targets and sub-targets to make these targets achievable. Manuals for both clinical and non-clinical specialties are being prepared comprising of departmental organizational plan, criteria for essential human resource, essential equipment, general and specialized SOPs, departmental safety guidelines etc. Standardized Medical Protocols (SMPs) are standard steps to be taken by a health facility during medical or surgical management of a patient. Standard Operating Procedure (SOPs) are detailed description of steps required in performing a task including specifications that must be complied with and are vital to ensure the delivery of these services .It requires literature review, departmental view, facility visits, consultative visits and development of action plan for implementation of MSDS. Effective MSDS implementation requires essential documentation. Documentation is a key for record keeping, monitoring and auditing. For this purpose, registers, forms, displays have to be designed with coding for effective tracking. In addition to this it also requires analysis from field from utilization point of view.

Displays constituting of public serving messages, health related information and general facility related guidelines. In order to monitor effective implementation, compliance monitoring is required to be carried out by field experts which is followed up by further planning to ensure continuous delivery of effective, accessible, continuous and quality services to masses in uninterruptable manner.

MSDS implementation is a complex procedure. Because it requires

1. Capacity building for understanding, development and continuous implementation of MSDS.
2. Ecosystem for establishing its implementation by full cooperation, collaboration, commitment of
3. Continuous monitoring
4. Continuous audit
5. Continuous training, refresher courses with purpose of reinforcement
6. Continuous quality improvement
7. Continuous Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis and gap identification
8. Continuous strategy making and implementation with backup plan for secondary options.
9. Responsibility designation for clinical and non-clinical procedures and activities.
10. Effective utilization, calibration and maintenance of equipment with record maintenance and their audit
11. Establishment of plans, implementation, analysis of gaps with alternate planning regarding fire evacuation plan, hospital inflectional control plan, hospital operational and

strategic plans, disaster plan both internal (partial / complete) and external .

The PDSA cycle

1. Developing a plan to test the change (Plan),
2. Carrying out the test (Do),
3. Observing and learning from the consequences (Study), and
4. Determining what modifications should be made to the test (Act).
5. Monitoring effective load sharing of Human resource and equipment within hospitals.
6. Addition of new HR/ rationalization on requirement of MSDS indicator compliance for effective departmental organization and their planned trainings by MPDD, UHS ETC
7. Standard optimization of Standard operating procedures and methods for their effective adoption by hospital human resource.
8. We have also extended our MSDS implementation in 20 more departments such as dentistry, ICU, CCU, Dialysis, mortuary, burn unit, physiotherapy, orthopedics, medicine, nursing, paeds, ophthalmology, derma, TB, urology, patient transfer system, store and purchase, audit and accounts, procurement, planning etc. We are also in process of preparing manuals, SOPS, plans, universal forms, and universal registers with universal tracking system of record.
9. We have developed an application for continuous monitoring of MSDS compliance.

Health managers are considered essential at both the strategic and operational levels of health systems. To gain an initial understanding of the management workforce for service deliver. Every health system desires managers who are competent and have the knowledge, skills and demeanor to be effective. The performance of health services managers will depend in part on how certain standard support systems function. Even good managers will have problems if procedures for running finances, staff, etc., are not working well. Functional systems should have clear rules and regulations, good guides and forms, effective monitoring and supervision and appropriate support staff, e.g. account staff, supplies and information staff and secretarial support A health manager is supposed to be competent in planning, budgeting, financial management systems , personnel management systems, including performance management , procurement and distribution systems for drugs and other commodities , information management and monitoring systems , systems for managing assets and other logistics, infrastructure and transport. Support systems help to ensure uniformity in management practices and ensure that management and administrative systems function and get results.

5.3.3.3 Laboratory

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the Laboratory in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of laboratory in vicinity.

5.3.3.4 X-Ray

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the Radiology unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of Radiology unit in vicinity. A healthy human being enables not only nutrition of the physical body but also enhances social interaction and promotes self-esteem and feelings of self-esteem and feelings of wellbeing. The radiology equipment serves as a “window “to the patient treatment regarding the body.

5.3.3.5 CCU

Understanding these ground realities Primary and Secondary Healthcare Department, Government of the Punjab has decided to establish coronary care units (CCU) in THQ hospitals as a part of its Revamping Program. This will improve the quality of healthcare and timely provision of life saving treatment will be possible to large number of patients. A coronary care unit (CCU) is a special department of a hospital or health care facility that provide coronary care to patients. Coronary care units cater to patients with severe and life-threatening cardiac illnesses and which require constant, close monitoring and support from specialized equipment and medications in order to ensure normal bodily functions.

Coronary care units are staffed by highly trained doctors and nurses who specialize in caring for cardiac patients. They are also distinguished from normal hospital wards by a higher staff-to-patient ratio and access to advanced medical resources and equipment that are not routinely available elsewhere. Common conditions that are treated within CCUs including angina, myocardial infection, cardiac arrhythmia, cardiac shock etc. Patients may be transferred directly to coronary care unit from an emergency department or from a ward if they rapidly deteriorate, and immediately require cardiac care treatment.

5.3.3.6 Dialysis Unit

Chronic kidney disease is now a significant public health problem worldwide. Chronic kidney disease globally affects almost 10 % of general population with Incidence in prevalence of disease are still rising especially in

developing countries .The rise in chronic kidney disease is by aging of the populations and growing problems of obesity, diabetes, high blood pressure and cardiovascular diseases.

Tehsil head Quarter Hospital (THQ) serve large catchment populations of the district and provide a range of specialist care in addition to basic outpatient and inpatient services. Patient who are in need of dialysis, are referred to tertiary care hospital due to non-availability or insufficient number of dialysis machines. Patient's condition not only deteriorate but also compromise the effectiveness of life saving intervention due to approaching to other cites or to costly private setups of dialysis. Primary and Secondary Healthcare Department has decided to establish & strengthening already existing 5 bedded dialysis unit at THQ hospitals. This will improve the quality of healthcare and timely provision of life saving treatment will be possible to large number of patients.

Dialysis unit is a special department of a hospital or health care facility that provides a lifesaving support to patients with chronic renal disease along with pre-existing diseases like diabetes, hypertension, ischemic heart disease to ensure normal bodily functions. Dialysis units are staffed by highly trained doctors, dialysis technicians and dialysis nurses who have done specialized training in caring for such patients. Patients are usually admitted from out door and often from emergency and registered for their timing and schedule of dialysis because these patients are given regular appointments twice or thrice a week as per defined by nephrologist/physician.

5.3.3.7 Labor Rooms/Nurseries

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the Labor Rooms/Nursery unit in THQ hospitals.

5.3.3.8 Operation Theater

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the Operation Theater in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in treatment according to diagnosis in case of lack of Operation Theater in vicinity.

5.3.3.9 Orthopedic unit

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the orthopedic unit in THQ

hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of orthopedic unit in vicinity.

5.3.3.10 Gynecology Department

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the gynecology unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of gynecology unit in vicinity.

5.3.3.11 Surgical Unit

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the surgical unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of surgical unit in vicinity.

5.3.3.12 Intensive Care Unit (ICU)

Tehsil Headquarter Hospitals (THQ) serve catchment populations of the whole Tehsil (0.5-1 million) and provide a range of specialist care in addition to basic outpatient and inpatient services. They typically have about 80 to 150 beds and a broad range of specialized services including surgery, medicine, paediatrics, obstetrics, gynaecology, ENT, ophthalmology, orthopaedics, urology, neurosurgery etc. Patient who are in need of intensive care are usually referred to tertiary care hospital but due to long distance they had to travel and time consumed on road due to heavy traffic and other unavoidable circumstance ,patient's condition not only deteriorate but also compromise the effectiveness of life saving intervention. Understanding these ground realities Primary and Secondary Healthcare Department, Government of the Punjab has decided to establish intensive care units (ICU) in THQ hospitals as a part of its Annual Development Plan. This will improve the quality of healthcare and timely provision of life saving treatment will be possible to large number of patients.

Primary and Secondary Healthcare Revamping programme (PSHRP) is the initiative by the Chief Minister of Punjab to strengthen the healthcare delivery system in the province Acquisition of licenses for all THQ Hospital by developing and implementing uniform set of standard Operating procedures (SOPs) & standard medical protocol (SMP) for compliance to MSDS of PHC is planned as a part of PSHRP.

An **intensive care unit** (**ICU**) is a special department of a hospital or health care facility that provides intensive treatment medicine. Intensive care units cater to patients with severe and life-threatening illnesses and injuries, which require constant, close monitoring and support from specialized equipment and medications in order to ensure normal bodily functions. Intensive care units are staffed by highly trained doctors and nurses who specialize in caring for critically ill patients. They are also distinguished from normal hospital wards by a higher staff-to-patient ratio and access to advanced medical resources and equipment that are not routinely available elsewhere. Common conditions that are treated within ICUs include ARDS, trauma, multiple organ failure and sepsis. Patients may be transferred directly to an intensive care unit from an emergency department if required, or from a ward if they rapidly deteriorate, or immediately after surgery if the surgery is very invasive and the patient is at high risk of complications.

5.3.3.13 Mortuary Unit

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the mortuary unit in THQ hospitals. Postmortem or autopsy is a part of medico legal investigation into a death which is conducted by a judicial medical officer. Realizing the problems countered medico legal process focusing on following important areas;

1. Improving quality and motivation levels of human resource conducting medico legal Examination.
2. Improve methods to collect and preserve samples so that so that these may best be available for further forensic analysis.
3. Improving physical infrastructure at tehsil level to provide enabling environment for better conduct of medico legal cases including improvement in state of mortuaries at tehsil level.
4. Improvement in legal framework including improved forms.

5.3.3.14 Dental Unit

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the dental unit in THQ hospitals. Majority of patients are suffering problems some time life threatening phases due to delay in diagnosis and treatment according to diagnosis in case of lack of dental unit in vicinity.

5.3.3.15 Physiotherapy Unit (33 THQ Hospitals)

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the physiotherapy unit in all THQ hospitals. Majority of patients are suffering problems some time life threatening

phases due to delay in diagnosis and treatment according to diagnosis in case of lack of physiotherapy unit in vicinity.

1. Physiotherapy is a “science of healing and art of caring”. It pertains to the clinical examination, evaluation, assessment, diagnosis and treatment of musculoskeletal, Neurological, Cardio-Vascular and Respiratory systems ‘functional disorders including symptoms of pain, edema, and physiological, structural and psychosomatic ailments. It deals with methods of treatment based on movement, manual therapy, physical agents, and therapeutics modalities to relieve the pain and other complications. Hence, Physical therapy covers basic parameters of healing sciences i.e. preventive, promotive, diagnostic, rehabilitative, and curative.

2. Physiotherapy practice has a very long history and a modern clinical practice is heavily reliant on research and evidence based practice. The Primary and Secondary Healthcare Department Government of Punjab attests to this commitment by adopting and promoting the Standards of Practice for Physiotherapy.

Importance of Physiotherapy and Rehabilitation department

1. Physiotherapy provides services to individuals and populations to develop maintain and restore maximum movement and functional ability throughout the lifespan. This includes providing services in circumstances where movement and function are threatened by aging, injury, disease or environmental factors. Functional movement is central to what it means to be healthy.
2. Physiotherapy is concerned with identifying and maximizing quality of life and movement potential within the spheres of promotion, prevention, treatment/intervention, habilitation and rehabilitation. This encompasses physical, psychological, emotional, and social wellbeing. Physiotherapy involves the interaction between physical therapist, patients/clients, other health professionals, families, care givers, and communities in a process where movement potential is assessed and goals are agreed upon, using knowledge and skills unique to physical therapists.
3. The proposed project entails setting up a Physiotherapy and Rehabilitation Department. Being one of the major players in human service sector, rehabilitation Departments provide a wide range of services relating to physical impairments and disabilities of all age groups. These services range from assessment, evaluation, diagnosis, treatment and plan of care of individuals, from newborns to the very oldest, who have medical problems or other health-related conditions that limit their abilities to move and perform functional activities in their daily lives. These services will be provided by qualified Physiotherapists Consultants. Our consultants

examine each individual and develop a plan using treatment techniques to promote the ability to move, reduce pain, restore function, and prevent disability. In addition, our doctor work with individuals to prevent the loss of mobility before it occurs by developing fitness- and wellness-oriented programs for healthier and more active lifestyles. The proposed Physiotherapy and Rehabilitation Department will provide all these services under one roof.

Opportunity Rationale

Due to vast media exposure over past few years, women, as well as men, have become more conscious about their health especially youngsters. In Pakistan, Rehabilitation Clinics and Fitness Centers have grown over the years. It is easy to open GP clinic as space and skill requirement is very basic. But a Rehabilitation clinic provides more professional services with qualified staff including Physiotherapy doctors and experienced support staff and therefore, requires more planning and arrangement. Quite a few Physiotherapy and Rehabilitation Departments have opened in Lahore, Islamabad, Karachi and other relatively larger cities of Pakistan, which are catering to the demand of the people, but still there is a lot of unfulfilled demand as can be judged from excessive rush at the existing Physiotherapy Departments. The patient's ratio and problems with musculoskeletal disorders and neurological disorders are same in the tehsils and districts levels of Punjab. The business is service-oriented and carries large potential for serving poor people due to its unique nature and uncontrolled spreading of joints and muscles, and neurological problems, especially in the areas where our THQ Hospitals are located. There is lot of potential in this domain, especially for those who are committed to providing quality service.

5.3.3.16 Queue Management System (QMS)

OPD in THQ has enormous patient load, due to the only big public sector serving hospital in Tehsils. At the moment the ticket system is prevailing but there is no mechanism to handle that ticket and assign number to the ticket and its being issued in manual format. This will also create dependency on the person issuing the ticket. After getting the tickets, patient will be provided with no guidance on where to go and when his term will come to meet the doctor and get the required service. This will create confusion and delayed service delivery. On the other hand it will waste lots of time on the end of doctor and patient as patient and doctor has no direct liaison with each other. Moreover, patient will again have to be dependent on some person to check that either doctor is free or any patient sitting in his facility. Here again, human intervention and dependency will come into play.

This project basically aims to remove all the human related dependency till the patient reach the doctors. Moreover, it also includes, recording basic information

for a patient and guiding him to the doctors room from registration count to triage without any dependency on hospital staff. This will improve the transparency as per the vision of good governance and serve the patient in an efficient and transparent manner. This will also help the patient in estimating that time estimate till his term which will give him relief and more belief on the fair system. On the other hand doctor will always have an idea that how many patients will be in queue and give him direct liaison with the patient sitting outside.

The need of queue management system is evident in hospital from the fact of lack of proper mechanism of patient queue management at OPD's, human resource deficiency and non-functional equipment. The Implementation of Queue Management System will provide and streamline Patient Queue Management at OPD with Ticket Generation and Display of Numbers on the counters. This will help in maintaining the queue on First IN First OUT (FIFO) basis. The system will also provide the information counter to the general public to educate them in the use of queue management system and short description of the process. After implementation of this system, the incoming patient will be guided in a manner to get the service on his turn without any dependency or interference of an external resource. All will be handled in an automated way with patient are being served at their turn.

The system manages the patients load, organizes the patient's queues in an adequate manner and gives them the ease in waiting area; and they will be examined gracefully by doctors at their turn. Basic information of the patient is also linked with its ticket, being taken at the first counter. This will help established a unique ID against each patient. This will also lead to the establishment of Electronic Medical Record. The Process flow of Queue Management System at THQ is given as follows:

There are 25 counters at THQ level including basic registration counter, triage counter, consultant office and hospital pharmacy. There is one ticketing machine with a bifurcation of male, female and old age person. The ticket will be issued to the relevant category accordingly. After receiving the ticket the said number will be blinked on male, female and old age counter. The person will move to that counter where he will be asked about his basic details which will be entered in the basic registration form software linked with QMS and that specific token / ticket number. He will also be asked about the disease and accordingly the relevant consultant / specialty area e.g. pediatrics, ophthalmology etc. after registering, he will take the printout and give the slip to patient / attendant along with its token number.

The basic fee of OPD will be received at the registration counter and accounted for in the basic registration software linked with QMS. The same token number will be displayed on the triage counter where his vitals will be taken and written on the same registration slip available with the patient. Now, keeping in view the specialty area the token number will be displayed on the relevant consultant office and he will be checked by relevant consultant. The consultant than diagnosed the medicine or either to admit it after his examination. In case of medicine he will be sent to hospital pharmacy where again the same ticket number will be displayed. There have to be an option available with the doctor to either redirect him to the hospital pharmacy or other (medical tests, referred to IPD). On displaying the same token number at pharmacy counter the patient will move to pharmacy counter along with his token number and registration slip and take prescribed medicine. Patient will be disposed from that window and process of QMS will be completed. There will be no entry in the basic registration software on the counters of triage, doctor at the moment. Detail of equipment is attached.

The process described above for THQ will be implemented. The important constraints for the systems are:

1. Same token number will be used at all the counters and patient will be getting the ticket from ticketing machine only once at the time of entry.
2. QMS will cater for missed, skipped or delayed patient at any counter.
3. There will be two LED displayed at different location in the waiting area to guide patients about the process details and to display token number along with announcement in URDU.
4. The gap between each display panel from ticketing machine to pharmacy can be customized according to requirement e.g. 5, 10, 30, 60 seconds etc.

5.3.3.17 Electronic Medical Record (EMR)

Establishment of network infrastructure, establishing a central data center, connectivity of different building through fiber, are also the major components of the revamping project in terms of ICT. This will including provision of networking point at all nursing stations and important areas where entries regarding patients' needs to be made e.g. Radiology/Pathology, Indoor, outdoor etc. This will serve as backbone to implement the Electronic Medical Record System in the Hospital which has the key feature of generating Unique Medical Record Number for each patient.

This MR number will serve as an identity for patients during their treatment, retrieval of records and for decision making.

EMR will also be able to log the patient for treatment being provided to him in different areas of hospital i.e. OPD, Pathology, Radiology, Surgery, Indoor, etc. and their integration. This will be achieved by entering the relevant information at each department against specific MR number of a patient in the Customized / Purpose build software (EMR) for these public healthcare facilities.

This entry of MR number against each patient in hospital will build a large database for patient and relevant diseases. This will help in analysis disease / epidemic prevention and better patient care through retrieval of patient history and proper diagnoses at physician end. Implementation of patient registration, Record keeping, physical queue management, E-prescription, supporting IT interventions for EMR and medicine dispensation. Detail of equipment is attached.

5.3.3.18 Video Surveillance through CCTVs

Installation of network based CCTV cameras is an important module in the ICT part of revamping project. Scope of this component is to install 60 to 80 cameras in each hospitals at important location i.e. entry, exit, OPD, waiting areas, Parking for surveillance and security purposes. This will also serve as major input to the security services by Outsourced Security Company in the hospitals. Moreover, there will be small scale central control room at each hospital to monitor the allocated locations where the cameras have been installed. This system will also have the facility to record the video for 15 days for all the cameras so that recording of specific duration can be produced on demand. This will also have the facility of central control room which has the capacity to access the camera of THQ hospitals and to view and monitor the area of specific camera within specific hospital at any given time. Therefore, it will establish a centralized surveillance and security mechanism for these 85 public sector healthcare facilities. Detail of equipment is attached.

5.3.3.19 Medicine Store

To improve the quality of medical care of patients, primary and secondary Healthcare Department has decided to improve the medicine store in THQ hospitals.

5.3.3.20 Day Care Center

On-site (or near-site) child care would lead to improve workplace satisfaction by allowing employers more frequent contact with their children,

reducing stress and anxiety over scheduling, and potentially providing financial benefit to the hospital. Therefore, P&SH Department has decided to establish the Day Care Center at every THQ Hospital. The Medical Superintendent of the concerned hospital will be the overall in-charge of the Day Care Center.

5.4 Out Sourcing of Non Clinical Services

It was planned to provide Outsourcing of following Non-clinical services through development Budget later on decided to shift to non-development Budget as per the decision of progress review meeting chaired by the Chairman P&D Board dated 01-01-2018 w.e.f. 30-06-2018:-

1. Janitorial services
2. Laundry services (On hold)
3. MEPG Services
4. CT scan
5. Security

5.4.1 Janitorial services

These services include cleaning of hospitals and its roads and ROW areas. Internal cleaning comprises of complete cleaning along with washrooms cleanliness and material for these services such as hand wash/sanitizer. The Outsourcing is hereby designed keeping in view the sizes of areas assigned to each sanitary worker along with condition and nature of service. Human resources are planned after measuring the total area of hospital, built up area excluding the areas of horticultural land and residential buildings. The workers shall work in three shifts in a day. Half of the total strength of sanitary workers shall work in morning shift due to patients load in OPD. The concerned sanitary work company is bound to provide cleaning services materials and their refilling as and when required.

The companies providing janitorial services will be required to provide quality janitorial services, complete their personnel strength on daily basis which will be ensured through biometric attendance. Also, the companies will be subject to pecuniary penalties by hospital authorities if services provided are not according to the contracts.

5.4.2 Laundry Services

Different models were being applied by the hospital administrations individually which were not properly catering the basic requirement of washing and disinfection of different items used for hospitals. This model includes the initial procurement of different daily use items such as three different colors bed sheets and pillow covers and are to be changed thrice a day. Moreover, the concerned company must provide washing and cleaning services of bed sheets, pillow covers, blankets along with covers, apparels/OT clothes.

5.4.3 MEPG Services

The service of the hospitals is suffering badly due to improper functionality of the existing electrical and mechanical equipment which arises due to lack of maintenance. This model satisfies the need of proper maintenance plan which comprises of regular visits of technicians for looking after of electrical and mechanical equipment and accessories. Outsourcing company will be responsible for immediate response and above mentioned services.

5.4.4 CT Scan Services

CT Scan Services in selected Hospitals of Punjab are also being undertaken as a component of Government's decision to revamp all Secondary Healthcare. The objective of this initiative is to provide high quality CT Scan Services to widely scattered population of low socio-economic groups at their door steps. It will ensure provision of satisfactory diagnose infections, muscle disorders, and bone fractures. The imaging technique of CT Scan can help doctor to study the blood vessels and other internal structures and assess the extent of internal injuries and internal bleeding.

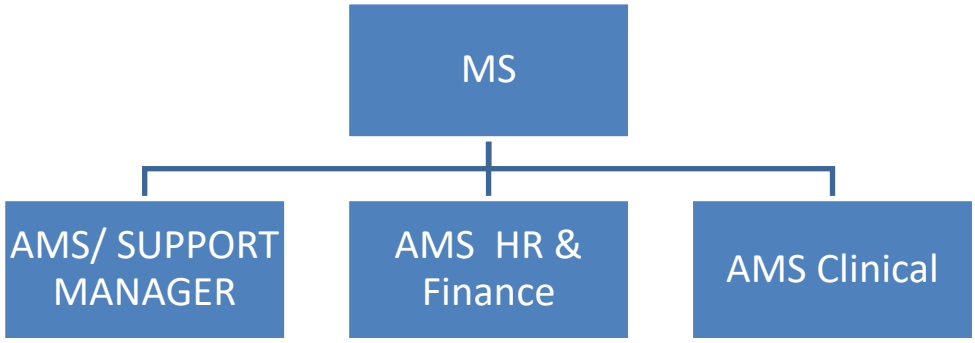
5.4.5 Security

The outsourcing model is designed due to non-provision of security arrangements and improper parking in different areas of premises of hospital. This model consists of guards who shall work in two shifts to provide security and surveillance for complete premises of hospital excluding residential areas. The devices required for this service to operate are arms, walkie talkie, Base set per unit and torch etc.

5.6 HR & Management Interventions Structure

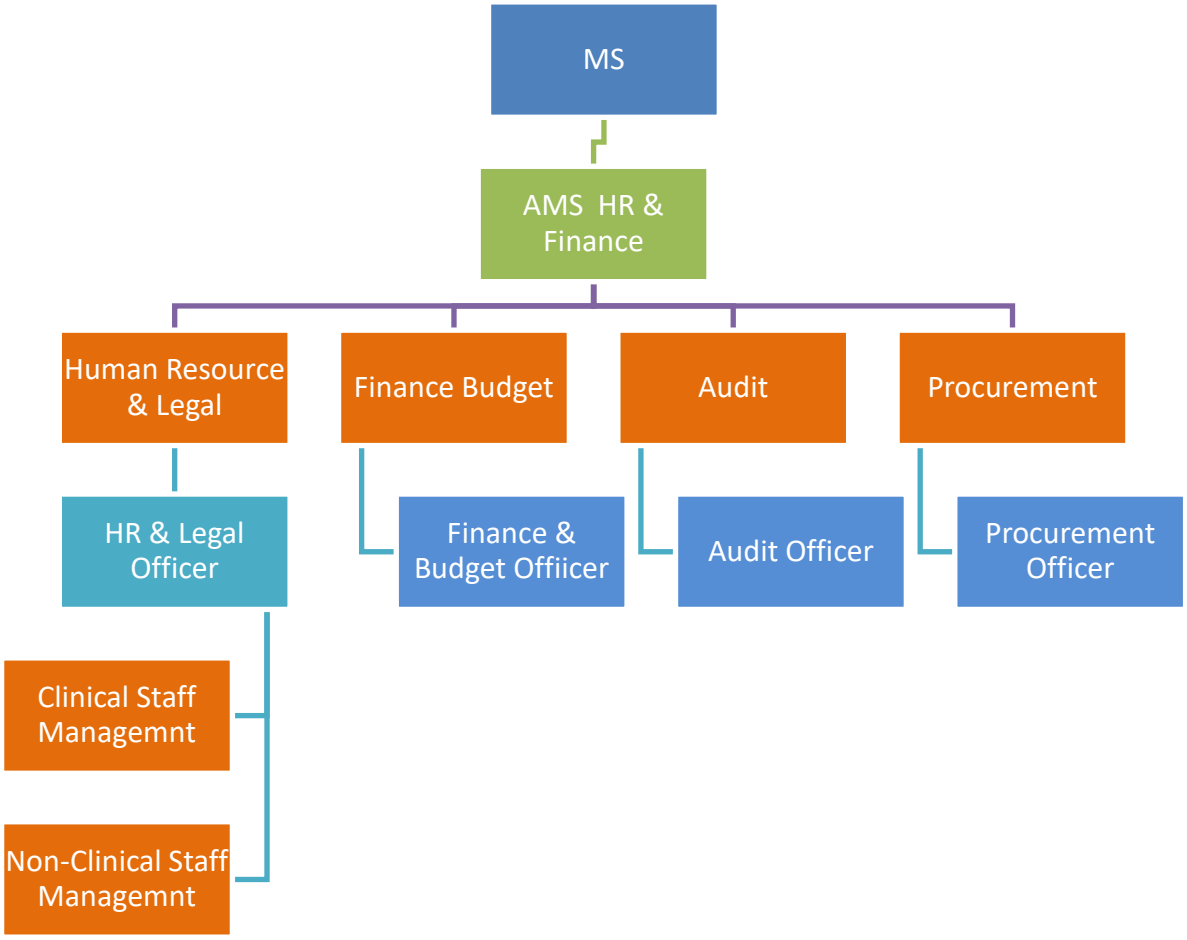
HR Interventions can be broadly classified into introduction of New Management Structure (NMS) staff.

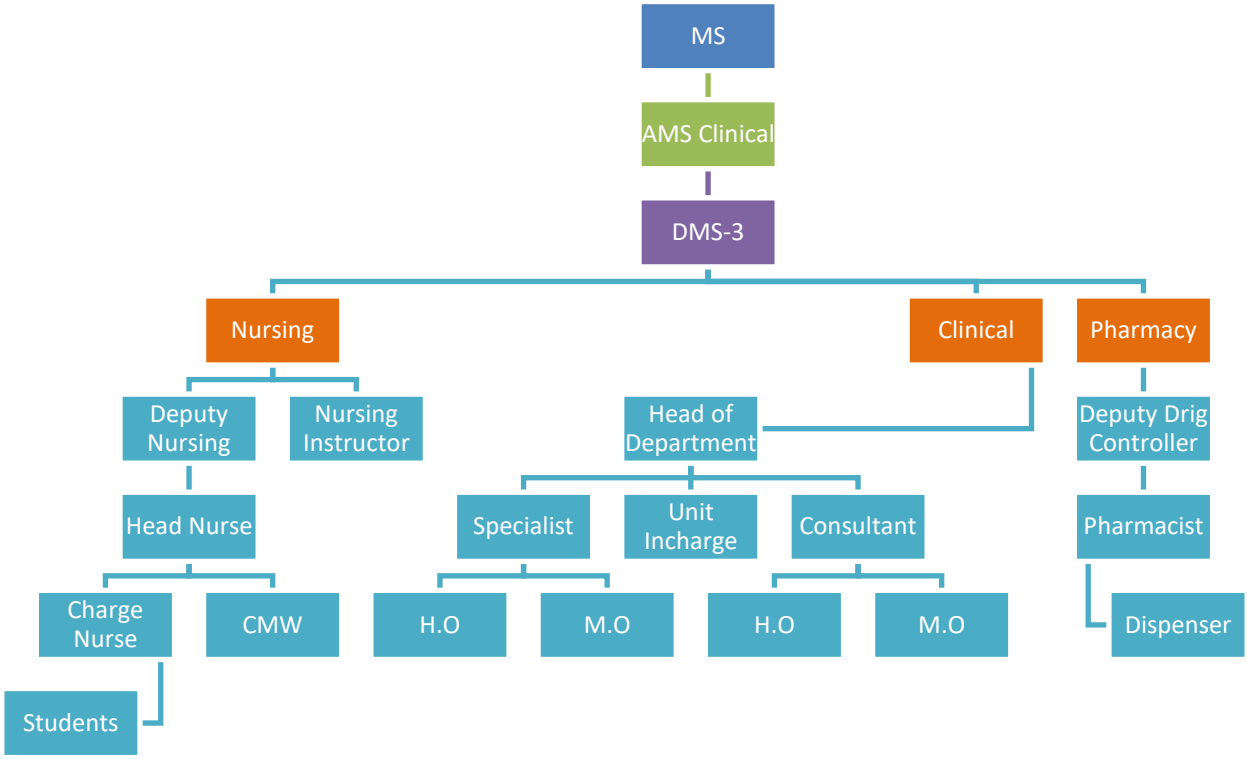
New Organogram of Hospital



MS

- AMS/ SUPPORT MANAGER
  - IT/Data Analysis
    - IT/ Statistical Officer
      - 4 Data Entry Operators
  - Admin
    - Admin Officer
      - 4 Monitors
        - Security
        - Transport
        - Parking
        - Janitorial
        - Canteen
        - External House Keeping
        - Civil Works
        - Technical works
        - Electrical Works
        - Internal House Keeping
        - Laundry
        - Stores & Supplies


MS
AMS HR & Finance
Human Resource & Legal
Finance Budget
Audit
Procurement
HR & Legal Officer
Finance & Budget Offiicer
Audit Officer
Procurement Officer
Clinical Staff Managemnt
Non-Clinical Staff Managemnt


MS
AMS Clinical
DMS-3
Nursing
Clinical
Pharmacy
Deputy Nursing
Nursing Instructor
Head of Department
Deputy Drig Controller
Head Nurse
Specialist
Unit Incharge
Consultant
Pharmacist
Charge Nurse
CMW
H.O
M.O
H.O
M.O
Dispenser
Students

5.6.1 Non Clinical HR Interventions (Human Resource (HR) Plan Management Structure)

Institution will run under the administrative control of Medical Superintendent, who will control this with the collaboration and cooperation of 3 Additional Medical Superintendents including AMS (Admin), AMS (HR & Budget) and AMS (clinical), 3 Deputy Medical Superintendents (morning, evening and night) will be reporting to AMS Clinical. Each clinical facility will be further controlled by head of concerned department and 6 administrative posts of HR & Legal Officer, IT/Static Officer, Budget & Account Officer, Admin Officer, Procurement Officer and Audit Officer will be provided as supporting hands for AMS Admin and AMS HR & Budget for smooth execution of hospital tasks.

Responsibilities / Job Descriptions, Eligibility & Financial Implications for Management Structure of Hospital

5.6.2.1 Medical Superintendent

Shall be overall responsible for all the affairs of the Hospital

5.6.2.2 AMS Admin.

Shall be responsible for following functions in addition to his own duties:

1. General administration
2. IT/Data analysis/statistics keeping (biometric machines, etc.).
3. In case of outsourced interventions like QMS/EMR he shall be responsible for enforcement of contract and in case of violation shall ensure action has been taken as envisaged in the contract.
4. He shall be responsible for entry of data on Citizen Feedback Model.
5. He shall be responsible for ensuring collection of report of actions taken on CFM reports and entry of that on CFM.
6. He shall be responsible for implementation of any IT related initiative in the hospital.
7. He shall be responsible for better record keeping of hospital
8. He shall devise and implement systems for better record keeping of hospital

9. He shall ensure generation of all types of reports/information required of hospital by District Government/P&SHD/any other authorized Public agency

New Management Structure (NMS)

In place of the clerical positions, the P&SH Department has introduced a New Management Structure (NMS), in all District and Tehsil Headquarters Hospitals. The officers recruited as a part of the NMS have a minimum of 16 years of education. Their minimum qualification is MBA / B.Sc. Engineering / M.Com / Pharm-D / M.Cs / LLB / MPA / CA Inter / ACCA / ACMA / Master Degree or equivalent in relevant field etc. Their recruitments were undertaken through a competitive process by a third party testing service.

5.6.2.3 <u>Admin Officer</u>

Shall be responsible for general administrative affairs of hospital along with following functions:

1. Security
2. Transport
3. Parking
4. Janitorial
5. External housekeeping
6. Electrical works
7. Internal housekeeping
8. Laundry
9. Stores & supplies

In case these functions have been outsourced, he shall be responsible for enforcement of these contracts and shall ensure that penalties are imposed in case of violation of contract. In case he fails to enforce contract and the outsourced function is not performed at par as per contract and penalties have not been imposed he shall be liable for non-action. Moreover, only reporting of violation of contract shall not suffice but he has to ensure follow up till the penalty has been imposed and action as envisaged in contract in case of violation has been taken.

<u>Eligibility Criteria</u>

1. Minimum qualification Masters' degree in Economics/ Public Administration/ Finance/ MBA Finance/Administration or equivalent from HEC recognized University

2. Minimum 2 years post degree experience of administration (Additional credit may be given for hospital administration/ Public sector administration of similar nature)

5.6.2.4 Human Resource Officer

Shall be responsible for following:

1. Issuance of monthly Duty rosters & special duty rosters of Eid, Muhurram etc. of all clinical & non-clinical staff in hospital
2. Issuance of Transfer/postings orders within hospital
3. Taking of joining from new incumbents and charge relieving orders of relinquishing officials
4. File maintenance of all employees of hospital
5. Record of all enquires of employees of hospital
6. Leave record of employees
7. Adjustment of officials on duty during leave of concerned employee
8. Litigation/ legal issues of hospital (shall ensure all court cases are well attended and all legal matters of hospital are well taken care of)
9. Any other HR related function assigned by MS/AMS

Eigibility Criteria

1. Minimum qualification Masters' degree in Economics/ Public Administration/ Finance/ MBA HR/Management/ Finance/Administration or equivalent from HEC recognized University
2. Minimum 1 year post degree experience of administration (Additional credit may be given for hospital administration/Public sector experience of similar nature)

5.6.2.5 IT/Statistical Officer

He shall be responsible for IT support for all IT interventions in the hospital.

He shall be in liaison with HISDU, P&SHD for proper reflection of hospital record on HISDU dashboard. In case there is any discrepancy or error he shall resolve the issue. Moreover, he shall be responsible for functionality of all IT equipment.

Eligibility Criteria

1. Minimum qualification Masters' degree in Computer Science or equivalent from HEC recognized University
2. 2 years post degree experience of IT/Data analysis(Additional credit may be given for similar assignment experience)

5.6.2.6 Finance & Budget Officer

Shall be responsible for following:

1. Handling of all financial matters of hospital
2. Petty cash handling
3. Preparation of budget
4. Budget review
5. Maintenance of accounts and record
6. Any other function assigned by AMR HR & Finance/MS/P&SHD

Eigibility Criteria

1. Minimum qualification Masters' degree in Finance/ MBA Finance or equivalent from HEC recognized University (Additional credit may be given to Charter accountant/ACCA)
2. Minimum 2 years post degree experience of Finance, Accounts & Budget (Additional credit may be given for Public sector experience of similar nature)

5.6.2.7 Procurement Officer

Shall be responsible for following functions:

1. Procurement of all kinds for hospital
2. Shall be in liaison with P&SHD for procurements being conducted
3. Any other function assigned by AMS HR & Finance /MS/P&SHD

Eigibility Criteria

1. Minimum qualification Masters' degree in Finance/ MBA Finance or equivalent from HEC recognized University
2. 2 years post degree experience of procurement (Additional credit may be given for public sector experience of procurement)

5.6.2.8 Quality Assurance Officer

He shall be responsible for quality of all things in the hospital.

Eligible Criteria

1. Masters in Total Quality Management / Masters in Public Health/ Masters in Health Administration/ Masters in Hospital Management / Masters in Biochemistry / Biotechnology / Molecular Biology / Microbiology from an HEC recognized University or equivalent.

   OR

   16 years education along with Post graduate diploma in Total Quality Management/ Post graduate diploma in Health Safety and Environmental Management System / Post graduate diploma in Healthcare and Hospital Management / Quality Assurance or equivalent.
2. Minimum 1 Year post degree relevant experience.

5.6.2.9 Logistics Officer

He shall be responsible for Supply Chain, logistics, fleet, warehousing and inventory management, clearing and forwarding in the hospital.

Eligible Criteria

1. M.Sc. Supply Chain Management/ MBA or Equivalent.
2. One year experience in Supply Chain, logistics, fleet, warehousing and inventory management, clearing and forwarding.

5.6.2.10 Data Entry Operators (DEO)

Four Data entry operators shall help IT officer in dispensation of his responsibilities.

Eligible Criteria

1. Minimum qualification BA / B.Sc / B.COM / BCS or equivalent from HEC recognized University. In case of BA/B.COM candidate must have six months computer course / Diploma.

2. Proficient in MS Word/ MS Excel/ MS Power point (additional credit may be given for additional relevant certified computer courses)
3. 1 years post degree relevant experience

5.6.2.11 Assistant Admin Officer

Shall be responsible for general administrative affairs of hospital and assist the admin officer.

Eligibility Criteria

1. Minimum qualification Masters' degree in Social Sciences/Economics/ Public Administration/ Finance/ MBA Finance/Administration or equivalent from HEC recognized University
2. Minimum 2 years post degree experience of administration (Additional credit may be given for hospital administration/ Public sector administration of similar nature).

5.7 HR for QMS and MSDS and Day Care Center.

5.7.1.1 QMS Supervisor / Information Desk Officer

Shall be responsible whole QMS networking

Eligible Criteria

1. M.Sc. (Comp. Engineering, Electronics, Electrical Engineering, IT, Telecommunication, Com. Science, Software Engineering, MCS), BCS (Comp. Engineering, Electronics, Electrical Engineering, IT, Telecommunication, Com. Science, Software Engineering, MBA, BBA, MPA, IT related 16 years Education.
2. Experience in the field of Software/Hardware/Network/DATA Quality Assurance, IT projects, IT enabled organizations, CCTV Control Room monitoring, Call Centre, Networking, Software Development will be considered as an added advantage during interview process.
3. Excellent communication Skill (Urdu, English) and IQ level
4. Age Limit of 21-28 years for Male & 21-30 years for Female
5. Typing Speed: 30WPM.

5.7.1.2 Computer Operators

Eight Computer operators shall help QMS Supervisor in dispensation of his responsibilities.

Eligible Criteria

1. Minimum qualification 14 year or Masters' degree from HEC recognized University
2. Proficient in MS Word/ MS Excel/ MS Power point (additional credit may be given for additional relevant certified computer courses)
3. 35 Word per Minute. Excellent communication in English and Urdu.

5.7.2 Consultants (MSDS) Implementation & Clinical Audit

Eligible Criteria

1. MBBS & Masters in Public Health, or equivalent qualification.
2. The consultant must have 10 years of hands on experience of third party validation, clinical audit of hospitals, Minimum Service Delivery Standards (MSDSs) implementation / hand holding; Report Writing; working knowledge of international best practices in hospital management will be preferred. Proficiency in MS Office is must. Must have strong communication skills.

5.7.2.1 Terms of Reference (TORs) for Consultants Minimum Service Delivery Standards (MSDS) Implementation & Clinical Audit

Government of the Punjab, Primary and Secondary Healthcare Department (P&SHD) is implementing multiple initiatives to improve the quality of healthcare at DHQ/THQ level across the province. One of the initiatives is Primary and Secondary Healthcare Revamping program which is being implemented by the Project Management Unit (PMU). Currently PMU is also involved in the standardization of quality of care at facility level through uniform set of Standard Operating Procedures (SOPs) & Standard Medical Protocols (SMPs) for compliance. The department intends to make all DHQs and THQ hospitals of Punjab as MSDS compliant which have been devised by Punjab Healthcare Commission.

Punjab Healthcare Commission was established under the PHC Act 2010 as an autonomous regulatory body for health sector; with the purpose of improving the quality, safety and efficiency of healthcare service delivery for all Public and Private Healthcare Establishments (including Allopaths, Homeopaths and Tibbs) in the province of Punjab. The Punjab Healthcare Commission has developed

Minimum Service Delivery Standards (MSDS) for all hospitals to improve the quality of healthcare services all over the Punjab. All Healthcare Establishments are required to implement MSDS to acquire a License to deliver healthcare services in Punjab.

This standardization effort will not only ensure availability of minimum services delivery standards (MSDS), SOPs, SMPs at all levels, but also the other essential inputs for functioning of systems and processes to ensure the smooth and safe delivery of quality healthcare services. These will also create conducive working environment for healthcare providers.

5.7.2.2 Objectives

The objective of this assignment is to implement & check all SOPs, SMPs, Minimum Service Delivery Standards (MSDS) & conduct clinical audit for 125 DHQ/THQ hospitals. Furthermore, the consultant will also monitor ongoing multiple trainings at DHQ/THQ hospitals.

5.7.2.3 Scope of Work

1. Develop policy & strategy for clinical audit of 125 hospitals.
2. Develop detailed clinical audit plan, with expected deliverables from hospitals. 360 degrees clinical audit.
3. Visit DHQ/THQ hospitals, to assess MSDS implementation and detailed report generation with short coming & highlight areas of improvement.
4. Review SOPs, SMPs & ISO Standards in hospitals to identify non-compliance.
5. Visit DHQ/THQ hospitals to implement clinical audit as per devised strategy, as well as monitoring and implementing MSDS standards.
6. Prepare detailed visit reports of clinical short comings; and suggest, and implement improvement plan.
7. Monitoring & auditing of patient referral system, detailed report on error and recommendations on rectification of errors.
8. Visit DHQ/THQ hospitals to implement clinical audit as per devised strategy, as well as monitoring and implementing MSDS standards.
9. Prepare detailed visit reports of clinical short comings; and suggest, and implement improvement plan.
10. Monitoring & auditing of patient referral system, detailed report on error and recommendations on rectification of errors.
11. Monitoring and evaluation of multiple trainings imparted at DHQ/THQ hospitals.
12. Any other relevant task assigned by Project Director/Director Quality Assurance / Project Manager.

5.7.2.4 Reporting Arrangements

- The Consultant (MSDS & Clinical Audit) will report to the Project Director/Director Quality Assurance/Senior Project Manager, P&SHD

5.7.2.5 Duration of Assignment

- The duration of assignment will initially be for THREE MONTHS / 120 DAYS which will be extendable subject to satisfactory performance.

5.7.2.6 Outputs / Key Deliverables

- Study/desk review the relevant Minimum Service Delivery Standards (MSDS) prescribed by PHC & ISO Standards, train the hospital staff/monitor/facilitate their implementation.
- Study/desk review the existing Standard Operating Procedures (SOPs), train the hospital staff/monitor/facilitate their implementation and suggest improvements where necessary.
- Study/desk review the existing SMPs, train the hospital staff/monitor/facilitate their implementation and suggest improvements where necessary.
- Conduct hospital visits of 125 DHQ/THQ hospitals (each DHQ hospital to be visited monthly & each THQ hospital every three months).
- Conduct formal hospital survey for confirming the implementation of MSDS on the relevant Scoring Matrix.
- Submit detailed report of each hospital visit on a standard format prescribed for the purpose.
- Conduct a system, process analysis with special emphasis on clinical audit and submission of detailed report accordingly.

5.7.2.7 Remunerations

- The consultant will be paid amount of Rs. **4500-6500/- per day** with no other benefits.
- All logistics will be arranged/reimbursed by PMU for field visits (accommodation, refreshments etc).

5.7.2.8 Terms of Payment

- Consultant will be paid on monthly basis throughout the contract period.

5.7.3 HR for Day Care Center

5.7.3.1 Manager Day Care Center (DCC)

Shall be responsible for general administrative affairs of DCC.

Eligibility Criteria

1. Minimum qualification Masters' degree in Economics/ Public Administration/ Finance/ MBA Finance/Administration or equivalent from HEC recognized University
2. Minimum 2 years post degree experience of administration (Additional credit may be given for hospital administration/ Public sector administration of similar nature)

5.7.3.2 Montessori Trained Teacher

Shall be responsible for basic education of children.

Eligibility Criteria

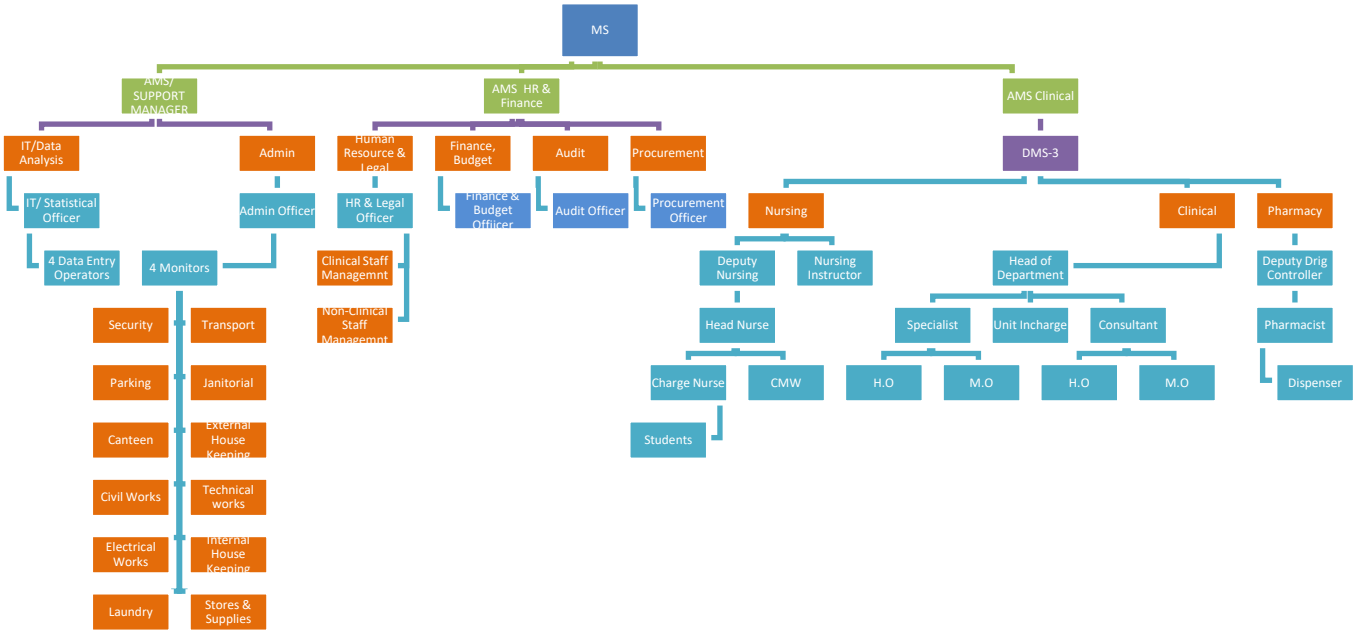
1. Minimum qualification BA/BSC or equivalent from HEC recognized University along with B.Ed.
2. Minimum 1 years post degree experience of teaching (Additional credit may be given for Public sector teaching of similar nature)

5.7.3.3 Attendant / Care Giver

Shall be responsible for special care of the children.

Eligibility Criteria

Minimum qualification Matric or equivalent alongwith diploma in relevant field



The Planning & Development Board vide letter No.12(24)PO(COORD-II)P&D/2022 dated 14-07-2022 has informed that revised standard pay package were discussed and approved by the 83rd PDWP meeting held on 28-06-2022 under the chairmanship of Chairman P&D Board for all ADP funded Project posts of Department /Organizations working in Government of the Punjab:

Project Pay Scale (PPS)	**Revised Project Pay Scales (Permissible Range) (PKR)**	**Annual Increment Up to % age**
PPS-1	28,000 --- 44,800	10
PPS-2	35,000 --56,000	10
PPS-3	43,750 -- 70,000	10
PPS-4	52,500 -- 84,000	10
PPS-5	70,000 --112000	10
PPS-6	105,000 -- 172,200	8
PPS-7	157,500 --258,300	8
PPS-8	218,750--358,750	8
PPS-9	306,250--502,250	8

PPS-10	437,500--700,000	5
PPS-11	612,500-- 980,000	5
PPS-12	875,000 --1,400,000	5

In view of the above the Pay package of NMS staff has been revised. Financial Implications of New Management Structure Model based on revised Standard Pay Package (PPS) approved by the 83rd PDWP meeting held on 28-06-2022:

Name of Post	**No. of Employees**	**Original Pay package approved**		**Revised Pay package**	
		Per Month Salary	**Salary for One Year**	**Per Month Salary**	**Salary for One Year**
Admin Officer	1	80,000	960,000	105,000	1,260,000
Human Resource Officer	1	80,000	960,000	105,000	1,260,000
IT/Statistical Officer	1	80,000	960,000	105,000	1,260,000
Finance & Budget Officer	1	80,000	960,000	105,000	1,260,000
Procurement Officer	1	80,000	960,000	105,000	1,260,000
Quality Assurance Officer	1	80,000	960,000	105,000	1,260,000
Logistics Officer	1	80,000	960,000	105,000	1,260,000
Data Entry Operator (DEO)	2	35,000	840,000	44,000	1,056,000
Assistant admin Officer	2	50,000	1,200,000	70,000	1,680,000
Total	**11**		**8,760,000**	**849,000**	**11,556,000**

5.8 Other Initiatives:

There are many other initiatives which government plans to undertake in order to improve healthcare services in the province. These include:

- Rehabilitation of Emergency Ward
- Fixture of Benches
- Addition of Bracket Fans/Water Coolers/LCDs with signage
- Supply of Laboratory/ Equipment/USG/ECG etc.
- CCU Improvement
- Installation of Water filtration plants
- Replacement of Bed sheets/Pillows/Matrasses
- Installation of Transformers/Dual Connection
- Improvement of Labor rooms/Nurseries

- Maintenance and replacement of Air-conditioners through Outsourcing
- Blood Bank improvement
- Installation of CCTV Cameras
- Installation of Basic Fire-fighting Equipment
- Up gradation of Pharmacy and medicine Store
- Improvement of Internal Roads and laying of Tough pavers
- External Development
- Rehabilitation of Hepatitis/T.B Control

The PMU is essential to deliver the project end-item within budget and time limitations, in accordance with technical specifications, and, when specified, in fulfillment of project objectives.

5.9 Patient Management Protocol

5.9.1 Emergency:

1. Initial reception and computerization of data, issuance of medical record number and preparation of record file.
2. Patients seen by C.M.O. initial assessment (brief history and physical examination) is entered on the emergency slip/file initial treatment is started.
3. C.M.O calls the medical officer / house officer of the relevant department who takes on of the following action:-
    i. Discharges the patient from emergency department after the patient is stabilized (himself or after consultation).
    ii. Returns the patient in emergency department and inform the consultant or call such patient is either discharged after some time i.e. 2 hours of admitted later on
    iii. Patient is straight way admitted by the medical officer himself or in consultation with the consultant
4. A separate record is maintained by each department. Each patient discusses at the morning meeting and any pitfalls are any pitfalls are corrected.
5. The patient who is admitted is again entered into the computer in the ward, complete history and physical examination is carried out and relevant lab & radiological investigations are ordered. (If not already done in the emergency department).

6. The definitive management is either started by the medical officer himself or in consultation with the consultant. (Telephone or physically). The patient is prepared for surgery if required.
7. At the evening round of the ward, the patients admitted throughout the day (Through OPD or emergency) are seen by the specialist. Appropriate changes in the management are carried out.
8. During the night, medical officer & house officer will be on duty and they will remain in contact with consultant.
9. In the morning round all the new admissions and old patients are thoroughly discussed management / treatment changed, surgery ordered or discharge ordered.
10. The discharge certificate is either prepared by the house officer or medical officer. If prepared by the house officer, it is countersigned by the medical officer

Appropriate changes are made in the computer record after discharge. The file is sent to the central record.

5.9.2 <u>O.P.D:</u>

1. After the initial registration and issuance of computerized number patient is sent to the relevant medical officer with the OPD slip/file.
2. The medical officer / house officer of the relevant department performs the initial assessment. The medical officer himself advises the treatment / investigation or refers the patients to the specialist or admits the patient.
3. After admission. The same routine is followed which has been mentioned in the case of admission through emergency.

5.9.3 <u>Death or End of Life Management</u>.

1. The decision regarding resuscitation is made at the initial stages by the medical officer / house officer or specialist in consultation with the patient himself and / attendants.
2. The DNR (Do not resuscitate) patients are only seen by the medical officer/ hose officer at the time of death.
3. For the patients to be resuscitated, a special code (blue code) is declared when patient go onto cardiac or the terminal events.
4. The policy for very sick / terminal and dying patients is formulated at the hospital administration level and appropriate modifications are decided in the relevant department for each patient.

5. Every death is discussed weekly at the mortality committee at the department and at the hospital level cleared by the Medical Superintendent.

5.9.4 Inventory Control System

The stock keeping and issuance of such items shall also be controlled and monitored through closer supervision and checks and balance system built in the software. The stock and expense of durable and consumable items will be kept in the system and also as hard copies. The main stores computers will be linked with the sub stores computers through networking. The areas like emergency. Outpatient department, Indoor registration desks, Laboratory and Radiology Department, ICUs, etc., will have linkages with the main and sub stores to know about:-

1. Stock in hand of various items
2. New receipt of these items
3. The items which have been issued to other departments
4. The Items which are not available
5. The expenditure incurred on the purchase.

The budget and details of account shall be linked with the financial control system.

5.9.5 Project Monitoring Committee

A Project Monitoring Committee is proposed hereby as under to monitor the project regarding Revamping of THQ Hospital:

1.	Deputy Commissioner	(Chairman)
2.	District Monitoring Officer	(Member)
3.	Executive Engineer Buildings	(Member)
4.	Assistant Commissioner Concerned	(Member)
5.	MS THQ Hospital	(Secretary/Member)

The committee will monitor the progress of the project and will hold regular weekly meeting to review the progress.

5.10 Relationship with Sectoral Objectives

The Government of the Punjab, Primary & Secondary Healthcare Department is in the process of undertaking number of initiatives to improve health care delivery system in the province. The Government of the Punjab is firmly committed to provide health care services at the doorstep of the community through integrated approach. A number of projects to improve emergency health care service particularly targeting on the promptness and quality have been

initiated. Although major focus is on disease prevention and health promotion strategies by providing specialist health care services to victims of various diseases in the patients is one of the top most priority. The instant project will be a major wing to health department with line departments.

Mainly the linkage with social welfare and human empowerment, labour and manpower, Education Department, Special Education, Home of the project will be in a vibrant environment in the holistic manner. The scope of the project itself aims to establish horizontal linkage with all the stakeholders through multi-sectorial approach. The health care facilities and ongoing services provided in the hospital will seek strength and viability from its linkage and public ownership.

6. DESCRIPTION AND JUSTIFICATION OF PROJECT

6.1 JUSTIFICATION OF PROJECT

Attached

1. Description, Justification and Technical Parameters

The scheme has been estimated on face of the factual basic requirements and if needed, alterations and has been quoted in this PC-1. The Population of Tehsil Talagang District Chakwal is more than 0.573 million. The area of the City Hospital Talagang District Chakwal is 119,167 SFT land.

6.1 Description and Justification

The Project Management Unit, Revamping Program, Primary and Secondary Healthcare Department planned to start the 2nd Phase of the said revamping program. The instant PC-I is also meant for provision of requisite biomedical and non-biomedical equipment, Electricity, Furniture & Fixture, Signage, HR and outsourcing of services for THQ City Talagang District Chakwal

Revamping of THQ City Talagang District Chakwal constitutes of value addition in all major domains of the hospital including improvement of Civil infrastructure, addition of water filtration plant facility, value addition in Emergency ward and making the health facility more equipped with modern bio-medical equipment. State of the art furniture and fixtures complemented by interior and exterior decors are also part of this revamping project backed by the thought of dedicated express line of electricity to ensure smooth operations of hospitals will bring the modern health facilities in healthy and comfortable environment at the door step of masses. Introduction of new model of outsourcing of laundry services to ensure provision of neat and clean bed sheets, pillow covers, blankets etc. round the clock is also a part of this project. Fool proof security and adequate cleanliness measures of whole health facility are also proposed in this PC-I.

Civil work component will be carried out through C&W Department instead of District Health Authority for this hospital. Value addition in Emergency block is proposed in four domains i.e. Triage, Minor O.T, Specialized care room and emergency ward. Addition of Water Filtration Plant facility where it is not available as unclean or polluted water is devastating for human health. A key consideration was made while selecting furniture and its compatibility with hospital grade cleaners, detergents and disinfectants. Signage is an effective interface between the user and intended facility. Effective signage promotes the healthcare facility in a patient friendly manner. Access is an important part of quality of care. A crucial aspect for patient satisfaction is their comfort levels with the facility itself i.e. a person's ease in navigating a facility, and the timeliness in receiving care. Clear and proper signage at strategic points helps patients in reaching their destination without losing much of their valuable time and saves lot of their efforts in unnecessary enquiring from persons. In this regard, the Equipment of Emergency, Bio-Medical, Non-Bio-Medical, Electricity, Signage, Janitorial, Security, Laundry, Maintenance of Generator and Horticulture have been added as per actual requirement of the Hospital. The Equipment of MSDS, IT, Furniture Fixture, Day Care Center, HR, Medical Gases, Cafeteria are fixed in all hospitals as per yardstick

established by P& SH Department. Prior to initiation of this exercise standardization of required facilities was done by committee of experts in P & SH Department and on the basis of it, gaps were identified which would be covered under this PC-I.

Justification for 3rd Revision of PC-I

1. Primary & Secondary Healthcare Department (P&SHD) made a decision to shift all the clerical posts in DHQ / THQ hospitals of Punjab to District Health Authorities as per notification dated 24th October, 2017. This administrative decision was taken due to a multiplicity of reasons which were adversely affecting healthcare service delivery in the hospitals. Primarily, these clerical posts were not specialized in any particular field, and therefore, the HR hired against these posts were generalized to the extent that they were not able to perform functions of Hospitals and Health Specific tasks that any medical administration should ideally perform. Additionally, public complaints against the clerical staff on issues such as behavior, performance created an environment of malfeasance in all hospitals. In place of the clerical positions, the Department introduced a New Management Structure (NMS), in all District and Tehsil Headquarters Hospitals. The officers/officials recruited as a part of the NMS have a minimum of 16 years of education. Introduction of New Management Structures (NMS) across all secondary hospitals in the Punjab, has allowed for the overall efficiency of District and Tehsil Headquarters Hospitals. In each Tehsil Headquarter Hospital HR under MNS has been provided for smooth running of the health services. Pay Package for NMS Staff was never been revised since 2017-18, therefore it was decided to approach the P&D Department for revision of Pay package. The PDWP approved revised pay page in its meeting held on 08-02-2022 based on PPS approved in 60th PDWP meeting as under: -

Name of Posts	**60th PDWP Meeting**		
	PPS Assigned	Permissible Range (PKR) & Annual increment	Approved Pay Package
HR & Legal Officer, IT & Statistical Officer, Admin Officer, Procurement Officer, Finance & Budget Officer, Logistics Officer, Quality Assurance Officer, Audit Officer and Biomedical Engineer	PPS-6	75,000-105,000 (8% annual incr.)	75,000
Assistant Admin Officer	PPS-5	50,000-75000 (10% annual incr.)	50,000

Data Entry Operator	PPS-3	35,000-55,000 (10% annual incr.)	35,000

Now the Planning & Development Board vide letter No.12(24)PO(COORD-II)P&D/2022 dated 14-07-2022 has informed that revised standard pay package were discussed and approved by the 83rd PDWP meeting held on 28-06-2022 under the chairmanship of Chairman P&D Board for all ADP funded Project posts of Department /Organizations working in Government of the Punjab. Therefore, the revised Pay Package has been incorporated in the revised PC-I.

2. As the gestation period of the PC-I till 30.06.2023, therefore, the cost of NMS has been revised for smooth running of the Tehsil Headquarter Hospitals and hence PC-I has been proposed till 30- 06-2025.

85 THQ Hospitals covered under the Program:

The location map of the 85 THQ hospitals that will be taken up for rehabilitation in this program is given below:

PROJECT MANAGEMENT UNIT
PRIMARY & SECONDARY HEALTHCARE DEPARTMENT

LOCATION OF DHQ AND THQ HOSPITALS IN PUNJAB

6.2 SECTORAL SPECIFIC INFORMATION

Social Sectors, Health Department

7. CAPITAL COST ESTIMATES

Financial Components: Revenue
Cost Center:OTHERS- (OTHERS)
Fund Center (Controlling):N/A

Grant Number: Development - (PC22036)
LO NO:LO17011136
A/C To be Credited: Assan Assignment

PKR Million

Sr #	Object Code	2019-2020		2020-2021		2021-2022		2022-2023		2023-2024		2024-2025	
		Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign
1	**A05270**-To Others	0.000	0.000	0.000	0.000	0.000	0.000	99.418	0.000	100.000	0.000	100.000	0.000
Total		**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**99.418**	**0.000**	**100.000**	**0.000**	**100.000**	**0.000**

Financial Components: Capital
Cost Center:OTHERS- (OTHERS)
Fund Center (Controlling):N/A

Grant Number: Government Buildings - (PC12042)
LO NO:LO21011482
A/C To be Credited: Account-I

PKR Million

Sr #	Object Code	2019-2020		2020-2021		2021-2022		2022-2023		2023-2024		2024-2025	
		Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign
1	**A12403**-Other Buildings	0.000	0.000	0.000	0.000	0.000	0.000	18.005	0.000	15.000	0.000	15.000	0.000
Total		**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**18.005**	**0.000**	**15.000**	**0.000**	**15.000**	**0.000**

Abstract of Cost

Name of THQ Hospital	Revamping of City Hospital Talagang											
Scope of work	Cost in million											
	Original			1st Revised			2nd Revised			3rd Revised		
	Capital	Revenue	Total	Capital	Revenue	Total	Capital	Revenue	Total	Capital	Revenue	Total
Capital component												
Internal Development	0.000	16.622	16.622	0.000	16.622	16.622	43.972	5.000	48.972	43.972	5.000	48.972
External Development	0.000	2.637	2.637	0.000	2.637	2.637	2.849	0.000	2.849	2.849	0.000	2.849
Water filtration plant	0.000	5.600	5.600	0.000	5.600	5.600	1.185	0.000	1.185	1.185	0.000	1.185
Total Capital Component	**0.000**	**24.859**	**24.859**	**0.000**	**24.859**	**24.859**	**48.005**	**5.000**	**53.005**	**48.005**	**5.000**	**53.005**
Emergency	0.000	20.463	20.463	0.000	20.463	20.463	0.000	27.876	27.876	0.000	47.336	47.336
MSDS	0.000	8.647	8.647	0.000	8.647	8.647	0.000	9.654	9.654	0.000	13.438	13.438
Med. Machinery and Equipment	0.000	51.051	51.051	0.000	51.051	51.051	0.000	67.504	67.504	0.000	98.047	98.047
Electricity	0.000	16.148	16.148	0.000	16.148	16.148	0.000	16.149	16.149	0.000	38.470	38.470
IT & QMS & Surveillance	0.000	14.515	14.515	0.000	14.515	14.515	0.000	16.715	16.715	0.000	20.120	20.120
Furniture and Fixtures	0.000	13.504	13.504	0.000	13.504	13.504	0.000	13.504	13.504	0.000	18.788	18.788
Interior and Exterior decorations/ Signage	0.000	3.004	3.004	0.000	3.004	3.004	0.000	4.271	4.271	0.000	4.271	4.271
Day Care Center	0.000	1.600	1.600	0.000	1.600	1.600	0.000	1.600	1.600	0.000	1.600	1.600
Human resource (HR) plan	0.000	17.220	17.220	0.000	17.220	17.220	0.000	33.460	33.460	0.000	50.075	50.075
LC Deficit during procurement (currency fluctuation)								2.274	2.274		2.274	2.274
Total Revenue component	**0.000**	**146.152**	**146.152**	**0.000**	**146.152**	**146.152**	**0.000**	**193.007**	**193.007**	**0.000**	**294.418**	**294.418**
Outsourcing component												
Janitorial Services	0.000	13.744	13.744	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Security and Parking services	0.000	5.343	5.343	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Laundry Services	0.000	39.727	39.727	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Maintenance (Generator)	0.000	1.920	1.920	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
MEP	0.000	3.685	3.685	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Medical Gases	0.000	1.304	1.304	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Cafeteria	0.000	6.743	6.743	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Horticulture services	0.000	8.518	8.518	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Total outsourcing cost	**0.000**	**80.985**	**80.985**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**
Total	**0.000**	**251.996**	**251.996**	**0.000**	**171.011**	**171.011**	**48.005**	**198.007**	**246.012**	**48.005**	**299.418**	**347.423**
Contingency (1%) only on Civil Component	0.000	0.249	0.249	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Third Party Monitoring (TPM) (1%)	0.000	2.520	2.520	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Third Party Validation (TPV) (1%)	0.000	2.520	2.520	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Grand Total	**0.000**	**257.284**	**257.284**	**0.000**	**171.011**	**171.011**	**48.005**	**198.007**	**246.012**	**48.005**	**299.418**	**347.423**

Emergency Equipment

			Original				1st Revised				2nd Revised				3rd Revised			
Sr. No.	Area	ITEM DESCRIPTION	Yard Stick	Required Quantity (T=6+S=0+E=6)	Actual Unit Price	Actual Total Cost(Rs)	Yard Stick	Required Quantity (T=6+S=0+E=6)	Actual Unit Price	Actual Total Cost(Rs)	Yard Stick	Required Quantity (T=6+S=0+E=6)	Actual Unit Price	Actual Total Cost(Rs)	Yard Stick	Required Quantity (T=6+S=0+E=6)	Actual Unit Price	Actual Total Cost(Rs)
1	Reception Area	Table	0		99,750	-	0		99,750	-	0		99,750	-	0		99,750	-
2		Chairs	0		26,775	-	0		26,775	-	0		26,775	-	0		30,000	-
3		Computer Data Entry With Printer	1	1	141,750	141,750	1	1	141,750	141,750	1	1	141,750	141,750	1	1	195,000	195,000
4	3	Table (2.5 X 4)*(N)	0	0	101,850	-	0	0	101,850	-	0	0	101,850	-	0	0	101,850	-
5	6	Chairs *(N)	0	0	26,775	-	0	0	26,775	-	0	0	26,775	-	0	0	30,000	-
6	Triage area	B.p apparatus wall type*(N)	3	6	15,750	94,500	3	6	15,750	94,500	3	6	30,000	180,000	3	6	30,000	180,000
7		Gurney WITH FOOT STEP)*(N)	3	6	420,000	2,520,000	3	6	420,000	2,520,000	3	6	460,000	2,760,000	3	6	800,000	4,800,000
8		Mercury B.P apparatus*(N)	2	4	33,600	134,400	2	4	33,600	134,400	2	4	36,000	144,000	2	4	36,000	144,000
9		Laryngoscope paeds &adult each*(N)	2	4	10,500	42,000	2	4	10,500	42,000	2	4	12,000	48,000	2	4	20,000	80,000
10		Diagnostic set*(N)	1	2	45,150	90,300	1	2	45,150	90,300	1	2	50,000	100,000	1	2	85,000	170,000
11		ECG Machine (with trolley) *(N)	1	2	169,785	339,570	1	2	169,785	339,570	1	2	180,000	360,000	1	2	300,000	600,000
12		Central oxygen with accessories FOR each	0	0	420,000	-	0	0	420,000	-	0	0	-	-	0	0	-	-
13		NEBULIZER HD*(N)	2	4	125,265	501,060	2	4	125,265	501,060	2	4	215,000	860,000	2	4	300,000	1,200,000
14		SUCKER MACHINE*(N)	1	2	259,350	518,700	1	2	259,350	518,700	1	2	275,000	550,000	1	2	300,000	600,000
15		Resuscitation Trolley (fully equipped))*(N)	1	2	244,733	489,466	1	2	244,733	489,466	1	2	400,000	800,000	1	2	600,000	1,200,000
16		INSTRUMENT CABINET*N	1	2	69,300	138,600	1	2	69,300	138,600	1	2	69,300	138,600	1	2	69,300	138,600
17		MEDICINE TROLLY*N	1	2	60,900	121,800	1	2	60,900	121,800	1	2	60,900	121,800	1	2	60,900	121,800
18	Minor O.T	O.T table WITH foot step	1	1	1,417,500	1,417,500	1	1	1,417,500	1,417,500	1	1	2,000,000	2,000,000	1	1	2,500,000	2,500,000
19		Anesthesia Machine	1	1	2,509,554	2,509,554	1	1	2,509,554	2,509,554	1	1	3,000,000	3,000,000	1	1	7,000,000	7,000,000
20		Sucker machine	1	1	259,350	259,350	1	1	259,350	259,350	1	1	275,000	275,000	1	1	300,000	300,000
21		Portable O.T Lights	1	1	304,220	304,220	1	1	304,220	304,220	1	1	500,000	500,000	1	1	900,000	900,000
22		Ceiling o.t light	1	1	414,750	414,750	1	1	414,750	414,750	1	1	800,000	800,000	1	1	950,000	950,000
23		Hot air oven	1	1	110,000	110,000	1	1	110,000	110,000	1	1	385,000	385,000	1	1	450,000	450,000
24		Autoclave	1	1	441,000	441,000	1	1	441,000	441,000	1	1	550,000	550,000	1	1	850,000	850,000
25		Instrument trolley*N	1	1	54,000	54,000	1	1	54,000	54,000	1	1	54,000	54,000	1	1	55,000	55,000
26		Defibrillator*N	1	1	310,000	310,000	1	1	310,000	310,000	1	1	650,000	650,000	1	1	800,000	800,000
27		Instrument cabinet	1	1	69,300	69,300	1	1	69,300	69,300	1	1	69,300	69,300	1	1	69,300	69,300
28	Constant / specialized care room	GURNEYS*N	4		420,000	-	4		420,000	-	4		460,000	-	4		850,000	-
29		Sucker machine *(N)	2		259,350	-	2		259,350	-	2		275,000	-	2		300,000	-
30		Nebulizer HD*(N)	2		125,265	-	2		125,265	-	2		215,000	-	2		300,000	-
31		Center Oxygen supply*N	1		420,000	-	1		420,000	-	1		-	-	1		-	-
32		Resuscitation Trolley (fully equipped))*(N)	1		237,618	-	1		237,618	-	1		400,000	-	1		600,000	-
33		Defibrillator*N	1		302,605	-	1		302,605	-	1		650,000	-	1		800,000	-
34		Pulse- oximeter*(N)	4		104,000	-	4		104,000	-	4		160,000	-	4		225,000	-
35		Bedside-monitor*(N)	4		301,665	-	4		301,665	-	4		550,000	-	4		1,200,000	-
36		ECG MACHINE)*(N)	1		169,785	-	1		169,785	-	1		169,785	-	1		300,000	-
37		BP APPARATUS*N	1		15,750	-	1		15,750	-	1		16,000	-	1		16,000	-
38		FOOT STEP)*(N)	1		3,150	-	1		3,150	-	1		4,000	-	1		5,500	-
39		ATTANDANT BENCH)*(N)	1		5,250	-	1		5,250	-	1		8,000	-	1		10,000	-
40	7	(MOTRIZED BEDS) with accessories (with foot steps*(N)	7	6	210,000	1,260,000	7	6	210,000	1,260,000	7	6	400,000	2,400,000	7	6	600,000	3,600,000
41	6	ECG machine(with trolley) *(N)	1	1	169,785	169,785	1	1	169,785	169,785	1	1	169,785	169,785	1	1	300,000	300,000
42	Emergency ward	Pulse- oximeter *(N)	6	6	104,000	624,000	6	6	104,000	624,000	6	6	160,000	960,000	6	6	225,000	1,350,000
43		Bedside-monitor*(N)	3	3	301,665	904,995	3	3	301,665	904,995	3	3	550,000	1,650,000	3	3	1,200,000	3,600,000
44		B.P apparatus wall type *(N)	6	6	26,250	157,500	6	6	26,250	157,500	6	6	30,000	180,000	6	6	30,000	180,000
45		Nebulizer HD *(N)	2	2	125,265	250,530	2	2	125,265	250,530	2	2	215,000	430,000	2	2	300,000	600,000
46		Resuscitation Trolley (fully equipped))*(N)	1	1	237,618	237,618	1	1	237,618	237,618	1	1	400,000	400,000	1	1	600,000	600,000
47		Defibrillator*N	1	1	299,153	299,153	1	1	299,153	299,153	1	1	650,000	650,000	1	1	800,000	800,000
48		Sucker machine *(N)	2	2	259,350	518,700	2	2	259,350	518,700	2	2	275,000	550,000	2	2	300,000	600,000
49		Wheal chairs *(N)	0	0	31,500	-	0	0	31,500	-	0	0	35,000	-	0	0	35,000	-
50		Stretcher *(N)	0	0	69,300	-	0	0	69,300	-	0	0	69,300	-	0	0	69,300	-

Emergency Equipment

			Original				1st Revised				2nd Revised				3rd Revised			
Sr. No	Area	ITEM DESCRIPTION	Yard Stick	Required Quantity	Actual Unit Price	Actual Total Cost/Price	Yard Stick	Required Quantity	Actual Unit Price	Actual Total Cost/Price	Yard Stick	Required Quantity	Actual Unit Price	Actual Total Cost/Price	Yard Stick	Required Quantity	Actual Unit Price	Actual Total Cost/Price
51	Generalized	ambo bag paeds with Mask*N	5	5	15,750	78,750	5	5	15,750	78,750	5	5	19,000	95,000	5	5	19,000	95,000
52		ambo bag adult with Mask* N	5	5	15,750	78,750	5	5	15,750	78,750	5	5	19,000	95,000	5	5	19,500	97,500
53		patient stool * N	2	2	4,085	8,169	2	2	4,085	8,169	2	2	4,500	9,000	2	2	5,000	10,000
54		Portable x-rays (300 M.A)	1	1	3,450,350	3,450,350	1	1	3,450,350	3,450,350	1	1	4,300,000	4,300,000	1	1	9,800,000	9,800,000
55		Portable ultra-sound	1	1	1,403,325	1,403,325	1	1	1,403,325	1,403,325	1	1	1,500,000	1,500,000	1	1	2,400,000	2,400,000
		Total				**20,463,445**				**20,463,445**				**27,876,235**				**47,336,200**
						20.463				20.463				27.876				47.336

MSDS

		Original			1st Revised			2nd Revised			3rd Revised		
Sr. No.	ITEM DESCRIPTION	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)
1	Histology slide boxes	3	3,100	9,299	3	3,100	9,299	3	4,500	13,500	3	4,500	13,500
2	Labeling Device connected with Computer	3	60,000	180,000	3	60,000	180,000	3	80,000	240,000	3	80,000	240,000
3	Safe Transportation Boxes	2	15,750	31,500	2	15,750	31,500	2	18,000	36,000	2	18,000	36,000
4	Portable Safety Exhaust Hood	1	160,000	160,000	1	160,000	160,000	1	250,000	250,000	1	450,000	450,000
5	Centrifuge Machine	0	149,336	-	0	149,336	-	0	250,000	-	0	325,000	-
6	Hot plates	2	26,250	52,500	2	26,250	52,500	2	45,000	90,000	2	55,000	110,000
7	Water bath	1	157,500	157,500	1	157,500	157,500	1	157,500	157,500	1	300,000	300,000
8	Complaint boxes	10	3,150	31,500	10	3,150	31,500	10	3,150	31,500	10	3,150	31,500
9	Spine boards with Neck holders	4	31,080	124,320	4	31,080	124,320	4	31,080	124,320	4	31,080	124,320
10	Sensitometer	1	137,325	137,325	1	137,325	137,325	1	137,325	137,325	1	137,325	137,325
11	Densitometer personal	2	191,391	382,782	2	191,391	382,782	2	191,391	382,782	2	191,391	382,782
12	Box of Films	2	26,250	52,500	2	26,250	52,500	2	30,000	60,000	2	30,000	60,000
13	Aluminium Step Wedge	1	26,250	26,250	1	26,250	26,250	1	26,250	26,250	1	26,250	26,250
14	Non-Mercury thermometer	10	305	3,045	10	305	3,045	10	350	3,500	10	750	7,500
15	Brass or copper mesh screen	2	5,250	10,500	2	5,250	10,500	2	5,250	10,500	2	5,250	10,500
16	Wheel Chairs	0	31,500	-	0	31,500	-	0	35,000	-	0	35,000	-
17	Statures	0	67,830	-	0	67,830	-	0	75,000	-	0	75,000	-
18	Blood Warmer	3	246,750	740,250	3	246,750	740,250	3	275,000	825,000	3	275,000	825,000
19	Sequence Compression Device	2	210,000	420,000	2	210,000	420,000	2	230,000	460,000	2	600,000	1,200,000
20	Blood Bank Refrigerators with	0	682,500	-	0	682,500	-	0	700,000	-	0	1,469,900	-
21	Data Coder	1	84,000	84,000	1	84,000	84,000	1	100,000	100,000	1	-	-
22	Plasma Separator 1	0	4,200,000	-	0	4,200,000	-	0	4,500,000	-	0	4,500,000	-
23	Blood Storage Cabinet	1	682,500	682,500	1	682,500	682,500	1	700,000	700,000	1	1,469,900	1,469,900
24	Resuscitation Trolley	0	244,733	-	0	244,733	-	0	400,000	-	0	491,350	-
25	Ultra sound machine gyne	0	1,403,325	-	0	1,403,325	-	0	1,700,000	-	0	2,150,000	-
26	Delivery Table	0	47,250	-	0	47,250	-	0	47,250	-	0	48,500	-
27	Height and weight scale	4	8,400	33,600	4	8,400	33,600	4	10,000	40,000	4	31,500	126,000
28	Suction Electronic	0	259,350	-	0	259,350	-	0	275,000	-	0	275,000	-
29	Fetal Heart Rate Detector	1	144,375	144,375	1	144,375	144,375	1	175,000	175,000	1	275,000	275,000
30	Ambo bag	0	17,325	-	0	17,325	-	0	19,000	-	0	19,000	-
31	Neonatal size face mask	4	578	2,310	4	578	2,310	4	1,200	4,800	4	1,500	6,000
32	Exchange transfusion trays	2	10,000	20,000	2	10,000	20,000	2	10,000	20,000	2	12,000	24,000
33	Shoe racks SS	4	39,900	159,600	4	39,900	159,600	4	39,900	159,600	4	39,900	159,600
34	Sterilizer	0	2,940,000	-	0	2,940,000	-	0	3,500,000	-	0	7,800,000	-
35	Washer disinfector	0	-	-	0	-	-	0	-	-	0	-	-
36	Packing table	0	-	-	0	-	-	0	-	-	0	-	-
37	Digital Sealer Printer	1	420,000	420,000	1	420,000	420,000	1	480,000	480,000	1	520,000	520,000
38	Backup Auto Clave	0	441,000	-	0	441,000	-	0	550,000	-	0	789,625	-
39	Racks for Manual	10	21,000	210,000	10	21,000	210,000	10	37,500	375,000	10	56,160	561,600
40	Locked Racks for MSDS Data	2	21,000	42,000	2	21,000	42,000	2	37,500	75,000	2	56,160	112,320
41	Eye Wash Station with shower	3	300,000	900,000	3	300,000	900,000	3	350,000	1,050,000	3	350,000	1,050,000
42	Air Curtain	4	50,190	200,760	4	50,190	200,760	4	60,000	240,000	4	60,000	240,000
43	Fire Sand Buckets with stand	5	15,000	75,000	5	15,000	75,000	5	20,000	100,000	5	20,000	100,000
44	Smoke Detectors	10	7,350	73,500	10	7,350	73,500	10	8,500	85,000	10	8,500	85,000
45	Heat Detector	5	8,400	42,000	5	8,400	42,000	5	10,000	50,000	5	10,000	50,000
46	Gas Detector	5	6,300	31,500	5	6,300	31,500	5	7,500	37,500	5	7,500	37,500
47	Fire Blankets	10	2,783	27,825	10	2,783	27,825	10	3,200	32,000	10	3,200	32,000
48	Fire Alarms	10	5,250	52,500	10	5,250	52,500	10	6,500	65,000	10	6,500	65,000

MSDS

		Original			1st Revised			2nd Revised			3rd Revised		
Sr. No.	ITEM DESCRIPTION	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)	Quantity Required	Actual Unit Price	Actual Total Cost(Rs)
49	Identification Bands	100	3	315	100	3	315	100	3	300	100	3	300
50	Wet Flooring Signages	0	431	-	0	431	-	0	550	-	0	750	-
51	Key Box	6	8,190	49,140	6	8,190	49,140	6	10,000	60,000	6	10,000	60,000
52	Dehumidifier	0	58,800	-	0	58,800	-	0	70,000	-	0	100,000	-
53	Tourniquet	4	840	3,360	4	840	3,360	4	850	3,400	4	1,500	6,000
54	LAB SAFETY BOX	2	3,150	6,300	2	3,150	6,300	2	4,000	8,000	2	4,000	8,000
55	densitometer	0	210,000	-	0	210,000	-	0	210,000	-	0	210,000	-
56	vending machine	0	630,000	-	0	630,000	-	0	630,000	-	0	630,000	-
57	Automatic shoe cover machine	2	296,100	592,200	2	296,100	592,200	2	332,500	665,000	2	332,500	665,000
58	Vein Finder	2	630,000	1,260,000	2	630,000	1,260,000	2	630,000	1,260,000	2	630,000	1,260,000
59	Blood Sample Vials (BOXES)	3	13	38	3	13	38	3	15	45	3	15	45
60	Bassinets	5	21,000	105,000	5	21,000	105,000	5	22,000	110,000	5	22,000	110,000
61	Chemical Spill Cleanup kit	2	100,000	200,000	2	100,000	200,000	2	100,000	200,000	2	100,000	200,000
62	Digital Tempurature Humidity Guage	4	15,000	60,000	4	15,000	60,000	4	15,000	60,000	4	15,000	60,000
63	Bio Cleaning and Disinfection System	1	650,000	650,000	1	650,000	650,000	1	650,000	650,000	1	2,200,000	2,200,000
	Total			**8,647,094**			**8,647,094**			**9,653,822**			**13,437,942**
				8.647			8.647			9.654			13.438

Medical Equipment

			Original					1st Revised				2nd Revised				3rd Revised			
Sr. No.	Area	Name of Equipment	Yard Stick	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost
1	Laboratory	Semi Auto Clinical Chemistry Analyzer	1	1	0	449,295	-	1	0	449,295	-	1	0	550,000	-	1	0	550,000	-
2		Hematology Analyzer	1	1	0	427,350	-	1	0	427,350	-	1	0	550,000	-	1	0	750,000	-
3		Electrolyte Analyzer	1	0	1	427,350	427,350	0	1	427,350	427,350	0	1	550,000	550,000	0	1	550,000	550,000
4		Blood Gas Analyzer	0	0	0	2,744,858	-	0	0	2,744,858	-	0	0	3,200,000	-	0	0	1,400,000	-
5		Clinical Microscope	1	2	0	132,825	-	2	0	132,825	-	2	0	180,000	-	2	0	250,000	-
6		Water Bath	1	1	0	60,000	-	1	0	60,000	-	1	0	157,500	-	1	0	325,000	-
7		Hot air Oven	1	0	1	210,000	210,000	0	1	210,000	210,000	0	1	385,000	385,000	0	1	450,000	450,000
8		Distilled water plant	1	0	1	52,500	52,500	0	1	52,500	52,500	0	1	75,000	75,000	0	1	125,000	125,000
9		Auto pipettes	10	5	5	31,500	157,500	5	5	31,500	157,500	5	5	40,500	202,500	5	5	45,000	225,000
10		glass wares	0	0	0	105,000	-	0	0	105,000	-	0	0	105,000	-	0	0	105,000	-
11		Centrifuge Machine	2	0	2	149,336	298,673	0	2	149,336	298,673	0	2	250,000	500,000	0	2	400,000	800,000
12	X-Rays	Static X-ray Machine	1	1	0	4,200,000	-	1	0	4,200,000	-	1	0	6,000,000	-	1	0	12,000,000	-
13		Mobile X-Ray Machine	0	0	0	3,850,524	-	0	0	3,850,524	-	0	0	4,300,000	-	0	0	9,800,000	-
14		Computerized Radiography System	0	0	0	4,018,245	-	0	0	4,018,245	-	0	0	4,500,000	-	0	0	4,500,000	-
15		Dental X-Ray	0	0	0	282,975	-	0	0	282,975	-	0	0	350,000	-	0	0	525,000	-
16		Lead apron and PPE	2	0	2	52,500	105,000	0	2	52,500	105,000	0	2	60,000	120,000	0	2	85,000	170,000
17		Density meter personal (Add)	0	0	0	210,000	-	0	0	210,000	-	0	0	210,000	-	0	0	250,000	-
18		Lead glass /shield	0	0	0	105,000	-	0	0	105,000	-	0	0	105,000	-	0	0	150,000	-
19		Lead Walls	0	0	0	525,000	-	0	0	525,000	-	0	0	525,000	-	0	0	525,000	-
20	Ultrasound	Portable/Mobile Ultrasound	0	1	0	1,371,331	-	1	0	1,371,331	-	1	0	1,500,000	-	1	0	2,400,000	-
21		Color Doppler RADIOLOGY	1	0	1	3,698,310	3,698,310	0	1	3,698,310	3,698,310	0	1	4,500,000	4,500,000	0	1	5,500,000	5,500,000
22	CCU	ICU MONITOR	2	0	2	301,665	603,330	0	2	301,665	603,330	0	2	900,000	1,800,000	0	2	1,250,000	2,500,000
23		Temporary pace maker	0	0	0	315,000	-	0	0	315,000	-	0	0	315,000	-	0	0	550,000	-
24		Defibrillator	1	0	1	299,153	299,153	0	1	299,153	299,153	0	1	650,000	650,000	0	1	800,000	800,000
25		ECG Machine Three Channel	2	0	2	169,785	339,570	0	2	169,785	339,570	0	2	169,785	339,570	0	2	300,000	600,000
26		ETT Machine	0	0	0	2,021,838	-	0	0	2,021,838	-	0	0	2,200,000	-	0	0	3,000,000	-
27		Color doplor CARDIOLOGY	0	0	0	4,681,790	-	0	0	4,681,790	-	0	0	4,800,000	-	0	0	6,000,000	-
28		Suction Pump	2	0	2	259,350	518,700	0	2	259,350	518,700	0	2	275,000	550,000	0	2	300,000	600,000
29	Blood Bank	Blood Cabinet	1	0	1	690,539	690,539	0	1	690,539	690,539	0	1	700,000	700,000	0	1	1,500,000	1,500,000
30		Centrifuge Machine	2	0	2	149,336	298,673	0	2	149,336	298,673	0	2	250,000	500,000	0	2	400,000	800,000
31		Slide viewer	1	0	1	42,000	42,000	0	1	42,000	42,000	0	1	55,000	55,000	0	1	55,000	55,000
32		Clinical Microscope	1	0	1	132,825	132,825	0	1	132,825	132,825	0	1	180,000	180,000	0	1	250,000	250,000
33	Dialysis Unit (10 beds)	Computerized Hemo Dialysis Machine	5	0	5	1,050,000	5,250,000	0	5	1,050,000	5,250,000	0	5	1,600,000	8,000,000	0	5	3,200,000	16,000,000
34	Nursery	Baby Cot	10	0	10	14,669	146,685	0	10	14,669	146,685	0	10	16,000	160,000	0	10	16,000	160,000
35		Phototherapy Unit	2	0	2	130,200	260,400	0	2	130,200	260,400	0	2	655,000	1,310,000	0	2	850,000	1,700,000
36		Infant Warmer	2	0	2	335,638	671,276	0	2	335,638	671,276	0	2	985,000	1,970,000	0	2	1,050,000	2,100,000
37		Pulse Oximeter	6	0	6	104,500	627,000	0	6	104,500	627,000	0	6	160,000	960,000	0	6	225,000	1,350,000
38		Infant Incubator	2	0	2	858,932	1,717,864	0	2	858,932	1,717,864	0	2	900,000	1,800,000	0	2	1,750,000	3,500,000
39		Suction Pump	1	0	1	259,350	259,350	0	1	259,350	259,350	0	1	275,000	275,000	0	1	300,000	300,000
40		Hospital Grade Nebulizer Heavy Duty	2	0	2	125,265	250,530	0	2	125,265	250,530	0	2	215,000	430,000	0	2	300,000	600,000
41	O.T (04)	Anesthesia Machine with Ventilator	1	1	0	2,509,554	-	1	0	2,509,554	-	1	0	3,000,000	-	1	0	7,000,000	-
42		BED SIDE PATIENT MONITOR	2	2	0	441,000	-	2	0	441,000	-	2	0	550,000	-	2	0	1,200,000	-
43		Defibrillator	2	0	2	308,713	617,425	0	2	308,713	617,425	0	2	650,000	1,300,000	0	2	800,000	1,600,000
44		Electrosurgical Unit	1	1	0	507,530	-	1	0	507,530	-	1	0	700,000	-	1	0	900,000	-
45		Operation Table	1	2	0	1,426,215	-	2	0	1,426,215	-	2	0	2,000,000	-	2	0	2,500,000	-
46		Ceiling Operating Light	1	2	0	413,013	-	2	0	413,013	-	2	0	800,000	-	2	0	950,000	-
47		STEAM STERILIZER	1	2	0	3,465,000	-	2	0	3,465,000	-	2	0	4,000,000	-	2	0	7,800,000	-
48		Suction Pump	2	0	2	259,350	518,700	0	2	259,350	518,700	0	2	275,000	550,000	0	2	300,000	600,000
49		Resuscitation trolley With Crash Cart	2	1	1	244,733	244,733	1	1	244,733	244,733	1	1	400,000	400,000	1	1	600,000	600,000
50		mayo table	4	0	4	21,000	84,000	0	4	21,000	84,000	0	4	23,000	92,000	0	4	23,000	92,000
51		MOBILE OPERATING LIGHT	1	0	1	304,220	304,220	0	1	304,220	304,220	0	1	400,000	400,000	0	1	900,000	900,000
52	Orthopedic	Operation Table	0	0	0	1,426,215	-	0	0	1,426,215	-	0	0	2,000,000	-	0	0	5,000,000	-
53		ORTHOPEDIC DRILL	0	1	0	1,108,740	-	1	0	1,108,740	-	1	0	1,500,000	-	1	0	4,000,000	-
54		Plaster Cutting Pneumatic	1	1	0	276,250	-	1	0	276,250	-	1	0	450,000	-	1	0	1,500,000	-
55		Pneumatic Tourniquets	0	0	0	262,500	-	0	0	262,500	-	0	0	262,500	-	0	0	300,000	-
56		Orthopedic Instruments	0	2	0	432,623	-	2	0	432,623	-	2	0	550,000	-	2	0	550,000	-

Medical Equipment

			Original					1st Revised				2nd Revised				3rd Revised			
Sr. No.	Area	Name of Equipment	Yard Stick	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost
57	Gynea (20 beds)	Portable/Mobile Ultrasound	1	0	1	1,418,958	1,418,958	0	1	1,418,958	1,418,958	0	1	1,500,000	1,500,000	0	1	2,400,000	2,400,000
58		Autoclave	1	0	1	441,000	441,000	0	1	441,000	441,000	0	1	550,000	550,000	0	1	850,000	850,000
59		Delivery Set	10	0	10	31,500	315,000	0	10	31,500	315,000	0	10	40,000	400,000	0	10	65,000	650,000
60		Delivery Table	2	0	2	47,250	94,500	0	2	47,250	94,500	0	2	47,250	94,500	0	2	55,000	110,000
61		BED SIDE PATIENT MONITOR	2	0	2	294,000	588,000	0	2	294,000	588,000	0	2	550,000	1,100,000	0	2	1,200,000	2,400,000
62		D & C Set	2	0	2	34,650	69,300	0	2	34,650	69,300	0	2	40,000	80,000	0	2	60,000	120,000
63		Vaccume Extractor	1	0	1	259,350	259,350	0	1	259,350	259,350	0	1	300,000	300,000	0	1	350,000	350,000
64		CTG Machine	1	0	1	628,049	628,049	0	1	628,049	628,049	0	1	725,000	725,000	0	1	900,000	900,000
65		ECG Machine Three Channel	1	0	1	169,785	169,785	0	1	169,785	169,785	0	1	180,000	180,000	0	1	300,000	300,000
66		Portable O.T Light	2	0	2	304,220	608,440	0	2	304,220	608,440	0	2	400,000	800,000	0	2	900,000	1,800,000
67		Baby Cot	2	0	2	14,669	29,337	0	2	14,669	29,337	0	2	16,000	32,000	0	2	16,000	32,000
68		Delivery trolly	2	0	2	47,250	94,500	0	2	47,250	94,500	0	2	47,250	94,500	0	2	47,250	94,500
69		Desktop Fetal Heart Rate Detector	1	0	1	144,375	144,375	0	1	144,375	144,375	0	1	175,000	175,000	0	1	200,000	200,000
70	Surgical Emergency (10 beds)	Steam Sterilizer	0	0	0	3,355,849	-	0	0	3,355,849	-	0	0	4,000,000	-	0	0	7,800,000	-
71		Operation Table	0	0	0	1,426,215	-	0	0	1,426,215	-	0	0	2,000,000	-	0	0	2,500,000	-
72		MOBILE OPERATING LIGHT	0	1	0	285,466	-	1	0	285,466	-	1	0	400,000	-	1	0	900,000	-
73		Suction Pump	0	3	0	259,350	-	3	0	259,350	-	3	0	275,000	-	3	0	300,000	-
74		Laryngoscope	0	5	0	9,744	-	5	0	9,744	-	5	0	12,000	-	5	0	20,000	-
75		Set of Surgical Instruments	0	2	0	141,750	-	2	0	141,750	-	2	0	160,000	-	2	0	220,000	-
76	Others	Stretcher	10	0	10	68,250	682,500	0	10	68,250	682,500	0	10	69,300	693,000	0	10	69,300	693,000
77		wheel chair	10	0	10	31,500	315,000	0	10	31,500	315,000	0	10	35,000	350,000	0	10	35,000	350,000
78		foot support	6	0	6	4,200	25,200	0	6	4,200	25,200	0	6	4,500	27,000	0	6	5,148	30,888
79		Resuscitation trolly With Crash Cart	5	1	4	237,618	950,473	1	4	237,618	950,473	1	4	400,000	1,600,000	1	4	600,000	2,400,000
80		BP Appratus	15	15	0	15,750	-	15	0	15,750	-	15	0	16,000	-	15	0	16,000	-
81		Ventilator	0	0	0	2,195,080	-	0	0	2,195,080	-	0	0	3,500,000	-	0	0	5,500,000	-
82		CPAP	1	0	1	1,098,510	1,098,510	0	1	1,098,510	1,098,510	0	1	2,100,000	2,100,000	0	1	2,800,000	2,800,000
83		X-RAY PROCESSOR	1	0	1	858,440	858,440	0	1	858,440	858,440	0	1	925,000	925,000	0	1	1,200,000	1,200,000
84		Hand wash Scrub Double Bay	2	0	2	94,500	189,000	0	2	94,500	189,000	0	2	100,000	200,000	0	2	140,000	280,000
85		Image Inensifier	0	0	0	4,667,460	-	0	0	4,667,460	-	0	0	4,667,460	-	0	0	12,000,000	-
86		Central Medical Gass Pipe Line System	7	0	7	850,000	5,950,000	0	7	850,000	5,950,000	0	7	-	-	0	7	-	-
87	ICU	Motorized Patient bed with bed side,Mattress,IV stand, Attendant Bench	4	0	4	210,000	840,000	0	4	210,000	840,000	0	4	400,000	1,600,000	0	4	600,000	2,400,000
88		Sphygmomanometer wall mtd	4	0	4	15,750	63,000	0	4	15,750	63,000	0	4	30,000	120,000	0	4	35,000	140,000
89		Resuscitation trolly With Crash Cart	2	0	2	244,733	489,466	0	2	244,733	489,466	0	2	400,000	800,000	0	2	600,000	1,200,000
90		Defibrilator	1	0	1	299,153	299,153	0	1	299,153	299,153	0	1	650,000	650,000	0	1	800,000	800,000
91		Defibrillator with Monitor	0	0	0	330,750	-	0	0	330,750	-	0	0	650,000	-	0	0	800,000	-
92		ECG Machine Three Channel	0	0	0	169,785	-	0	0	169,785	-	0	0	180,000	-	0	0	300,000	-
93		Syringe pump	1	0	1	108,780	108,780	0	1	108,780	108,780	0	1	125,000	125,000	0	1	200,000	200,000
94		Suction Pump	0	0	0	259,350	-	0	0	259,350	-	0	0	275,000	-	0	0	300,000	-
95		ICU Monitor	0	0	0	298,200	-	0	0	298,200	-	0	0	900,000	-	0	0	1,250,000	-
96		Instrument Trolley	1	0	1	55,000	55,000	0	1	55,000	55,000	0	1	55,000	55,000	0	1	55,000	55,000
97		Ward instruments	0	0	0	-	-	0	0	-	-	0	0	-	-	0	0	-	-
98		Ventilator intensive care	2	0	2	1,600,000	3,200,000	0	2	1,600,000	3,200,000	0	2	3,500,000	7,000,000	0	2	5,500,000	11,000,000
99		CPAP with humidifier	0	0	0	1,098,510	-	0	0	1,098,510	-	0	0	2,100,000	-	0	0	2,800,000	-
100		DELIVERY TROLLY STAINLESS STEEL	1	0	1	23,835	23,835	0	1	23,835	23,835	0	1	47,250	47,250	0	1	47,250	47,250
101		Ambu-Bag, adult	4	0	4	17,325	69,300	0	4	17,325	69,300	0	4	19,000	76,000	0	4	19,000	76,000
102		Ambu-Bag, paeds	4	0	4	17,325	69,300	0	4	17,325	69,300	0	4	19,000	76,000	0	4	19,000	76,000
103	MORTUERY	TWO BODY REFRIGERATOR WITH CASTERS 220v 50Hz Along with Atopsy Table & Lifter Trolley	1	0	1	2,470,546	2,470,546	0	1	2,470,546	2,470,546	0	1	3,000,000	3,000,000	0	1	3,500,000	3,500,000
104	Dental Unit	Dental Unit	2	0	2	2,190,000	4,380,000	0	2	2,190,000	4,380,000	0	2	2,820,000	5,640,000	0	2	2,820,000	5,640,000
105		Autoclave	1	0	1	441,000	441,000	0	1	441,000	441,000	0	1	550,000	550,000	0	1	850,000	850,000
106		Dental X-RAY Machine	1	0	1	282,975	282,975	0	1	282,975	282,975	0	1	350,000	350,000	0	1	525,000	525,000
107		Digital Intra Oral Camera	0	0	0	94,500	-	0	0	94,500	-	0	0	150,000	-	0	0	600,000	-
108		DENTAL CAUTERY	0	0	0	84,000	-	0	0	84,000	-	0	0	160,000	-	0	0	900,000	-
109		Ultrasonic scaling	1	0	1	120,750	120,750	0	1	120,750	120,750	0	1	175,000	175,000	0	1	300,000	300,000
110		Curing lights	1	0	1	52,500	52,500	0	1	52,500	52,500	0	1	95,000	95,000	0	1	150,000	150,000
111		Endo motor system	1	0	1	199,601	199,601	0	1	199,601	199,601	0	1	265,000	265,000	0	1	500,000	500,000

Medical Equipment																			
			Original					1st Revised				2nd Revised				3rd Revised			
Sr. No.	Area	Name of Equipment	Yard Stick	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost	Available Quantity	Required Quantity	Cost per Unit	Total Cost
112		Dental cabinet	0	0	0	42,000	-	0	0	42,000	-	0	0	70,000	-	0	0	160,000	-
113		Dental examination/surgical instrument sets	4	0	4	157,500	630,000	0	4	157,500	630,000	0	4	175,000	700,000	0	4	175,000	700,000
131	**Beds**	Fowler beds with Mattress	50	0	50	70,000	3,500,000	0	50	70,000	3,500,000	0	50	110,000	5,500,000	0	50	150,000	7,500,000
		Total					**51,051,229**				**51,051,229**				**67,504,320**				**98,046,638**
							51.051				**51.051**				**67.504**				**98.047**

Electricity

		Original			1st Revised			2nd Revised			3rd Revised		
Sr. No.	Item Name	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost
1	Transformers (200 KVA)	1	600,000	600,000	1	600,000	600,000	1	600,000	600,000	3	1,600,000	4,800,000
2	Transformers (100 KVA)	1	450,000	450,000	1	450,000	450,000	1	450,000	450,000	1	450,000	450,000
3	Transformers (50 KVA)	0	300,000	-	0	300,000	-	0	300,000	-	0	300,000	-
4	Generator (200 KVA)	1	4,000,000	4,000,000	1	4,000,000	4,000,000	1	4,000,000	4,000,000	2	6,500,000	13,000,000
5	Generator (100 KVA)	0	2,300,000	-	0	2,300,000	-	0	2,300,000	-	0	2,300,000	-
6	2 Ton air conditioners (split)	40	55,500	2,220,000	40	55,500	2,220,000	40	55,500	2,220,000	40	139,150	5,566,000
7	2 Ton air conditioners (Cabinet)	30	78,000	2,340,000	30	78,000	2,340,000	30	78,000	2,340,000	30	187,200	5,616,000
8	4 Ton air conditioners (Cabinet)	9	120,000	1,080,000	9	120,000	1,080,000	9	120,000	1,080,000	9	353,899	3,185,091
9	Ceiling Fans 56"	50	3,090	154,500	50	3,090	154,500	50	3,090	154,500	50	6,975	348,750
10	Exhaust Fans	36	3,000	108,000	36	3,000	108,000	36	3,000	108,000	36	3,000	108,000
11	Bracket Fans 18"	60	3,280	196,800	60	3,280	196,800	60	3,280	196,800	60	6,600	396,000
12	Dual Connection of Electricity / Express Line	1	4,998,800	4,998,800	1	4,998,800	4,998,800	1	5,000,000	5,000,000	1	5,000,000	5,000,000
	Total			**16,148,100**			**16,148,100**			**16,149,300**			**38,469,841**
				16.148			**16.148**			**16.149**			**38.470**

IT & QMS & Surveillance

		Original			1st Revised			2nd Revised			3rd Revised		
Sr. No.	Item Name	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost
1	Desktop, UPS, LED	30	75,000	2,250,000	30	75,000	2,250,000	30	130,000	3,900,000	30	216,000	6,480,000
2	MS Windows License	30	20,000	600,000	30	20,000	600,000	30	20,000	600,000	30	20,000	600,000
3	Scanner Flatbed with ADF	3	90,000	270,000	3	90,000	270,000	3	150,000	450,000	3	150,000	450,000
4	Heavy duty Printer	7	40,000	280,000	7	40,000	280,000	7	50,000	350,000	7	110,000	770,000
5	Multimedia Projector with Screen	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000
6	Tabs	4	50,000	200,000	4	50,000	200,000	4	50,000	200,000	4	50,000	200,000
7	Laptop	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000
8	MS Windows License	1	20,000	20,000	1	20,000	20,000	1	20,000	20,000	1	20,000	20,000
9	QMS System	1	3,700,000	3,700,000	1	3,700,000	3,700,000	1	4,000,000	4,000,000	1	4,000,000	4,000,000
10	Networking	1	995,000	995,000	1	995,000	995,000	1	995,000	995,000	1	1,200,000	1,200,000
11	Monitoring & Surveillance (CCTV)	1	5,000,000	5,000,000	1	5,000,000	5,000,000	1	5,000,000	5,000,000	1	5,000,000	5,000,000
12	Public Address System	1	1,000,000	1,000,000	1	1,000,000	1,000,000	1	1,000,000	1,000,000	1	1,200,000	1,200,000
	Total			**14,515,000**			**14,515,000**			**16,715,000**			**20,120,000**
				14.515			**14.515**			**16.715**			**20.120**

Furniture and Fixtures

		Original			1st Revised			2nd Revised			3rd Revised		
Sr. No.	Item Name	Quantity	Unit Price	Total	Quantity	Unit Price	Total	Quantity	Unit Price	Total	Quantity	Unit Price	Total
1	Benches (internal)	60	30,000	1,800,000	60	30,000	1,800,000	60	30,000	1,800,000	60	40000	2,400,000
2	Benches (external)	10	10,000	100,000	10	10,000	100,000	10	10,000	100,000	10	40000	400,000
3	Electric Water Cooler	8	45,000	360,000	8	45,000	360,000	8	45,000	360,000	8	60000	480,000
4	Doctors rooms Furniture	30	70,000	2,100,000	30	70,000	2,100,000	30	70,000	2,100,000	30	125000	3,750,000
5	Examination couches	10	35,000	350,000	10	35,000	350,000	10	35,000	350,000	10	35000	350,000
6	Fire Blanket	5	2,500	12,500	5	2,500	12,500	5	2,500	12,500	5	3000	15,000
7	Fire Extinguisher (Water Based)	30	8,000	240,000	30	8,000	240,000	30	8,000	240,000	30	2500	75,000
8	Acrylic Board	150	2,200	330,000	150	2,200	330,000	150	2,200	330,000	150	2000	300,000
9	Rostrum	2	18,000	36,000	2	18,000	36,000	2	18,000	36,000	2	20000	40,000
10	Blinds for windows	6000	150	900,000	6000	150	900,000	6000	150	900,000	6000	200	1,200,000
11	Paintings	100	6,000	600,000	100	6,000	600,000	100	6,000	600,000	100	5000	500,000
12	Waste Bin Sets (3 bin)	40	6,000	240,000	40	6,000	240,000	40	6,000	240,000	40	9000	360,000
13	Printing			1,000,000			1,000,000			1,000,000			1,000,000
	Machinery and Equipment's												
14	Refrigerator(Domestic) front glass double door	2	160,000	320,000	2	160,000	320,000	2	160,000	320,000	2	150000	300,000
15	Refrigerator glass single door	5	80,000	400,000	5	80,000	400,000	5	80,000	400,000	5	90000	450,000
16	Refrigerator 16 cft	5	36,000	180,000	5	36,000	180,000	5	36,000	180,000	5	50000	250,000
17	Air Curtain On Door	5	50,000	250,000	5	50,000	250,000	5	50,000	250,000	5	75000	375,000
18	Washing machines for pantries	3	13,000	39,000	3	13,000	39,000	3	13,000	39,000	3	11000	33,000
19	Gas Burner for pantries	10	4,800	48,000	10	4,800	48,000	10	4,800	48,000	10	80000	800,000
20	Fire Extinguishers DCP	30	4,800	144,000	30	4,800	144,000	30	4,800	144,000	30	6500	195,000
21	LED TV	15	55,000	825,000	15	55,000	825,000	15	55,000	825,000	15	140000	2,100,000
22	Industrial Exhaust	5	50,000	250,000	5	50,000	250,000	5	50,000	250,000	5	60000	300,000
23	Acrylic Display Board	4	20,000	80,000	4	20,000	80,000	4	20,000	80,000	4	20000	80,000
	Laundry & Washing												
24	Bed Sheets and pillow covers	300	1,250	375,000	300	1,250	375,000	300	1,250	375,000	300	2500	750,000
25	Pillows	150	400	60,000	150	400	60,000	150	400	60,000	150	500	75,000
26	Blankets with covers	100	5,000	500,000	100	5,000	500,000	100	5,000	500,000	100	4000	400,000
	Medicine Store												
27	Medicine (Iron Racks) 8x6x2 (Required)	20	50,000	1,000,000	20	50,000	1,000,000	20	50,000	1,000,000	20	60000	1,200,000
28	Moveable Iron Stairs (Required)	2	15,000	30,000	2	15,000	30,000	2	15,000	30,000	2	20000	40,000
29	Lifters (Required)	2	37,000	74,000	2	37,000	74,000	2	37,000	74,000	2	35000	70,000
30	Pallets 3x4 (Plastic) (Required)	20	12,000	240,000	20	12,000	240,000	20	12,000	240,000	20	10000	200,000
31	Dehumidifier (Required)	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000	1	125000	125,000
32	Insect Killer (Required)	25	8,000	200,000	25	8,000	200,000	25	8,000	200,000	25	6500	162,500
33	Thermometer (Required)	20	16,000	320,000	20	16,000	320,000	20	16,000	320,000	20	600	12,000
	Total			**13,503,500**			**13,503,500**			**13,503,500**			**18,787,500**
				13.504			**13.504**			**13.504**			**18.788**

Signage and plaques

			Original			1st Revised			2nd Revised			3rd Revised		
Sr No	**Type**	**Kinds of Sign Boards**	**Quantity**	**Rates**	**Cost**	**Quantity**	**Rates**	**Cost**	**Quantity**	**Rates**	**Cost**	**Quantity**	**Rates**	**Cost**
		External Sign Boards												
1	A1	External Platform/Road Signage (Circular)	6	9,812	58,872	6	9,812	58,872	6	13,951	83,706	6	13,951	83,706
2	A2	External Platform/Road Signage (Triangular)	6	8,976	53,856	6	8,976	53,856	6	12,762	76,574	6	12,762	76,574
3	B1	Main Directional Board	1	109,087	109,087	1	109,087	109,087	1	155,107	155,107	1	155,107	155,107
4	C1	Directional Board (Single Sheet)	10	14,016	140,160	10	14,016	140,160	10	19,929	199,290	10	19,929	199,290
5	C2	Directional Board (Two Sheets)	1	21,813	21,813	1	21,813	21,813	1	31,016	31,016	1	31,016	31,016
6	C3	Directional Board (Three Sheets)	1	29,244	29,244	1	29,244	29,244	1	41,581	41,581	1	41,581	41,581
7	C4	Directional Board (Four Sheets)	1	36,114	36,114	1	36,114	36,114	1	51,351	51,351	1	51,351	51,351
8	C5	Directional Board (Five Sheets)	1	43,858	43,858	1	43,858	43,858	1	62,360	62,360	1	62,360	62,360
9	C6	Directional Board (Six Sheets)	1	51,207	51,207	1	51,207	51,207	1	72,810	72,810	1	72,810	72,810
10	C7	Additional Panel (For Fixation on existing Foundation & Posts)	3	7,703	23,109	3	7,703	23,109	3	10,952	32,857	3	10,952	32,857
11	D1	Departmental Signage on Building	6	45,776	274,656	6	45,776	274,656	6	65,087	390,524	6	65,087	390,524
12	E1	External Map Boards	2	39,939	79,878	2	39,939	79,878	2	56,788	113,576	2	56,788	113,576
		Internal Signage	0		-	0		-	0	-	-	0	-	-
1	F1	Internal Hanging Signage (Main Entrance)	5	88,119	440,595	5	88,119	440,595	5	125,294	626,472	5	125,294	626,472
2	F2	Internal Hanging Signage (Main Entrance 2)	5	67,092	335,460	5	67,092	335,460	5	95,396	476,980	5	95,396	476,980
3	F3	Internal Hanging Signage (Corridor)	4	49,689	198,756	4	49,689	198,756	4	70,651	282,604	4	70,651	282,604
4	F4	Internal Hanging Signage (Corridor 2)	4	50,265	201,060	4	50,265	201,060	4	71,470	285,880	4	71,470	285,880
5	G1	Internal Department Signage on wall	7	12,709	88,963	7	12,709	88,963	7	18,071	126,498	7	18,071	126,498
6	H1	Specialist Name Plaques fixed on wall	20	3,653	73,060	20	3,653	73,060	20	5,194	103,880	20	5,194	103,880
7	J1	Room Name Plaques and Numbers fixed on wall	100	840	84,000	100	840	84,000	100	1,194	119,420	100	1,194	119,420
8	K1	Internal Wall Signage	100	1,380	138,000	100	1,380	138,000	100	1,961	196,140	100	1,961	196,140
9	L1	Room Numbers Fixed on Wall	50	3,501	175,050	50	3,501	175,050	50	4,978	248,920	50	4,978	248,920
10	M1	Advance Fire Exit Sign	10	1,782	17,820	10	1,782	17,820	10	2,534	25,340	10	2,534	25,340
11	M2	Fire Exit Sign Mounted Above the Door	10	1,233	12,330	10	1,233	12,330	10	1,753	17,528	10	1,753	17,528
12	N1	Fire Safety/Equipment Signage	20	2,361	47,220	20	2,361	47,220	20	3,357	67,144	20	3,357	67,144
13	P1	Floor Map Board	5	20,449	102,245	5	20,449	102,245	5	29,075	145,376	5	29,075	145,376
14	Q1	Caution Signage	25	2,107	52,675	25	2,107	52,675	25	2,996	74,900	25	2,996	74,900
15	Q2	Caution Signage	5	634	3,170	5	634	3,170	5	902	4,508	5	902	4,508
16	Q3	Caution Signage	10	1,109	11,090	10	1,109	11,090	10	1,576	15,764	10	1,576	15,764
17	Q4	Caution Signage	15	861	12,915	15	861	12,915	15	1,225	18,375	15	1,225	18,375
		Total			**2,916,263**			**2,916,263**			**4,146,482**			**4,146,482**
		Designing and Site Supervision			87,488			87,488			124,394			124,394
		Grand Total			**3,003,751**			**3,003,751**			**4,270,877**			**4,270,877**
					3.004			3.004			4.271			4.271

DAY CARE CENTER

Yard Stick as per Women Dvelopment Department

		Original			1st Revised			2nd Revised			3rd Revised		
Sr. No.	ITEMS	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total
1	Cylinder Block	1	3,000	3,000	1	3,000	3,000	1	3,000	3,000	1	3,000	3,000
2	Geometrical Cabinet (36 pcs)	1	4,000	4,000	1	4,000	4,000	1	4,000	4,000	1	4,000	4,000
3	Geometrical Solids (10 pcs)	1	2,200	2,200	1	2,200	2,200	1	2,200	2,200	1	2,200	2,200
4	Base for Geometrical Solids (14 pcs)	1	2,000	2,000	1	2,000	2,000	1	2,000	2,000	1	2,000	2,000
5	Constructive Triangles (4 box)	1	400	400	1	400	400	1	400	400	1	400	400
6	Metal Insets (10 - shape)	1	1,000	1,000	1	1,000	1,000	1	1,000	1,000	1	1,000	1,000
7	Stand for metal insets	1	2,000	2,000	1	2,000	2,000	1	2,000	2,000	1	2,000	2,000
8	Paper Board for metal insets (10 Boards)	1	5,000	5,000	1	5,000	5,000	1	5,000	5,000	1	5,000	5,000
9	Sandpaper Alphabets (English)	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000
10	Sandpaper Alphabets (Urdu)	3	3,500	10,500	3	3,500	10,500	3	3,500	10,500	3	3,500	10,500
11	Sandpaper Number	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000
12	Hammer Case	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
13	Soft Reading Book	15	200	3,000	15	200	3,000	15	200	3,000	15	200	3,000
14	Shape Sorting Case	2	500	1,000	2	500	1,000	2	500	1,000	2	500	1,000
15	Transport Set (Model)	2	700	1,400	2	700	1,400	2	700	1,400	2	700	1,400
16	Model Puzzles (S)	7	300	2,100	7	300	2,100	7	300	2,100	7	300	2,100
17	Model Puzzles (B)	7	500	3,500	7	500	3,500	7	500	3,500	7	500	3,500
18	Storybook	20	100	2,000	20	100	2,000	20	100	2,000	20	100	2,000
19	Information Book (Large)	20	350	7,000	20	350	7,000	20	350	7,000	20	350	7,000
20	Basket (L)	10	1,000	10,000	10	1,000	10,000	10	1,000	10,000	10	1,000	10,000
21	Basket (S)	10	600	6,000	10	600	6,000	10	600	6,000	10	600	6,000
22	Color table Box	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
23	ABC Block	4	500	2,000	4	500	2,000	4	500	2,000	4	500	2,000
24	Number Block	4	500	2,000	4	500	2,000	4	500	2,000	4	500	2,000
25	Color Pensils (Large)	5	450	2,250	5	450	2,250	5	450	2,250	5	450	2,250
26	Color Crayons (Large)	5	300	1,500	5	300	1,500	5	300	1,500	5	300	1,500
27	Marker Color (Board and Permanent)	15	395	5,925	15	395	5,925	15	395	5,925	15	395	5,925
28	Fruits Basket (Model Set)	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
29	Vegetables Basket (Model Set)	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
30	Animal Sets	2	600	1,200	2	600	1,200	2	600	1,200	2	600	1,200
31	Insects sets	2	400	800	2	400	800	2	400	800	2	400	800
32	Shape Sorting House	2	1,500	3,000	2	1,500	3,000	2	1,500	3,000	2	1,500	3,000
33	Flash card (Small)	10	120	1,200	10	120	1,200	10	120	1,200	10	120	1,200
34	Flash card (Big)	10	325	3,250	10	325	3,250	10	325	3,250	10	325	3,250
35	Sand Play	2	1,000	4,000	2	1,000	4,000	2	1,000	4,000	2	1,000	4,000
36	Gym Play	2	2,000	3,000	2	2,000	3,000	2	2,000	3,000	2	2,000	3,000
37	Straight Mats	20	1,500	40,000	20	1,500	40,000	20	1,500	40,000	20	1,500	40,000
38	Folding Mats	20	2,000	6,000	20	2,000	6,000	20	2,000	6,000	20	2,000	6,000
39	Diaper Changing Mats	3	300	1,500	3	300	1,500	3	300	1,500	3	300	1,500
40	Cube Cushion	2	500	1,000	2	500	1,000	2	500	1,000	2	500	1,000
41	Square Cushion	2	500	600	2	500	600	2	500	600	2	500	600
42	Baby Mirror	3	300	2,400	3	300	2,400	3	300	2,400	3	300	2,400
43	Pink Tower With Stand	1	800	500	1	800	500	1	800	500	1	800	500
44	Dressing Frames	10	500	8,000	10	500	8,000	10	500	8,000	10	500	8,000
45	Monkey Stuffed	2	800	2,400	2	800	2,400	2	800	2,400	2	800	2,400
46	Lion Stuffed	2	1,200	3,400	2	1,200	3,400	2	1,200	3,400	2	1,200	3,400
47	Cater Pillar Stuffed	2	1,700	3,000	2	1,700	3,000	2	1,700	3,000	2	1,700	3,000
48	Stuffed toys (Animal shaped i.e. Moneky, lion, caterpillar etc)	6	1,500	9,000	6	1,500	9,000	6	1,500	9,000	6	1,500	9,000
49	Long Roads with Stands	1	1,500	1,500	1	1,500	1,500	1	1,500	1,500	1	1,500	1,500
50	Number Rods	1	500	500	1	500	500	1	500	500	1	500	500
51	Stand Number Rods	1	800	800	1	800	800	1	800	800	1	800	800

DAY CARE CENTER

Yard Stick as per Women Dvelopment Department

		Original			1st Revised			2nd Revised			3rd Revised		
Sr. No.	ITEMS	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total	Yard Stick (DCC of 25 Kids)	Unit Cost	Total
52	Soft toys	2	700	1,400	2	700	1,400	2	700	1,400	2	700	1,400
53	Infants Manual Weight Machine	1	1,000	1,000	1	1,000	1,000	1	1,000	1,000	1	1,000	1,000
54	Toddlers Manual Weight Machine	1	1,000	1,000	1	1,000	1,000	1	1,000	1,000	1	1,000	1,000
55	Tri Cycles	4	3,500	14,000	4	3,500	14,000	4	3,500	14,000	4	3,500	14,000
56	Wooden Cots	10	10,000	100,000	10	10,000	100,000	10	10,000	100,000	10	10,000	100,000
57	Mattresses for Cots	10	1,200	12,000	10	1,200	12,000	10	1,200	12,000	10	1,200	12,000
58	Pillows	10	300	3,000	10	300	3,000	10	300	3,000	10	300	3,000
59	Bed Sheets and pillow covers	20	400	8,000	20	400	8,000	20	400	8,000	20	400	8,000
60	Nets	10	600	6,000	10	600	6,000	10	600	6,000	10	600	6,000
61	High Chairs for feeding	15	3,000	45,000	15	3,000	45,000	15	3,000	45,000	15	3,000	45,000
62	Rockers Cum Bouncer	8	2,500	20,000	8	2,500	20,000	8	2,500	20,000	8	2,500	20,000
63	Cot Mobile	10	1,500	15,000	10	1,500	15,000	10	1,500	15,000	10	1,500	15,000
64	Plastic Chairs (Round edges Animal Shapes)	7	600	4,200	7	600	4,200	7	600	4,200	7	600	4,200
65	Multi-Purpose Table	2	3,000	6,000	2	3,000	6,000	2	3,000	6,000	2	3,000	6,000
66	Writing Board	1	500	500	1	500	500	1	500	500	1	500	500
67	Electric Sterilizer	2	5,000	10,000	2	5,000	10,000	2	5,000	10,000	2	5,000	10,000
68	Electric Warmer	2	5,000	10,000	2	5,000	10,000	2	5,000	10,000	2	5,000	10,000
69	Table sets	2	4,000	8,000	2	4,000	8,000	2	4,000	8,000	2	4,000	8,000
70	Rocker	6	3,200	19,200	6	3,200	19,200	6	3,200	19,200	6	3,200	19,200
71	Activity Gym (Infants)	5	2,000	10,000	5	2,000	10,000	5	2,000	10,000	5	2,000	10,000
72	Play Gym	5	2,700	13,500	5	2,700	13,500	5	2,700	13,500	5	2,700	13,500
73	Activity Gym (Toddlers)	5	2,000	10,000	5	2,000	10,000	5	2,000	10,000	5	2,000	10,000
74	Toiler Training Seat	10	3,000	30,000	10	3,000	30,000	10	3,000	30,000	10	3,000	30,000
75	Infant Toys	30	4,000	120,000	30	4,000	120,000	30	4,000	120,000	30	4,000	120,000
76	Bath Toys	15	1,000	15,000	15	1,000	15,000	15	1,000	15,000	15	1,000	15,000
77	Fun Links Teether	15	300	4,500	15	300	4,500	15	300	4,500	15	300	4,500
78	Fun Pal Teether	15	500	7,500	15	500	7,500	15	500	7,500	15	500	7,500
79	Fun Rattle	15	400	6,000	15	400	6,000	15	400	6,000	15	400	6,000
80	Mother feeding Chair	1	3,000	3,000	1	3,000	3,000	1	3,000	3,000	1	3,000	3,000
81	Soft Books (duplication)	20	500	10,000	20	500	10,000	20	500	10,000	20	500	10,000
82	Bottle Brushes	3	300	900	3	300	900	3	300	900	3	300	900
List of others Items i.e. Kitchen, Office, Electric items				-			-			-			-
1	Water Dispenser	1	14,000	14,000	1	14,000	14,000	1	14,000	14,000	1	14,000	14,000
2	Microwave Oven	1	12,400	12,400	1	12,400	12,400	1	12,400	12,400	1	12,400	12,400
3	Fridge	1	34,000	34,000	1	34,000	34,000	1	34,000	34,000	1	34,000	34,000
4	Kitchen Accessories / Cutleries etc.	24	200	4,800	24	200	4,800	24	200	4,800	24	200	4,800
5	Sofa Set	1	40,000	40,000	1	40,000	40,000	1	40,000	40,000	1	40,000	40,000
6	Office Table	1	5,000	5,000	1	5,000	5,000	1	5,000	5,000	1	5,000	5,000
7	Office Chairs	5	10,000	50,000	5	10,000	50,000	5	10,000	50,000	5	10,000	50,000
8	Air Conditioner	2	42,000	84,000	2	42,000	84,000	2	42,000	84,000	2	42,000	84,000
9	LCD	1	27,000	27,000	1	27,000	27,000	1	27,000	27,000	1	27,000	27,000
10	DVD player	1	5,000	5,000	1	5,000	5,000	1	5,000	5,000	1	5,000	5,000
11	CCTV Cameras	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000
12	Fire Alarms	3	5,000	15,000	3	5,000	15,000	3	5,000	15,000	3	5,000	15,000
13	UPS	1	10,000	10,000	1	10,000	10,000	1	10,000	10,000	1	10,000	10,000
14	Vacuum Cleaner	1	7,000	7,000	1	7,000	7,000	1	7,000	7,000	1	7,000	7,000
15	Fire Extinguishers (Large)	2	5,000	10,000	2	5,000	10,000	2	5,000	10,000	2	5,000	10,000
16	Electric Insect Killer	2	7,800	15,600	2	7,800	15,600	2	7,800	15,600	2	7,800	15,600
17	Electric Hand Dryer	1	4,000	4,000	1	4,000	4,000	1	4,000	4,000	1	4,000	4,000
18	Electric Heater	2	5,000	10,000	2	5,000	10,000	2	5,000	10,000	2	5,000	10,000
19	Ceiling/bracket Fans	4	8,000	32,000	4	8,000	32,000	4	8,000	32,000	4	8,000	32,000
20	Curtains	2	45,000	90,000	2	45,000	90,000	2	45,000	90,000	2	45,000	90,000
21	Carpets	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000

DAY CARE CENTER

Yard Stick as per Women Dvelopment Department

		Original			1st Revised			2nd Revised			3rd Revised		
Sr. No.	**ITEMS**	**Yard Stick (DCC of 25 Kids)**	**Unit Cost**	**Total**	**Yard Stick (DCC of 25 Kids)**	**Unit Cost**	**Total**	**Yard Stick (DCC of 25 Kids)**	**Unit Cost**	**Total**	**Yard Stick (DCC of 25 Kids)**	**Unit Cost**	**Total**
22	Other miscellaneous items	1	218,675	218,675	1	218,675	218,675	1	218,675	218,675	1	218,675	218,675
	TOTAL			**1,600,000**			**1,600,000**			**1,600,000**			**1,600,000**
				1.600			1.600			1.600			1.600

Human Resource Model of THQ Hospital

		Original				1st Revised				2nd Revised				3rd Revised				
Sr. No.	NAME OF POST	No. of Employees	Per Month Salary	Per Month Salary for Person	Salary for One Year	No. of Employees	Per Month Salary	Per Month Salary for Person	Salary for One Year	No. of Employees	Per Month Salary	Per Month Salary for Person	Salary for Two Years	No. of Emplyees	Project Pay Scale	Per Month Salary	Per Month Salary for all Person	Salary for Two Years
1	ADMIN OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
2	HUMAN RESOURCE & LEGAL OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
3	IT/STATISTICAL OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
4	FINANCE, BUDGET & AUDIT OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
5	PROCUREMENT OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
6	QUALITY ASSURANCE OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
7	LOGISTICS OFFICER	1	60,000	60,000	720,000	1	60,000	60,000	720,000	1	80,000	80,000	1,920,000	1	6	105,000	105,000	3,255,000
8	DATA ENTRY OPERAOTOR (DEO)	2	25,000	50,000	600,000	2	25,000	50,000	600,000	2	35,000	70,000	1,680,000	2	3	44,000	88,000	2,728,000
9	ASSISTANT ADMIN OFFICER	2	40,000	80,000	960,000	2	40,000	80,000	960,000	2	50,000	100,000	2,400,000	2	5	70,000	140,000	4,340,000
10	**HR FOR QMS and MSDS and Day Care Center**																	
11	QMS Supervisor / Information Desk Officer	2	25,000	50,000	600,000	2	25,000	50,000	600,000	2	25,000	50,000	600,000	2		25,000	50,000	600,000
12	Computer Operator	8	20,000	160,000	1,920,000	8	20,000	160,000	1,920,000	8	20,000	160,000	1,920,000	8		20,000	160,000	1,920,000
13	Consultants (MSDS) Implementation & Clinical Audit	1	100,000	100,000	1,200,000	1	100,000	100,000	1,200,000	1	100,000	100,000	1,200,000	1		100,000	100,000	1,200,000
14	Training on MSDS Compliance for Staff of THQ Hospital	1000	4,000	4,000,000	4,000,000	1000	4,000	4,000,000	4,000,000	1000	4,000	4,000,000	4,000,000	1000		4,000	4,000,000	4,000,000
15	Rent for Vehicle				500,000				500,000				500,000				0	500,000
16	Manager Day Care Center	1	45,000	45,000	540,000	1	45,000	45,000	540,000	1	45,000	45,000	540,000	1		45,000	45,000	540,000
17	Montessori Trained Teacher	1	35,000	35,000	420,000	1	35,000	35,000	420,000	1	35,000	35,000	420,000	1		35,000	35,000	420,000
18	Attendant / Care Giver	4	25,000	100,000	1,200,000	4	25,000	100,000	1,200,000	4	25,000	100,000	1,200,000	4		25,000	100,000	1,200,000
19	Office Boy	1	20,000	20,000	240,000	1	20,000	20,000	240,000	1	20,000	20,000	240,000	1		20,000	20,000	240,000
	Sub Total of HR Model			**4,860,000**	**17,220,000**			**4,860,000**	**17,220,000**			**5,040,000**	**28,140,000**				**5,273,000**	40,473,000
					17.220				**17.220**				**28.140**					**40.473**
	Utilization of HR Component								**5.320**				9.60					
	Total of HR Component												**33.46**					**50.075**

Janitorial Services

	Original			From 1st Revised to onward
Assumptions				In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: **"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY".** In view of above, Outsourcing cost has been excluded from this PC-I.
Covered area excluding residential area	56,673	sft		
Covered area assigned to one sweeper	7,500	sft		
Number of sweepers required for covered area	8	Persons		
Road and ROW area	39,999	sft		
Road and ROW assigned to one sweeper	15,000	sft		
Number of sweepers required for road and ROW area	3	Persons		
Number of washroom blocks	9	blocks		
Number of washroom block assigned to one sweeper	3	Persons		
Number of sweepers required for total washroom blocks	3	Persons		
Total sweeper in morning shift	14	Persons		
Total number of sweepers in evening shift	4	Persons		
Total number of sweepers in night shift	7	Persons		
Total number of sweepers in all shifts	27	Persons		
Number of sewer men required	3	Persons		
Number of supervisors	3	Persons		
Salary component				
Type of worker	**No of workers**	**Salary per month**	**Salary for One Year**	
Sweepers / Janitors	27	22,000	7,216,334	
Sewer men	3	22,000	792,000	
Supervisors	3	26,000	936,000	
Cost of Supply per Month		400,000	4,800,000	
Sub Total (Salary component)			**13,744,334**	

13.744

Security and Parking

	Original				From 1st Revised to onward
Assumptions					In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: **"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY".** In view of above, Outsourcing cost has been excluded from this PC-I.
Covered area excluding residences	56,673				
Covered Area per guard	15,000				
Number of guards	**4**				
Open area excluding parking area	39,999				
Area covered per guard per shift for open area excluding parking	15,000				
Number of guards for total area excluding parking area	**3**				
Number of gates	3				
Number of guards at gates	**6**				
Total No of Guard	**12**				
Total number of all guards for second shift	**6**				
Lady Searcher	**2**				
Number of parking areas	1				
Number of guards for parking lot per shift (Morning+ Evening)	**9**				
Total no. of Supervisors	**2**				
Type of worker	**No of workers**	**Salary per month**	**Salary per Month for all Person**	**Salary for One year**	
Supervisors	2	24,675	49,350	592,200	
Ex-Army	6	21,525	129,150	1,549,800	
Civilian	9	21,000	189,000	2,268,000	
Lady Searcher	2	21,525	43,050	516,600	
Parking	2	21,525	43,050	516,600	
Sub total				**5,443,200**	
Equipment cost					
Lump sum Provision (Walk Through Gate=1, Metal Detector=4, Walkies Talkies=8, Base Set=1)				400,000	
Sub total				**400,000**	
Subtracting Parking Fees				500,000	
Total Security and Parking Services				**5,343,200**	
				5.343	

Laundry Services

	Original			From 1st Revised to onward
Number of beds (50)	**Qunatity**	**Unit cost**	**Total cost**	In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: **"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY".** In view of above, Outsourcing cost has been excluded from this PC-I.
Hygwine Barrier Washer 50 KG	4	4,481,490	17,925,960	
Drying Tumbler (100kg Lenin) 40 kg/Each Machine	2	1,252,519	2,505,038	
Drying Tumbler (100kg Lenin) 20 kg/Each Machine	1	942,262	942,262	
Flat Work Ironer	1	2,591,910	2,591,910	
Utility Press	1	1,264,010	1,264,010	
Hand Ironer with Table	1	551,568	551,568	
Spotting Machnie / Stain Removal	1	367,712	367,712	
Sewing Machine	1	115,000	115,000	
Packing / Sorting Table (Local / Imported)	1	85,000	85,000	
Dirty Linen Collection Trolley (Local / Imported)	2	65,000	130,000	
Clean Linen Distribution Trolley (Local / Imported)	2	105,000	210,000	
Storage Racks (Local/Imported)	2	112,000	224,000	
Dirty Linen Storage Bin (Local / Imported)	30	55,000	1,650,000	
Clean Linen Storage Cupboard(Local / Imported)	30	115,000	3,450,000	
Weighing Scale	1	115,000	115,000	
Electric Power Generator (200 KVA)	1	4,900,000	4,900,000	
Sub total			**37,027,460**	
Type of Item	**No of Beds**	**Per bed cost per year**	**Total Cost**	
No of Bed	50	30,000	1,500,000	
Transport Charges			1,200,000	
Total for laundry items			**2,700,000**	
Total			**39.727**	

Maintenance of Generator

	Original			From 1st Revised to onward
Item Name	**Quantity**	**Cost per year**	**Total Cost**	In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: **"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY".** In view of above, Outsourcing cost has been excluded from this PC-I.
Periodical Maintenance Cost				
Number of Generators (200 KVA)	-	500,000	-	
Number of Generators (100 KVA)	1	300,000	300,000	
Number of Generators (50 KVA)	-	175,000	-	
Repairs Cost	1	300,000	300,000	
HR Cost				
Supervisor	1	40,000	240,000	
Generator Operator	3	30,000	1,080,000	
Technical Staff/Mechanic	-	30,000	-	
Total			**1,920,000**	
			1.920	

MEP

	Original				From 1st Revised to onward
Type of worker / Component	**No of workers**	**Salary per month**	**Salary per Month for all persons**	**Salary for One Year**	In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: **"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY".** In view of above, Outsourcing cost has been excluded from this PC-I.
Supervisors	1	56,420	56,420	677,040	
Plumber	1	32,550	32,550	390,600	
AC/ Technician	1	34,720	34,720	416,640	
Electrician	2	31,465	62,930	755,160	
Car painter	1	30,380	30,380	364,560	
Total (Salary component)			**217,000**	**2,604,000**	
	No.	**Per Unit Cost per Year**	**Cost per Year for all Items**	**Cost for One Year**	
A/C	66	6,665	439,890	439,890	
Fridge	5	4,000	20,000	20,000	
UPS	12	8,000	96,000	96,000	
Water Cooler	15	4,000	60,000	60,000	
Exhaust	7	3,000	21,000	21,000	
Geyser	15	4,000	60,000	60,000	
Water Pump	3	3,000	9,000	9,000	
Carpentry Work		-	180,000	180,000	
Electrical Work		-	120,000	120,000	
Plumbing Work		-	75,000	75,000	
Sub Total				**1,080,890**	
General Total				**3,684,890**	
				3.685	

Medical Gases

		Original				From 1st Revised to onward
Scope of Work		Monthly Consumption per THQ Hospital	Annual Consumption per THQ Hospital	Rate per Cylinder	Total Annual Cost per THQs	In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: **"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY".** In view of above, Outsourcing cost has been excluded from this PC-I.
Oxygen	Medical Oxygen Gas in 240 CFTCylinder (MM)	12	144	1850	266,400	
	Medical Oxygen Gas in 48 CFTCylinder (MF)	30	360	1,000	360,000	
	Medical Oxygen Gas in 24 CFTCylinder (ME)	40	480	800	384,000	
Nitrous Oxide	Nitrous Oxide in 1,620 Liter (XE)	2	24	5,000	120,000	
	Nitrous Oxide in 16,200 Liter (XM)	1	12	12,500	150,000	
Nitrogen Gas	Nitrogen Gas	1	12	2,000	24,000	
Total					**1,304,400**	
					1.304	

Cafeteria

Pre-Fabrication Cateen (Procurement)

		Original				From 1st Revised to onward
Sr. No.	**Description of work**	**Unit**	**Qty**	**Rate (Rs)**	**Amount (Rs)**	In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: **"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY".** In view of above, Outsourcing cost has been excluded from this PC-I.
1	Excavation in foundation of building, bridges and other structures, including dagbelling, dressing, refilling around structure with excavated earth, watering and ramming lead upto one chain (30 m) and lift upto 5 ft. (1.5 m) for ordinary soil	Cft	2545	6.13	15,602	
2	Spraying anti-termite liquid mixed with water in the ratio of 1:40.	Sft	4305	2.21	9,514	
3	Supplying and filling sand of approved quality from outside sources under floors etc complete in all respects.	Cft	2268	15.62	35,426	
4	Providing, laying, watering and ramming brick ballast 1½" to 2"(40 mm to 50 mm) gauge mixed with 25% sand, for floor and foundation, complete in all respects.	Cft	998	39.15	39,069	
5	Providing and laying damp proof course (1½" thick (40 mm)) of cement concrete 1:2:4, with one coat bitumen and one coat polythene sheet 500gauge	Sft	318	43.34	13,789	
6	Brick work with cement, sand mortar ratio 1:5	Cft	1792	180.25	323,071	
7	Cement concrete plain Ratio 1: 4: 8 including placing, compacting, finishing and curing complete (including screening and washing of stone aggregate)	Cft	427	170.72	72,893	
8	Cement concrete plain Ratio 1: 2 : 4 including placing, compacting, finishing and curing complete (including screening and washing of stone aggregate)	Cft	1043	190.48	198,746	
9	Placing Granite tiles (24"x24"x0.5") using white cement over a bed of ¾" (20 mm) thick cement mortar 1:6.	Sft	2160	200.00	432,000	
10	Providing and laying Tuff pavers, having 7000 PSI, crushing strength of approved manufacturer, over 2" to 3" sand cushion i/c grouting with sand in joints i/c finishing to require slope . complete in all respect.	Sft	720	118.00	84,960	
	Total Amount of Platform Construction				**1,225,070**	
Pre-Fabrication of Canteen Structure						
11	Providing and fixing aluminium frame window with double glazzed glass 6mm+6mm thick complete in all respect as approved by engineer	Sft	48	1100.00	52,800	
12	Providing and fixing aluminium frame door with single glazzed glass 6mm thick complete in all respect as approved by engineer	Sft	56	700.00	39,200	
13	Fixing of frameless Glass wall of approved quality and design as approved by engineer	Sft	550	1500.00	825,000	
14	Providing Granite skirting or dado 4/8"(13 mm) thick including rounding of corner and straight ening of top edge and finishing to smooth surface afterplastering	Sft	491	212.00	104,177	
15	Placing & erection of pre-painted Box section tube Columns of M.S sheet 4mm thick of size 4" x4" complete in all respect.	Kg	693	150.00	103,950	
16	Placing & erection of pre-painted Box section tube Rafters of M.S sheet 4mm thick of size 3" x3" with all fittings, complete in all respect.	Kg	1040	150.00	155,925	
17	Placing & erection of pre-painted Box section tube Purlins of M.S sheet 1.6 mm thick (16 Gauge) of size 2" x2", with all fittings, complete in all respect.	Rft	676	120.00	81,144	
18	Placing & erection of pre-painted, Galvanized Sandwitched board of 0.5 mm thick M.S sheet with 50mm PU insulation with all fittings, complete in all respect.	Sft	2640	400.00	1,055,800	
19	Placing & fixing glass wool complete in all respect.	Sft	3024	50.00	151,200	
20	Placing & fixing Gypsum False Ceiling, complete in all respect.	Sft	3024	70.00	211,680	
21	Providing & Fixing corrugated galvanized iron sheets 22 gauge with EPDM screw fittings, complete in all respect.	Sft	3629	145.00	526,176	

Cafeteria

Pre-Fabrication Cateen (Procurement)

		Original				From 1st Revised to onward
	Total Cost of Pre-Fabrication of Canteen Structure				**3,307,052**	
	Total Amount (Rs)				**4,532,121**	
22	Electrification				998,735	
23	Plumbing and Sanitory				410,000	
24	Kitching Fixtures				802,000	
	Grand Total Amount (Rs)				**6,742,856**	

6.743

LANDSCAPE DEVELOPMENT WORKS

COST ESTIMATE

		Original				From 1st Revised to onward
Sr. No.	**Description**	**Unit**	**Quantity**	**Unit Rate Rs.**	**Amount Rs.**	In the light of decision made during the Progress Review Meeting of Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the Chairmanship of Chairman, P&D Board; it was inter alia decided as under: **"It would be made sure by the P&SH Department that the outsourcing would be shifted to the non-development side from 1st July 2018 next FY".** In view of above, Outsourcing cost has been excluded from this PC-I.
1	**SOFT LANDSCAPE**					
1.1	**TOP SOIL**					
	Providing, spreading and leveling of topsoil (sweet soil including manure and fertilizers) as required complete in all respects as per Drawings, Specifications and as approved by the Engineer.	Cft	9,184	20	183,680	
1.2	**STONE / PEBBLES**					
	Supply and laying a layer of pebbles/stone at specified locations with Landscape base as in Landscape Design approved by the Engineer.	Truck	1	34,375	34,375	
1.3	**GRASSING**					
a	**GRASSING (EXISTING NON MAINTANE LAWNS)**					
	Providing and dibbing of Fine Dacca grass where required, including mud filling/leveling and contour shape preparation confirming to the criteria outlined in the Specifications, complete in all respects as per Drawings , Specifications and as approved by the Engineer.	Sft	25,361	7	177,527	
b	**GRASSING (NEW LAWNS)**					
	Providing and dibbing of Fine Dacca grass , including mud filling/leveling and contour shape preparation confirming to the criteria outlined in the Specifications, complete in all respects as per Drawings, Specifications and as approved by the Engineer.	Sft	9,361	11.25	105,311	
1.4	**TREE / SHRUBS (SPREADING)**					
	Providing and planting tree / shrub as listed and as arrangement and type shown in the Drawings, in pits of size 305mm x 305mm x 305mm. Dug in improved soil 610mm. deep filled by adding 10% cow dung manure and confirming to the criteria outlined in the Specifications, complete in all respects and to the satisfaction of Engineer .					
a	Trees 18" pot 6'-7' - Terminally, Cassia Fistula, Bauhinia Variegated, Alstonia Choirs, Ficus Yellow, Ficus Black, Jacaranda, Pilken, Mangifera etc.	No's	242	1,500	363,000	
b	Trees 12" pot 3'-4' - Polyalthia Long folia, Terminally, Cassia Fistula, Bauhinia Variegated, Latonia Choirs, Delonix Regia, Ficus Yellow, Focus Black, fichus Starlight, Melaluca, Mimuspps, Pine, Ficus Amestal, Pilken, Palms etc.	No's	60	270	16,200	
c	Plantation of Fruit Plants in the vacant area 12" pot 3'-4' - Am rood, Jaman, Berri, Mango, Citrus. Including site preparation, plantation, watering and maintenance for six months.	No's	400	600	240,000	
1.5	Shrubs and Ornamental Plants 10" pot Pittosporum Variegated, Murray Small, Ixora Coccinea, Juniper Varigated, Hibiscus Varigated, Carronda Dwarf Spp, Jasmine Sambac(Mottya), Leucophyllum Frutescens(Silvery), Rose, Nerium, Lantana, Canna, Asparagrass, Conocarpus, Acalypha, Callistemon Dwarf, Cestrum, Thabernaemontara Variegated etc.	No's	31,500	69	2,173,500	
a	Shrubs and Ornamental Plants 12" pot Pittosporum Varigated, Ixora Cochineal, Juniper Variegated, Carronade Dwarf, Jasmine Thai, Plumier Robar, Cassia Malacca, Largest mea, Euphorbia, Jestropha Thai etc	No's	4,875	195	950,625	
1.6	**GROUND COVERS**					
	Providing and planting ground covers as listed and as arrangement and type shown in the Drawings, in pits of size 150mm x 150mm x 150mm. Dug in improved soil 610mm deep filled by adding 10% cow dung manure and confirming to the criteria outlined in the Specifications, complete in all respects and to the satisfaction of Engineer .					
	Ground Cover Plastic Bag Plants Alternant Hera, Dianella, Iresine (Red), Hemercollis(Daylily), Duranta etc	No's	25,000	12	300,000	
1.7	**PALMS**					
	Providing and planting palms as per Drawings, specifications and to the satisfaction of Engineer .					
a	Palm 18" pot - Queen Palm, Wodyetia Bifurcate, Washingtonian Palm, Biskarkia etc.	No's	12	3,675	44,100	
b	Palm 18" pot - Phoenix Palm, Cyrus Palm	No's	40	1,800	72,000	
1.8	**CREEPERS**					
	Providing and planting Creepers as listed and as arrangement and type shown in the Drawings, in pits of size 305mm x 305mm x 305mm. Dug in improved soil 610mm. deep filled by adding 10% cow dung manure and confirming to the criteria outlined in the Specifications, complete in all respects and to the satisfaction of Engineer .					
	Creepers 12" Pot - Bougainvillea, Bonsai, Qusqualus, Bombay Creeper etc.	No's	100	195	19,500	
2	**HARD LANDSCAPE**					

LANDSCAPE DEVELOPMENT WORKS

COST ESTIMATE

		Original				From 1st Revised to onward
2.1	**WALK WAYS**					
a	Excavation of walkways and edging including brick ballast under 12"X14" curb stones fixing with1:2:4 PCC, supply of 7000PSI tuff tiles 60mmas per approved design fixing on 4" brick ballast compacted and grouting with sand.	Sft	2000	150	300,000	
2.2	**BENCHES**					
	Concrete Bench 5' wide complete in all respects and to the satisfaction of Engineer as per approved design.	No's	10	12,562	125,620	
2.3	**DUSTBINS**					
	Complete in all respects and to the satisfaction of Engineer as per approved design.	No's	8	23,675	189,400	
2.4	**PLAYING EQUIPMENTS**					
	Complete in all respects and to the satisfaction of Engineer as per approved design.	No's	1	465,760	465,760	
2.5	**PLANTERS**					
	Concrete planters 2' X 2-1/2' complete in all respects and to the satisfaction of Engineer as per approved design.	No's	7	3,850	26,950	
2.6	**WATER POINTS (Injector Pump 1HP)**	No's	3	45,000	135,000	
3	**SOFT LANDSCAPE MAINTENANCE** (Including maintenance and up keeping of site for 6 months) after development as per specifications and to the satisfaction of Engineer.	Sft	40,456	7.50	303,420	
4	**CONSTRUCTION OF PLANTERS**					
4.1	**Large Size** with keystones fixed with cement with top concrete slab as per design and to the satisfaction of Engineer.	No's	100	550	55,000	
4.2	**Medium Size** with keystones fixed with cement with top concrete slab as per design and to the satisfaction of Engineer.	No's	1,170	550	643,500	
4.3	**Small Size** with keystones fixed with cement with top concrete slab as per design and to the satisfaction of Engineer.	No's	240	550	132,000	
5	**GAZEEBO** Construction of Gazebo 12' X 12' with top fiberglass 3 layer canopy as per approved design and to the satisfaction of Engineer.	No's	1	200,000	200,000	
	Total Amount of - Landscaping				**7,256,468**	
	PRA(16%)				1,161,035	
	Design Consultancy				100,000	
	Grand Total				**8,517,503**	
					8.518	

GOVERNMENT OF PUNJAB

2nd BI-Annual
2021
Phase # 02
THQ

08

OFFICE OF THE
EXECUTIVE ENGINEER
BUILDINGS DIVISION
CHAKWAL

NAME OF WORK:- **ROUGH COST ESTIMATE FOR THE WORK REVAMPING OF CITY HOSPITAL TALGANG DISTRICT CHAKWAL**

ESTIMATED COST:- **RS. 48.005 Millions**

ROUGH COST ESTIMATE FOR THE WORK PROGRAME FOR REVAMPING ALL THQ HOSPITALS IN PUNJAB (ONE AT CITY HOSPITAL TALAGANG DISTRICT CHAKWAL)" ADP NO. 792 FOR THE YEAR 2021-22

HISTORY:-

The Chief Executive Officer, District Health Authority Rawalpindi has apprised in his letter No. P&D011/THQ/1753, dated: 04-12-2020 to prepared the rough cost estimate for revamping of Clinical Building of City Hospital Talagang as per the directions and guidelines circulated by the Director Infrastructure, PMU(P&SHD)/2020/730, dated: 25-11-2020. There are the following buildings required to be revamped.

Scope Of Work

1. Revamping of THQ Hospital Main Building
2. Provision of Street Lights
3. Provision of Glow electric sign board
4. Provision of Tuff Paver
5. Provision of PCC Path
6. Re-Construction / Maintenance of Boundary Wall
7. Provision of RO Filtration plant
8. Provision of Revamping of Sewerage System

The rough cost estimate of Rs. 20.198 (M) was framed and forwarded to Secretary to the Government of the Punjab, Primary & Secondary Healthcare Department Lahore vide the Superintending Engineer Buildings Circle No. 1 Rawalpindi letter no. 406/D, dated: 15-02-2021 but the administrative approval could not be issued. Meanwhile scheme appeared in the next ADP 2021-22 at Gen Sr. No.792 with titled " Programe for Revamping all THQ Hospitals in Punjab (one at City Hospital Talagang) & fresh plinth area rates notified on 09-07-2021. PMU Primary & Secondary Healthcare Department requested for submission of rough cost estimate on fresh rates by keeping the scope of work confined to the revamping of existing buildings / structures and deleting the construction of new blocks.

Now the rough cost estimate of **Rs. 48.005 (M)** has been framed accordingly on the plinth area rates 2nd Bi-Annual 2021 (MRS 1st July 2021 to 31st Dec 2021) for Chakwal notified vide Chief Engineer North Zone Punjab Buildings Department Lahore vide memo No. CEBNZ/1120, dated; 09-07-2021 and forwarded to the client department for arranging administrative approval / funds.

CARRYING OUT OF WORK

The work will be got carried out through approved contractors of Punjab Buildings Department after calling for competitive tenders as usual.

SPECIFICATIONS

The work shall be carried out according to the latest specifications of Provincial Buildings Department and to the entire satisfaction of Engineer In charge.

RATES

This Rough Cost Estimate has been framed on the basis of Plinth Area Rates 2nd B-I Annual 2021 Notified Vide the Chief Engineer (N.Z) Punjab Building Department Lahore No.CEBNZ/1120/D, dated:-09/07/2021 for the period from 1st July 2021 to 31st Dec 2021 for Chakwal.

TIME LIMIT

15 months subject to the availability of funds.

COST

The total cost of work comes to **Rs. 48.005 Millions**

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

DETAIL FOR REVAMPING OF CITY HOSPITAL TALAGANG DISTRICT CHAKWAL
(MAIN BUILDING)

S.#	Description	Nos	Measurements			Qty	Rate	Unit	Amount
			L	B	H				
1	Removing cement or lime plaster.								
	Ground Floor	1	26.00		21.00	546			
		2	15.00		12.00	360			

ROUGH CO

S. No.	
A	CLINICAL BU
1	Revamping of Ma
2	Revamping of Ele
B	ADDITIONAL P
1	Revamping of Bou
2	M&R of Electric L
3	Provision of Rever trearment filtration membrane
4	Renovation of existi
5	Revamping of Sewer
6	Supply / Errectic 20x4=80 Sft
	Add 1% Tree Plantatic
	Add 5% PST

Sub Divisio
Buildings Su
Talag

SIE

	.W2a					
		10	.6.000	2.000	0.500	60
	CW1	2	7.500	2.000	0.500	15
		2	3.750	2.000	0.500	8
	W5	2	5.000	2.000	0.500	10
		2	4.000	2.000	0.500	8
	W6	4	3.750	2.000	0.500	15
		4	4.000	2.000	0.500	16
	W1	2	50.000	2.000	0.500	100
		2	.6.000	2.000	0.500	12

DW2	2	11.000	2.000	0.500	22			
	2	13.250	2.000	0.500	27			
Veranda opening	11	11.000	1.125	0.750	102			
Portico colum	4	9.000	1.000	1.000	36			
beam	2	36.000	1.000	1.000	72			
	2	24.000	1.000	1.000	48			
				Total	6786	390.40	cft	2649193

7 Fabrication of mild steel reinforcement for cement concrete including cutting bending, laying in position , making joints and fastening.,including cost of binding wire and labour charges for binding of steel reinforcement deformed bars

	1	6786	6.000	0.454	18485			
				Total	18485	19988.70	%kg	3694839

8 P/L PREPOLISHED PORCELAIN TILE "MASTER OR EQ" WITH DRY / WET / VENIED APPLICATION, DWV SERIES (LIGHT COLOR) CLASS SB, 16"X24" SIZE LAID OVER A BED OF 3/4" THICK C/S MORTAR 1:2, I/C FILLING JOINTS WITH WHITE CEMENT MIXED WITH MATCHING PIGMENT COMPLETE IN ALL RESPECT AS APPROVED BY THE ENGINEER INCHARGE (FOR FLOOR)

Portico / Enterence	1	24.00	36.00		864			
corridor	1	40.00	7.00		280			
Emergency	1	12.00	14.00		168			
	1	16.00	14.00		224			
	1	13.00	18.00		234			
	1	16.00	14.00		224			
	1	13.00	18.00		234			
F.Floor	1	15.00	14.00		210			
	1	10.00	12.00		120			
	1	13.00	14.00		182	276		756240
				Total	**2740**	~~280~~.00	P.Sft	~~767,200~~

9 P/L PREPOLISHED PORCELAIN TILE "MASTER OR EQ" WITH DRY / WET / VENIED APPLICATION, DWV SERIES (LIGHT COLOR) CLASS SB, 16"X16" SIZE LAID OVER A BED OF 3/4" THICK C/S MORTAR 1:2, I/C FILLING JOINTS WITH WHITE CEMENT MIXED WITH MATCHING PIGMENT COMPLETE IN ALL RESPECT AS APPROVED BY THE ENGINEER INCHARGE (DADO)

stretcher ramp	2	154.000		5.000	1540			
Stair side	1	160.000		4.000	640			
round are	1	76.000		2.000	152			
damged pieces	1	10.000		5.000	50			
	2	8.000		5.000	80			
	2	12.000		5.000	120			
	2	10.000		5.000	100			
	2	13.000		5.000	130	293		823916
				Total	**2812**	~~283~~.00	P.Sft	~~795,796~~

10	P/L Non-Skidding Ceramic Tile size 12:x12" laid in White Cement over a bed of 3/4" thick cement sand mortor 1:2 i/c filling of joints with maching pigment complete in all respect as approved by the Engineer in charge							
	strecher Ramp	1	154.00	7.00		1078		
		2	20.00	6.00		240		
					Total	**1318**	252.00	P.Sft	332,136
11	P/F Extruded suspended canopy of M.S pipe frame 4"x2" 16 SWG, 2"x1" M.S pipe with fiber Sheet with Aluminum composit panel i/c hanger rods with tie pack bolts i/c carriage charges and erection in position complete in all respect & as approved by the Engineer Incharge.							
		1	12.00	12.00		144		
		1	23.00	11.00		253		
					Total	**397**	2122.63	P.Sft	842,683
12	Providing and fixing all types of partly fixed and partly openable glazed anodised bronze colour aluminium doors, using delux section of M/s Al-Cop or Pakistan Cables, having chowkat frame of size 40 x 100 mm (1½" x 4") and leaf frame of 60x40mm (2½"x1½") wide sections including the cost of ¼" (5 mm) thick imported tinted glass with aluminium triangular gola and rubber gasket to support the glass and leaf edging, using approved standard fittings, locks, 3" (75 mm) wide long handles etc., and hardware any required as approved by the engineer in-charge. 2 mm thick							
		5	5.000		7	175		
		3	3.000		7	63		
					Total	**238**	586.45	P.Sft	139,575
13	Providing and fitting all types of glazed aluminium windows of anodised bronze colour partly fixed and partly sliding using delux sections of approved manufacturer having frame size of 100 x 20 mm (4"x¾") and leaf frame sections of 50 x 20 mm (2"x¾"), all of 1.6mm thickness including 5 mm thick imported tinted glass with rubber gasket using approved standard latches, hardware etc., as approved by the Engineer in-charge.							
		1	25.000		10	250		
		2	17.000		10	340		
					Total	**590**	498.50	P.Rft	294,115
14	Preparing surface & Distempring on old surface two coat i/c scraping complete in all respect.							
	ceiling of ground floor Waiting	1	22.250	13.500		300		
	Minnor opration	1	22.250	15.375		342		
	Sterlization / scrab bath	1	22.250	11.000		245		
	dressing	1	22.250	10.500		234		
	passege	1	22.250	6.250		139		
	W.B / Bath	2	6.500	7.500		98		
	W.M.O	1	15.000	15.625		234		
	I.H.V	1	15.500	15.625		242		

passege	1	59.875	15.625		936
Vaccination	1	8.750	13.500		118
Medical Store	1	12.500	13.500		169
Pathologist	1	11.000	13.500		149
Lab	1	21.625	19.000		411
Emergency	1	21.000	45.250		950
W.C	2	3.625	5.000		36
Toilets	1	7.625	12.875		98
Medican Store	1	7.625	9.000		69
Nursing station	1	7.625	16.125		123
UPS control room	1	8.500	10.250		87
Blood bank	1	20.000	10.250		205
M.R.I	1	28.875	23.625		682
M.O	1	11.000	11.500		127
Waiting	1	12.500	11.500		144
Powd	1	4.625	11.500		53
	1	4.625	23.625		109
	1	4.625	10.250		47
Corridor	1	57.625	8.000		461
Homeopathice	1	15.000	10.250		154
Hakeem	1	14.000	10.250		144
X-Ray TEC.	1	8.000	12.000		96
Dark room	1	11.625	6.000		70
store	1	9.000	6.000		54
X-Ray	1	21.000	14.500		305
E.C.G	1	10.625	13.500		143
Ultrasound	1	10.000	13.500		135
Waiting	1	8.875	24.500		217
	1	17.625	22.750		401
Toilets	2	12.000	18.125		435
Hadic	2	12.000	5.000		120
Stair	1	24.000	10.000		240
Duct	1	4.000	10.000		40
Electric	1	15.500	7.250		112
M.O	1	14.000	12.750		179
	1	14.000	13.750		193
Consultant	4	14.000	11.500		644
Toilets	1	14.000	12.625		177
Stair loby	1	23.500	10.000		235
Consultant	1	15.000	12.250		184
M.O	2	15.000	10.500		315
Waiting	1	31.875	22.875		729
Gallary	1	16.750	35.875		601
Dental Surgeon	1	15.000	10.625		159
Dispensory	1	18.000	15.625		281
	1	10.250	8.250		85
Gallary	1	16.750	27.750		465
Veranda	1	10.000	67.000		670
	1	10.000	74.750		748
Enterance Deck	1	20.000	74.000		1480
Porch	1	18.000	35.500		639
Hall	1	47.000	49.000		2303
Walls of ground floor Waiting	2	22.25+13.5		11.500	822
Minnor opration	2	22.25+15.375		11.500	865
Sterlization / scrab bath	2	22.25+11		11.500	765
dressing	2	22.25+10.5		11.500	753
passege	2	22.25+6.25		11.500	656
W.B / Bath	4	6.5+7.5		11.500	644

W.M.O	2	15+15.625	11.500	704
I.H.V	2	15.5+15.625	11.500	716
passege	2	59.875+15.625	11.500	1737
Vaccination	2	8.75+13.5	11.500	512
Medical Store	2	12.5+13.5	11.500	598
Pathologist	2	11+13.5	11.500	564
Lab	2	21.625+19	11.500	934
Emergency	2	21+45.25	11.500	1524
W.C	4	3.625+5	11.500	397
Toilets	2	7.625+12.875	11.500	472
Medican Store	2	7.625+9	11.500	382
Nursing station	2	7.625+16.125	11.500	546
UPS control room	2	8.5+10.25	11.500	431
Blood bank	2	20+10.25	11.500	696
M.R.I	2	28.875+23.625	11.500	1208
M.O	2	11+11.5	11.500	518
Waiting	2	12.5+11.5	11.500	552
Powd	2	4.625+11.5	11.500	371
	2	4.625+23.625	11.500	687
	2	4.625+10.25	11.500	342
Corridor	2	57.625+8	11.500	1509
Homeopathice	2	15+10.25	11.500	581
Hakeem	2	14+10.25	11.500	558
X-Ray TEC.	2	8+12	11.500	460
Dark room	2	11.625+6	11.500	405
store	2	9+6	11.500	345
X-Ray	2	21+14.5	11.500	811
E.C.G	2	10.625+13.5	11.500	555
Ultrasound	2	10+13.5	11.500	541
Waiting	2	8.875+24.5	11.500	768
	2	17.625+22.75	11.500	929
Toilets	4	12+18.125	11.500	1386
Hadic	4	12+5	11.500	782
Stair	2	24+10	11.500	782
Duct	2	4+10	11.500	322
Electric	2	15.5+7.25	11.500	523
M.O	2	14+12.75	11.500	615
	2	14+13.75	11.500	638
Consultant	8	14+11.5	11.500	2346
Toilets	2	14+12.625	11.500	612
Stair loby	2	23.5+10	11.500	771
Consultant	2	15+12.25	11.500	627
M.O	4	15+10.5	11.500	1173
Waiting	2	31.875+22.875	11.500	1259
Gallary	2	16.75+35.875	11.500	1210
Dental Surgeon	2	15+10.625	11.500	589
Dispensory	2	18+15.625	11.500	773
	2	10.25+8.25	11.500	426
Gallary	2	16.75+27.75	11.500	1024
Veranda	2	10+67	11.500	1771
	2	10+74.75	11.500	1949
Enterance Deck	2	20+74	11.500	2162
Porch	2	18+35.5	11.500	1231
Hall	2	47+49	11.500	2208
			Total A	**70595**
First floor same Qty of above			**Total B**	**70595**
2nd Floor ceiling Angiography	1	22.250 21.000		467
Technical Room	2	22.250 11.000		490

Control room	1	10.000	14.000		140
bath	1	15.000	7.000		105
Nursing	1	13.500	9.375		127
C.D store	1	13.500	12.500		169
Lobby	1	13.500	9.750		132
Gallary	1	10.000	23.000		230
DR room	2	13.125	11.500		302
Staff room	1	14.250	11.500		164
	1	7.000	11.500		81
store	1	7.000	11.500		81
corridor	1	86.250	10.000		863
male ward	1	69.750	23.500		1639
W.C / Store	2	7.500	23.500		353
Gallary	1	6.000	47.250		284
Kitchen	1	10.000	10.000		100
W.C	1	13.500	10.000		135
passage	1	24.500	5.000		123
ramp	1	54.500	24.500		1335
stair	1	24.500	10.000		245
Electric	1	15.500	7.250		112
DR room	1	14.125	8.750		124
Store	2	7.000	5.125		72
nursing	1	10.000	15.000		150
P.Room	4	22.750	11.125		1012
bath	1	10.000	5.500		55
Pediatrician	1	45.000	22.250		1001
I.C.U	1	24.250	17.000		412
passage	1	10.000	47.500		475
Hall	1	55.750	46.000		2565
2nd Floor Wall Angiography	2	22.250	21.000	11.500	995
Technical Room	4	22.250	11.000	11.500	1530
Control room	2	10.000	14.000	11.500	552
bath	2	15.000	7.000	11.500	506
Nursing	2	13.500	9.375	11.500	526
C.D store	2	13.500	12.500	11.500	598
Lobby	2	13.500	9.750	11.500	535
Gallary	2	10.000	23.000	11.500	759
DR room	4	13.125	11.500	11.500	1133
Staff room	2	14.250	11.500	11.500	592
	2	7.000	11.500	11.500	426
store	2	7.000	11.500	11.500	426
corridor	2	86.250	10.000	11.500	2214
male ward	2	69.750	23.500	11.500	2145
W.C / Store	4	7.500	23.500	11.500	1426
Gallary	2	6.000	47.250	11.500	1225
Kitchen	2	10.000	10.000	11.500	460
W.C	2	13.500	10.000	11.500	541
passage	2	24.500	5.000	11.500	679
ramp	2	54.500	24.500	11.500	1817
stair	2	24.500	10.000	11.500	794
Electric	2	15.500	7.250	11.500	523
DR room	2	14.125	8.750	11.500	526
Store	4	7.000	5.125	11.500	558
nursing	2	10.000	15.000	11.500	575
P.Room	8	22.750	11.125	11.500	3117
bath	2	10.000	5.500	11.500	357
Pediatrician	2	45.000	22.250	11.500	1547
I.C.U	2	24.250	17.000	11.500	949

	passage	2	10.000	47.500	11.500	1323		
	Hall	2	55.750	46.000	11.500	2340		
					Total C	**45227**		
D/D Ground Floor	D1	8	6.000		7.000	336		
	D2	4	5.000		7.000	140		
	D3	50	3.500		7.000	1225		
	D4	32	3.000		7.000	672		
	D5	28	2.500		7.000	490		
	W1	30	9.250		5.750	1596		
	W1a	12	9.250		4.000	444		
	W2	4	6.000		4.000	96		
	W4	12	4.000		4.000	192		
	W5	6	3.000		2.000	36		
	W6	2	2.000		4.000	16		
	CW1	12	5.500		1.750	116		
	DW1	4	14.000		9.000	504		
	DW2	4	13.000		7.000	364		
	DW3	2	7.000		7.000	98		
First Floor	D1	2	6.000		7.000	84		
	D2	18	5.000		7.000	630		
	D2a	12	5.000		7.000	420		
	D3	54	3.500		7.000	1323		
	D4	20	3.000		7.000	420		
	D5	36	2.500		7.000	630		
	W1	38	9.000		8.250	2822		
	W2	1	48.000		4.000	192		
	W4	8	6.000		6.000	288		
	W5	11	2.500		4.000	110		
	W6	2	1.750		4.000	14		
	W8	6	8.000		6.000	288		
	W9	2	7.500		6.000	90		
	W10	6	4.000		6.000	144		
	W11	4	6.000		5.500	132		
	DW1	2	9.250		7.000	130		
	DW2	4	9.000		7.000	252		
	CW1	4	5.500		1.750	39		
2nd Floor	D1	10	6.000		7.000	420		
	D2	4	5.000		7.000	140		
	D3	22	3.500		7.000	539		
	D4	16	3.000		7.000	336		
	D5	36	2.500		7.000	630		
	W1	1	48.000		4.000	192		
	W2	17	9.000		8.250	1262		
		8	9.000		8.250	594		
	W2a	5	9.000		4.000	180		
	W3	4	5.000		4.000	80		
	W4	2	4.000		4.000	32		
	W5	1	3.000		2.000	6		
	W5a	4	1.750		4.000	28		
	W6	2	1.750		2.000	7		
	CW1	1	5.500		1.750	10		
	DW1	2	10.000		7.000	140		
	DW2	1	9.000		11.250	101		
					Total	**19028**		
	A+B+C-D				**Net**	**167390**	1008.40	%Sft 1,687,959

15	Preparing surface lacqure polishing on old wooden floor, windows, doors with best quality material i/c rubbing properly and preparing surface complete as approved and directed by the Engineer Incharge.							
	Groundf floor D1	8	6.000	7.000	336			
	D2	4	5.000	7.000	140			
	D3	50	3.500	7.000	1225			
	D4	32	3.000	7.000	672			
	D5	28	2.500	7.000	490			
	First Floor D1	2	6.000	7.000	84			
	D2	18	5.000	7.000	630			
	D2a	12	5.000	7.000	420			
	D3	54	3.500	7.000	1323			
	D4	20	3.000	7.000	420			
	D5	36	2.500	7.000	630			
	2nd Flor D1	10	6.000	7.000	420			
	D2	4	5.000	7.000	140			
	D3	22	3.500	7.000	539			
	D4	16	3.000	7.000	336			
	D5	36	2.500	7.000	630			
				Total	**8435**	80.00	P.Sft	674,800
16	P/L STONE TILE "MASTER OR EQ" WITH DRY / WET / VENIED APPLICATION, 8"X24" SIZE LAID OVER A BED OF 3/4" THICK C/S MORTAR 1:2, I/C FILLING JOINTS WITH CEMENT MIXED WITH MATCHING PIGMENT COMPLETE IN ALL RESPECT AS APPROVED BY THE ENGINEER INCHARGE (DADO)							
	R/S	1	196.50	53.00	10415			
	L/S	1	81.00	53.00	4293			
	B/S	1	165.63	53.00	8778			
	F/S	1	232.75	33.00	7681			
		1	92.50	20.00	1850			
	top sky light	4	31.00	11.25	1395			
	B/Wall	1	259.00	8.00	2072			
		1	141.00	8.00	1128			
		1	136.00	8.00	1088			
		1	110.00	8.00	880			
		1	23.00	8.00	184			
		1	40.00	12.00	480			
				Total	**40243**			
	D/D Ground Floor W1	18	9.250	5.750	957			
	W5	3	3.000	2.000	18			
	W1a	5	9.250	4.000	185			
	CW1	4	5.500	1.750	39			
	Veranda Opening	11	9.17	7.50	757			
	First Floor W1	38	9.000	8.250	2822			
	W2	1	48.000	4.000	192			
	W6	2	1.750	4.000	14			
	2nd Floor W2	17	9.000	8.250	1262			
	W2a	5	9.000	4.000	180			
	CW1	1	5.500	1.750	10			
	W5	1	3.000	2.000	6			
	W6	2	1.750	2.000	7			

	W1	1	48.000		4.000	192		
	DW2	1	9.000		11.250	101		
					Total	6741		
					Net	33502	241.00 P.Sft	8,074,066
17	S/E of Aluminum composit panel Complete in all respect as approved by the Engineer incharge.							
		1	36.00		5.00	180		
		2	24.00		5.00	240		
		1	815.00		2.75	2241		
		1	81.00		2.50	203		
		2	81.00	5.00		810		
	columns	50	1.000	0.750	53.000	1988		
		50	1.000	0.750	33.000	1238		
	beam	2	768.000	1.000	0.750	1152		
	supports for louvers							
	D/D Ground Floor W1	72	11.250	1.000		810		
		72	7.750	1.000		558		
	W5	12	5.000	1.000		60		
		12	4.000	1.000		48		
	W1a	20	11.250	1.000		225		
		20	6.000	1.000		120		
	CW1	16	7.500	1.000		120		
		16	3.750	1.000		60		
	First Floor W1	152	11.000	1.000		1672		
		152	10.250	1.000		1558		
	W2	4	51.000	1.000		204		
		4	6.000	1.000		24		
	W6	8	3.750	1.000		30		
		8	6.000	1.000		48		
	2nd Floor W2	68	11.000	1.000		748		
		68	10.250	1.000		697		
	W2a	20	11.000	1.000		220		
		20	6.000	1.000		120		
	CW1	4	7.500	1.000		30		
		4	3.750	1.000		15		
	W5	4	5.000	1.000		20		
		4	4.000	1.000		16		
	W6	8	3.750	1.000		30		
		8	4.000	1.000		32		
	W1	4	50.000	1.000		200		
		4	6.000	1.000		24		
	DW2	4	11.000	1.000		44		
		4	13.250	1.000		53		
					Total	15837	875.00 P.Sft	13,857,156
18	S/E of sika filler chemical material in construction joints horizontal./ vertical Complete in all respect as approved by the Engineer incharge.							
	horizontal	1	136.00			136		
	Vertical	4	33.00			132		
					Total	268	87.00 P.Rft	23,316
19	P/F 1/8" thick 3" wide aluminum strip on horizontal and vertical expension joints in wall columns ceilings etc with mastic strip							

	horizontal	2	136.00		272			
	Vertical	8	.33.00		264			
				Total	536	98.90	P.Rft	53,010
20	P/F Aluminum frame for fly proofing consisting of aluminum section for frame 1-3/4" X 1/2" "APRO" & aluminum wide cloth of mesh 18X16 (imported), complete with roller, ravels, gasket, screws complete in all respect as approved by the Engineer incharge.							
	W1	5	9.25	5.75	266			
	W2	6	6.00	4.00	144			
				Total	410	230.00	P.Sft	94,286
21	P/F Louvers of M.S pipe frame 3"x1-1/2" 16 SWG, i/c carriage charges and erection in position complete in all respect & as approved by the Engineer Incharge.							
	D/D Ground Floor W1	18	11.250	3.000	608			
	W5	3	5.000	2.000	30			
	W1a	5	11.250	2.000	113			
	First Floor W1	38	51.000	3.000	5814			
	W2	1	3.750	2.000	8			
	W6	2	11.000	2.000	44			
	2nd Floor W2	17	11.000	4.000	748			
	W2a	5	7.500	2.000	75			
	W1	1	11.000	2.000	22			
	DW2	1	11.000	6.000	66			
				Total	7527	296	P.Sft	2,225,812
							Total	36,442,177
							Say	36,442,000

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

P/L PREPOLISHED PORCELAIN TILE "MASTER OR EQ" WITH DRY / WET / VENIED APPLICATION, DWV SERIES (LIGHT COLOR) CLASS SB, 24"X24" SIZE LAID OVER A BED OF 3/4" THICK C/S MORTAR 1:2, I/C FILLING JOINTS WITH WHITE CEMENT MIXED WITH MATCHING PIGMENT COMPLETE IN ALL RESPECT AS APPROVED BY THE ENGINEER INCHARGE (FOR FLOOR)

1st July 2021 to 31st December 2021
Unit Rate P.Sft
For Analysis Purpose (100.00 Sft)

S.No	Description	Nos	Length	Breadth	Depth	Qty	Rate	Unit	Amount
	Material								
1	Prepolished Porcelain tile with dry / wet / venied application, DWW series (light colour) class SB, 24"x24" size i/c wastage. **(P - 53) (CA-(4)-3) 1595/10.40= 148.23**					105	148.23	P.Sft	15,564
2	White Cement **(06.009)**					0.10	1,100	P.Bag	110
3	Grey Cement **(06.008)**					2.16	600.00	P.Bag	1,296
4	Pigment **(10.015)**					0.45	82.00	P.Kg	37
5	Sand **(06.007)**					5.20	15.00	P.Cft	78
	Total								**17,085**
	Contractor's profit and over head charges 20%								3,417
	Total								**20,502**
	Labour								
1	Mason **(LB-040)**					2	950.00	P.Day	1,900
2	Un skilled Coolies **(LB-015)**					5	725.00	P.Day	3,625
3	Bahishti **(LB-017)**					0.50	750.00	P.Day	375
	Total								**5,900**
	Sundries 10%								590
	Total								**6,490**
	Contractor's profit and over head charges 20%								1,298
	Total								7,788
	Item Rate								
	Labor Rate for P.Sft								
	Composite Rate per % P.sft								28,290
	Composite Rate per P.Sft								282.90
							Say Rs.		280

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

P/L PREPOLISHED PORCELAIN TILE "MASTER OR EQ" WITH DRY / WET / VENIED APPLICATION, DWV SERIES (LIGHT COLOR) CLASS SB, 24"X24" SIZE LAID OVER A BED OF 3/4" THICK C/S MORTAR 1:2, I/C FILLING JOINTS WITH WHITE CEMENT MIXED WITH MATCHING PIGMENT COMPLETE IN ALL RESPECT AS APPROVED BY THE ENGINEER INCHARGE (DADO)

1st July 2021 to 31st December 2021
Unit Rate P.Sft
For Analysis Purpose (100.00 Sft)

S.No.	Description	Nos	Length	Breadth	Depth	Qty	Rate	Unit	Amount
	Material								
1	Prepolished Porcelain tile with dry / wet / venied application, DWW series (light colour) class SB, 24"x24" size i/c wastage. **(P - 53) (CA-(4)-3) 1595/10.40= 148.23**					105	148.23	P.Sft	15,564
2	White Cement **(06.009)**					0.10	1,100	P.Bag	110
3	Grey Cement **(06.008)**					2.16	600.00	P.Bag	1,296
4	Pigment **(10.015)**					0.45	82.00	P.Kg	37
5	Sand **(06.007)**					5.20	15.00	P.Cft	78
	Total								**17,085**
	Contractor's profit and over head charges 20%								3,417
	Total								**20,502**
	Labour								
1	Mason **(LB-040)**					2	950.00	P.Day	1,900
2	Un skilled Coolies **(LB-015)**					5	725.00	P.Day	3,625
3	Bahishti **(LB-017)**					0.50	750.00	P.Day	375
	Total								**5,900**
	Sundries 10%								590
	Total								**6,490**
	Contractor's profit and over head charges 20%								1,298
	Total								7,788
	Item Rate								
	Labor Rate for P.Sft								
	Composite Rate per % P.sft								28,290
	Composite Rate per P.Sft								282.90
							Say Rs.		**283**

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

P/L NON-SKIDDING CERAMIC TILE MADE OF APPROVED MANUFACTURER COLOR LIGHT SIZE 12"x12" TILE LAID IN WHITE CEMENT OVER A BED OF 3/4" THICK C/S MORTAR 1:2 I/C FILLING JOINTS WITH MATCHING PIGMENT COMPLETE IN ALL RESPECT AS APPROVED BY THE ENGINEER INCHARGE (FOR FLOOR)

1st July 2021 to 31st December 2021
Unit Rate P.Sft
For Analysis Purpose (100.00 Sft)

S.No	Description	Nos	Length	Breadth	Depth	Qty	Rate	Unit	Amount
	Material								
1	Light colour glazed tiles 12"x12" i/c 10% wastage.					105	67.66	P.Sft	7,104
2	White Cement **(06.009)**					0.10	1,100	P.Bag	110
3	Grey Cement **(06.008)**					2.16	600.00	P.Bag	1,296
4	Pigment **(10.015)**					0.45	82.00	P.Kg	37
5	Sand **(06.007)**					5.20	1,300	P.Cft	6,760
	Total								**15,307**
	Contractor's profit and over head charges 20%								3,061
	Total								**18,368**
	Labour								
1	Mason **(LB-040)**					2	950.00	P.Day	1,900
2	Un skilled Coolies **(LB-015)**					4	725.00	P.Day	2,900
3	Bahishti **(LB-017)**					0.50	750.00	P.Day	375
	Total								**5,175**
	Sundries 10%								518
	Total								**5,693**
	Contractor's profit and over head charges 20%								1,139
	Total								**6,831**
	Item Rate								
	Labor Rate for P.Sft								
	Composite Rate per % P.sft								25,200
	Composite Rate per P.Sft								252.00
							Say Rs.		**252**

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

ANALYSIS OF RATE

Preparing surface lacqure polishing on old wooden floor, windows, doors with best quality material i/c rubbing properly and preparing surface complete as approved and directed by the Engineer Incharge.

10x10=100 Sft

Based on MRS BI Annual July 2021 to December 2021 (District Chakwal)

S.No.	Description	Nos.	Length	Breadth	Depth	Qty	Rate	Unit	Amount
(A)	**COST OF MATERIAL**								
i	Cost of polish best quality	100				100			
	Total					**100**	**41**	**P.Sft**	**4100**
	Add 10% sundries								**410**
	Total								**4510**
(B)	**COST OF LABOUR**	100				100	22	P.Sft.	2200
	Total								**6710**
	Add 20% Contractor Profit								1342
	Total								**8052**
	Rate in P.Rft		8052	/	100				**80.52**
	Say Rs. 80/- P.Rft								

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

P/L STONE TILE "MASTER OR EQ" WITH DRY / WET / VENIED APPLICATION, 8"X24" SIZE LAID OVER A BED OF 3/4" THICK C/S MORTAR 1:2, I/C FILLING JOINTS WITH CEMENT MIXED WITH MATCHING PIGMENT COMPLETE IN ALL RESPECT AS APPROVED BY THE ENGINEER INCHARGE (DADO)

1st July 2021 to 31st December 2021
Unit Rate P.Sft
For Analysis Purpose (100.00 Sft)

S.No	Description	Nos	Length	Breadth	Depth	Qty	Rate	Unit	Amount
	Material								
1	Stone tile "Master or Eq"					105	116.00	P.Sft	12,180
2	White Cement **(06.009)**					0.10	1,100	P.Bag	110
3	Grey Cement **(06.008)**					2.16	600.00	P.Bag	1,296
4	Pigment **(10.015)**					0.45	82.00	P.Kg	37
5	Sand **(06.007)**					5.20	15.00	P.Cft	78
	Total								**13,701**
	Contractor's profit and over head charges 20%								2,740
	Total								**16,441**
	Labour								
1	Mason **(LB-040)**					3	950.00	P.Day	2,850
2	Un skilled Coolies **(LB-015)**					2	725.00	P.Day	1,450
3	Bahishti **(LB-017)**					2.00	750.00	P.Day	1,500
	Total								**5,800**
	Sundries 10%								580
	Total								**6,380**
	Contractor's profit and over head charges 20%								1,276
	Total								**7,656**
	Item Rate								
	Labor Rate for P.Sft								
	Composite Rate per % P.sft								24,097
	Composite Rate per P.Sft								240.97
							Say Rs.		**241**

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

ANAYLSIS OF RATE

P/L ALUMINUM COMPOSITE PANNEL 5MM THICK FIXED WITH WALL FOR HEAT PROOFING UPTO PARAPIT HEIGHT COVERING OVER MASHES OF M.S ANGLE 1-1/2"X1-1/2"X3/16" USING RIVETS, FIXED OVER ALUMINUM CHANNEL ACP 3 SCREWED OVER WALL DIRECTLY PLACING PANNELS IN STANDARD GROVE BETWEEN DIFFERENT PIECES OF EACH ALUMINUM COMPOSITE PANNEL OF APPROVED COLURED & DESIGN AS APPROVED & DIRECTED BY THE ENGINEER INCHARGE.

Taken Size 10x10 = 100 Sft
MRS 1ST July 2021 to 31st Dec 2021

Detail		Unit rate per 100 Sft				
		Qty		Rate	Unit	Amount
"A"	**MATERIAL**					
i	Aluminum composite pannel / Aluminum clading sheet 1x10x10 = 100 Sft Added 10% wastage = 10 Sft Total = 110 Sft 110 Sft x5mm / 25.4mmx12 = 1.81 Cft (. 1.81 Cft)m3 / 3.28x3.28x3.28 x 2710 Kg / m3 =140 Kg **input rate 12.010**	140	Kg	300	P.Kg	42000
ii	M.S Angle iron from 1-1/2"x1-1/2"x3/16" 2x6x10 =.120 Rft Added 5% wastage = 6 Rft Total = 126 Rft 126 Rft @0.812 Kg/ P.Rft = 102.31 Kg **input rate 12.119**	102.31	Kg	140.27	P.Kg	14351
iii	Rivets **input rate 25.011**	36	Nos	26	Each	936
iv	Aluminum Chaneel Acp 3 having dimensions 2"x3/4"x3/8" (Market rate)	120	Rft	125	P.Rft	15000
v	Screws 4" long **input rate 24.261**	0.5	Dozen	40	P.Dozen	20
vi	Silicon Standared size tube (Market rate)	1	Nos	350	Each	350
vii	Carriage for total material				L.S	150
					Total	**72807**
"B"	**LABOUR**					
i	Black smith LB-.028 (Input Rate)	0.5	Nos	950	P.Day	475
ii	Skilled cooly LB-.024 (Input Rate)	0.5	Nos	950	P.Day	475
iii	Carpainter LB-.029 (Input Rate)	0.25	No	950	P.Day	237.5
iv	Skilled cooly LB-.024 (Input Rate)	0.25	No	950	P.Day	237.5
					Total	**1425**
	Add 10% Sundries					142.5
					Total	**1568**
					Total A+B	**74375**
	Add 20% Contractor Profit and over head					14875
					G.Total	**89249**
	Rate Per Sft	95414 / 100	=	892.49428		
					Say	**875**

Sub Divisional Officer,
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

SIE

ANALYSIS OF RATE

S/E of sika filler chemical material in construction joints horizental / vertical Complete in all respect as approved by the Engineer incharge.

Unit of Rate 100 Rft

Based on MRS BI Annual July 2021 to December 2021 (District Chakwal)

S.No.	Description	Nos.	Length	Breadth	Depth	Qty	Rate	Unit	Amount
(A)	**COST OF MATERIAL**								
i	Sika filler chemical material	100				100			
	Total					**100**	**60**	**P.Rft**	**6000**
	Add 10% sundries								**600**
	Total								**6600**
(B)	**COST OF LABOUR**							L.S	700
	Total								**7300**
	Add 20% Contractor Profit								1460
	Total								**8760**
	Rate in P.Rft		8760	/	100				**87.60**
	Say Rs. 87/- P.Rft								

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

ANALYSIS OF RATE

P/F ALUMINUM FRAME FOR FLY PROOFING CONSISTING OF ALUMINUM SECTION FOR FRAME 1-3/4" X 1/2" "APRO" & ALUMINUM WIDE CLOTH OF MESH 18X16 (IMPROVED), COMPLETE WITH ROLLER, RAVELS, GASKET, SCREWS, COMPLETE IN ALL RESPECT AS APPROVED & DIRECTED BY THE ENGINEER INCHARGE.

MRS 1st Bi-Annual 1st July 2021 to 31st december 2021

S No.	Detail	Unit Rate P.Sft For Analysis purpose (100.00 Sft)				
		Quantity		Rate per unit (Rs)		Amount
1	**Material**					
a	Aluminum wire guaze imported i/c 5% wastage.	8.4	Sft	9.00	P.Sft	76
b	Aluminum Frame 1--1/2"x1/2" 2 x 4 = 8 2 x 2 = 4 Total = 12 Rft Wastage = 0.6 Total = 12.6 Rft	12.6	Rft	25	P.Rft	315
c	Aluminum rooler wheel	2	No	10	Each	20
d	Rubber, gasket i/c 5% wastage.	12.6	Rft	10	P.Rft	126
e	Corner	2	No	6	Each	12
	Total					**549**
	Add 20% Contractor's profit					110
	Total				**(A)**	**658**
2	**Labour**					
a	Aluminum Tehnician **(LB 075)**	0.5	Nos	950	P.Day	475
b	Cooly Skilled **(LB-024)**	0.5	Nos	950	P.Day	475
	Total					**950**
	Add 10% Sundries charges					95
	Total				**(B)**	**1045**
	Contractor's profit and over head charges 20%					209
	Total					**1254**
	Total of A + B					**1912**
	Rate per Sft.	**1658/8**				**239.04**
	Say Rs.					**230**

Sub Divisional Officer
Buildings Sub Division
Talagang

SIE

Executive Engineer
Buildings Division
Chakwal

ANALYSIS OF RATE

P/F Louvers of M.S pipe frame 3"x1-1/2" 16 SWG, i/c carriage charges and erection in position complete in all respect & as approved by the Engineer Incharge.

Take an area 10'x10' having 100 Sft
Unit Rate P.Sft

Sr. No	Detail	Qty	Unit	Rate	Amount
A	**MATERIAL**				
1	Cost of M.S hallow pipe size 3"x1-1/2", 16 SWG				
	Top frame Vertical 2x10	20			
	Horizental C/C 22 x10	220			
	Total	**240**			
	Add: 5% Wastage	12			
	Total	**252**	P.Rft	36	9072
2	Painting Guard bars Gates of iron bar				
	2x10x10	**200**	%Sft	1303.3	2607
3	Cost of blind rivets screws etc.		L.S		1000
4	Cost of.welding rods	2	P.Pkt	700	1400
5	Carriage charges		L.S		1000.00
6	Labour charges				
	1x10x10	100	P.Sft	100	10000
				Total	**25079**
	Add: 20% Contractor Profit on all iteme except item No. 2 on Rs. 22472/-				4494
				Total	**29573**
	Rate.P.Sft	29573	\	100	296
				Say Rs. P.Sft	**296**

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

ROUGH COST ESTIMATE FOR THE WORK REVAMPING OF CITY HOSPITAL TALGANG DISTRICT CHAKWAL.

INTERNAL E.I WORK

Sr. No	Description	Qty	Rate	Unit	Amount
1	S/E of PVC insulated PVC sheathed 4 core 660/1100 volt grade cable armoured with G.I wire 16 SWG 19/2.11mm (19/0.083)	110	4675.45	P.Mtr	514300
2	S/E of Copper conductor cables for service connection in prelaid pipes PVC insulated PVC sheathed twin core 7/1.112 mm (7/0.044)	1350	237.90	P.Mtr	321165
ii	do -- 7/0.029 single core	1350	60.15	P.Mtr	81203
ii	do -- 3/0.029 single core	1350	46.15	P.Mtr	62303
3	P/F LED 24 Watts (9"x9") of approved quality and make complete in all respect as approved by Engineer Incharge.	150	2250	Each	337500
4	Provision of Street Lights	10	54000	Each	540000
5	Provision of Exhaust Fan	20	4000	Each	80000
6	S/E of PVC duckt pati for open wireing 25mm	1000	21	P.Rft	21000
7	S/E of single pole circuit bracker japan 6A to 20A	100	540	Each	54000
				Total	**2011470**
				Say	**2011000**

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

ANALYSIS OF RATE

Supply / Errection of Fancy LED pannel light 9"x9" i.c LED Light & Driver 24W Philips / alpha Led ultra Slim or Equilvalent i.c Fixing in false ceiling and electric connection complete as approved and directed by the Engineer Incharge.

				Unit Rate Each		
S.No.	**Description**	**Quantity**		**Rate per unit (Rs)**		**Amount**
	Material.					
1	Cost of LED pannel light 9"x9" i.c LED Light & Driver 24W (Philips / alpha Led ultra Slim)	1	No.	1600	Each	1600
2	Fixing charges	1	Job	200	P.Job	200
3	Carriage charges					100
				Total		**1900**
	20% contractor's					380
				Total Rs		**2280**
				Say Rs		**2250**

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

ANALYSIS OF RATE

Supply and Installation of Street light single arm with 8 meter high octagonal pole (Factory made unit of Jamal Pipes) hot dip galvanized base 150mm and top dia 60mm thickness 350mm with arm length 500mm and base plate of 300x300x14mm thick with philips lamp Hrc 125 watt complete in all respect as approved and directed by the Engineer Incharge.

Unit of rate= Each

Based on MRS Bi annual Ist July 2021 to 31st december 2021 (District Chakwal)

S.No	Description	Nos	Length	Breadth	Depth	Qty	Rate	Unit	Amount
A	**Material**								
1	Cost of Street light pole comprising of M.S. sheet in octagonal shape 8 meter high single arm hot diped galvanized complete with philips lamp Hrc 125 watt Light, shade. etc	1				1			
	Total					**1**	**33000**	**Each**	33000
2	Cost of MS Bed Plate size 1.5'x1.5'x1/4"								
		1				1			
	1 No.@ 10.4 Kg/Each					**10.4**	**20949.05**	**%Kg**	2179
3	Excavation for pole								
		1	2	2	3	12			
	Total					**12**	**8,078.40**	**%0Cft**	97
4	Providing and laying PCC ratio 1:2:4								
		1	2	2	3	12			
	Total					**12**	**24538.8**	**%Cft**	2945
5	Cost of Electric Wire double core 7/.036"								
		1	10			10			
	Total					**10**	**171.25**	**P.Mtr**	1713
6	Cost of Automatic Circuit Breaker i/c Plastic Board complete								
			L.S						750
	Total								40683
	Add 20% contractor Profit on item No.1&6.								6750
	Total								47433
B	Fixing Charges		L.S						5500
	Total								5500
	Add 20% contractor Profit.								1100
	Total								6600
	Total A+B								54033
	Rate Each								54000

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

ANALYSIS OF RATE

S/E of 6A to 20A single pole circuit breaker (Legrand France, Terasaki Japan) Complete in all respect as approved by the Engineer incharge.

Unit of Rate Each

Based on MRS BI Annual July 2021 to December 2021 (District Chakwal)

S.No.	Description	Nos.	Length	Breadth	Depth	Qty	Rate	Unit	Amount
(A)	**COST OF MATERIAL**								
i	Single Pole Circuit Breaker 6A-20A ampere (Legrand France, Terasaki or equivalent)	1				1			
	Total DA 1(2)					**1**	**400**	**Each**	**400**
(B)	**COST OF LABOUR**							L.S	50
	Total								**450**
	Add 20% Contractor Profit								90
	Total								**540**
	Hence Rate Each								**540**
	Say Rs. 540/- Each								

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

Detailed Estimate for Revamping of boundary wall in City Hospital Talagang District Chakwal
(MRS July 2021 to december 2021)

S/No	Description	No	Measurements L ft.	B ft.	H ft.	Qty	Rate Rs.	Amount Rs.
1	Removing Cement Plaster							
		1	48.000		8	384		
		1	116.000		8	928		
		1	110.000		8	880		
		1	23.000		8	184		
		1	60.000		8	480		
		1	50.000		8	400		
					Total	3256	319.00 %Sft	10387
2	Cement plaster 1:4 floating coat of neet cement 1/32" thick **same qty of item No.1**					3256	3617.40 %Sft	117783
3	P/L STONE TILE "MASTER OR EQ" WITH DRY / WET / VENIED APPLICATION, 8"X24" SIZE LAID OVER A BED OF 3/4" THICK C/S MORTAR 1:2, I/C FILLING JOINTS WITH CEMENT MIXED WITH MATCHING PIGMENT COMPLETE IN ALL RESPECT AS APPROVED BY THE ENGINEER INCHARGE (DADO)							
	same qty of item No.1					3256		
	Pillar	2	12		10	240		
		2	9		10	180		
	F/S	1	38		6	228		
	Sides	2	20		6	240		
					Total	4144	241.00 P.Sft	998704
							Total	**1126873**
							Say	**1127000**

Sub Divisional Officer
Buildings Sub Division
Talagang

Executive Engineer
Buildings Division
Chakwal

ANALYSIS OF RATE

P/F Reverse Osmosis Drinking water Filtration Plant Capacity 500-600Ltr LPH with blending UF memboran complete as approved and directed by the Engineer Incharge.

				Unit Rate Each		
S.No.	**Description**	**Quantity**		**Rate per unit (Rs)**		**Amount**
	Material.					
1	P/F Reverse Osmosis Drinking water Filtration Plant Capacity 500-600Ltr LPH with blending UF memboran	1	No.	1074500	P.Job	1074500
	Total					**1074500**
	05% contractor's profit on Rs.850000/-					**42500**
	Total			**Total Rs**		**1117000**
				Say Rs		**1117000**

Sub Divisional Officer
Buildings Sub Division
Talagang

SIE

Executive Engineer
Buildings Division
Chakwal

DM Water Treatment System

Deals: All Kinds of Commercial & Industrial Reverse Osmosis RO Water Treatment System Plants & Drinking Ultra Water Filtration Plants, Repairing Services & Maintenance, All RO Spare Parts available and General Order Suppliers

Ref: No. 9210-21

Date: 23-07-2021

To,
Executive Engineer Buildings
Division Chakwal

Quotation

Subject: Reverse Osmosis Drinking Water Treatment Filtration Plant With Blending UF Membrane

Sr. No	Description	Unit Price	Quantity	GST 17%	Sub Amount
01	Reverse Osmosis Water Treatment Filtration Plant (Technical Specification is attached herewith)	850,000	01 Unit	144,500	994,500.00
02	Carriage Transport Charges	80,000	01 Unit	Nil	80,000.00

Total Amount: Rs. 1074,500.00/

Terms and Conditions:

1. Payments Terms: 50% Advance 50% After installation.
2. Delivery: Within 2~3 week after received confirmed order PO.
3. Installation: Will be free by the Company.
4. R O Plant Warranty: One Year Parts against any manufacturing defect.
5. R O Plant Services: One year R O Service Will be free by the Company.
6. PPM Schedule: Monthly Service Visit Will be between One Visit every month.

Customer's Responsibilities

- ✓ Inlet Water connection.
- ✓ Any civil work required.
- ✓ Effluent drains from water plant.
- ✓ Electric supply.
- ✓ Space & drain etc.

Yours Truly,

(Hayat khan)

Address: House # 2, St# 7, Main Road Ismail Town Harbansepura Lahore Cantt
Cell # 0333-4434103-0300-4607592 Email dmhayatkhan@gmail.com info@dmwater.net / www.dmwater.net

Scanned with CamScanner

DM Water
Purification System
Pure Water Healthy Life

Technical Specification

Reverse Osmosis Drinking Water Filtration Plant Capacity 500~600 LPH

Sr.#	Description	Quantity
01.	**R.O membranes:**	
	Quantity:	02 No
	Dimensions:	1016 x 99 (mm)
	Nominal Size:	4" x 40" (Known as 4040)
	Nominal Salt Rejection:	96-99.5%
	Type:	Ultra low pressure/extra low energy
	Material:	TFC, Polyamide, fiberglass wrapped
	Feed water acceptance:	Brackish water 15,00 -2,000 TDS
	Max. Operating Temperature:	40° C
	Manufacturer:	Vontron Technology from USA.
	Flow Rate:	500/ Liter/ LPH
02.	**Pressure Vessel Housings:**	
	Quantity:	02 No
	Size:	4" 40 – element, 4040
	Material:	FRP
	Pressure Rating:	300 Psi
	Origin:	KEDI-Imported UK.
03.	**Brand New High Pressure Pump:**	
	Quantity:	01 No
	Design flow rate:	2,000-Litre per hour
	Mad in Taiwan:	Hualien Pump Taiwan
	Power Requirement:	50 Hz Single Phase (220 VAC) 1.1 kw
	Model:	H V L 2-11 Vertical Multi Stage SS.316. 165 psi
	Max Pressure:	
04.	**Brand New Feed Water Pump With Pressure Kit:**	
	Quantity:	01 No.
	Material :	Stainless Steel 316.
	Mad in Taiwan:	Hualien Pump Taiwan
	Power Requirement:	50 Hz Single Phase (220 VAC) 1 Hp
	Model:	Centrifugal CRN 2,000 LPH/
	Max Pressure:	60/ 70 Psi.

DM Water
Purification System
Pure Water Healthy Life

Technical Specification

Reverse Osmosis Drinking Water Filtration Plant Capacity 500~600 LPH

Sr.#	Description	Quantity
05.	**Online TDS Meter:**	
	Quantity:	02 No.
	Type:	Range 2000 Micro s/cm
	Origin:	Digital Counting PPM
		Create Imported
06.	**Micron Filters System:**	
	Quantity:	03No.
	Origin:	Taiwan
	Size:	20" x 4" Slim PPF
	Cartridge:	1 Micron ~5 Micron
	Housing Material:	HDPE
07.	**Skid Structure:**	
	Quantity:	01 No
	Material:	Stainless Steel 201
	Size:	1 ¼ " x1 ¼ "
08.	**Product Water Storage Tank:**	
	Quantity:	01 No
	Capacity:	300 Gallon
	Material:	HDPE Food Grade
	Make:	Local Umar.Tuff
09.	**UV Sterilizer System:**	
	Quantity:	01 No
	Lamp Size:	36"
	Power:	40 Watt
	Lamp Life:	10,000 hours/ H/r Meter
	Material:	S.S 304/ 2.5" x 36"
	Make Lamp:	Philips / Poland.
	Flow Rate:	2,000 Lit/ Hr

DM Water
Purification System
Pure Water Healthy Life

Technical Specification
Reverse Osmosis Drinking Water Filtration Plant Capacity 500~600 LPH.

Sr.#	Description	Quantity
10.	**Pressure Gauges:**	
	Quantity:	06 No.
	Range:	0-15 -300 Psi 2 ½ SS 316 Liquid Filled
	Connections:	¼''' MPT 63 mm
	Origin:	Imported.
11.	**Flow Meters:**	
	Quantity:	02 No (1 x Product 1 x Rejection)
	Type:	Rota meter, Panel Mount 5 GPM
	Origin:	LZM/ Imported.
12.	**Automatic Inlet Shut Off Valve:**	
	Quantity:	01 NO
	Design Flow Rate	14 GPM
	Type:	Solenoid
	Material:	Brass
	Pressure Rating:	150 Psi
	Origin:	SNS.
13.	**High Pressure Control Valve:**	
	Quantity:	01 No.
	Design Flow Rate:	14 GPM
	Material:	Stainless Steel
	Pressure Rating:	300 Psi
	Size:	½"
	Origin:	Taiwan.
14.	**Sensor and Switches:**	
	Low Pressure Switch	
	Quantity:	03 No
	Pressure:	0 – 110 Psi, Adjustable
	Size":	¼'''
	Make:	Imported.

15. Multimedia Filter
Pre Water Treatment

Quantity:	01
Sand Vessel	13" x 54"
Vessel Material:	High Quality Pressure resistant fiber glass
Filling:	Multimedia Silica Sand Size 3.5mm
Operating Valve:	Imported 3 – way multi port. single
Valve size:	1"x1" in/out
Operation:	Manual.

Sand Filter
Unlike conventional filters which get plugged or have a high pressure drop early in the filtration cycle (Terminal pressure drop), in depth filters have five spate layers which trap large particles first and allow to pass smaller particles on the next layer. This process is repeated five times and the finest particles are trapped at the bottom. Higher flows are possible and the period between back washed is often 3 to 4 times longer than with conventional sand filters.

16. Activated Carbon Filter.

Quantity:	01 No
Vessel Size:	13 " x 54"
Vessel Material:	High Quality Pressure resistant Fiber Glass
Filling :	Germany High Grade activated carbon
Operating Valve:	Imported 3 – way multi port. single
Valve Size:	1"x1" in/out
Operation:	Manual.

Activated Carbon Filter.
Carbon Adsorption is the most efficient methods for water treatment because of its ability to improve water by removing, many disagreeable tastes and odors including objectionable chlorine. Activated carbon has the ability to remove or reduce numerous organic chemicals like pesticides, THM'S, TEC, PCB etc.
Activated Carbon is a micro Porous Carbon, it is obtained from various agents such as peat, moss, brown coal, hard coal, wood and coconuts shells. Activated Carbon Filter are very essential for pre treatment of water.

Technical Specification
Reverse Osmosis Drinking Water Filtration Plant Capacity 500~600 LPH

Sr.#	Description	Quantity

17. Water Softener:

Quantity:	01 No
Vessel Size:	13 " x 54"
Vessel Material:	High Quality Pressure resistant Fiber Glass
Filling:	High Grade strong Cation Resin
Operating Valve:	Imported 5 – way multi port, single
Valve Size:	1"x1" in/out
Operation:	Manual.

18. High Pressure Pipe and Fitting
Low Pressure Pipe and Fitting

Quantity:	1 Lot SH 80
Material:	Upvc High Grade
Size:	1" - ¾ " – ½ "

19. PDB Control Panel Single Phase.
Operating Full Automatic.

Quantity:	01

20. Product Filling Header:

Quantity:	01
Material:	Stainless Steel 316
Size:	3"x 6 Fit
Filling Point Handle Ball Valve:	½" 05 No

21. Brand New Re- Pressurize Booster Pump:

Quantity:	01 No.
Mad in UK :	New Pump Happy/ Imported.
Power Requirement:	220 AC 2800 RPM
Material:	Stainless Steel 304
Model:	4-50 Pressure 50 psi

DM Water
Purification System
Pure Water Healthy Life

Technical Specification

Reverse Osmosis Drinking Water Filtration Plant Capacity 500~600 LPH

Sr.#	Description	Quantity

22. UF Ultra filtration membrane

Dimensions:	1016 x 99 (mm)
Nominal Size:	4" x 40" (Known as 4040)
Type:	Ultra low pressure/extra low energy
Material:	TFC, Polyamide, fiberglass wrapped
Max. Operating Temperature:	40' C
Made in	UK
Flow Rate:	600 Lit/ H/r

23. Reverse Osmosis Drinking Water Filtration Plant Capacity 500~600 Liter LPH With Blending UF Membrane.

Values for drinking purpose Water TDS 165~250

Permeate Flow Rate;	8~ 12 LMP
Assembled	Local
Recovery	50%
Rejection	97%-98%
No of membranes	02
Size of membranes	4"x40"
Make membranes	Vontron Technology from USA.
Housing Material	FRP.

24. Terms and Conditions:

Delivery:	Within 3-4 Weeks after received confirmed order PO.
Payments Terms:	50% Advance 50% After installation.
Installation	Will be free charge by company.
Warranty:	One year Free Parts and Service.
Offer Validity:	90 Days from the date of offer.

Detailed Estimate / Anylsis for Renovation of Wash Rooms in City Hospital Talagang District Chakwal

(MRS July 2021 to December 2021)

S/No	Description	No	Measurements L ft.	B ft.	H ft.	Qty	Rate Rs.	Amount Rs.
1	Dismantling P.C.C 1:2:4							
	Toilet	1	6.500	7.500	0.125	6		
	Lav damege portion	1	8.000	10.000	0.125	10		
					Total	16	8421.60 %Cft	1355
2	Removing Cement Plaster							
	Toilet	1	25.750		7	180		
	Lav damege portion	1	33.000		7	231		
					Total	411	319.00 %Sft	1312
3	P/L P.C.C 1:2:4							
	same Qty of item No.1					16	24538.80 %Cft	3949
4	Providing, laying, cutting, jointing, testing and disinfecting P.V.C. pipe line of B.S.S. with `B' Class working pressure pipe, in.trenches, complete in all respects:-4" dia							
		1	30			30	350.05 P.Rft	10502
ii	Providing, laying, cutting, jointing, testing and disinfecting P.V.C. pipe line of B.S.S. with `D' Class working pressure pipe, in trenches, complete in all respects:-2" dia							
		1	35			35	167.05 P.Rft	5847
5	P/L Ceramic Tile Size 12"X18" Master Or Equivelent Laid Over 1:2 Cement Sand Mortar I/C Filling Of Joint With Matching Pigment Complete In All Respect As Approved/ Directed By The Engineer Incharge (For Floor)							
		1	6.5	7.5		49		
		1	8	10		80		
					Total	129	220.00 P.Sft	28325
6	P/L Ceramic Tile Size 12"X18" Master Or Equivelent Laid Over 1:2 Cement Sand Mortar I/C Filling Of Joint With Matching Pigment Complete In All Respect As Approved/ Directed By The Engineer Incharge (Dado)							
		1	25.75		7	180		
		1	33		7	231		
					Total	411	230.00 P.Sft	94588
7	S/E English W.C Porta made imported one piece i/c double seat cover full size i/c thimble complete set color ICI/forte or equivalent							
		1				1	35000.00 Each	35000

8	P/F W.H.B 22x16" i/c bracket set waste pipe and waste coupling etc white with pedestal	1			1	2778.75 Each	2779
9	P/F of Bath room accessories set Master made consisting of plastic made, towel rail, shelf, looking glass, with plastic cover, toilet paper holder, soap dish, brush holder complete in all respect.	1			1	12000.00 Each	12000
10	P.F. C.P T Stop cock	3			3	467.80 Each	1403
11	P/F. C.P bib cock 1/2" dia	2			2	365.80 Each	732
12	P/F C.P mixing valve for W.H.B or sink	1			1	1576.25 Each	1576
13	P/F floor trap 4" dia.	2			2	451.35 Each	903
14	P/F Gully trap 4" dia C.I complete	1			1	797.5 Each	797.45
15	P/F low down flushing cistern 3 Gln Capiacity plastic body complete. Coloured	1			1	1575.95 Each	1576
						Total	**202643**
	D.D						
i	Cost of all bath fittings, utensils & Accessories set (U/S) etc.					L.S	2000
						Total	**200643**
	Cost of 15 No Wash Rooms	200643	x	15		**Total**	**3009650**
						Say	**3010000**

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Executive Engineer
Buildings Division
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ANALYSIS OF RATE

P/L Ceramic Tile Size 12"X18" Master Or Equivelent Laid Over 1:2 Cement Sand Mortar I/C Filling Of Joint With Matching Pigment Complete In All Respect As Approved/ Directed By The Engineer Incharge (For Floor)

Unit of Rate Per Sft

MRS, 2nd BI-ANNUAL-2021 (1st July-2021 to 31st december-2021) DISTRICT CHAKWAL

S.No.	Description	Nos.	Length	Breadth	Depth	Qty	Rate	Unit	Amount
A	GSP-SERIES PLAN MATCHING DARK COLOUR (GLOSSY/ MAT) GSP-SB **(ITEM NO. 3 PAGE NO.55)** 996/10.76 = 92.56								
1	Total = 105 Sft					105.00	92.56	P.Sft	9719
2	White cement **(06.009)**					0.15	1100	P.Bag	165
3	Grey Cement **(06.008)**					2.16	600	P.Bag	1296
4	Pigment **(10.015)**					0.45	82	P.Kgs	37
5	Sand **(06.007)**					5.20	15	P.Cft	78
							Total Rs.		**11295**
	Add 20% Contractor profit.								2259
							Total Rs "A"		**13554**
B	**Labour**								
1	Mason **(L.B 040)**					4.00	950	P.Day	3800
2	Coolies **(L.B 015)**					2.50	725	P.Day	1813
3	Bahishti **(L.B 017)**					2.00	750	P.Day	1500
							Total Rs.		**7113**
	Add 10 % Sundries								711
							Total Rs.		**7824**
	Add 20% Contractor profit								1565
							Total Rs.		**9389**
							Total Rs A + B		**22942**
	Rate P.Sft		22942	/	100	=			**229.42**
							Total Rs.		**220**
	Say Rs. 220/- Per Sft								

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Buildings Division
Chakwal

ANALYSIS OF RATE

P/L Ceramic Tile Size 12"X18" Master Or Equivelent Laid Over 1:2 Cement Sand Mortar I/C Filling Of Joint With Matching Pigment Complete In All Respect As Approved/ Directed By The Engineer Incharge (For Dado)

Unit of Rate Per Sft

MRS, 2nd BI-ANNUAL-2021 (1st JulY-2021 to 31st December-2021) DISTRICT CHAKWAL

S.No.	Description	Nos.	Length	Breadth	Depth	Qty	Rate	Unit	Amount
A	GSP SERIES PLAN MATCHING DARK COLOUR (GLOSSY/ MAT) GSP-SB **(ITEM NO. 3 PAGE NO.55)** 996/10.76 = 92.56								
1	Total = 105 Sft					105.00	92.56	P.Sft	9719
2	White cement **(06.009)**					0.10	1100	P.Bag	110
3	Grey Cement **(06.008)**					2.16	600	P.Bag	1296
4	Pigment **(10.015)**					0.45	82	P.Kgs	37
5	Sand **(06.007)**					5.20	15	P.Cft	78
							Total Rs.		**11240**
	Add 20% Contractor profit.								2248
							Total Rs "A"		**13488**
B	**Labour**								
1	Mason **(L.B 040)**					4.00	950	P.Day	3800
2	Coolies **(L.B 015)**					3.00	725	P.Day	2175
3	Bahishti **(L.B 017)**					2.50	750	P.Day	1875
							Total Rs.		**7850**
	Add 10 % Sundries								785
							Total Rs.		**8635**
	Add 20% Contractor profit								1727
							Total Rs.		**10362**
						Total Rs A+B			**23850**
	Rate P.Sft		23850	/	100	=			**238.50**
							Total Rs.		**230**
	Say Rs. 230/- Per Sft								

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Analysis of rates

S/E English W.C Porta made imported one piece i/c double seat cover full size i/c thimble complete set color ICI/forte or equivalent complete in all respect as approved by the Engineer Incharge.

1st July 2021 to 31st December 2021

Unit= Each

S.No.	Description	Quantity		Rate	Unit	Amount
A	**Material.**					
1	Cost of English W.C Porta made imported one piece i/c double seat cover full size i/c thimble complete set color ICI/forte or equivalent complete i/c labour .	1	No	29500	Each	29500
				Total		**29500**
	Add 20% Contractor profit.					5900
				Total		**35400**
				Say Rs		**35000**

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ANALYSIS OF RATE

S/E of Bathroom accessories set 7-pieces "Master with looking glass shelf towel rail, tissue paper holder, soap dish complete as approved / directed by the Engineer Incharge.

Unit = Each **1st July 2021 to 31st dec 2021**

S.No	Description	Quantity	Rate	Unit	Amount
A	**Material**				
1	Cost of bath room accessories of approved quallity shade comprising of the following as per satisfaction of Engineer Incharge Soap dish, Towel Rail, Toilet Paper Holder, Towel rail, looking glass with plastic frame, coat hook (Master / Sonex).	1 Each	8000	Each	8,000
				Total	**8,000**
		Add 20 % Contractor Profit			1,600
				"A"	**9,600**
B	**Labour**				
1	1st class Plumber 1 day **(L.B 046)**	1.25 Day	950	P.Day	1,188
2	Helper **(L.B 015)**	1.00 Day	725	P.Day	725
				Total	1,914
		Add 10 % Sundries			191
				Total	2,105
		Add 20 % Contractor Profit			421
				"B"	**2,526**
		Total of A + B			**12,126**
		Say:-			**12,000**

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REVAMPING OF SEWERAGE SYSTEM
(MRS July 2021 to December 2021)

S/No	Description	No	Measurements L ft.	B ft.	H ft.	Qty	Rate Rs.	Amount Rs.
1	Earthwork excavation in open cutting for sewers and manholes in all types of soil except shingle, gravel and rock from o ft to 7 ft depth.	1	220	4.500	6.000	5940		
						5940	6687.30 %ocft	39723
2	Cement concrete brick or stone ballast 1.5" to 2" gauge in foundation and plinth (1:4:8)	1	220	4.500	0.500	495		
						495	15212.70 %cft	75303
3	Providing and laying R.C.C. pipe 15" dia sewers, moulded with cement concrete 1:1½:3 conforming to ASTM Specification C-76-79, Class II. Wall B, including carriage of pipe from factory to site of work, lowering in trenches to correct alignment and grade, jointing with rubber ring,	1	220			220	686.25 P.Rft	150975
4	Filling, watering and ramming earth under floors with surplus earth from foundation, etc.							
	Take 2/3rd of item no.1		2/3*5940			3960	3867.60 %o cft	15316
5	Construction of Main Hole (Detyail Attached)	1	6			6	51000.00 Each	306000
6	S/F cost iron MainHole Cover 12"dia with frame etc	20				20	422.70 Each	8454
7	P/F Cast iron rain water down pipe fixed in position excluding hed and shoes i/c painting 4" dia	15			40	600	237.65 P.Rft	142590
8	P/F shoes bends or ofset for cost iron rain water down pipe i/c fixing and painting	15				15	352.85 Each	5293
9	P/F cost iron rain water down pipe hed fixed inpleace	15				15	624.15 Each	9362
10	P/F of cost iron soil pipe with cement caulked joint 2" dia	10			40	400	83.40 P.Rft	33360
11	P/F cost iron specials such as tee, bend, coller etc with cement joint					250	155.50 P.Kg	38875
							Total	**825250**
							Say	**825000**

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ANALYSIS OF RATE FOR MAINHOLE. (4'x4'x6')
(MRS: 1ST JULY 2021 TO 31ST DECEMBER 2021)

S/No	Description	No	Measurements L ft.	B ft.	H ft.	Qty	Rate Rs.	Amount Rs.
1	Earthwork excavation in open cutting for sewers and manholes in all types of soil except shingle, gravel and rock from o ft to 7 ft depth.							
		1	6.000	6.000	6.000	216	6683.30 %ocft	1444
2	Cement concrete brick or stone ballast 1.5" to 2" gauge in foundation and plinth (1:6:12)	1	6.000	6.000	0.500	18		
						18	13037.10 %cft	2347
3	Pacca brick work in cement sand mortar 1:4 other than building up to 10 feet high	2	5.500	0.750	5.500	45		
		2	4.000	0.750	5.500	33		
					Total	78	24758.40 %cft	19404
4	Plain cement concrete ratio 1:2:4 l/c placing, compacting, finishing and curing complete.	1	4.000	4.000	0.250	4		
						4	24538.80 %cft	982
5	Cement plaster 1:4 up to 20' height 1/2" thick		1x2(4+4)x5.25			84		
					Total	84	2306.40 %sft	1937
6	Reinforced cement concrete in roof slab ,beams , columns lintels girders and other structural members with nominal mix 1:2:4	1	5.500	5.500	0.500	15		
		22	1.833	1.833	0.333	1		
					Total	14	390.40 P.cft	5514
7	Fabrication of mild steel reinforcement for cement concrete including cutting bending, laying in position, making joints and fastening, including cost of binding wire and labour charges for binding of steel reinforcement deformed bars							
			14x6.50x0.454			42	19988.70 %kg	8332
8	P/F of 6" Thick RCC man hole cover 22" dia with T shaped C,I frame of 20" wiring 37.324 Kg Complete.					1.00	11435.15 Each	11435
							Total	**51395**
							Say	**51000**

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ANALYSIS OF RATE

P/F Glow Sign Board comprising of M.S square pipe frame 1.5"x1.5" 18 SWG, 1"x1" M.S square pipe with M.S Sheet 26 SWG with M.S pipe 3" dia vertical i/c angle iron bracket 1.5"x1.5"x3/16" and fixing best quality panaflex sheet i/c writing and i/c lighting arrangment and electric connecttion i/c carriage charges and erection in position complete in all respect & as approved by the Engineer Incharge.

Take an area 20'x4' having 80 Sft

Unit Rate P.Sft

Sr. No	Detail	Qty	Unit	Rate	Amount
A	**MATERIAL**				
1	Cost of M.S hallow pipe size 1.5"x1.5", 18 SWG				
	Top frame Horizental 4x20	80			
	4x18	72			
	0.5 x18	9			
	Total	**161**			
	Add: 5% Wastage	8.05			
	Total	**169.05**	P.Rft	85	14369
2	Cost of M.S hallow pipe size 1"xT" 18 SWG				
	2x20	**40**			
	Total	**40**			
	Add: 5% Wastage	2			
	Total	**42**	P.Rft	60	2520
3	M.S pipe for post 3" **(23.085) Page.21**				
	2x20	40			
	Total	**40**			
	Add: 5% Wastage	2			
	Total	**42**	P.Rft	366	15372
4	Cost of imported M.S sheet 26 SWG of approved colour best quality **(12.157 P.11)**				
	20x4	80			
	2x24	48			
	Total	**128**			
	Add: 5% Wastage	6			
	Total	**134**			
	134x0.363=48.64 Kg	48.64			
	Total	**48.64**	P.Rft	115	5594
5	P/F M.S angle iron 1-1/4"x1-1/4"x3/16" **(12.119 P9)**				
	11x4	44			
	44x0.67=29.48 Kg	29.48	Kg		
	Total	**29.48**	Kg	140.27	4135
6	P/F Plastic Panaflex sheet i/c writing				
	20x4	80.00	Sft		
	Total	**80.00**	Sft	500	40000
7	Cost for Electric lights, cable, board etc				
		4.00	No.	1300	5200
8	Cost of blind rivets screws etc		L.S		2000
9	Cost of welding rods	8	P.Pkt	700	5600
10	Excavation				
	2x2x2x2	16	%0Cft	8078.40	129
11	Cement Concrete (1:2:4) 2x2x2x2	16	%Cft	24538.80	3926
12	Carriage charges		L.S		2000.00
13	Labour charges				
	1x20x4	80	P.Sft	150	12000
				Total	**112845**
	Add: 20% Contractor Profit on all iteme except item No.10,11 on Rs. 108790/-				21758
				Total	**134603**
	Rate P.Sft	134603	\	80	**1683**
				Say Rs. P.Sft	**1683**

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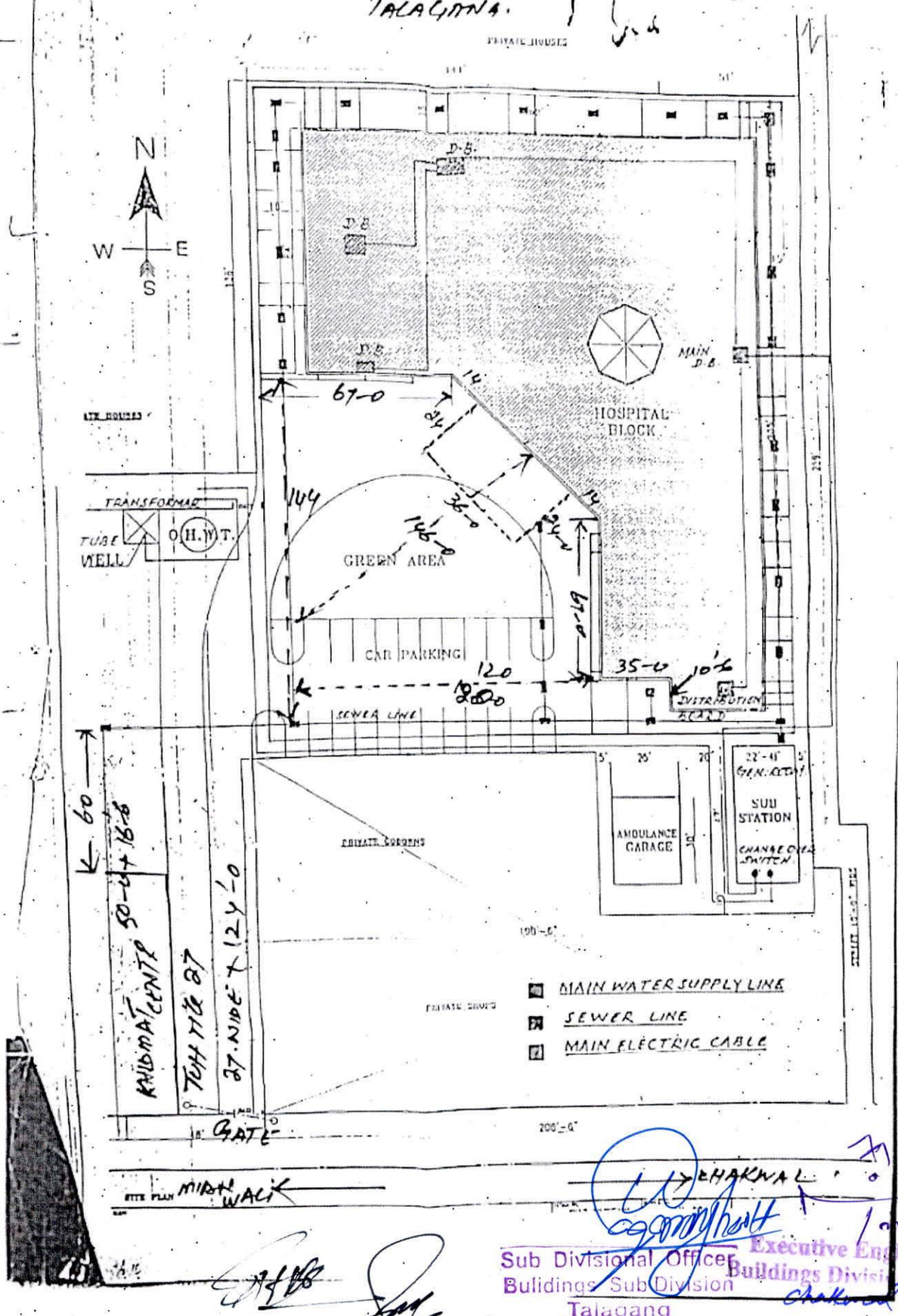
SITE PLAN OF CITY HOSPITAL AT TALAGANG.



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Chakwal

8. Annual Operating and Maintenance Cost after Completion of the Project

The Annual operating and maintenance cost after completion of the project will be borne by the concerned District Health Authority (DHA) as well as Primary and secondary healthcare Department, Lahore.

8. ANNUAL OPERATING COST (POST COMPLETION)

Financial Components: Capital
Cost Center:OTHERS- (OTHERS)
Fund Center (Controlling):N/A

Grant Number: Government Buildings - (PC12042)
LO NO:LO21011482
A/C To be Credited: Account-I

PKR Million

Sr #	Object Code	2023-2024		2024-2025		2025-2026		2026-2027		2027-2028	
		Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign
1	**A05270**-To Others	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
2	**A12403**-Other Buildings	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Total		**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**

Financial Components: Capital
Cost Center:OTHERS- (OTHERS)
Fund Center (Controlling):N/A

Grant Number: Government Buildings - (PC12042)
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PKR Million

Sr #	Object Code	2023-2024		2024-2025		2025-2026		2026-2027		2027-2028	
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2	**A12403**-Other Buildings	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Total		**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**	**0.000**

9. DEMAND AND SUPPLY ANALYSIS

Semi modern health facilities and scientific diagnostics are presently available in this Hospital. This initiative of revamping Hospital will cover all departments and components of healthcare including Medical, Surgical, psychiatric, Cardiac, ENT, Ophthalmic and Pediatrician components. Moreover, women health components i.e. Gynecology and obstetric will also be emphasized upon. In emergency, calamities and natural disasters, valuable lives will be saved through revamping of Emergency Units.

10. FINANCIAL PLAN AND MODE OF FINANCING

10.1 FINANCIAL PLAN EQUITY INFORMATION

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10.2 FINANCIAL PLAN DEBT INFORMATION

undefined

10.3 FINANCIAL PLAN GRANT INFORMATION

Attached

RISK REGISTER

Programme for Revamping of all THQ Hospitals in Punjab

RISK DATA				Pre-Mitigation / Current Qualitative Assessment			MITIGATION
Risk Item No	Risk Description/Event	Cause	Effect / Consequences	Likelihood (1 to 3)	Impact (1 to 3)	Risk Score (1 to 9)	Mitigation / Actions
1	Due date for the completion of some hospital sites may be extended due to increase in scope from the Client	Direct instructions from the Medical Superintendents / Hospital Administration to revamp the remaining areas	Significant scope increase requested by the Hospital administration will result in: 1. Project delays 2. Contractor claims 3. Increase in project cost along with variations	3	3	9	Hospital administration is requested to finalize the scope during joint field visits of C&W and PMU
2	Various unexpected structural issues are being encountered	Unforeseen structural issues are expected to face during execution in hospital buildings approaching end of life	1. Stoppage of work 2. Performance of the Contractor has affected 3. Delays in the project	3	3	9	Various items which are unforeseen and expected to be used during execution may be taken in estimates so that those can be executed to address these issues
3	Change in management of the Client	Management change	Re-briefing is to be carried out	2	2	4	Acceleration of understanding for smooth and expeditious transition, without affecting the project
4	Financial Issues	Funds for these schemes should be provided as per the targets	1) Delay in tendering 2) Effect on quality as the Consultant supervision will not take place 3) Inconvenience to the patients	3	3	9	Approval of PCIs and early release of funds is requested
5	Nationwide spread of pandemic i.e. COVID-19 in 2nd and 3rd quarter of this year	Work delays during nationwide lockdown.	1) Delays in completion of works 2) Claim requests received by Contractor and Consultant	3	3	9	Contractor will be asked to depute fully vaccinated labor

10.4 WEIGHT COST OF CAPITAL INFORMATION

undefined

11. PROJECT BENEFITS AND ANALYSIS

11.1 PROJECT BENEFIT ANALYSIS INFORMATION

Social Benefits with Indicators

Social economic burden will be decreased due to availability of better medical services in the district. Time and money of community will be saved which were expended in other cities like Lahore Islamabad etc. on treatment of patients and for boarding and logging of attendants. The social status of community will rise.

11.3.1 Social Impact:

A number of patients lose their lives or suffer serious disabilities for want of timely access to the health facilities. The project will ensure that no one is left to reach the health facilities. The most important beneficiaries will be mothers having complicated delivery conditions. The number of patients transferred to the health facilities for treatment and lifesaving will serve as indicators for performance evaluation. In long term the project will help in improving socio-economic indicators of IMR and MMR.

11.2 ENVIRONMENTAL IMPACT ANALYSIS

Environmental Impact

It will have no hazardous effect on the environment. On the other hand, addition of horticulture and landscaping will provide healthy environment to the general public. All the more, the program is environment friendly having no adverse environmental effects. Simultaneously, this shall further improve environment by creating sense of responsibility among employed and beneficiaries of the service.

11.3 PACT ANALYSIS

undefined

11.4 ECONOMIC ANALYSIS

Employment Generation (Director and Indirect)

Revamping of this Hospital will lead to generation of employment for highly skilled /professional staff and unskilled staff leading to reduction of unemployment. Huge employments opportunity will be created from the establishment of the project. The Medical doctors and paramedics who are trained in this discipline or intended to specialize in this field can make maximum use of training. A large number of gazette and non-gazette posts will be available for employment directly or indirectly.

Impact of Delays on Project Cost and Viability

Delay in the implementation of the project will lead to increase in cost and increase financial burden on the Government and general population of Punjab. Since the project is one of the major needs and a long awaited desire of the community, therefore, Government of the Punjab contemplated plan for early execution of Revamping of Emergency Units. The delay will not only deprive the patients of the state of the art facility but also distort the public image of the Government.

11.5 FINANCIAL ANALYSIS

Financial Benefits & Analysis

Tremendous public benefits will be accrued from revamping of Emergency Units:

The Targets of Sustainable Development Goals (SDGs) will be achieved
The Human Development Index of Pakistan (HDI) will improve
Infant Mortality Rate will decrease
Mother Mortality rate will be decreased
The international commitments of Pakistan will be accomplished
Health standard of public will
Better Health Facilities to mother and
Prompt and scientific facility for operation
Rehabilitation of disables and injured
Blindness in this area will be decreased and controlled
Better social and mental health to addict
Provision of better health facilities at doorsteps
Awareness and control for communicable
Survival of heart failure
Social indicators of Pakistan will improve

This will decrease load of patients on teaching hospitals and specialized institutions by promoting physical and mental health. By adopting preventive and Hygienic principles, the number of patients and diseases will decrease. Resultantly budget load of Government for treatment will decrease and saving will be utilized for development programs.

11.1.1 Financial Impact:

In the beginning, It is extremely difficult to put a money value on each life saved by taking/shifting a critically ill patient to the appropriate health facility for treatment. However, the exact amount spent shall be calculated against each patient shifted by analyzing data collected during operations.

11.2 Revenue Generation

Revenue will be generated from:

Indoor fee
Laboratory fees
Diagnostic facility fees
Dental fee
ECG fee
Private room charges
Ambulance charges

From other fees prescribed by Government

12. IMPLEMENTATION SCHEDULE

12.1 IMPLEMENTATION SCHEDULE/GANTT CHART

Original Gestation period (From September, 2017 to June, 2019)

Extension in Gestation period for one year with no change in cost & Scope till June 2020.

1st Revised gestation period till June, 2021

2nd Revised gestation period till June, 2023

3rd Revised gestation period till June, 2025

12.2 RESULT BASED MONITORING (RBM) INDICATORS

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12.3 IMPLEMENTATION PLAN

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12.4 M&E PLAN

The operation team will monitor the progress of the project and will hold regular weekly meeting to review the progress under the supervision of Project Director.

12.5 RISK MITIGATION PLAN

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12.6 PROCUREMENT PLAN

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13. MANAGEMENT STRUCTURE AND MANPOWER REQUIREMENTS

The Organogram of New Management Structure is available in PC-I

14. ADDITIONAL PROJECTS / DECISIONS REQUIRED

NA

15. CERTIFICATE

Focal Person Name:

Designation: Project Director, PMU P&SHD

Email:

Tel. No.:042-99231206

Fax No:

Address:31/E1, Shahrah-e-imam Hussain? Road? Block E 1 Gulberg III, Lahore, Punjab

15. It is certified that the project titled **"Revamping of THQ Hospital** City Hospital Talagang. **(3rd Revised)"** has been prepared on the basis of instruction provided by the Planning Commission for the preparation of PC-I for Social Sector projects.

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17. RELATION WITH OTHER PROJECTS

20. MARGINALISATION OF PC-1

SR.NO.	CRITERIA	YES/NO	COMMENTS
Description & Objectives			
1	does the pc-i specify link/alignment with punjab growth strategy, punjab spatial strategy (if relevant) & sustainable development goals?	NO	
2	do project objectives/justification include focus on marginalised groups (women, pwds, minorities, transgender, poor etc.)?	NO	
Use of Gender Disaggregated Data			
1	has gender disaggregated data been used to determine need for the project? if yes, identity the source. if not, what additions/observations have been made to strengthen the pc-i?	NO	
2	was gender disaggregated data used to identify potetialimpact of the project on selected beneficiaries?	NO	
Social Impact			
1a	have marginalised groups been included as beneficiaries of the project?	NO	
1b	if yes, does the pc-1 specify a specific quota/percentage for the marginalised (women, peds, etc.)?	NO	
2	does the pc-1 include specific provisions for capacity building / training of women (if applicable)?	NO	
Results Based Monitoring			
1a	does the pc-i include a results based monitoring framework (rbmf)/logical framework?	NO	
1b	if yes, does the framework include measurable targets relating to impact on marginalised groups?	NO	
2	were sdg indicators used for determining targets included in the pc-i?	NO	
3	was gender disaggregated data used to establish baseline and develop quantifiable targets/key indicators?	NO	
4	if yes, identify the source/refresh institute(s)?	NO	
Inculsion/Participation			
1	was female representation ensured in planning and adp formulization?	NO	
2a	was stakeholder consultation held during adp formulization and/or pc-idevelopment?	NO	
2b	if yes, did the consultation include experts and representatives of marginalised groups and csos?	NO	

3	was participation of representatives of marginalised groups ensured in pc-1 rist assessment planning?	NO	
Monitoring & Evaluation			
1	does the project provide a role to communities in project monitoring and/or implementation (if relevant)?	NO	
2a	does the project include formation of a steering committee and/or project implementation committiees?	NO	
2b	if yes, is there a provision to ensure representation of women in these committees?	NO	