

PC-1

Revamping of THQ Hospital, Kallar Kahar District Chakwal

ORIGINAL APPROVED COST	PKR Million. 348.037/-
ORIGINAL APPROVED GESTATION	72 Months Till June 2025
APPROVAL FORUM	DDSC (DDSC)

Revamping of THQ Hospital, Kallar Kahar District Chakwal

2. LOCATION OF THE PROJECT

- 2.1. DISTRICT(S)
 - I. CHAKWAL
- 2.2. TEHSIL(S)
 - I. KALLAR KAHAR

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, District Health Councils and C&W Department.
	3.3 Operation & Maintenance	PMU for Revamping Program of Primary and Secondary Healthcare Department and District Health Authority
	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: 5219	
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 Biomedical 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, Shahrahe-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 replanned 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 <u>improvement of</u> <u>sewerage system</u> 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 <u>water filtration</u> <u>plant</u> is proposed accordingly. For ease of patients, <u>drinking water supply network</u> 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 <u>express line or dual electrical supply</u> in all hospitals under revamping. Despite these two facilities based, on the current and proposed electrical load of hospital <u>new transformers were proposed</u> to step down the voltage to desired level and complete generator backup system was designed and <u>generators along with automatic transfer switches</u> 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 <u>pole lights</u> to lighten up the pathways and <u>garden lights</u> 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. <u>Parking and waiting areas</u> on several places of hospital were then proposed according to the design.

5.3.1.8 External Signage

<u>Eexternal signage system</u> 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 <u>X-Ray</u>

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 <u>CCU</u>

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 preexisting 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 <u>intensive treatment medicine</u>. Intensive care units cater to patients with <u>severe and life-threatening</u> illnesses and injuries, which require constant, close monitoring and support from specialized equipment and medications in order to ensure <u>normal bodily functions</u>. Intensive care units are staffed by highly trained <u>doctors</u> and <u>nurses</u> 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 <u>ARDS</u>, <u>trauma</u>, <u>multiple organ failure</u> and <u>sepsis</u>. Patients may be transferred directly to an intensive care unit from an <u>emergency department</u> 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 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.
- 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.

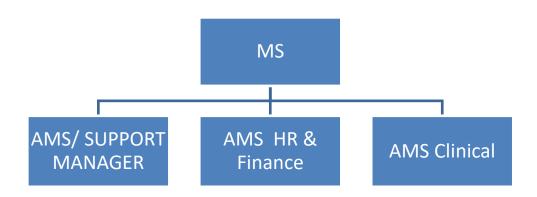
5.4.5 Security

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.

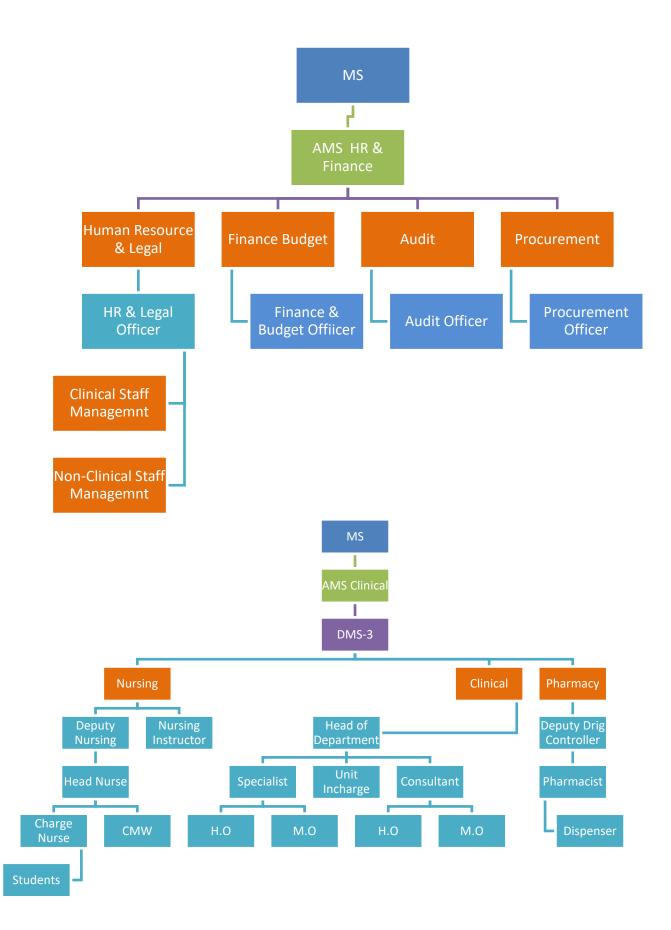
5.6 HR & Management Interventions Structure

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 	



Page 29

5.6.1 <u>Non Clinical HR Interventions (Human Resource (HR) Plan</u> <u>Management Structure)</u>

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.

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

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 Admin Officer

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.

Eligibility Criteria

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

- 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
- 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)
- 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

 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

 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

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

5.7 <u>HR for QMS and MSDS and Day Care Center.</u> 5.7.1.1 <u>QMS Supervisor / Information Desk Officer</u>

Shall be responsible whole QMS networking

Eligible Criteria

- 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.
- 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 <u>Terms of Reference (TORs) for Consultants Minimum Service</u> <u>Delivery Standards (MSDS) Implementation & Clinical Audit</u>

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 <u>Reporting Arrangements</u>

 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 <u>Remunerations</u>

- 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

- 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

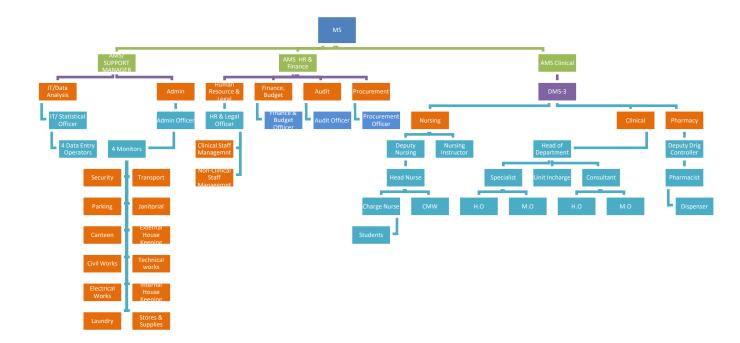
- 1. Minimum qualification BA/BSC or equivalent from HEC recognized University along with B.Ed.
- Minimum 1 years post degree experience of teaching (Additional credit may be given for Public sector teaching of similar nature)

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	Annual Increment Up
	<u>Range) (PKR)</u>	to % age
PPS-1	28,000 44,800	10
PPS-2	35,00056,000	10
PPS-3	43,750 70,000	10
PPS-4	52,500 84,000	10
PPS-5	70,000112000	10
PPS-6	105,000 172,200	8
PPS-7	157,500258,300	8
PPS-8	218,750358,750	8
PPS-9	306,250502,250	8

PPS-10	437,500700,000	5
PPS-11	612,500 980,000	5
PPS-12	875,0001,400,000	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:

	No. of	Original Pa approved	ay package	Revised Pa	ay package
Name of Post	Employees	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 Death or End of Life Management.

- 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 Concerne	ed (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 multisectorial 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 Kallar Kahar District Chakwal is more than 0.235 million. The area of the THQ Hospital Kallar Kahar District Chakwal is 76,553 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 Kallar Kahar District Chakwal.

Revamping of THQ Kallar Kahar 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 vardstick 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. Originally the Civil work component of the scheme was planned to be executed by the Health Council of the concerned District Health Authority based on cost estimates prepared by the Infrastructure Wing of PMU and approved by the DDSC. Accordingly, funds of Rs.3, Rs.5 and Rs.10 million were provided during FY 2017-18 for the execution of work as per parameters provided to these THQ Hospitals. However, no reasonable revamping civil work was carried out and hence did not fulfil the requirement and the objectives of the Revamping Program. Now P&SHD has decided to carry out further revamping of Civil work through Communication and Works Department Punjab to accomplish the uniformity of THQ Hospitals with already revamped hospitals of Phase-I. Hence the Rough Cost Estimates of the Punjab Buildings Department has been included in the civil work cost of this scheme.
- 2. 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: -

	60 th PDWP Me	eting	
Name of Posts	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.

- 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.
- 4. Infrastructure team has conducted the Joint visits with the team of C&W Department. During the field visits, few alterations were recommended by the technical teams which have been incorporated in the Revised Rough Cost Estimates of the subject scheme and have been attached with the PC-I along with comparative statement. Therefore, Civil works component cost has been decreased from Rs. 154.238 million to Rs. 14.179 million due to few changes in the scope and MRS rates (2nd Bi-annual 2022).

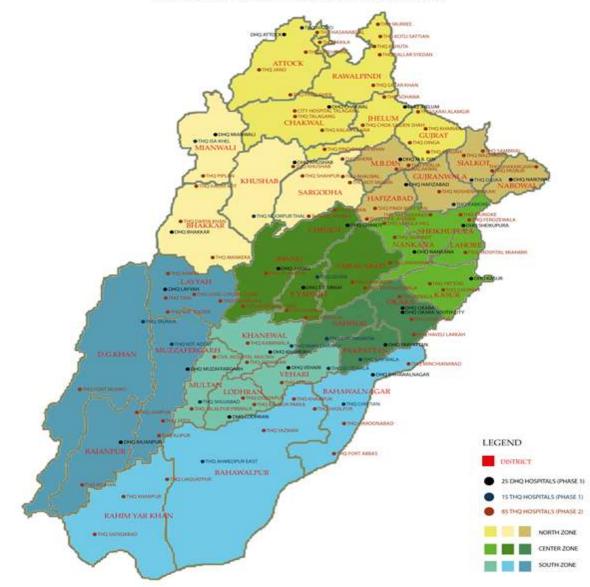
85 THQ Hospitals covered under the Program:

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:LO17010543 A/C To be Credited:Assan Assignment

Pł													
S	Object Code	2019	-2020	2020	-2021	2021	-2022	2022-	2023	2023-	-2024	2024-	-2025
r #													
		Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign	Local	Foreign
	A05270-To Others	0.000	0.000	0.000	0.000	0.000	0.000	102.008	0.000	100.000	0.000	100.000	0.000
	Total	0.000	0.000	0.000	0.000	0.000	0.000	102.008	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:LO21011480 A/C To be Credited:Account-I

PKR Million

S r #	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	46.029	0.000	0.000	0.000	0.000	0.000	
	Total	0.000	0.000	0.000	0.000	0.000	0.000	46.029	0.000	0.000	0.000	0.000	0.000	

			Α	bstra	act of	Cost						
			Revamp	ing of Th	IQ Hospita	al Kallar Kah	ar					
Scope of work						Cost in mi	illion					
•		Original			1st Revis	sed		2nd Revise	d		3rd Revise	d
	Capital	Revenue	Total	Capital	Revenue	Total	Capital	Revenue	Total	Capital	Revenue	Total
Capital component	-			-								
Internal Development	0.000	8.106	8.106	0.000	8.106	8.106	33.872	0.000	33.872	33.872	0.000	33.872
External Development	0.000	1.918	1.918	0.000	1.918	1.918	12.157	0.000	12.157	12.157	0.000	12.157
Water filtration plant	0.000	5.600	5.600	0.000	5.600	5.600	0.000	0.000	0.000	0.000	0.000	0.000
Total Capital Component	0.000	15.624	15.624	0.000	15.624	15.624	46.029	0.000	46.029	46.029	0.000	46.029
Emergency	0.000	24.466	24.466	0.000	24.466	24.466	0.000	33.667	33.667	0.000	56.078	56.078
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	55.678	55.678	0.000	55.678	55.678	0.000	72.057	72.057	0.000	113.319	113.319
Electricity	0.000	11.596	11.596	0.000	11.596	11.596	0.000	12.196	12.196	0.000	23.196	23.196
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	33.370	33.370	0.000	47.644	47.644
LC Deficit during procurement (currency								3.554	3.554		3.554	3.554
fluctuation)												
Total Revenue component	0.000	150.230	150.230	0.000	150.230	150.230	0.000	200.588	200.588	0.000	302.008	302.008
Outsourcing component												
Janitorial Services	0.000	10.052	10.052	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Security and Parking services	0.000	4.581	4.581	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Laundry Services	0.000	2.100	2.100	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Maintenance (Generator)	0.000	1.670	1.670	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
MEP	0.000	3.673	3.673	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	8.735	8.735	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Total outsourcing cost	0.000	38.859	38.859	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Total	0.000	204.712	204.712	0.000	165.854	165.854	46.029	200.588	246.616	46.029	302.008	348.037
Contingency (1%) only on Civil	0.000	0.156	0.156	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Component												
Third Party Monitoring (TPM) (1%)	0.000	2.047	2.047	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	2.047	2.047	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000
Grand Total	0.000	208.963	208.963	0.000	165.854	165.854	46.029	200.588	246.616	46.029	302.008	348.037

		1		Er	nergei	ncy Eq	uipment	1							
					ginal			Revise	ed	-	Revis	sed	••••	Revis	ed
Sr. No.	Area	ITEM DESCRIPTION	Yard Stick	Required Quantity (T=8+S=0+E=8)	Actual Unit Price	Actual Total Cost(Rs)									
1	Reception	Table	0		99,750	-		99,750	-		99,750	-		99,750	-
2	Area	Chairs	0		26,775	-		26,775	-		26,775	-		30,000	-
3		Computer Data Entry With Printer	1	1	141,750	141,750	1	141,750	141,750	1	141,750	141,750	1	195,000	195,000
4	3	Table (2.5 X 4)*(N)	0	0	101,850	-	0	101,850	-	0	101,850	-	0	101,850	-
5	8	Chairs *(N)	0	0	26,775	-	0	26,775	-	0	26,775	-	0	30,000	-
6		B.p apparatus wall type*(N)	3	8	15,750	126,000	8	15,750	126,000	8	30,000	240,000	8	30,000	240,000
7		Gurney WITH FOOT STEP)*(N)	3	8	420,000	3,360,000	8	420,000	3,360,000	8	460,000	3,680,000	8	800,000	6,400,000
8		Mercury B.P apparatus*(N)	2	6	33,600	201,600	6	33,600	201,600	6	36,000	216,000	6	36,000	216,000
9		Laryngoscope paeds &adult each*(N)	2	6	10,500	63,000	6	10,500	63,000	6	12,000	72,000	6	20,000	120,000
10		Diagnostic set*(N)	1	3	45,150	135,450	3	45,150	135,450	3	50,000	150,000	3	85,000	255,000
11	.	ECG Machine (with trolley) *(N)	1	3	169,785	509,355	3	169,785	509,355	3	180,000	540,000	3	300,000	900,000
12	Triage area	Central oxygen with accessories FOR each	0	0	420,000	-	0	420,000	-	0	-	-	0	-	-
13		NEBULIZER HD*(N)	2	6	125,265	751,590	6	125,265	751,590	6	215,000	1,290,000	6	300,000	1,800,000
14		SUCKER MACHINE*(N)	1	3	259,350	778,050	3	259,350	778,050	3	275,000	825,000	3	300,000	900,000
15		Resuscitation Trolley (fully equipped))*(N)	1	3	244,733	734,199	3	244,733	734,199	3	400,000	1,200,000	3	600,000	1,800,000
16		INSTRUMENT CABINET*N	1	3	69,300	207,900	3	69,300	207,900	3	69,300	207,900	3	69,300	207,900
17		MEDICINE TROLLY*N	1	3	60,900	182,700	3	60,900	182,700	3	60,900	182,700	3	60,900	182,700
18		O.T table WITH foot step	1	1	1,417,500	1,417,500	1	1,417,500	1,417,500	1	2,000,000	2,000,000	1	2,500,000	2,500,000
19		Anesthesia Machine	1	1	2,509,554	2,509,554	1	2,509,554	2,509,554	1	3,000,000	3,000,000	1	7,000,000	7,000,000
20		Sucker machine	1	1	259,350	259,350	1	259,350	259,350	1	275,000	275,000	1	300,000	300,000
21		Portable O.T Lights	1	1	304,220	304,220	1	304,220	304,220	1	500,000	500,000	1	900,000	900,000
22		Ceiling o.t light	1	1	414,750	414,750	1	414,750	414,750	1	800,000	800,000	1	950,000	950,000
23	Minor O.T	Hot air oven	1	1	110,000	110,000	1	110,000	110,000	1	385,000	385,000	1	450,000	450,000
24		Autoclave	1	1	441,000	441,000	1	441,000	441,000	1	550,000	550,000	1	850,000	850,000
25		Instrument trolley*N	1	1	54,000	54,000	1	54,000	54,000	1	54,000	54,000	1	55,000	55,000
26		Defibrillator*N	1	1	310,000	310,000	1	310,000	310,000	1	650,000	650,000	1	800,000	800,000
27		Instrument cabinet	1	1	69,300	69,300	1	69,300	69,300	1	69,300	69,300	1	69,300	69,300
28		GURNEYS*N	4		420,000	-		420,000	-		460,000	-		850,000	-
29		Sucker machine *(N)	2		259,350	-		259,350	-		275,000	-		300,000	-
30		Nebulizer HD*(N)	2		125,265	-		125,265	-		215,000	-		300,000	-
31		Center Oxygen supply*N	1		420,000	-		420,000	-		-	-		-	-
32	Constant /	Resuscitation Trolley (fully equipped))*(N)	1		237,618	-		237,618	-		400,000	-		600,000	-
33	specialized	Defibrillator*N	1		302,605	-		302,605	-		650,000	-		800,000	-
34	care room	Pulse- oximeter*(N)	4		104,000	-		104,000	-		160,000	-		225,000	-
35		Bedside-monitor*(N)	4		301,665	-		301,665	-		550,000	-		1,200,000	-
36		ECG MACHINE)*(N)	1		169,785	-		169,785	-		169,785	-		300,000	-
37		BP APPARATUS*N	1		15,750	-		15,750	-		16,000	-		16,000	-
38		FOOT STEP)*(N)	1		3,150	-		3,150	-		4,000	-		5,500	-
39		ATTANDANT BENCH)*(N)	1		5,250	-		5,250	-		8,000	-		10,000	-
40	7	(MOTRIZED BEDS) with accessories (with foot steps*(N)	7	8	210,000	1,680,000	8	210,000	1,680,000	8	400,000	3,200,000	8	600,000	4,800,000
41	8	ECG machine(with trolley) *(N)	1	2	169,785	339,570	2	169,785	339,570	2	169,785	339,570	2	300,000	600,000
42		Pulse- oximeter *(N)	6	7	104,000	728,000	7	104,000	728,000	7	160,000	1,120,000	7	225,000	1,575,000
43		Bedside-monitor*(N)	3	4	301,665	1,206,660	4	301,665	1,206,660	4	550,000	2,200,000	4	1,200,000	4,800,000
44	_	B.P apparatus wall type *(N)	6	7	26,250	183,750	7	26,250	183,750	7	30,000	210,000	7	30,000	210,000
45	Emergency ward	Nebulizer HD *(N)	2	3	125,265	375,795	3	125,265	375,795	3	215,000	645,000	3	300,000	900,000
46	u	Resuscitation Trolley (fully equipped))*(N)	1	2	237,618	475,236	2	237,618	475,236	2	400,000	800,000	2	600,000	1,200,000
47		Defibrillator*N	1	2	299,153	598,307	2	299,153	598,307	2	650,000	1,300,000	2	800,000	1,600,000

	Emergency Equipment														
				Ori	ginal		1st	Revis	ed	2nc	d Revis	ed	3rd Revised		
Sr.	Area	ITEM DESCRIPTION	Yard	Required Quantity	Actual Unit	Actual Total									
48		Sucker machine *(N)	2	3	259,350	778,050	3	259,350	778,050	3	275,000	825,000	3	300,000	900,000
49		Wheal chairs *(N)	0	0	31,500	-	0	31,500	-	0	35,000	-	0	35,000	-
50		Stretcher *(N)	0	0	69,300	-	0	69,300	-	0	69,300	-	0	69,300	-
51		ambo bag paeds with Mask*N	5	5	15,750	78,750	5	15,750	78,750	5	19,000	95,000	5	19,000	95,000
52	Generalized	ambo bag adult with Mask* N	5	5	15,750	78,750	5	15,750	78,750	5	19,000	95,000	5	19,500	97,500
53		patient stool * N	2	2	4,085	8,169	2	4,085	8,169	2	4,500	9,000	2	5,000	10,000
54		Portable x-rays (300 M.A)	1	1	3,450,350	3,450,350	1	3,450,350	3,450,350	1	4,300,000	4,300,000	1	9,800,000	9,800,000
55		Portable ultra-sound	1	1	1,403,325	1,403,325	1	1,403,325	1,403,325	1	1,500,000	1,500,000	1	2,400,000	2,400,000
		Total				24,465,980			24,465,980			33,667,220			56,078,400
						24.466			24.466			33.667			56.078

				MS	DS								
			Origina	al	1s	t Revi	sed	2n	d Revi	sed	3r	d Revi	sed
Sr. No.	ITEM DESCRIPTION	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
-	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
	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
	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	-	-
	Packing table	0	-	-	0	-	-	0	-	-	0	-	-
	Digital Sealer Printer	1	420.000	420.000	1	420.000	420.000	1	480.000	480.000	1	520.000	520.000
-	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
	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
	Air Curtain	4	50,190	200,760	4	50,190	200,760	4	60.000	240.000	4	60,000	240.000
	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
	Smoke Detectors	10	7,350	73,500	10	7,350	73,500	10	8.500	85.000	10	8.500	85,000
	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	42,000	5	7,500	37,500	5	7,500	37,500
	Fire Blankets	10	2,783	27,825	10	2,783	27,825	10	3,200	32,000	10	3,200	32,000
	Fire Alarms	10	5,250	52,500	10	5,250	52,500	10	6,500	65,000	10	6,500	65,000

Page 57

				MS	DS								
		Original			1st Revised			2n	d Revi	sed	3rd Revised		
Sr. No.	ITEM DESCRIPTION	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
	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

				IVIE	edical	Equipr	nent											
				Origi				Rev	vised			2nd F	Revise	d		3rd F	Revise	d
. 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
	Semi Auto Clinical Chemistry Analyzer	1	1	0	449,295	-	1	0	449,295	-	1	0	550,000	-	1	0	550,000	-
1	Hematology Analyzer	1	1	0	427,350	-	1	0	427,350	-	1	0	550,000	-	1	0	750,000	-
	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
	Blood Gas Analyzer	0	0	0	2,744,858	-	0	0	2,744,858	-	0	0	3,200,000	-	0	0	1,400,000	-
	Clinical Microscope	1	3	0	132,825	-	3	0	132,825	-	3	0	180,000	-	3	0	250,000	-
Laboratory	Water Bath	1	0	1	60,000	60,000	0	1	60,000	60,000	0	1	157,500	157,500	0	1	325,000	325,000
	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
1	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
1	Auto pipettes	10	3	7	31,500	220,500	3	7	31,500	220,500	3	7	40,500	283,500	3	7	45,000	315,000
-	glass wares	0	0	0	105,000	-	0	0	105,000	-	0	0	105,000	-	0	0	105,000	-
	Centrifuge Machine	2	1	1	149,336	149,336	1	1	149,336	149,336	1	1	250,000	250,000	1	1	400,000	400,000
	Static X-ray Machine	1	0	1	4,200,000	4,200,000	0	1	4,200,000	4,200,000	0	1	6,000,000	6,000,000	0	1	##########	12,000,000
	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	-
1	Computerized Radiography System	0	0	0	4,018,245	-	0	0	4,018,245	-	0	0	4,500,000	-	0	0	4,500,000	-
	Dental X-Ray	0	1	0	282,975	-	1	0	282,975	-	1	0	350,000	-	1	0	525,000	-
X-Rays	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
	Density meter personal (Add)	0	0	0	210,000	-	0	0	210,000	-	0	0	210,000	-	0	0	250,000	-
1	Lead glass /shield	0	0	0	105,000	-	0	0	105,000	-	0	0	105,000	-	0	0	150,000	-
1	Lead Walls	0	0	0	525,000	-	0	0	525.000	-	0	0	525,000	-	0	0	525,000	-
1	Portable/Mobile Ultrasound	0	1	0	1.371.331	-	1	0	1.371.331	-	- 1	0	1,500,000	-	1	0	2,400,000	-
Ultrasound	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
		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
	Temporary pace maker	0	0	0	315,000	-	0	0	315,000	-	0	0	315,000	-	0	0	550,000	-
-	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
сси	ECG Machine Three Channel	2	2	0	169,785	-	2	0	169,785	- 200,100	2	0	169,785	-	2	0	300,000	-
000	ETT Machine	0	0	0	2,021,838		0	0	2,021,838		0	0	2,200,000	_	0	0	3,000,000	
· ·	Color doplor CARDIOLOGY	0	0	0	4,681,790		0	0	4,681,790	-	0	0	4,800,000	-	0	0	6,000,000	
1	Suction Pump	2	3	0	259.350	_	3	0	259,350		3	0	275,000	_	3	0	300,000	-
)	Blood Cabinet	1	1	0	690.539	-	1	0	690.539	-	1	0	700,000	-	1	0	1,500,000	-
	Centrifuge Machine	2	1	1	149.336	149.336	1	1	149.336	149.336	1	1	250.000	250.000	1	1	400.000	400,000
Blood Bank	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
	Clinical Microscope	1	1	0	132,825	42,000	1	0	132,825	42,000	1	0	180,000	33,000	1	0	250,000	55,000
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
Ļ	Baby Cot	10	1	9	14,669	132,017	1	9	14,669	132,017	1	9	16,000	144,000	1	9	16,000	144,000
5	Phototherapy Unit	2	1	1	130,200	130,200	1	1	130,200	130,200	1	1	655,000	655,000	1	1	850,000	850,000
	Infant Warmer	2	2	0	335,638	-	2	0	335,638		2	0	985,000	-	2	0	1,050,000	-
Nursery	Pulse Oximeter	6	1	5	104,500	522,500	1	5	104,500	522,500	1	5	160,000	800,000	1	5	225,000	1,125,000
	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
-	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
1	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
	Anesthesia Machine with Ventilator	1	0	1	2,509,554	2,509,554	0	1	2,509,554	2,509,554	0	1	3,000,000	3,000,000	0	1	7,000,000	7,000,000
!	BED SIDE PATIENT MONITOR	2	1	1	441,000	441,000	1	1	441,000	441,000	1	1	550,000	550,000	1	1	1,200,000	1,200,000
	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
1	Electrosurgical Unit	1	2	0	507,530	-	2	0	507,530	-	2	0	700,000	-	2	0	900,000	-
1	Operation Table	1	3	0	1,426,215	-	3	0	1,426,215	-	3	0	2,000,000	-	3	0	2,500,000	-
O.T (04)	Ceiling Operating Light	1	1	0	413,013	-	1	0	413,013	-	1	0	800,000	-	1	0	950,000	-
1	STEAM STERILIZER	1	0	1	3,465,000	3,465,000	0	1	3,465,000	3,465,000	0	1	4,000,000	4,000,000	0	1	7,800,000	7,800,000
1	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
1	Resuscitation trolley 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
	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
1	MOBILE OPERATING LIGHT	1	1	0	304,220	-	1	0	304,220	-	1	0	400,000	-	1	0	900,000	-
1	Operation Table	0	0	0	1,426,215	-	0	0	1,426,215	-	0	0	2,000,000	-	0	0	5,000,000	-
1	ORTHOPEDIC DRILL	0	0	0	1,108,740	-	0	0	1,108,740	-	0	0	1,500,000	-	0	0	4,000,000	-
Orthopedic	Plaster Cutting Pneumatic	1	1	0	276,250	-	1	0	276,250	-	1	0	450,000	-	1	0	1,500,000	-
5	Pneumatic Tourniquets	0	0	0	262,500	-	0	0	262,500	-	0	0	262,500	-	0	0	300,000	

				0								0)	-		0	D = + +! =	-
				Orig					vised				Revise	a			Revise	d
r. Area Name	e 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
-	opedic Instruments	0	0	0	432,623	-	0	0	432,623	-	0	0	550,000	-	0	0	550,000	-
7 Portat	able/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
8 Autoc	clave	1	1	0	441,000		1	0	441,000		1	0	550,000	-	1	0	850,000	
9 Delive	very Set	10	3	7	31,500	220,500	3	7	31,500	220,500	3	7	40,000	280,000	3	7	65,000	455,000
0 Delive	very Table	2	3	0	47,250	-	3	0	47,250	-	3	0	47,250	-	3	0	55,000	-
1 BED S	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
2 D&C	C Set	2	1	1	34,650	34,650	1	1	34,650	34,650	1	1	40,000	40,000	1	1	60,000	60,000
3 Gynea (20 beds) Vaccu	cume Extractor	1	1	0	259,350	-	1	0	259,350	-	1	0	300,000	-	1	0	350,000	-
	Machine	1	1	0	628,049	-	1	0	628,049	-	1	0	725,000	-	1	0	900,000	-
5 ECG I	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
6 Portat	able O.T Light	2	1	1	304,220	304,220	1	1	304,220	304,220	1	1	400,000	400,000	1	1	900,000	900,000
7 Baby	-	2	2	0	14,669	-	2	0	14,669	-	2	0	16,000	-	2	0	16,000	-
	very trolly	2	4	0	47,250		4	0	47,250		4	0	47,250	-	4	0	47,250	
-	ktop 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
	m Sterilizer	0	0	0	3,355,849	-	0	0	3,355,849	-	0	0	4,000,000	-	0	0	7,800,000	-
-	ration Table	0	0	0	1,426,215	-	0	0	1,426,215	-	0	0	2,000,000	-	0	0	2,500,000	-
2 Surgical MOBI	BILE OPERATING LIGHT	0	0	0	285,466	-	0	0	285,466	-	0	0	400,000	-	0	0	900,000	-
Emergency (10	ion Pump	0	2	0	259,350	-	2	0	259,350	-	2	0	275,000	-	2	0	300,000	-
Deusj	ngoscope	0	3	0	9,744	-	3	0	9,744	-	3	0	12,000	-	3	0	20,000	-
	of Surgical Instruments	0	4	0	141,750	-	4	0	141,750	-	4	0	160,000	-	4	0	220,000	-
6 Stretc		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
-	el 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
	support	6	2	4	4,200	16,800	2	4	4,200	16,800	2	4	4,500	18.000	2	4	5,148	20,592
10010	uscitation trolly With Crash Cart	5	0	5	237,618	1,188,091	0	5	237,618	1,188,091	0	5	400,000	2,000,000	0	5	600,000	3,000,000
	Appratus	15	28	0	15,750	-	28	0	15,750	-	28	0	16,000	-	28	0	16,000	-
1 Others Ventil		0	0	0	2,195,080	-	0	0	2,195,080	-	0	0	3,500,000	-	0	0	5,500,000	-
2 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
	" AY 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
	d 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
	ge Inensifier	0	0	0	4,667,460	100,000	0	0	4,667,460		0	0	4,667,460	200,000	0	0	#######################################	
intege	tral Medical Gass Pipe Line System	7	0	7	850,000	5,950,000	0	7	850,000	5,950,000	0	7	-	-	0	7	-	
	prized Patient bed with bed																	
side,N	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
	ygmomanometer 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
	uscitation 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
	brilator	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
	brillator with Monitor	0	0	0	330,750	-	0	0	330,750	-	0	0	650,000	-	0	0	800,000	-
	Machine Three Channel	0	0	0	169,785	-	0	0	169,785	-	0	0	180,000	-	0	0	300,000	-
	nge 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
	ion Pump	0	0	0	259,350	-	0	0	259,350	-	0	0	275,000	-	0	0	300,000	-
	Monitor	0	0	0	298,200	-	0	0	298,200	-	0	0	900,000	-	0	0	1,250,000	-
	ument 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
	d instruments	0	0	0	-	-	0	0	-	-	0	0	-	-	0	0	-	-
	tilator 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
	P with humidifier	0	0	0	1,098,510	-	0	0	1,098,510	-	0	0	2,100,000	-	0	0	2,800,000	-
	IVERY 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
Anbu	u-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
741104	ou-Bag, paeds D BODY REFRIGERATOR WITH	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
MORTUERY CAST Along	DBODY REFRIGERATOR WITH TERS 220v 50Hz Ig 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
4 Denta	tal 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
05 Autoc	clave	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
	tal 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
	al Intra Oral Camera	0	0	0	94,500	-	0	0	94,500	-	0	0	150,000	-	0	0	600,000	-
DENT	ITAL CAUTERY	0	0	0	84,000	-	0	0	84,000	-	0	0	160,000	-	0	0	900,000	-
)9 Dental Unit Ultras	Isonic 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

					Me	edical	Equip	ment											
					Orig	inal			Re	vised			2nd F	Revise	d		3rd F	Revise	d
Sr. No.	Area	Name of Equipment	Yard Stick		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
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
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
114	Beds	Fowler beds with Mattress	30	0	30	70,000	2,100,000	0	30	70,000	2,100,000	0	30	110,000	3,300,000	0	30	150,000	4,500,000
		Total					55,678,456				55,678,456				72,057,250				113,318,842
						•	55.678			•	55.678				72.057				113.319

				Elec	tricity								
			Original		-	lst Revise	ed	2	nd Revis	ed		3rd Revis	ed
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	1,200,000	1,200,000	2	1,600,000	3,200,000
2	Transformers (100 KVA)	0	450,000	-	0	450,000	-	0	800,000	-	0	800,000	-
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)	14	55,500	777,000	14	55,500	777,000	14	55,500	777,000	14	55,500	777,000
7	2 Ton air conditioners (Cabinet)	10	78,000	780,000	10	78,000	780,000	10	78,000	780,000	10	78,000	780,000
8	4 Ton air conditioners (Cabinet)	1	120,000	120,000	1	120,000	120,000	1	120,000	120,000	1	120,000	120,000
9	Ceiling Fans 56"	30	3,090	92,700	30	3,090	92,700	30	3,090	92,700	30	3,090	92,700
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"	36	3,280	118,080	36	3,280	118,080	36	3,280	118,080	36	3,280	118,080
12	Dual Connection of Electricity / Express Line	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
	Total			11,595,780			11,595,780			12,195,780			23,195,780
				11.596			11.596			12.196			23.196

				IT	& QM	S & Sı	urveilla	nce					
		(Origina	al	1 s	st Revis	sed	2n	d Revi	sed	3	r <mark>d Rev</mark>	ised
Sr. No.	Item Name	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost	Quantity	Per Unit Cost	Total Cost	Quantit y	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

:... 0 0

Furniture and Fixtures

			Origina	al	1s	t Revi	sed	2n	d Revi	sed	3r	d Revi	sed
Sr. No.	Item Name	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	40,000	2,400,000
2	Benches (external)	10	10,000	100,000	10	10,000	100,000	10	10,000	100,000	10	40,000	400,000
3	Electric Water Cooler	8	45,000	360,000	8	45,000	360,000	8	45,000	360,000	8	60,000	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	125,000	3,750,000
5	Examination couches	10	35,000	350,000	10	35,000	350,000	10	35,000	350,000	10	35,000	350,000
6	Fire Blanket	5	2,500	12,500	5	2,500	12,500	5	2,500	12,500	5	3,000	15,000
7	Fire Extinguisher (Water Based)	30	8,000	240,000	30	8,000	240,000	30	8,000	240,000	30	2,500	75,000
8	Acrylic Board	150	2,200	330,000	150	2,200	330,000	150	2,200	330,000	150	2,000	300,000
9	Rostrum	2	18,000	36,000	2	18,000	36,000	2	18,000	36,000	2	20,000	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	5,000	500,000
12	Waste Bin Sets (3 bin)	40	6,000	240,000	40	6,000	240,000	40	6,000	240,000	40	9,000	360,000
13				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	150,000	300,000
15	Refrigerator glass single door	5	80,000	400,000	5	80,000	400,000	5	80,000	400,000	5	90,000	450,000
16	Refrigerator 16 cft	5	36,000	180,000	5	36,000	180,000	5	36,000	180,000	5	50,000	250,000
17	Air Curtain On Door	5	50,000	250,000	5	50,000	250,000	5	50,000	250,000	5	75,000	375,000
18	Washing machines for pantries	3	13,000	39,000	3	13,000	39,000	3	13,000	39,000	3	11,000	33,000
19	Gas Burner for pantries	10	4,800	48,000	10	4,800	48,000	10	4,800	48,000	10	80,000	800,000
20	Fire Extinguishers DCP	30	4,800	144,000	30	4,800	144,000	30	4,800	144,000	30	6,500	195,000
21	LED TV	15	55,000	825,000	15	55,000	825,000	15	55,000	825,000	15	140,000	2,100,000
22	Industrial Exhaust	5	50,000	250,000	5	50,000	250,000	5	50,000	250,000	5	60,000	300,000
23	Acrylic Display Board	4	20,000	80,000	4	20,000	80,000	4	20,000	80,000	4	20,000	80,000
	Laundry & Washing												
24		300	1,250	375,000	300	1,250	375,000	300	1,250	375,000	300	2,500	750,000
25		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	4,000	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	60,000	1,200,000
28	Moveable Iron Stairs (Required)	2	15,000	30,000	2	15,000	30,000	2	15,000	30,000	2	20,000	40,000
29	Lifters (Required)	2	37,000	74,000	2	37,000	74,000	2	37,000	74,000	2	35,000	70,000
30	Pallets 3x4 (Plastic) (Required)	20	12,000	240,000	20	12,000	240,000	20	12,000	240,000	20	10,000	200,000
31	Dehumidifier (Required)	1	100,000	100,000	1	100,000	100,000	1	100,000	100,000	1	125,000	125,000
32	Insect Killer (Required)	25	8,000	200,000	25	8,000	200,000	25	8,000	200,000	25	6,500	162,500
33	Thermometer (Required)	20	16,000	320.000	20	16.000	320,000	20	16.000	320,000	20	600	12,000
50	Total	20	10,000	13,503,500	20	10,000	13,503,500	20	10,000	13,503,500	20	000	18,787,500
	10101			13,503,500	1		13,503,500			13,505,500			18,78

			0	rigin	al	1st	Revi	sed	2nc	l Rev	vised	3rd	Rev	ised
Sr No	Туре	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	113,57
		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	476,98
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	126,49
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	196,14
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	248.92
10	M1	Advance Fire Exit Sign	10	1.782	17.820	10	1.782	17.820	10	2.534	25,340	10	2,534	25,34
11		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	17.52
12	N1	Fire Safety/Equipment Signage	20	2.361	47.220	20	2.361	47.220	20	3.357	67,144	20	3.357	67.14
13	P1	Floor Map Board	5	20,449	102.245	5	20,449	102.245	5	29.075	145.376	5	29.075	145.37
14	Q1	Caution Signage	25	2.107	52.675	25	2.107	52.675	25	2.996	74,900	25	2.996	74.90
15	Q2	Caution Signage	5	634	3.170	5	634	3.170	5	2,330	4,508	5	2,330	4.50
16	Q2 Q3	Caution Signage	10	1.109	11.090	5 10	1,109	11.090	5 10	1.576	15,764	5 10	1.576	15.76
17	Q3 Q4	Caution Signage	10	861	12,915	10	861	12,915	10	1,576	18,375	10	1,576	18,375
17	Q4	Total	10	001		10	001		-	1,225		15	1,223	
					2,916,263			2,916,263			4,146,482			4,146,48
		Designing and Site Supervision			87,488		ł	87,488			124,394			124,39
		Grand Total			3,003,751	1		3,003,751			4,270,877			4,270,87

			Original		1s	t Revised		2n	d Revise	d	3rc	d Revised	1
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
	Sandpaper Alphabets (Urdu)	3	3,500	10,500	3	3,500	10,500	3	3,500	10,500	3	3,500	10,500
11		3	2,000	6,000	3	2,000	6,000	3	2,000	6,000	3	2,000	6,000
	Hammer Case	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
	Soft Reading Book Shape Sorting Case	15 2	200 500	3,000									
	Transport Set (Model)	2	700	1,000	2	700	1,000	2	700	1,000	2	700	1,000
	Model Puzzles (S)	7	300	2,100	7	300	2,100	7	300	2,100	7	300	2,100
	Model Puzzles (B)	7	500	3.500	7	500	3,500	7	500	3,500	7	500	3.500
18		20	100	2.000	20	100	2.000	20	100	2,000	20	100	2.000
	Information Book (Large)	20	350	7.000	20	350	7.000	20	350	7.000	20	350	7.000
	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		2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
23		4	500	2,000	4	500	2,000	4	500	2,000	4	500	2,000
	Number Block	4	500	2,000	4	500	2,000	4	500	2,000	4	500	2,000
25		5	450	2,250	5	450	2,250	5	450	2,250	5	450	2,250
26 27	Color Crayons (Large) Marker Color (Board and Permanent)	5 15	300 395	1,500 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		2	1,000	2,000	2	1,000	2,000	2	1,000	2,000	2	1,000	2,000
30	,	2	600	1,200	2	600	1,200	2	600	2,000	2	600	1.200
31		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
	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
	Sand Play	2	1,000	4,000	2	1,000	4,000	2	1,000	4,000	2	1,000	4,000
	Gym Play	2	2,000	3,000	2	2,000	3,000	2	2,000	3,000	2	2,000	3,000
37		20	1,500	40,000	20	1,500	40,000	20	1,500	40,000	20	1,500	40,000
	Folding Mats	20	2,000	6,000	20	2,000	6,000	20	2,000	6,000	20	2,000	6,000
	Diaper Changing Mats	3	300	1,500	3	300	1,500	3	300	1,500	3	300	1,500
	Cube Cushion	2	500	1,000 600	2	500	1,000 600	2	500 500	1,000 600	2	500	1,000
	Square Cushion Baby Mirror	3	500 300	2,400	2	500 300	2.400	2	500 300	2,400	2	500 300	<u>600</u> 2,400
	Pink Tower With Stand	1	300	2,400	3	800	2,400	3	300 800	2,400	<u> </u>	300	2,400
	Dressing Frames	10	500	8,000	10	500	8.000	10	500	8,000	10	500	8.000
	Monkey Stuffed	2	800	2,400	2	800	2,400	2	800	2,400	2	800	2,400
	Lion Stuffed	2	1.200	3,400	2	1,200	3,400	2	1,200	3,400	2	1,200	3,400
	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
	Number Rods	1	500	500	1	500	500	1	500	500	1	500	500
61	Stand Number Rods	1	800	800	1	800	800	1	800	800	1	800	800

DAY CARE CENTER

			sk as hei	women	Dvelopmer	n Depan	ment						
		(Original		1s	t Revised	ł	2n	d Revise	d	3rc	d Revise	d
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
	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
	Tri Cycles	4 10	3,500	14,000	4	3,500	14,000	4 10	3,500	14,000	<u>4</u> 10	3,500	14,000
	Wooden Cots Mattresses for Cots	10	10,000	100,000	10	10,000	100,000	10	10,000	100,000	10	10,000	100,000
57 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
	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
	Activity Gym (Infants)	5	2,000	10,000	5	2,000	10,000	5	2,000	10,000	5	2,000	10,000
72 73	Play Gym	5	2,700 2,000	13,500 10,000	5 5	2,700 2,000	13,500 10,000	5	2,700 2,000	13,500 10,000	5 5	2,700 2,000	13,500 10,000
74	Activity Gym (Toddlers) Toiler Training Seat	5 10	2,000	30,000	5 10	2,000	30,000	5 10	3,000	30,000	5	2,000	30,000
74	Infant Toys	30	4,000	120,000	30	4.000	120,000	30	4,000	120.000	30	4,000	120,000
	Bath Toys	15	1,000	15,000	15	1,000	15,000	15	1,000	15,000	15	1.000	15,000
77		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
	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 Kitchen Accessories / Cutleries etc.	1 24	34,000 200	34,000 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
	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
9 10		1	5.000	5.000	1	5.000	5,000	1	5,000	5.000	1	5.000	5,000
10	DVD player CCTV Cameras	1	100,000	5,000	1	100,000	5,000	1	100.000	5,000	1	100,000	100,000
	Fire Alarms	3	5,000	15,000	3	5,000	15,000	3	5,000	15,000	3	5,000	15,000
		1	10.000	10.000	1	10.000	10.000	1	10.000	10.000	1	10.000	10.000
		1	7,000	7.000	1	7.000	7,000	1	7.000	7.000	1	7.000	7,000
	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
	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
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	1,600,000		1	1,600,000

DAY CARE CENTER

is. Name Salary is provide Salary is provide <th></th> <th></th> <th></th> <th>Orig</th> <th>inal</th> <th></th> <th></th> <th>1st Re</th> <th>evised</th> <th></th> <th></th> <th>2nd Re</th> <th>evised</th> <th></th> <th></th> <th></th> <th>3rd Re</th> <th>vised</th> <th></th>				Orig	inal			1st Re	evised			2nd Re	evised				3rd Re	vised	
2 NUMAN RESOURCE & LEGAL 1 60,000 720,000 1 80,000 1,20,000 1 6 150,000 3,255,000 3 ITSTATISTICAL OFFICER 1 60,000 720,000 1 80,000 1,20,000 1 6 150,000 3,255,000 4 FINANCE: BULGET & AUDIT 1 60,000 60,000 720,000 1 80,000 1,20,000 1 6 105,000 105,000 3,255,000 5 PROLUREMENT OFFICER 1 60,000 720,000 1 80,000 80,000 1,20,000 1 6 105,000 3,255,000 6 OUCLEMENT OFFICER 1 60,000 720,000 1 80,000 80,000 1,20,000 1 6 105,000 3,255,000 7 OCCLEMENT OFFICER 1 60,000 720,000 1 80,000 8,000 1,20,000 1 6 105,000 105,000 3,255,000 8 DATA ENTY OFFICER 1	Sr. No.	NAME OF POST			Salary for				Salary for				Salary for						
OFFICER Image: Constraint of the constraint	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
Implication			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
OFFICER 1 60,000 720,000 1 60,000 720,000 1 60,000 720,000 1 60,000 720,000 1 60,000 720,000 1 60,000 720,000 1 60,000 1,520,000 1 6 105,000 3,255,000 3,255,000 6 QUALITY ASSURANCE OFFICER 1 60,000 720,000 1 80,000 1,220,000 1 6 105,000 105,000 3,255,000 3,255,000 7 Locistics OFFICER 1 60,000 60,000 720,000 1 80,000 1,220,000 1 6 105,000 105,000 3,255,000 0 DATA ENTRY OFERATIOR 2 25,000 60,000 2 50,000 600,000 2 50,000 100,000 1,850,000 1 6 105,000 105,000 3,255,000 0 DATA ENTRY OFERATIOR 2 25,000 60,000 2 50,000 600,000 2 50,000 160,000	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
6 OLALITY ASSURANCE OFFICER 1 60,000 720,000 1 60,000 720,000 1 80,000 1,920,000 1 6 105,000 3,255,000 7 LOGISTICS OFFICER 1 60,000 720,000 1 80,000 1,920,000 1 6 105,000 3,255,000 DATA ENTRY OPERAOTOR 2 25,000 50,000 600,000 2 25,000 600,000 2 25,000 1,880,000 2 3 44,000 88,000 2,728,000 9 ASSISTANT ADMIN OFFICER 2 40,000 80,000 2 50,000 600,000 2 50,000 600,000 2 50,000 1,880,000 2 50,000 140,000 4,34	4		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
Instruction	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
B DATA ENTRY OPERAOTOR (DEO) 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 2 40,000 80,000 2 50,000 100,000 2,400,000 2 5 70,000 140,000 4,340,000 0 HR FOR OMS and MSDS and Day Care Center - <td>6</td> <td>QUALITY ASSURANCE OFFICER</td> <td>1</td> <td>60,000</td> <td>60,000</td> <td>720,000</td> <td>1</td> <td>60,000</td> <td>60,000</td> <td>720,000</td> <td>1</td> <td>80,000</td> <td>80,000</td> <td>1,920,000</td> <td>1</td> <td>6</td> <td>105,000</td> <td>105,000</td> <td>3,255,000</td>	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
(DEC) 2 25,000 50,000 22 25,000 50,000 22 35,000 70,000 1,88,000 22 3 44,000 88,000 27,728,000 9 ASSISTANT ADMIN OFFICER 2 40,000 80,000 2 40,000 2 50,000 100,000 2 5 70,000 140,000 4,340,000 10 HR FOR QMS and MSDS and Day Care Center -	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
Index Image Image <th< td=""><td>8</td><td></td><td>2</td><td>25,000</td><td>50,000</td><td>600,000</td><td>2</td><td>25,000</td><td>50,000</td><td>600,000</td><td>2</td><td>35,000</td><td>70,000</td><td>1,680,000</td><td>2</td><td>3</td><td>44,000</td><td>88,000</td><td>2,728,000</td></th<>	8		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
Day Care Center C	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
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 2 25,000 50,000 600,000 2 25,000 50,000 600,000 2 25,000 50,000 600,000 120,000 8 20,000 160,000 1,920,000 8 20,000 160,000 1,920,000 8 20,000 160,000 1,920,000 8 20,000 100,000 1,920,000 8 13 Consultaria (MSDS) 1 100,000 1,00,000	10																	·	
13 Consultants (MSDS) Implementation & Clinical Audit Training on MSDS Compliance for Staff of THQ Hospital 1 100,000 1,200,000 1 100,000 1,200,000 1 15 Training on MSDS Compliance for Staff of THQ Hospital 1000 4,000 4,000,000 1,200,000 1 4,000,000 1,200,000 1 4,000,000 1,200,000 1 4,000,000 1,200,000 1 4,000,000 1,200,000 1 4,000,000 1 4,000,000 1,200,000 1 20,000 1 20,000 1 20,000 1 <			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
Implementation & Clinical Audit 1 100,000 1,200,000 1 100,000 1,200,000 1 100,000 1,200,000 1 Implementation & Clinical Audit 1 100,000 1,200,000 1 100,000 1,200,000 1 100,000 1,200,000 1 Italing on MSDS Compliance for Staff of THAD Hospital 1000 4,000 4,000,000 4,000 4,000,000 4,000 4,000,000	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
Staff of THQ Hospital 1000 4,000 </td <td></td> <td>Implementation & Clinical Audit</td> <td>1</td> <td>100,000</td> <td>100,000</td> <td>1,200,000</td> <td>1</td> <td>100,000</td> <td>100,000</td> <td>1,200,000</td> <td>1</td> <td>100,000</td> <td>100,000</td> <td>1,200,000</td> <td>1</td> <td></td> <td>100,000</td> <td>100,000</td> <td>1,200,000</td>		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
16 Manager Day Care Center 1 45,000 540,000 1 45,000 540,000 1 17 Montessori Trained Teacher 1 35,000 35,000 420,000 1 35,000 35,000 420,000 1 18 Attendant / Care Giver 4 25,000 100,000 420,000 1 20,000 240,000 1 25,000 100,000 420,000 1 9 Office Boy 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 20,000 240,000 1 20,000 20,000 240,000 1 20,000 20,000 20,000 </td <td>14</td> <td></td> <td>1000</td> <td>4,000</td> <td>4,000,000</td> <td>4,000,000</td> <td>1000</td> <td>4,000</td> <td>4,000,000</td> <td>4,000,000</td> <td>1000</td> <td>4,000</td> <td>4,000,000</td> <td>4,000,000</td> <td>1000</td> <td></td> <td>4,000</td> <td>4,000,000</td> <td>4,000,000</td>	14		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
17 Montessori Trained Teacher 1 35,000 35,000 420,000 1 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 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 4 25,000 100,000 1,200,000	15					500,000				500,000				500,000				0	500,000
18 Attendant / Care Giver 4 25,000 100,000 4,200,000 4 25,000 100,000 4,200,000 4 19 Office Boy 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 240,000 240,000 1 20,000 240,000 <	16	Manager Day Care Center	1		45,000		1	45,000	45,000		1	45,000			1]			
19 Office Boy 1 20,000 240,000 1 20,000 240,000 1 20,000 240,000 1 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 Utilization of HR Component 17.220 5,230 7.171 20,100 5,273,000 40,473	17	Montessori Trained Teacher	1				1				1				1]			
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 Utilization of HR Component 17.220 5,230 7,171 40.473 40.473 40.473			4				4				4				4	1			
Interference Interference<	19		1	20,000			1	20,000			1	20,000			1		20,000		
Utilization of HR Component 5.230 7.171		Sub Total of Hi	R Model		4,860,000				4,860,000				5,040,000					5,273,000	
						17.220										4			40.473
Total of HR Component 33.37 47.644										5.230			1	7.171 33.37		J			47.644

			-	
	(Origir	nal	From 1st Revised to onward
Assumptions				In the light of decision made during the Progress Review Meeting of
Covered area excluding residential area	22,561	sft		Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the
Covered area assigned to one sweeper	7,500	sft		Chairmanship of Chairman, P&D Board; it was inter alia decided as
Number of sweepers required for covered area	3	Persons		under:
Road and ROW area	36,210	sft		"It would be made sure by the P&SH Department that the
Road and ROW assigned to one sweeper	15,000	sft		outsourcing would be shifted to the non-development side from 1s July 2018 next FY".
Number of sweepers required for road and ROW area	2	Persons		In view of above, Outsourcing cost has been excluded from this PC-I.
Number of washroom blocks	5	blocks		In view of above, Outsourcing cost has been excluded from this PC-1.
Number of washroom block assigned to one sweeper	3	Persons		
Number of sweepers required for total washroom blocks	2	Persons		
Total sweeper in morning shift	7	Persons		
Total number of sweepers in evening shift	3	Persons		
Total number of sweepers in night shift	3	Persons		
Total number of sweepers in all shifts	13	Persons		
Number of sewer men required	3	Persons		
Number of supervisors	3	Persons		
Salary component				
Type of worker	No of	Salary per	Salary for	
	workers	month	One Year	
Sweepers / Janitors	13	22,000	3,524,294	
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)			10,052,294	

	\$	Secu	rity an	d Parl	king
		Ori	ginal		From 1st Revised to onward
Assumptions					In the light of decision made during the Progress Review Meeting of
Covered area excluding residences	22,561				Revamping of DHQ/THQ Hospitals held on 01-01-2018 under the
Covered Area per guard	15,000				Chairmanship of Chairman, P&D Board; it was inter alia decided as
Number of guards	2				under:
Open area excluding parking area	36,210				"It would be made sure by the P&SH Department that the
Area covered per guard per shift for open area excluding parking	15,000				outsourcing would be shifted to the non-development side from 1s July 2018 next FY''. In view of above, Outsourcing cost has been excluded from this PC-I.
Number of guards for total area excluding parking area	2				In view of above, Outsourcing cost has been excluded from this PC-1.
Number of gates	2				1
Number of guards at gates	4		1		1
Total No of Guard	8				1
Total number of all guards for second shift	4				
Lady Searcher	2				1
Number of parking areas	1				1
Number of guards for parking lot per	-				1
shift (Morning+ Evening)	2				
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	5	21,525	107,625	1,291,500	
Civilian	7	21,000	147,000	1,764,000	
Lady Searcher	2	21,525	43,050	516,600	
Parking	2	21,525	43,050	516,600	
Sub total				4,680,900	
Equipment cost					
Lump sum Provision (Walk Through Gate=1, Metal Detector=4, Walkies Talkies=8, Base Set=1)				400,000]
Sub total			1	400,000	1
Subtracting Parking Fees				500,000	-
Total Security and Parking Services				4,580,900	
, , ,				4.581	1

Laundry Services

		Original		
Number of beds	30			
Type of Item	No of Beds	Per bed cost per year	Total Cost	
No of Bed	30	30,000	900,000	
Transport Charges			1,200,000	
Total for laundry items			2,100,000	
Total			2.100	

From 1st Revised to onward 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.

	Mainte	nanc	e of G	Generator
	(Drigin	al	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
Periodical Maintenance Cost				Chairman, P&D Board; it was inter alia decided as under:
Number of Generators (200 KVA)	-	500,000	-	"It would be made sure by the P&SH Department that the outsourcing
Number of Generators (100 KVA)	-	300,000	-	would be shifted to the non-development side from 1st July 2018 next FY".
Number of Generators (50 KVA)	1	175,000	175,000	In view of above, Outsourcing cost has been excluded from this PC-I.
Repairs Cost	1	175,000	175,000	
HR Cost				
Supervisor	1	40,000	240,000	
Generator Operator	3	30,000	1,080,000	
Technical Staff/Mechanic	-	30,000	-	
Total			1,670,000	
			1.670	

				MEF	
		Ori	ginal		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
Supervisors	1	56,420	56,420	677,040	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.
Plumber	1	32,550	32,550	390,600	In view of above, Outsourcing cost has been excluded from this PC-1.
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	
Fotal (Salary compone	nt))		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	2	4,000	8,000	8,000	
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				1,068,890	
General Total				3,672,890	
				3.673	

			Medi	cal	Gase	es
			Origir	nal		Fror
	Scope of Work	Monthly Consumption per THQ Hospital	Annual Consumption per THQ Hospital	Rate per Cylinder	Total Annual Cost per THQs	In the light o Revamping Chairmanshi
	Medical Oxygen Gas in 240 CFTCylinder (MM)	12	144	1850	266,400	"It would outsourcing
Oxygen	Medical Oxygen Gas in 48 CFTCylinder (MF)	30	360	1,000	360,000	In view of ab
	Medical Oxygen Gas in 24 CFTCylinder (ME)	40	480	800	384,000	
Nitrous	Nitrous Oxide in 1,620 Liter (XE)	2	24	5,000	120,000	
Oxide	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	

om 1st Revised to onward

t of decision made during the Progress Review Meeting of ng of DHQ/THQ Hospitals held on 01-01-2018 under the ship of Chairman, P&D Board; it was inter alia decided as

under: uld be made sure by the P&SH Department that the g would be shifted to the non-development side from 1st July 2018 next FY". above, Outsourcing cost has been excluded from this PC-I.

Cafeteria Pre-Fabrication Cateen (Procurement)

			C	Drigin	al	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:
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	"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.
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 ³ / ₄ " (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 Providing and fixing aluminium frame window with					4
11	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	

Cafeteria

Pre-Fabrication Cateen (Procurement)

			C	Drigin	al	From 1st Revised to onward
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	
	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	

		C	OST E	ESTIM	ATE	
			0	rigina		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
1	SOFT LANDSCAPE					decided as under: "It would be made sure by the P&SH Department that the
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	It would be handled suffer by the resist Department unit the outsourcing would be shifted to the non-development side from Ist July 2018 next FV". In view of above, Outsourcing cost has been excluded from this PC I.
1.2	STONE / PEBBLES Supply and laying a layer of pebbles/stone at specified locations with Landscape base as in	Truck	1	34,375	34,375	-
	Landscape Design approved by the Engineer.					-
1.3						-
а	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						*
	Providing and planting tree / shrub as listed and as arrangement and type shown in the Drawings, in pits of size 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.					
а	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	
с	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	

	LANDSC					VORKS						
	COST ESTIMATE											
			0	rigina	I	From 1st Revised to onward						
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							
а	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												
	Providing and planting ground covers as listed and as arrangement and type shown in the Drawings, in pits of size 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							

		C(OST E	STIM	ATE	
			0	rigina		From 1st Revised to onward
1.7	PALMS			- U		
	Providing and planting palms as per Drawings,					
	specifications and to the satisfaction of Engineer .					
а	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		140.5	10	1,000	72,000	
	Providing and planting Creepers as listed and as arrangement and type shown in the Drawings, in pits of size 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					
2.1	WALK WAYS					
а	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						
	Complete in all respects and to the satisfaction of	No's	8	23,675	189,400	
2.4	Engineer as per approved design. PLAYING EQUIPMENTS					
	Complete in all respects and to the satisfaction of				105 500	
	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	

LANDSCAPE DEVELOPMENT WORKS COST ESTIMATE										
Total Amount of - Landscaping	7,256,	168								
PRA(16%)	1,161,	035								
Design Consultancy	100,0	00								
TPV (3%)	217,6	94								
Grand Total	8,735,	97								
	8.	35								

Civil Estimates

GOVERNMENT OF PUNJAB



2nd BI-Annual 2021 phase # 02 THO

OFFICE OF THE EXECUTIVE ENGINEER BUILDINGS DIVISION CHAKWAL

NAME OF WORK

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

ESTIMATED COST:

46.029 48.289 (M)

SUPERINTENDING ENGINEER BUILDINGS CIRCLE NO.1 RAWALPINDI

Email: sepbcrwp@gmail.com

Phone. 051/9334587 Fax. 051/9334542

To

The Director, Infrastructure Project Management Unit Primary & Secondary Healthcare Department 31/E1 Shahra-E-Imam Hussain Gulberg-III Lahore No. <u>1903</u> 10 dated: <u>2810712021</u>

Subject:

ROUGH COST ESTIMATE FOR THE WORK "PROGRAMME FOR REVAMPING OF ALL THQ HOSPITALS IN PUNJAB ONE AT THQ HOPSITAL KALLAR KAHAR DISTRICT CHAKWAL" ADP N0.792 FOR 2021-22.

Rough cost estimate amounting to Rs.56.483M for the scheme cited as subject was sent to Secretary to the Govt of the Punjab Primary & Secondary Healthcare Department Lahore vide Chief Engineer (North Zone) Punjab Building department Lahore No.CEBNZ/570/DB dated 2-3-2021 but the administrative approval has not been issued as yet.

Now the scheme cited as subject has been reflected in the ADP for the year 2021-22 at G.S No.792 with estimated cost Rs. 1500.000 M (Block) & allocation of Rs.600.000(M) (Block) & plinth area rates has also been revised vide Chief Engineer (North Zone) Punjab Building Department Lahore memo No.CEBNZ/1120/D, dated:9-7-2021 & MRS 2nd Bi Annual 2021 for the period (1st July 2021 to 31st Dec 2021) for District Chakwal.

Hence this rough cost estimate amounting to Rs.46.029 M prepared by the Executive Engineer Building Division Chakwal, on the basis of new plinth area rates dated:9-7-2021, is submitted herewith dully vetted for arranging its administrative approval / funds.

DA/Rough cost estimate

Superintending Englinee) Buildings Circle No. Rawalpindi

No.___/

dated:___/__

Copy is forwarded to:

1. The Chief Executive Officer District Health Authority Chakwal.

 The Executive Engineer, Building Division Chakwal with reference to his letter No.1894/D, dated:26-07-2021 received on 28-7-2021 for pursuance.

DA/Nil

Superintending Engineer Buildings Circle No.I Rawalpindi

brawing Branch(D)/New data 2021/fwd letter 2021/letter 2021

ROUGH COST ESTIMATE FOR THE WORK PROGRAME FOR REVAMPING ALL THQ HOSPITALS IN PUNJAB (ONE AT THQ HOSPITAL KALLAR KAHAR 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 Tehsil Headquarters Kallar Kahar as per 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

 Trauma Centre / THQ Hospital 	20168 Sft
2. Re-Construction of Boundary Wall	01 Job
3. Provision of Water Supply line from spring near Darbar to UGWT	01 Job
4. Facelifting of Main Building	01 Job
5. Supply / Erection Glow Sign Board	80 Sft
6. Provision of External Waiting Area & Parking facility	01 Job
7. Construction of Under Ground Tank	20000 GIn

The rough cost estimate of Rs. 56.483 (M) was framed and forwarded to Secretary to the Government of the Punjab, Primary & Secondary Healthcare Department Lahore vide the Chief Engineer, Punjab Buildings Department (NZ) Lahore letter no. CEBNZ/570/D, dated: 02-03-2021 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 THQ Hospoital Kallar Kahar) & 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. 48.289 (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. 48.289 Millions

Sub Divisional Officer **Buildings Sub Division** Chakwal

Executive Engineer Buildings Division Chakwal

ROUGH COST ESTIMATE FOR THE WORK PROGRAME FOR REVAMPING ALL THQ HOSPITALS IN PUNJAB (ONE AT THQ HOSPITAL KALLAR KAHAR DISTRICT CHAKWAL)" ADP NO. 792 FOR THE YEAR 2021-22 <u>COMPARITIVE STATEMENT</u>

		Rou		Estimate as ef Engineer		Rough	Cost Esti	mate on Fres Rates	h Plinth Area	Diffe	erence	
Sr.#	Description of Item	Plinth Area	Unit	Total Rate	Amount	Plinth Area	Unit	Total Rate	Amount	Excess	Saving	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13
A	CLINICAL BUILDING (Internal Development, Tile work, ramp & stair paint & dampness work lead lining, façade improvement, internal fixtures, intenal electrification & miscellaneous repair work of building											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
1	Trauma Centre / THQ Hospital	20168	P.Sft	1325.21	26,726,847	20168	P.Sft	1395.97	28,153,923	1,427,076	0	Lahore
2	Re-Construction of Boundary Wall	1	P.Job	2991401	2,991,401	1	P.Job	3087103	3,087,103	95,702	0	No.CEBNZ/1120/D, dated:-09/07/2021
3	Provision of Water Supply line from Spring near to Darbar to UGWT	· 1	Each	3281969	3,281,969	1 -	Each	3885979	3,885,979	604,010	0	for the period from 1st July 2021 to 31st Dec 2021 for Chakwal
4	Provision of Façade Improvement	0	0	0	0.	1	P.Job	4521000	4,521,000	4,521,000	0	
5	Supply / Errection Glow Sign board 1x20x4=80 Sft	0	0	0	0	80	P.Sft	1600	128,000	128,000	0	
6	Provision of Water Filteration Plant with Supply System	1	P.Job	2616000	2,616,000	0	0	0	0	0	2,616,000	
7	Provision of External Waiting Area & Parking facility	1	P.Job	1151000	1,151,000	I	P.Job	1168357	1,168,357	17,357	0	
>		>				>				<u>``</u>		I

.

		Rou		Estimate as of Engineer		Rough	Cost Estir	nate on Fres Rates	h Plinth Area	Diff	erence	
Sr.#	Description of Item	Plinth Area	Unit	Total Rate	Amount	Plinth Area	Unit	Total Rate	Amount	Excess	Saving	Remarks
1	2	3	4	5	6	7	8	9	10		12	
8	Provision of External Electrification (4-core cable 19/0.083)	50	P.Mtr	4661.7	233,085	0	0	0	0	0	12 233,085	13
В 1	Construction of Emergency Department	2033	P.Sft	-2609	5,304,097	0	- 0	0	0	0		
2	Construction of CCU Ward.	450	P:Sft	2609	1,174,050	0	- 0	0	0	0	1,174,050 -	
3	Construction of 5 Bedded Dialysis Unit.	894	P.Sft	2609	2,332,446	0	0	0	0	0	2,332,446	
	Additional Items											
С	ADDITIONAL PROVISIONS											
1	P/L floor of pre-polished porcelain (Master made) tiles size 24"x24"x3/8" of approved quality any shade laid in cement sand mortar %" thick 1:2 i/c filling joints with white cement and matching pigment i/c laser cutting where required complete in all respect asapproved by the Engineer Incharge. (For Floor) 280-134.53+34.93= 180.4	2609	P.Sft	171	446,139	0	0	0	0	0	446,139	. * .

1

.

>

>

*

?

4

	s.	Rou		Estimate as ef Engineer F		Rough	Cost Esti	mate on Fres Rates	sh Plinth Area	Diff	erence	
Sr.#	Description of Item	Plinth Area	Unit	Total Rate	Amount	Plinth Area	Unit	Total Rate	Amount	Excess	Saving	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13
5	P/L Ceramic Tile Size 12"X18" Master Made 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) 220 - 134.53+34.93= 120.4	123	P.Sft	96	11,808	0	0	0	0	0	11,808	10
6	P/L Ceramic Tile Size 12"X18" Master Made 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) 230-146.93 =83.07	770	P.Sft	72	55,440	0	0	0	0	0	55,440	
7	Finishing of exterior surface of walls with Tramofine Coating / Crete Sand Coating i/c cost of all labour and Material Charges as approved by the Engineer Incharge.	5396	P.Sft	16	86,336	0	0	0	0	0	86,336	
8	P/F M.S Grill to windows using 1/2"x 1/2" sq bar @4" c/c vertically in two parts with 2 nos horizental Iknow for using sliding of windows 1" x 1" x 1/8" angle iron frame alaround i/c painting 3 coats hold fast complete in all respect as approved/ directed by the Engineer Incharge	750	P.Sft	72.15	54,112	0	0	0	0	0	54,112	

>

>

1

.

•

1

		Rou		Estimate as ve of Engineer	etted by	Rough	Cost Estin	nate on Fresl Rates	ı Plinth Area	Diffe	rence	
Sr.#	Description of Item	Plinth Area Un		Total Rate	Amount	Plinth Area	Unit	Total Rate	Amount	Excess	Saving	Remarks
1	2	3	4	5	6	7	8	9	10	11	12	13
9	Supply and erection of fancy LED Pannell light 2'x2' i/c LED Light & Driver 36 (W) (Philips / Alpha LED Ultra Slim) or Equivalent i/c fixing in false ceiling and electric connection complete in all respect as approved/ directed by the Engineer Incharge	36	Each	9200.00	331,200	o	0	0	0	0	331,200	
10	P/F Stainless steel corner beading angle 2"x2"x1/16" with double tape fixed with stainless steel nails i/c cutting fixing complete in all respect as approved by the Executive Engineer.	220	P.Rft	640.00	140,800	0	0	0	0	0	140,800	é
11	P/F OAK wood gola / skirting 2"x2" i/c labour for moulding and finishing in proper shape complete with french polishing as approved by the Engineer Incharge.	870	P.Sft	275.00	239,250	0	0	0	. 0	0	239,250	
12	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.	12	Each	35000.00	420,000	0	0	0	0	0	420,000	

.

		Rou	Rough Cost Estimate as vetted by Chief Engineer				Cost Estir	nate on Fres Rates	sh Plinth Area	Diff	erence	
Sr.#	Description of Item	Plinth Area Unit		Total Rate	Amount	Plinth Area	Unit	Total Rate	Amount	Excess	Saving	Remarks
1	2	3	4	5	6	7	8	9	10	11		
13	Construction of 20000 GIn Under Ground Tank	20000	P.Gln	98.17	1,963,400	20000	P.Gln	113.00	2,260,000	296,600	0	13
				Total Rs.	51,901,817		I I		43,204,361	0	8,697,456	
	Add-5% External Development charge	es on item E	3-1-to-3 (R	s. 8810593)	440,529			and working the second second	1,407,696	967,167	0	
				Total Rs.	52,342,346				44,612,057	0	7,730,289	
	Add 1% for Tree Plantat	tion charges	s on Rs. (5.	2342346/-).	523,423				446,121	0	77,303	
	Add 5% F	PRA charge	s on Rs. (5	2342346/-)	2,617,117				2,230,603	0	386,514	
	Add Cost for WAPDA	e to IESCO	1,000,000				1,000,000	0	0			
		OTAL Rs.	56,482,886				48,288,779	0	8,194,107			
		OR	56.483 (M)				48.289 (M)	0	8.194 (M)			

1

= 48,288,779-10,218,289

1

= 38,070,490

= 38.07 M

Sub Divisional Officer, Buildings Sub Division Chakwal

a.

Executive Engineer Buildings Division Chakwal

a

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

r. No	Description	Plinth	Unit					Plinth Ar	ea Rates					Amount	Dame de
		Area/ Qty				Build	ling Portion			E.I	S.I	S.G	Total Rate	Anodite	Remarks
				Building Portion	Extra for Strip Founda tion	Extra for Base- ment:	Cost of Found-	Extra For 1st Floor and Subsequent Floors	Extra For Framed Structure For Each Floors				Totor nate		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Α	CLINICAL BUILDING (Internal Development, Tile work, ramp & stair paint & dampness work lead lining , façade improvement, internal fixtures, intenal electrification & miscellaneous repair work of building								3						
1	Trauma Centre / THQ Hospital	20168	P.Sft	1295.97 _1395.97						-			1295.47 1395.97	26127039 28153923	Detailed attached.
2	Re-Construction of Boundary Wall	1	P.Job	-			-	-		-	-		3083053 _3087103	3082053	Detailed attached.
3	Provision of Water Supply line from Spring near Darbar to UGWT	1	Each	3885979			-	3 9	-	-			3885979	3885979	Detailed attached.
4	Provision of Façade Improvement	1	P.job			-				-			4521000	4521000	Detailed attached.
5	Supply / Errection Glow Sign board 1x20x4=80 Sft	80	P.Sft					-					1600		Anaylsis attached.
6	Provision of External Waiting Area & Parking facility	1	P.Job	1168357		-			-			-	1168357		Detailed attached.

1

C:\Users\SDO Building\Desktop\Revamping of THQ Kallar Kahar\Kiyani sb changing\RCE for Revamping of THQ-Hospital Kallar Kahar District Chakwal..xls Final

Page 90

1

۲

r. No.	Description	Plinth	Unit					Plinth A	rea Rates					Amount	Remarks
18	24	Area/ Qty			-		ling Portio	n		E.J	5.1	S.G	Total Rate	rinount	Remarks
				Building Portian	Extra for Strip Founda tion	Extra for Base- ment:	Reduced Cost of Found- ation	Extra For 1st Floor and Subsequent Floors	Extra For Framed Structure For Each Floors					94 10	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	Construction of 20000 Gln Under Ground Tank	20000	P.Gln	113.00			-						113.00	2260000	Detailed attached.
							10			h			Total	_4 320436 1	41173428/2
								Add 5	% Developn	nent Ch	arges on	item 1	(28153923/-) 6127039/-	1407696	1306352/=
													Total	44612057	42479780/-
								Add 1.00	% for tree p	lantatio	n charge	es on Rs.	144612057(-)	4 46121	4247981,
									Ada	I CO/ DD	A charge	D	(44612057/-) 12474720 trasnsformer	2230603	2123989
				Add Co	st for WA	APDA Tr	ansforme	r payable to	IESCO (Incre	ease the	load ca	pacity of	trasnsformer	1000000	
	11			2									Grand Total:-	48288781	46028587
_						and the second second							Rs.in Million	48.289 (M)	1
	Sub Divisional Officer, Buildings Sub Division Chakwal	ł	Buik	utive Engi dings Divis Chakwal		Circle Bato	TE For Rs Head Dr. Head Dr. ings Circl (aw alpint	1.4.1	y ile		R			4 6.0 29 n	
									10					a	
	X														
	SDO Building\Desktop\Revamping of THQ Kall				2					>					>

4

Man-inter

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

ABSTRACT O	FCOST
1 Building Portion	2-2585723 Rs. 24 ,613,845
2 Electric Installation	Rs. 1,693,000
3 Sanitary Installation	Rs. 1,864,000
	Total <u>28,170,845</u> 26/42723
Covered Area Ground Floor = 11320 Sft First Floor = $\frac{8860}{1}$ Sft Total = 20180 Sft 26142723 1295.47 Rate P.Sft 28170845 /20180 = 1395.97 P.Sft	8
Sub Divisional Officer Buildings Sub Division Chakwal	Executive Engineer Buildings Division Chakwal

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

MAIN BUILDING ABSTRACT OF COST

MRS 1st July 2021 to 31st Dec 2021

S/No	ltem	Description	Unit	Qty	Rate	Amount
1	P-35 19 c	Dismnantling tile flooring / cement concrete plain 1:2:4 plain.	%Cft	902	8421.6	75963
2	P-66 3	Providing, laying, watering and ramming brick ballast 1½" to 2"(40 mm to 50 mm) gauge mixed with 25% sand, for floor foundation, complete in all respects.	%Cft	1804	5435.7	98060
3	P-42 5 f	P/L of PCC (1:2:4) i/c finishing curing complete.	%Cft	902	24538.8	221340
4	P-37 48	Removing cement or lime plaster.	%Sft	23959	319	76429
5		Cement plaster on walls ratio (1:4) old surface Applying floating coat of cement 1/32" (0.8 mm) thick.	%Cft	23959	3617.4	866693
6		P/L floor of pre-polished porcelain (Master made) tiles size 24"x24"x3/8" of approved quality any shade laid in cement sand mortar ¾" thick 1:2 i/c filling joints with white cement and matching pigment i/c laser cutting where required complete in all respect asapproved by the Engineer Incharge. (For Floor)	P.Sft	5194	276 - 280	1433544 44543207
7		P/L skirting of pre-polished porcelain (Master made) tiles size 24"x24"x3/8" in the shape of 24"x12" pieces of approved quality any shade laid in cement sand mortar ³ /4" thick 1:2 i/c filling joints with white cement and matching pigment i/c laser cutting where required complete in all respect as approved by the Engineer Incharge.(For Dado)	P.Sft	18994	29 Z -290	SS 65 24: 5508260
8	÷	P/F False ceilling (DAMPA) sheet 2'x2' imported fixed with Aluminum frame (TEE & L) hanged with 10 No wire with RCC roof slab i/c cost of Hook & Scaffolding, carriage charges complete in all respect & as approved by the Engineer Incharge	P.Sft	10985	350)	3844758 - 4229225
9		Supply and erection of fancy LED Pannell light 2'x2' i/c LED Light & Driver 36 (W) (Philips / Alpha LED Ultra Slim) or Equivalent i/c fixing in false ceiling and electric connection complete in all respect as approved/ directed by the Engineer Incharge	Each	120	10000	1200000

Page 93

No/	em	Description	Unit	Qty	Rate	Amount
10		Providing / laying 3/4" thick Jet Black Marble slab laid in white cement filling with matching pigment over a bed of 3/4" thick cement sand mortar 1:2 i/c curtin, rubbing and making noizing on one side upto 4-Sft Stair Steps complete in all respect as approved and directed by the Engineer Incharge	P.Sft	1494	375	560250
11	P-36 32 a	Removing door with chowkat.	Each	74	331.65	24542
∕ 12 ♥	P-162 52	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.	P.Sft	486	498.5	242271
13	P-162 53	Providing and fixing Aluminum Fly screen comprising of Fiber / Aluminum wire guaze (Malasian) fixed in aluminum frame of approved manufacturer brownze Colour / powder coated of size 1-1/2"x1/2" and 1.6mm thick with rubber gasket i/c cost of Hardwares as approved and directed by the engineer incharge. complete in all respect.	P.31	243	330.05	80202
4		P/L Ceramic Tile Size 12"X18" Master Made 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)	P.Sft	843	199 220	/67757 185460
5	1	P/L Ceramic Tile Size 12"X18" Master Made 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)	P.Sft	3206	230 230	6892970 73738 0
6		P/F 1 1/2" thick OAK wood Solid door i/c Brass hinges brass towers bolt brass kick plate Brass finger plate, complete in all respect as approved by the Engineer Incharge.	P.Sft	1588	2000	3176000
7	P-84 58	Providing and fixing ornamental wooden architrave 3" x (1½" tapered to ¼") all along the door frame complete in all respect. Deodar wood architrave	P.Sft	1258	50.9	64032

/No	em	Description	Unit	Qty	Rate	Amount
18	R	Providing / Fixing stainless steel non- magnetic stair railing 2-3/4" height consisting of 2" dia 18 SWG pipe top hand rail welded over vertical balustrade, of 1-1/2" wide 3/8" thick stainless steel double strip with stainless steel double strip with stainless stud welded to fancy reducer 2"x1/2" at top and M.S tikki 3" dia 1/4" thick at bottom fixed on steps with holding down rawel bolts 3"x3/8" M.S tikki covered with architectural multi offset shape stainless steel cap 3" dia at bottom and reduced to 1-1/2" dia at top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia at top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia at top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia top in 2" height in horizantal steel cap 3" dia at bottom 3/4" dia 18 SWG 3 No fixed with vertical balustrades i/c steel polishing fixed at site complete in all respect and as approved by the Engineer Incharge (All stainless steel member, shell be of non magnetic) code No 304	P.Rft	100	2400	240000
19		Finishing of exterior surface of walls with Tramofine Coating / Crete Sand Coating i/c cost of all labour and Material Charges as approved by the Engineer Incharge.	P.Sft	10799	54	583146
20		P/F Stainless steel corner beading angle 2"x2"x1/16" with double tape fixed with stainless steel nails i/c cutting fixing complete in all respect as approved by the Executive Engineer.	P.Rft	500	680	340000
, 1 21	1	P/F spun pipe of approved quality (Tipu Supreme) with cement yarn joints etc complete in all respect as approved and directed by the Engineer Incharge 4" dia	P.Rft	540	475	256500
22		P/F of spun pipe specials such as tee, coller, bend etc plain type / plug type of approved quality (Tipu supreme) with cement yarn joints complete in all respect as approved and directed by the Engineer Incharge	P.Rft	60	410	24600
23		Preparing surface & painting with mat finish paint 2 coat on old surface i/c scraping old paint from walls and filling with putty with required material complete in all respect.	P.Sft	23959	30	718770
24	to L	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.	P.Sft	1453	80	116240

/No	em	Description	Unit	Qty	Rate	Amount
25	æ	P/F of UPVC wall paneling UPVC section like plank, beading gola, angle gola 200 mm wide 9mm thick designed grooved planks fixed with inter locking system nails scew on existing wall produced in plumbs using wooden strips (Anti termite) i/c carriage of material from market to site work complete in all respect as approved/ directed by the Engineer Incharge	P.Sft	2561	120	307320
26		Disposal of Dismentled Material from Metropolitan area upto 10 Km	P.Cft	1899	8	15192
27	×	P/L lead lining 0.5mm thick lead sheet with wall for radiation protection upto roof height as per instructions and covering with mdf lasani sheet 1/2" thick vin board 3/4"thick paneling i/c frame of kail wood 1-1/2"x2" i/c termite proofing and fancy deodar wood beading complete in all respect and as directed and approved by the engineer incharge also approved the radiation protecting agency etc.		1647	970 1950-	159 7592

Sub Divisional Officer Buildings Sub Division Chakwal u a

Executive Engineer Buildings Division Chakwal

ROUGH COST ESTIMATE FOR THE WORK PROGRAME FOR REVAMPING ALL THQ HOSPITALS IN PUNJAB (ONE AT THQ HOSPITAL KALLAR KAHAR DISTRICT CHAKWAL)" ADP NO. 792 FOR THE YEAR 2021-22 MAIN BUILDING DETAIL OF QTY

	Z			N	leasurement	s		
S/No	Item No	Description	No	L	В	H ft.	Qt	у
1	-	Dismnantling tile flooring / cement	0	ft.	ft.			
		concrete plain 1:2:4 plain.						
		Ground Floor						
		Porch	1	26.750	19.000	0.125	64	0
		Platform	1	25.250	14.000	0.125	44	Ci
		Entr	1	25.500	12.750	0.125	44	
		Corridor	2	9.750	35.750	0.125	87	"
			1	9.750	67.000	0.125	82	
		Waiting area	2	17.500	19.500	0.125	85	.,
		Crushing Hall	1	32.250	19.500	0.125	79	u
		Ramp	1	81.500	6.250	0.125	64	
			2	20.000	5.000	0.125	25	
		First Floor	2	20.000	5.000	0.125	20	
		Ramp Hall	1	37.000	18.250	0.125	84	
		Corridor	1	47.000	9.750	0.125	57	
			2	44.750	9.750	0.125	109	
			1	49.000	6.125	0.125	38	
	1	Waiting area	1	17.500	20.000	0.125	44	
					20.000	Total -	902	- Cf
		Providing, laying, watering and ramming brick ballast 1 ¹ / ₂ " to				Total	302	
	1	2"(40 mm to 50 mm) gauge mixed with 25% sand, for floor foundation, complete in all						
		respects. As qty item 1	002	0.250			1001	-
			902 0.125	0.250			1804	Cf
			0.125			Total	1804	Cf
		P/L of PCC (1:2:4) i/c finishing curing complete.						
		As qty item 1.	902	0.125			902	Cf
	1	1778-177 E	0.125	0.120		Total	902	Cft
			0.120			rotar	302	Un
	ı	Removing coment or lime plaster						

Removing cement or lime plaster.

Ground Flooor					
Porch	2	24.750	5.000	248	Sft
	2	18.875	5.000	189	
Platform	2	25.250	5.000	253	
	2	14.000	5.000	140	0
Entr	2	25.500	5.000	255	н
	2	12.750	5.000	128	
Preparation	2	11.250	5.000	113	
	2	9.000	5.000	90	n.
UPS	2	11.250	5.000	113	·
	2	9.125	5.000	91	

Control Room	2	8.375	5.000	84	
Lobby	2 2	11.250 8.375	5.000 5.000	113 84	.u u
LODDy	2	6.500	5.000	65	
C.T Scan	2	18.000	5.000	180	п
	2	18.250	5.000	183	н
M.O	2	15.000	5.000	150	U.
	2	18.250	5.000	183	н
Exam	2	5.000	5.000	50	
	2	9.875	5.000	99	л.
Bath	2	5.000	5.000	50	
	2	8.000	5.000	80	0
Doctor duty	2	8.625	5.000	86	
	2	18.250	5.000	183	
W.C	4	4.000	5.000	80	1) 11
1. Salar	4	5.500	5.000	110	
Lav	4	4.000	5.000	80	
1-6	4	5.500	5.000	110	
Lab	2 2	18.250	5.000	183	
Labby	2	7.750	5.000	78	at .
Lobby	2	9.000 5.000	5.000	90 ,	
Blood bank	2	9.000	5.000 5.000	50 180	
BIOOU DATIK	4	11.750	5.000	235	
Film store	2	8.000	5.000	80	
Thin store	2	5.000	5.000	50	
Dark room	2	4.500	5.000	45	н
Barkroom	2	5.000	5.000	50	
X-Ray room	2	18.250	5.000	183	11
	2	16.500	5.000	165	
Chute	2	3.625	5.000	36	н
	2	20.500	5.000	205	н
Radialogist	2	18.250	5.000	183	н.
	2	8.000	5.000	80	ш
Scrub up	2	8.250	5.000	83	н
·	2	8.625	5.000	86	0
Sterlization	2	8.250	5.000	83	
	2	9.125	5.000	91	n.
M.O or Ot	2	14.000	5.000	140	
	2	18.250	5.000	183	0
Plaster Room	2	13.250	5.000	133	н
	2	18.250	5.000	183	u.
W.C	8	4.330	5.000	173	"
	8	6.500	5.000	260	
Lav	2	18.250	5.000	183	
	2	5.000	5.000	50	н
Madical ward	2	18.250	5.000	183	н
	2	51.500	5.000	515	
11 H	2	3.625	5.000	36	н
	2	19.500	5.000	195	н
Disp	2	18.250	5.000	183	н
	2	11.250	5.000	113	11
Entr	2	7.000	5.000	70	۳
	2	18.000	5.000	180	u
Ultrasound	2	8.830	5.000	88	"
	2	12.500	5.000	125	
лп	2	8.000	5.000	80	11

Page 98

	2	12.500	5.000	125	u	
Corridor	4	9.750	5.000	195		
	4	35.750	5.000	715	н	
8.0	2	9.750	5.000	98	.0	
	2	67.000	5.000	670		
Waiting	4	17.500	5.000	350		
	4	19.500	5.000	390		
Crush hall	2	32.250	5.000	323		
	2	19.500	5.000			
Ramp	2	81.500	5.000	195		
	2	6.250		815		
Stair & landing	4	5.000	5.000	63		
ordin of fattoring	4		5.000	100		
Stair waist		5.000	5.000	100		
otan waist	6	8.916	5.000	267		
First Floor	6	5.000	5.000	150	6	
a second s						
ICU, Storre Mumty	4	18.250	5.000	365	"	
-	4	20.000	5.000	400		
Paedric ward	2	18.250	5.000	183		
	2	33.000	5.000	330	200	
Paedric ward	2	3.625	5.000	36	.0	
	2	19.750	5.000	198	- 0	
Surgical ward	2	18.250	5.000	183		
	2	28.750	5.000	288	11	
Lav/WC	2	18.250	5.000	183		
	2	10.125	5.000			
Treatment	2	8.625		101		
neathent	2		5.000	86	н	
Pama hall		18.250	5.000	183		
Ramp hall	2	37.000	5.000	370		
Dute Dastar's staff 1	2	18.250	5.000	183		
Duty Doctor & staff change pass	2	17.750	5.000	178	2.00	
-	2	18.250	5.000	183	11	
Surgeon lounge	2	17.875	5.000	179		
	2	18.250	5.000	183		
O.T -1	2	18.250	5.000	183		
	2	23.250	5.000	233		
O.T -2	2	18.250	5.000	183		
	2	20.000	5.000	200	н	
Scrub upt	2	8.830	5.000	88		
	2	9.750	5.000	98		
Corridor	2	47.000	5.000	470		
	2	9.750	5.000	98		
Sterlization	2	8.830	5.000	88		
	2	12.500	5.000	125		
Lift	4	8.000	5.000	160		
*	4	10.000	5.000	200		
Lift back offset	2	9.500	5.000	95		
	2	1.750	5.000	18		
Corridor	4	44.750	5.000	895		
Somaon	4	9.750	5.000			
D.Utility store	2	3.625		195		
e.ouncy store	2		5.000	36		
Store + WC	2	24.000	5.000	240	н.	
		13.625	5.000	136		
Duty Depter N.C.	2 2	9.000	5.000	90		
Duty Doctor N.S		14.375	5.000	144	U.	
Carrida (Da	2	8.250	5.000	83	0	
Corridor/Passage	2	49.000	5.000	490	200 1	

Page 99

	175 200	н н
2 20.000 5.000	0.04	
Recovery 2 30.125 5.000	301	11
2 17.625 5.000	176	U.
Waiting room 4 13.750 5.000	275	
4 1.250 5.000	25	н
Stair waist 6 8.916 5.000 2	267	
6 5.000 5.000	150	н
Landing 4 5.000 5.000	100	
4 5.000 5.000	100	"
Mumty 2 20.500 5.000 2	205	u
2 12.625 5.000	126	
Total 23	3959	Sft

Cement plaster on walls ratio (1:4) old surface Applying floating coat of cement 1/32" (0.8 mm) thick. Same above qty

P/L floor of pre-polished porcelain (Master made) tiles size 24"x24"x3/8" of approved quality any shade laid in cement sand mortar ¼" thick 1:2 i/c filling joints with white cement and matching pigment i/c laser cutting where required complete in all respect asapproved by the Engineer Incharge. (For Floor)

Ground Floor

5

6

Porch	
Platform	
Entr	
Corridor	
First Floor	
Ramp Hall	

Waiting area

Corridor

7

P/L skirting of pre-polished porcelain (Master made) tiles size 24"x24"x3/8" in the shape of 24"x12" pieces of approved quality any shade laid in cement sand mortar ¼" thick 1:2 i/c filling joints with white cement and matching pigment i/c laser cutting where required complete in all respect as approved by the Engineer Incharge.(For Dado)

Ground Flooor

Platform

2 25.250

5.000

253

Sft Page 100

	23959	Sft
Total	23959	Sft

1	26.750	19.000		508	Sft
1	25.250	14.000		354	.0
1	25.500	12.750		325	.0
2	9.750	35.750		697	н
1	9.750	67.000		653	
1	37.000	18.250		675	н
1	47.000	9.750		458	· 0
2	44.750	9.750		873	
1	49.000	6.125		300	
1	17.500	20.000		350	u
			Total	5194	Sft

Broneretien	2	14.000	5.000	140	u
Preparation	2	11.250	5.000	113	"
UPS	2	9.000	5.000	90	u.
0F3	2	11.250	5.000	113	
Control Room	2	9.125	5.000	91	
Control Room	2	8.375	5.000	84	н
l obby	2	11.250	5.000	113	
Lobby	2	8.375	5.000	84	
C.T Scan	2	6.500	5.000	65	
C. I Scall	2	18.000	5.000	180	
M.O	2	18.250	5.000	183	"
M.O	2	15.000	5.000	150	"
Exam	2	18.250	5.000	183	"
Exam	2	5.000	5.000	50	n
Doctor duty	2	9.875	5.000	99	
Doctor duty	2	8.625	5.000	86	
Lab	2	18.250	5.000	183	
LaD	2	18.250	5.000	183	
1	2	7.750	5.000	78	"
Lobby .	2	9.000	5.000	90	"
- 	2	5.000	5.000	50	н
Blood bank	4	9.000	5.000	180	
-	4	11.750	5.000	235	
Film store	2	8.000	5.000	80	10
	2	5.000	5.000	50	n
Dark room	2	4.500	5.000	45	0
	2	5.000	5.000	50	
X-Ray room	2	18.250	5.000	183	
	2	16.500	5.000	165	
	2	3.625	5.000	36	
	2	20.500	5.000	205	н
Radialogist	2	18.250	5.000	183	
	2	8.000	5.000	80	0
Scrub up	2	8.250	5.000	83	
	2	8.625	5.000	86	11
Sterlization	2	8.250	5.000	83	"
No	2	9.125	5.000	91	.0
M.O	2	14.000	5.000	140	
Director D	2	18.250	5.000	183	-
Plaster Room	2	13.250	5.000	133	
Madiant	2	18.250	5.000	183	0
Madical ward	2	18.250	5.000	183	"
	2	51.500	5.000	515	п
	2	3.625	5.000	36	"
Dian	2	19.500	5.000	195	n.
Disp	2	18.250	5.000	183	
Entr	2	11.250	5.000	113	н
Entr	2	7.000	5.000	70	
Ultrasound	2 2	18.000	5.000	180	u u
onasouna		8.830	5.000	88	
ан на С	2 2	12.500	5.000	125	"
		8.000	5.000	80	"
Corridor	2	12.500	5.000	125	0
Contact	4 4	9.750	5.000	195	
	4	35.750	5.000	715	э н
	2	9.750 67.000	5.000	98 670	11
	2	07.000	5.000	670	

. .

Page 101

100 C

	Waiting	4	17.500	5.000		350	c = 0	
		4	19.500	5.000		390	0	
	Crush hall	2	32.250	5.000		323		
		2	19.500	5.000		195		
	Ramp	2	81.500	5.000		815	11	
	(anip	2	6.250	5.000		63		
	Stair & landing	4	5.000	5.000		100		
	orall a landing	4	5.000	5.000		100	0	
	Stair waist	6	8.916	5.000		267	0	
	Stall Walst	6	5.000	5.000		150	0	
	First Floor	0	0.000	0.000				
	ICU, Storre Mumty	4	18.250	5.000		365	U.	
		4	20.000	5.000		400	0	
	Paedric ward	2	18.250	5.000		183	н	
	i acano wara	2	33.000	5.000		330	Ű.	
	Paedric ward		3.625	5.000		36	. 10	
	Faeuric ward	2 2	19.750	5.000				
	o · · · ·					198		
	Surgical ward	2	18.250	5.000		183		
		2	28.750	5.000		288		
	Treatment	2	8.625	5.000		86		
		2	18.250	5.000		183	8	
	Ramp hall	2	37.000	5.000		370		
		2	18.250	5.000		183		
	Duty Doctor & staff change pass	2	17.750	5.000		178		
		2	18.250	5.000		183		
	Surgeon lounge	2	17.875	5.000		179		
	Guigeon lounge	2	18.250	5.000		183		
	O.T -1	2	18.250	5.000		183	н	
	0.1 -1	2				233		
			23.250	5.000			́. н	
	O.T -2	2	18.250	5.000		183		
		2	20.000	5.000		200		
	Scrub upt	2	8.830	5.000		88	н	
		2	9.750	5.000		98		
	Corridor	2	47.000	5.000		470		
		2	9.750	5.000		98		
a)	Sterlization	2	8.830	5.000		88		
		2 2	12.500	5.000		125		
	Lift back offset	2	9.500	5.000		95		
	Lift back offset	2	1.750	5.000		18		
	Corridor	4	44.750	5.000		895	н	
	Corridor							
	and the second second	4	9.750	5.000		195		
	D.Utility store	2	3.625	5.000		36		
		2	24.000	5.000		240		
	Duty Doctor N.S	2	14.375	5.000		144	- - - -	
		2	8.250	5.000		83		
	Corridor/Passage	2	49.000	5.000		490	u	
	n na	2	6.125	5.000		61		
					Total	18994	Sft	

	W.C Door cill Offset	4 2 2	5.000 4.250 4.250	4.250 0.750 0.330	85 6 3	" " - 05
15	P/L Ceramic Tile Size 12"X18" Master Made Laid Over 1:2 Cement Sand Mortar I/C Filling Of Joint With Matching Pigment Complete In All Respect As Approved/ Directed By The			Total	843	Sft
	Engineer Incharge (Dado)					
	Ground Floor Bath	1	22.000	7.000	154	Sft
	W.C	2	17.500	7.000	245	
	Left lav	1	20.000	7.000	140	
		1	3.500	7.000	25	н
	Lav M.Ward	1	22.250	7.000	156	
		1	9.000	7.000	63	"
	" W.C	3	19.000	7.000	399	
	Lav N. Stn	1	13.250	7.000	93	
	W.C N.Stn	1	19.000	7.000	133	
	W.C X-Ray	1	20.000	7.000	140	
		1	23.000	7.000	161	"
	First Floor	27.80		Report administration		
	Toilet Duty Doctor & Staff chang	1	28.250	7.000	198	
	Lav Surgical ward	1	28.750	7.000	201	н
		1	6.000	7.000	42	
	W.C	4	15.500	7.000	434	
		1	19.500	7.000	137	
	W.C Duty Doctor	2	15.500	7.000	217	
	W.C Recovery	1	26.500	7.000	186	
	Lav Surgical ward	6	2.000	7.000_	84	
16	P/F 1 1/2" thick OAK wood Solid			Total	3206	
10	door i/c Brass hinges brass towers					
	bolt brass kick plate Brass finger					
	plate, complete in all respect as					
-	approved by the Engineer					
	Incharge.					
	Ground Floor					
	D1	11	4.750	6.875	359	Sft
	D-2	11	3.250	6.875	246	"
	D-3, D-6	8	2.750	6.875	151	n
	D4	10	2.250	6.875	155	н
	First Floor	0	4 750	0.075		н
	D1	8	4.750	6.875	261	- n
	D-2 D3	6 5	3.250	6.875	134	
	D3 D4		2.750	6.875	95 155	
	D4 D5	10 1	2.250 4.750	6.875 6.875	155	
	05		4.750	Total	33 1588	Sft
				Total	1200	on

-

.

Providing and fixing ornamental wooden architrave $3" \times (1\frac{1}{2}"$ tapered to $\frac{1}{4}"$) all along the door frame complete in all respect.					
Deodar wood architrave					
Ground Floor					
D1	11	19.000		209	Rft
D-2	11	17.500		193	
D-3, D-6	8	17.000		136	
D4	10	17.500		175	н
First Floor					
D1	8	19.000		152	
D-2	6	17.500		105	- 11
D3	5	17.000		85	.0
D4	10	16.500		165	-
D5	2	19.000		38	и
			Total	1258	Rft

Providing / Fixing stainless steel non magnetic stair railing 2-3/4" height consisting of 2" dia 18 SWG pipe top hand rail welded over vertical balustrade, of 1-1/2" wide 3/8" thick stainless steel double strip with stainless stud welded to fancy reducer 2"x1/2" at top and M.S tikki 3" dia 1/4" thick at bottom fixed on steps with holding down rawel bolts 3"x3/8" M.S tikki covered with architectural multi offset shape stainless steel cap 3" dia at bottom and reduced to 1-1/2" dia at top in 2" height in horizantal steel cap 3" dia at bottom and reduced to 1-1/2" dia at top in 2" height in horizantal stainless steel pipe 3/4" dia 18 SWG 3 No fixed with vertical balustrades i/c steel polishing fixed at site complete in all respect and as approved by the Engineer Incharge (All stainless steel member, shell be of non magnetic) code No 304

19

17

18

Finishing of exterior surface of walls with Tramofine Coating / Crete Sand Coating i/c cost of all labour and Material Charges as approved by the Engineer Incharge. outer side

D/d 15% for opening

20.00 30.00

30.000

30.000

2

2

2

2

104.500

107.250

40 Rft 11 60 Total 100 Rft

6270 Sft 6435 " Total 12705 " (-) <u>1906</u> " Net 10799 Sft Page 104

20 P/F Stainless steel corner beading angle 2"x2"x1/16" with double tape fixed with stainless steel nails i/c cutting fixing complete in all respect as approved by the Executive Engineer. 100 5.000 500 Rft Total 500 Rft 21 P/F spun pipe of approved quality (Tipu Supreme) with cement yarn joints etc complete in all respect as approved and directed by the Engineer Incharge 4" dia 18 30.000 540 Rft Total 540 Rft 22 P/F of spun pipe specials such as tee, coller, bend etc plain type / plug type of approved quality (Tipu supreme) with cement yarn joints complete in all respect as ۲ approved and directed by the Engineer Incharge 60 Kg 60 Kg Total 60 Kg 23 Preparing surface & painting with mat finish paint 2 coat on old surface i/c scraping old paint from walls and filling with putty with required material complete in all respect. **Ground Flooor** Porch 2 24.750 5.000 248 Sft 2 18.875 5.000 = 189 Platform 2 . 25.250 5.000 253 2 . 14.000 5.000 140 Entr 2 25.500 ... 5.000 255 . 2 12.750 5.000 128 .. Preparation 2 .. 11.250 5.000 113 2 ... 9.000 5.000 90 2 UPS 11.250 5.000 113 11 2 9.125 5.000 91 11 Control Room 2 8.375 5.000 84 2 11.250 11 5.000 113 2 Lobby 8.375 = 5.000 84 2 6.500 5.000 65 C.T Scan 2 18.000 5.000 180 2 18.250 5.000 ii. 183 M.O 2 15.000 5.000 150 2 18.250 5.000 183 Exam 2 5.000 5.000 50 2 9.875 99 5.000 2 Bath 5.000 50 5.000 11 2 11 8.000 5.000 80 Doctor duty 2 8.625 5.000 86 2 ... 18.250 183 5.000 W.C 4 4.000 80 5,000 4 5.500 5.000 110

Page 105

Lav	4	4.000	5.000	80	n
	4	5.500	5.000	110	11
Lab	2	18.250	5.000	183	
	2 2	7.750	5.000	78	.0
Lobby		9.000	5.000	90	
Blood bank	2	5.000	5.000	50	11 11
BIOOD DATIK	4 4	9.000	5.000	180	
Film store	4	11.750 8.000	5.000 5.000	235	
	2	5.000	5.000	80 50	н
Dark room	2	4.500	5.000	45	
	2	5.000	5.000	50	
X-Ray room	2	18.250	5.000	183	
	2	16.500	5.000	165	
Chute	2	3.625	5.000	36	"
	2	20.500	5.000	205	н.
Radialogist	2	18.250	5.000	183	u
	2	8.000	5.000	80	н
Scrub up	2	8.250	5.000	83	н
	2	8.625	5.000	86	11
Sterlization	2	8.250	5.000	83	н
	2	9.125	5.000	91	и.
M.O or Ot	2	14.000	5.000	140	
	2	18.250	5.000	183	
Plaster Room	2	13.250	5.000	133	
	2	18.250	5.000	183	0
W.C	8	4.330	5.000	173	"
	8	6.500	5.000	260	
Lav	2	18.250	5.000	183	"
	2	5.000	5.000	50	-11
Madical ward	2	18.250	5.000	183	u
	2	51.500	5.000	515	н
0.0	2	3.625	5.000	36	
	2	19.500	5.000	195	
Disp	2	18.250	5.000	183	
	2	11.250	5.000	113	"
Entr	2	7.000	5.000	70	
1 litera e con el	2	18.000	5.000	180	
Ultrasound	2	8.830	5.000	88	
	2	12.500	5.000	125	
	2	8.000	5.000	80	
Corridor	2	12.500	5.000	125	
Corndor	4	9.750	5.000	195	
	2	35.750 9.750	5.000 5.000	715 98	11
	2	67.000	5.000	98 670	
Waiting	4	17.500	5.000	350	н
waiting	4	19.500	5.000	390	н
Crush hall	2	32.250	5.000	323	
or don hun	2	19.500	5.000	195	
Ramp	2	81.500	5.000	815	
i terrip	2	6.250	5.000	63	
Stair & landing	4	5.000	5.000	100	
	4	5.000	5.000	100	
Stair waist	6	8.916	5.000	267	u
and a second	6	5.000	5.000	150	

First Floor						
ICU, Storre Mumty	4	18.250	E 000		0.05	н
	4		5.000		365	
Paedric ward	2	20.000	5.000		400	
	2	18.250	5.000		183	ार
Paedric ward	2	33.000	5.000		330	"
r acute ward	2	3.625	5.000		36	
Surgical ward	2	19.750	5.000		198	
Surgical ward	2	18.250	5.000		183	
	2	28.750	5.000		288	
Lav/WC	2	18.250	5.000		183	
	2	10.125	5.000		101	11
Treatment	2	8.625	5.000		86	
	2	18.250	5.000		183	11
Ramp hall	2	37.000	5.000		370	
	2	18.250	5.000		183	
Duty Doctor & staff change pass	2	17.750	5.000		178	
1	2	18.250	5.000		183	
Surgeon lounge	2	17.875	5.000		179	
	2	18.250	5.000		183	
O.T -1	2	18.250	5.000		183	
0.1 -1	2					
07.0		23.250	5.000		233	
0.T -2	2	18.250	5.000		183	
	2	20.000	5.000		200	11
Scrub upt	2	8.830	5.000		88	11
	2	9.750	5.000		98	0
Corridor	2	47.000	5.000		470	.,
	2	9.750	5.000		98	
Sterlization	2	8.830	5.000		88	.11
	2	12.500	5.000		125	11
Lift	4	8.000	5.000		160	**
	4	10.000	5.000		200	
Lift back offset		9.500	5.000		95	
Ent back onset	2 2	1.750	5.000		18	
Corridor		44.750	5.000			
Condo	4	9.750			895	
D LHUbs store	4		5.000		195	
D.Utility store	2	3.625	5.000		36	
2	2 2 2	24.000	5.000		240	
Store + WC	2	13.625	5.000		136	"
	2	9.000	5.000		90	"
Duty Doctor N.S	2	14.375	5.000		144	. "
	2 2 2	8.250	5.000		83	
Corridor/Passage	2	49.000	5.000		490	"
		6.125	5.000		61	
Waiting	2 2 2	17.500	5.000		175	
	2	20.000	5.000		200	
Recovery	2	30.125	5.000		301	
at coldinary manufacture	2	17.625	5.000		176	
Waiting room	4	13.750	5.000		275	
	4	1.250	5.000		25	
Stair waist	6	8.916	5.000		267	
	6	5.000	5.000		150	н
Landing	4	5.000	5.000		100	н
canong	4	5.000	5.000		100	
Mumty	2	20.500	5.000		205	
manny	2	12.625	5.000		126	12
	2	12.025	5.000	Total		
				Total	23959	Sft

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

S/No	item	Description	Unit	Qty	Rate	Amount
		Providing and fixing European type water closet of approved color with intergal trap and flush tank in vitreous china best quality Porta make Model HD-113 or equivalent make as approved by the Engineer Incharge complete in all respects to their entire satisfaction, including all accessories and fittings (Master & Sonex) make, waste and trap, double seat and cover,tee stop cock with wall cups, PVC flexible pipe connection, all joints to services and drains, plugging and screwing as necessary to the structure and making good the same complete in all respects.	Each	16	35000.00	560000
2		Providing and fixing Indian (Orissa) type water closet of approved color in vitreous china with S or P trap best quality china make Porta Model HD- 13 or as approved by the Engineer Incharge complete in all respects to their entire satisfaction with low level flushing cistern, including all fittings and accessories (Master & Sonex) or approved equivalent make, waste and trap, PVC flexible pipe connection, tee stop cock with wall cups, painted MS wall brackets with nut bolts, all joints to services and drains, plugging and screwing as necessary to the structure and making good the same complete in all respects.		22	20000.00	440000
3		Providing and fitting 10 cm (4") gully trap, including cement concrete, cost of PVC grating 15x15 cm (6"x6") and masonry chamber 30x30 cm (12"x12") complete in all respect as per drawing as per specification and instruction of the Engineer.	Each	22	1000.00	22000

ABSTRACT OF COST (MRS 1st July 2021 to 31st Dec 2021)

./	4		Providing glazed earthen ware Vanit type wash hand basin 56 cm x 40 cm (22" x 16") of approved color in vitreous china best quality Porta Mole including all fittings which shall be o Best quality manufactured by Master Sonex or approved equivalent bracket set, waste pipe, waste coupling, Flexible CPconnection Pipes, Stop Cocks, Pillar Cock including mixer, Heads, washers, CF Bottle traps, rubber plug with chain and other relevant fittings, (Al accessories / fittings shall be Master,Sonex or approved equivalent) complete in all respect as per drawing, conformingto specification and as directed by the Engineer	n f Each	14	5000.00	70000
	► 5	- <u>5</u>	Supply and installation of Muslim Shower combine with Double Bib cock tap (Manufactured by MASTER, SONEX or approved equivalent) and one meter flexible pipe including all fitting for complete installation, as per drawing, conforming to the specification or as directed and approved by the Engineer.	Each	16	2150.00	34400
	6		Providing and fixing looking glass, 5mm thick beveled edge. Best quality Belgium made or approved equivalent including backing board, frame complete in all respect as per drawing, specification & instructions of the Engineer.	Each	30	2500.00	75000
/	7	4	Providing, laying, cutting, jointing, testing and disinfecting polypropylene random (PPR) pipelines in trenches, walls and floors etc. for cold water conforming to DIN 8077-8078 PN 10 including all types of fitting specials conforming to DIN 16962, PN 25 complete in all respects 20 mm o/d (1/2" i/d)	P.Rft	750	150.00	112500
	ii		-do25 mm o/d (3/4" i/d)	P.Rft	1200	200.00	240000
	8		Providing & Fitting Polyethylene PE 100(Black)Pipe (SDR 11,10 Bars) Pipe for external water supply conforming to ISO:4427,1996 SDR-11 DIN8074/8075 & PS 3580, 1994 including material of jointing & all type of fittings, specials conforming to ISO 3458, 3459, 3501, 3503 BS:5114 32 mm o/d (1" i/d)	P.Rft	400	225.00	90000
	ii		-do32 mm o/d (1¼" i/d)	P.Rft	200	250.00	50000

Page 109

					Total	1863542
12		S/E of CP Bib cock 1/2" dia. complete in all respect as approved & directed by the Engineer Incharge.	Each	21	800.00	16800
11		S/E of CP T-stop cock 1/2" dia complete in all respect as approved & directed by the Engineer Incharge.	Each	21	800.00	16800
10		S/E of CP Mixing valve for WHB / sink complete in all respect as approved & directed by the Engineer Incharge.	Each	1	2000.00	2000
111		do50 mm o/d (2" i/d)	Each	80	167.05	13364
li		do75 mm o/d (3" i/d)	Each	100	346.90	34690
9	P-133 16	Providing and fitting PVC soil, waste and rainwater pipe including material of jointing and all types of fittings, specials conforming to class D (4" i/d)		150	573.25	85988

Sub Divisional Officer

lu

Page 110

ROI HOSPI		NO. 79	E WORK Q HOSPIT 22 FOR TI STRACT July 2021 t	AL KAL HE YEA OF COS	LAR K R 2021 T	AHAR -22	EVAN DIS	IPING AI TRICT CH	_L THQ ¦AKWAL)''
ž	T		Me	asurement	e	1		-T	
s/No Item N	Description	No	the second s	B ft.	Н	c	Qty	Rate Rs	Amount Rs.
1	Reconstruction of B-Wall 9" thick 8' high input rate	500			ft	<u>500</u> 500	_ Rft Rft		2783500
.1								P.Rft	
2 N.S	double sharp 4 Nos. pointer razor 1-1/4" C/C making in circular shape 24" dia ring @ 3" C/C fixed with 2 No M.S bar 1/2"x1/2" sq welding horizontally and 1 Nos post of M.S angle iron 1-1/2"x1- 1/2"x3/16" ertically 27" clear height & 1' embedded in PCC 1:2:4 (4-1/2"x4-1/2"x1') fixing at site i/c labour and carriage charges i/c painting								
	3- coats as approved by Engineer Incharge.								
	8	1	500.000			500	Rft	480.00 P.Rft	240000
P-34 13	Dismantling bricks works in cement mortar	1	600.000	0.750	6.000	2700	Cft	3253.80 %Cft	87853
1.44						Total	Rs		3111353
	AFTER DISMAN	TLING	COST OF	OLD MAT	ERIAL				
	Bricks 60% useable	500	<u>1350.000</u> 00	0.600		4050	Nos	5000:00 %0Nos	24 300 /
-	Bricks Bat 40%	<u>500</u> 1	<u>40.000</u> 00		6	200	Cft	2000.00 %Cft	4000
						Total	Rs		28300
	M				N	et Tota	Rs	5	-3087103 308703
	Sub Divisional Officer Buildings Sub Division Chakwal				- 1	Executi Buildin	gs Div	vision	
	a					C	hakwa	1	Page

DETAIL OF WATER SUPPLY LINE FROM SPRING NEAR DARBAR TO UNDERGROUND WATER TANK ABSTRACT OF COST

MRS, BI-ANNUAL PERIOD (1st JULY, 2021 TO 31st DEC 2021)

S.N	Description	No	L	В	н	Qty	Rate	Unit	Amount
1	Excavation in trenches in all kind of soil, except cutting rock, for water supply pipelines upto 5 ft (1.5m) depth from ground level, i/c trimming, dressing sides, leveling the beds of trenches to correct grade and cutting pits for joints etc complete in all respect.	9							
		1	11000	2	2	44000			
	P-33 item 44				Total	44000	5,755.20	%0Cft	253229
2	P/L High Density Polythene PN- 16 pipe							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	200220
		1	11000			11000			
	P-141 item 42 d				Total	11000	330.25	P.Rft	3632750
		1						Total	3885979

Sub Divisional Officer Buildings Sub Division Chakwal u

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

(PROVISION OF FAÇADE IMPROVEMENT)

S.#	Description	Nos	Me	easurem	ents		ty	Data	A
			L	В	Н	1 4	LY .	Rate	Amount
1	Dismantling brick work in lime or cement mortar.							8	
	Front side	1	88.000	15.000	0.180	238	Cft		
	First Floor	1	88.000			238	Cft		-
			00.000	10.000	Total	475	- Cft	2052.00	15 100
					Total	475	Cit	3253.80	15,462
2	Cement plaster 1:4 with flouting							%Cft	
	coat 1/32" thick								
	Front side	1	88.000	15.000		1320	Sft		
	First Floor	1	88.000	15.000		1320	Sft		
					Total	2640	Sft	3617.40	95,499
							-	%Sft	00,400
	Excavation in foundation of building, bridges and other structures, including dagbelling, dressing, refilling around 17.1 to 17.5 structure with excavated earth, watering and ramming lead upto one chain (30 m) and lift upto 5 ft. (1.5 m) O.Soil								
	Front /Right side 2x8	16	4.000	4.000	5.000	1280	Cft	8078.40 %0Cft	10,340
	Plain cement concrete 1:4:8 i/c placing compacting and curing etc							700011	
		16	4.000	4.000	0.333	85	Cft	19167.60 %Cft	16,340
X	Reinforced cement concrete in slab of rafts / strip foundation, base slab of column and retaining walls; etc and other structural members other than those mentioned in 5(a) (i) above not requiring form work (i.e. horizental shuttering) complete in all respects Type C (nominal mix 1: 2: 4) Right /Front side G.F 2x8	16	1 000	4 000	0.750	102	0.5		×
		16	4.000	4.000	0.750	192	Cft		
1	Front side F.F	16	4.000	4.000	0.500	128	Cft		
					Total	320	Cft	291.35	93,232
r r	RCC work in roof slab beams collumn lintel girder and other structural member laid in situ or precast laid in position on type C nominal mixture (1:2:4)							P.Cft	
	column G.F	16	0.750	1.250	33.000	495	Cft		
	Fop design 16(5+5+2+2)	224	0.750	1.250		210	Cft		
F	Roof	16	6.500	4.000	0.420	175	Cft		
		2	88.000	1.500	0.500	132	Cft		
		2	18.000	1.500	0.500	27	Cft		
					Total	1039	Cft	402.40	417,981
								P.Cft	

5	7 Fabrication of M.S reinforcement i/c cutting bending binding laying in postion making joints and fastenings inculding cost of binding wire and labour charges for binding of steel reinforcement				81				
/	(also includes removal of rust from bars):- b- deformad bars As qty item No. 5 As qty item No. 6	1 1	320 1039	8.000 6.750		1161 <u>3180</u> 4342	Kg Kg Kg	19988.70 %Kg	867,823
8	P/F of front side design of M.S pipe 4"x1-1/2" fixed with 1- 1/2"x1/8" M.S patti on both sides between in column i/c welding fixing painting (white colour) carriage complete as approved & directed by the Engineer Incharge.								
		40	5.000			200	Rft		
	en ž	5	20.000			100	Rft		
	u.				Total	300	Rft	250.00	75,000
								P.Rft	
9	Providing and Applying weather shield (Black paint) of approved quality on external surface of buildings including preparation of surface, application of primer complete in all respect	16 16 1	33.000 14.000 88.000	4.000 4.000 2.500	Total	2112 896 220 3228	Sft Sft Sft	4150.00 %Sft	133,962
 10,	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.	4	00.000	00.000		0001	05		
	Parapit Top	1	88.000	33.000		2904	Sft		
	1(104.50+88+88+18+18+24)	1	340.500	2.500		851	Sft		
	Porch (18+24+18) column	1 2	60.000 9.000	5.000		300	Sft		7
	color:	2	9.000	8.500	Total -	153 4208	Sft Sft		
					, 5(4)	1200	on		225

Page 114

Deduction W2		14	4.000	6.000	(-)	336	Sft	
W5 .		4	8.250	6.000	(-)	198	Sft	
DW1		1	7.000	9.000	(-)	63	Sft	
CW2		2	4.000	3.000	(-)	24	Sft	
W1	3	8	5.000	6.000	(-)	240	Sft	
W3		2	4.000	6.000	(-)	48	Sft	
D1		3	5.000	7.000	(-)	105	Sft	
					Total	1014	Sft	
					Net Qty	3194	Sft	875.00

875.00 2,794,969 P.Sft

Total 4,520,609

4,521,000 Say

Sub Divisional Officer Buildings Sub Division Chakwal

4

ROUGH COST ESTIMATE FOR THE WORK PROGRAME FOR REVAMPING ALL THQ HOSPITALS IN PUNJAB (ONE AT THQ HOSPITAL KALLAR KAHAR DISTRICT CHAKWAL)" ADP NO. 792 FOR THE YEAR

2021-22

PROVISION OF EXTERNAL WAITING AREA & PARKING FACILITY

MRS (1ST JULY. 2021 TO 31ST DEC 2021) ABSTRACT OF COST

5.NO		NO	L	В	н	Qty	UNIT	Rate	AMOUN
T	Excavation in foundation of building, bridges and other structures, including								
	dagbelling, dressing, refilling around						1		1.
	structure with excavated earth, watering		1					1	
	and ramming lead upto one chain (30 m)								
	and lift upto 5 ft. (1.5 m) in hard soil.								
		2	50.00	1.50	1.00	150	-		
		2	50.00	1.50	1.00	150		1	
	Page-30 item 21 c				Total	300	%0sft	9042	2713
2	Cement concrete (1:6:12) using brick or								
	stone ballast.		-						
		2	50.00		0.25	38	Cft		
	Description of the	2	50.00	1.50	0.25	38	Cft		
3	Page-41 item 3 d				Total	75	% cft	13037.10	9778
3	Cement concrete plain i/c placing compacting & curing complete 1:4:8								
-	compacting & curing complete 1:4:8	1	50.00	50.00	0.38	020	C4		
	Page-42 item 5 i	1	50.00	50.00	Total	938 938	Cft % cft	19167.60	170000
	Pucca brick work in F&P 1:6.				Total	550	70 CTL	19107.00	179696
		2	50.00	0.75	1.50	113	Sft		5-309 N
		2	50.00		1.50	113	Sft		
	Page-51 item 4 i				Total	225	%Sft	22964.5	51670
5	ProvidingandlayingTuffpavers, having700								
	0PSI, crushing strength of approved manufa								
	cturer,over2"to3"sandcushioni/cgrouting								
	withsand in joints i/c finishing to require								
	slope . complete in all respect. (50% Grey								
	/ 50% Coloured) 60 mm thick								
	Page-70 item 43	1	50.00	50.00		2500	P.Sft	109.80	274500
5	P/F of Fiber Glass Shed assembled with								
- E	fiber glass translucent canopies,								
	manufactured with especially polyester	10					-		
	resin with 47% concentration of fiber						-		
	glass chopped strand matt 450 Gms/Sq.								
	Mt, maximum protection "ultra violet	1	-						
	rays" base. Steel structure fabricated	1							
100	and the second						(j		
	with 1 1/2" x 1 1/2" M.S Hallow square								
	tube of trusses, 3" x 1 1/2" M.S Hallow								
	rectangular tubes for tee trusses and								
1.1	cross bars. M.S Structure will be anti rust								
	coated and (enamel paint with best								
	quality) complete in all respect as								
	approved & directed by the engineer								
ii	ncharge.	1	50.00	20.00		1000	D Ct	650.00	(50000
-		1	50.00	20.00		1000	P.Sft	650.00	650000
-	M.							Total	1168357
	Ach p								
	Sub Divisional Officer					From	tive Eng	incor	
	Buildings Sub Division						ings Div	200 Celebration of	
	Eligkwale						ATT DATE AND AND A PARTY	the state of the s]

Page 116

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

PROVISION OF UNDERGROUND WATER TANK 20000 GALLON ABSTRACT OF COST.

MRS 1st July 2021 to 31st Dec 2021

-	- Provide and the second secon		CLOLL		
S.N	beechption	Qty	Rate	Unit	Amount
1	Excavation in foundation of building, bridge	s 6084	9042.00	%0Cft	55,012
	and other structures, including dagbelling	A CONTRACTOR			00,012
	dressing, refilling around structure with	n		1	
	excavated earth, watering and ramming lead	н			
	upto one chain (30 m) and lift upto 5 ft. (1.5 m)			
	in hard soil or soft murum.				
2	Cement concrete plain including placing	338	19167.60	%Cft	64,786
	compacting, finishing and curing complete	e		1.001	04,700
	(including screening and washing of stone				
	aggregate) Ratio 1: 4: 8				
3	Reinforced cement concrete in slab of rafts .	693	291.35	P.Cft	201,906
	strip foundation, base slab of column and	1			201,000
	retaining walls; etc and other structura				
•	members other than those mentioned inType C				
	(nominal mix 1: 2: 4)				
4	Reinforced cement concrete in roof slab,	722	435.35	P.Cft	314,323
	beams, columns lintels, girders and other			1	UT 1,020
	structural members laid in situ or precast laid in				
	position, or prestressed members cast in situ,				
	complete in all respects Type C (nominal mix 1:				
	1-1/2: 3)			1	
5	Fabrication of mild steel reinforcement for		19988.70	%Kg	1,122,565
	cement concrete, including cutting, bending,				
	laying in position, making joints and fastenings,				
	including cost of binding wire and labour				
	charges for binding of steel reinforcement (also				8
	includes removal of rust from bars) Deformed				
	bars (Grade-40)				
6	P/F Stair comprising of angle iron 2"x2"x1/4" i/c	12	1050.00	P.Rft	12,600
	steps etc complete in all respect				
7	Mosaic dado or skirting with one part of cement		14701.65	%Sft	152,897
•	& marble powder with ratio of :1 & two parts of				
	marble chips laid over 1/2" (1:3) plant without				
8	rubbing & polishing complete 1/2" thick.	200			
0	Reinforced cement concrete in roof slab,	266	402.40	P.Cft	107,151
	beams, columns lintels, girders and other				
	structural members laid in situ or precast laid in				
	position, or prestressed members cast in situ,				
	complete in all respects Type C (nominal mix 1: 2: 4)				
9	P/L of 3" dia G.I pipe line from Under ground	200	754 50	0.00	005 155
5	tank to existing OHR Complete	300	751.50	P.Rft	225,450
10					
10	Trasportation of earth & un certain material	6084	8.00	P.Cft	48,672
	outside from metropalation area end upto 20 mile				
			Tota	d l	2,256,690
	Rate P.GIn	2256690	1	20,000	112.83
			3) 		and the second
	N/ 1			Say	113/-
	40 11				
	Sub Divisional Officer		Executive I	Engineer	
	Buildings Sub Division		Buildings I		
	Cuchakwat		Chaky		
	B		CHARA	a di	

Page 117

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

UNDERGROUND WATER TANK 20000 GALLON

S.No	Description	Nos	Length	Breadth	Depth	Qty	
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) in hard soil o)					
	soft murum.		00.00	00.00	7.00		
		1	26.00	26.00	7.00	4732	Cft
		+ '	26.00	26.00	2.00 Total	1352 6084	Cft Cft
2	Cement concrete plain including placing compacting, finishing and curing complete (including screening and washing of stone aggregate) Ratio 1: 4: 8				Total	0004	
		1	26.00	26.00	0.50	338	Cft
					Total	338	Cft
3	Reinforced cement concrete in slab of rafts / strip foundation, base slab of column and retaining walls; etc and other structural members other than those mentioned inType C (nominal mix 1: 2: 4)						
-		1	21.50	21.50	1.50	693	Cft
-			21.00	21.00	Total	693	Cft
	Reinforced cement concrete in roof slab, beams, columns lintels, girders and other structural members laid in situ or precast laid in position, or prestressed members cast in situ, complete in all respects Type C (nominal mix 1: 1-1/2: 3)						43
-	Walls	2	22.00	1.00	8.00	352	Cft
		2	20.00	1.00	8.00	320	Cft
		4	1.25	1.25	8.00	50	Cft
					Total	722	Cft
	Fabrication of mild steel reinforcement for cement concrete, including cutting, bending, laying in position, making joints and fastenings, including cost of binding wire and labour charges for binding of steel reinforcement (also includes removal of rust from bars) Deformed bars (Grade-40)						
	Same Qty item no 3+4	1415	8.75	0.454		5616	Kg
	P			2	Total	5616	Kg
	P/F Stair comprising of angle iron						
	2"x2"x1/4" i/c steps etc complete in all		10.00			10	
1	respect	1	12.00		_	12	Rft
			-		Total	12	Rft

	material outside from metropalation area end upto 20 mile						
10	Trasportation of earth & un certain				TOTAL	300	Rft
		1	300	******	Total	300	Rft Rft
	ground tank to existing OHR Complete						
9	P/L of 3" dia G.I pipe line from Under				Net	266	Cft
-	D/d Man hole cover	_1	2.00	2.00	0.42	3	Cft
-	DUN				Total	269	Cft
		4	22.00	1.00	0.75	66	Cft
		1	22.00	22.00	0.42	203	Cft
	beams, columns lintels, girders and other structural members laid in situ or precast laid in position, or prestressed members cast in situ, complete in all respects Type C (nominal mix 1: 2: 4)						
8	Reinforced cement concrete in roof slab,				Total	1040	Sf
-		4	20.00	8.00	Total	640	Sf
Course		1 4	20.00	20.00	-	400	Sf
7	Mosaic dado or skirting with one part of cement & marble powder with ratio of :1 & two parts of marble chips laid over 1/2" (1:3) plant without rubbing & polishing complete 1/2" thick.						r

Sub Divisional Officer, Buildings Sub Division Chakwal el

a

P/L PREPOLISHED PORCELAIN TILE "MASTER MADE" 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)

			ARS 1st July		131 000 202
			nit Rate P.S is purpose (27	
Detail					
	Qua	ntity	Rate per	unit (Rs)	Amount
MATERIAL					
 Prepolished Porcelain tile with dry / wet / venied application, DWW series (Vain effect) class SB, 24"x24" size i/c wastage. (CA-4,7) 1692/10.76=157.24 	105	Sft	157.24	P.Sft	16510
ii). White Cement (06.009)	0.1	Bag	1100	P.Bag	110
iii). Grey Cement (06.008)	2.16	Bag	600	P.Bag	1296
vi). Pigment (10.015)	0.45	Kg	82	P.Kg	37
v). Sand (06.007)	5.2	Cft	1500	%Cft	78
Total					18031.10
Contractor's profit and over head charges			-		3606.22
Total					21637.32
Labour	and the second second				
i). Mason (LB-040)	2	Nos	950	P.Day	1900
ii).Un skilled Coolies (LB-015)	4	Nos	725	P.Day	2900
iii). Bahishti (LB-017)	0.5	No	750	P.Day	375
Totai					5175
Sundries 10%					517.5
Total					5692.5
Contractor's profit and over head charges 20%					1138.5
Total					6831
tem Rate					
Labour Rate for P.Sft					68.31
Composite Rate per % P.sft					28468.32
Composite Rate per P.Sft			1		284.68
			Say Rs.		280
			1		(i.e

Sub Divsional Officer Buildings Sup Division Chakwal

Executive Engineer Buildings Division Chakwal

Page 120

Supply and installing perforted aluminum sheet dampa type false ceiling 6mm thick including fabrication to required size, shape and pattern aluminum surpension system, acceess pannels, bulk heads, cornices, moldings finishing the false ceiling in approved colour, shades and size, fittings and fixing accessories complete in all respect as approved and directed by the Engineer Incharge.

U.O.R P.SFT

Take a room size 15x22 having 330 Sft for Analysis

		MRS	1st July	2021 to 31	st Dec 20
S #	. Detail	Qty	Unit	Rate	Amount
A	Description				
1	Cost of Aluminum imported sumpa concealed false ceiling 6mm having size 2'x2' with frame of approved design complete.	330	P.Sft	280	92400
2	Scaffolding Charges	330	P.Sft	10	3300
3	Carriage of Material		(L.S)		2500
4	Fixing Charges	330	P.Sft	25	8250
				Total	106450
	Add 20% Conntractor Profit				21290
	14			Total	127740
	Hence Rate P	.Sft <u>127740</u> 330		7.09	
				Say	385
					P.Sft

istonal Officer ings Sub Division Bu

Chakwal

59

P/F giazed ceramic tile best quality having size 12"x18"x3/8" laid over 3/4"thick cement sand mortar 1:2 filling with filling meterial i/c cutting finishing where necessory etc (For Floor)

MRS, BI-ANNUAL PERIOD (1st JULY, 2021 TO 31ST DEC, 2021) DISTRICT Chakwal For Analysis 100Sft. Unit Rate P.Sft (10x10 = 100 Sft.)

Sr#	Description	Quantity	Rate per	unit (Rs)	Amount
1	Material Tile best quality having size 18"x12"SP Series on matching color base (Glossy / Matt) Light Color Rectified SB 933/10.76 = 86.71)	105	86.71	Sft.	9105
	ii) White Cement (06.009)	0.15	1100.00	P.Bag	165
a.	(iii) Grey cement (06.008)	2.16	600.00	P.Bag	1296
	iv) Pigmant (10.015)	0.45	82.00	P.Kg	36.9
	v) Sand (06.007)	5.2	1500.00	% Cft	78
2	Labour				
	i)Mason (LB-040)	4	950.00	P.Day	3800
	ii)Un skilled Coolies (LB-015)	2.5	725.00	P.Day	1812.5
	iii) Bahishti (LB-017)	2	950.00	P.Day	1900
Instants Const.F. og 191				Total:	18192.9

Total.	10102.00
Add 10% Sundries Charges o	n 262
Total:	18454.95
Add 20% Contractor	3690.99
Total:	22145.94
Rate PSft.	221.46
Say Rs:	220/-
Construction of the second construction of the second se	

sional Officer Buildings Sub Division Chakwal a

P/F glazed ceramic tile best quality having size 12"x18"x3/8" laid over 3/4"thick cement sand mortar 1:2 filling with filling meterial i/c cutting finishing where necessory etc (For Dado)

MRS, BI-ANNUAL PERIOD (1st JULY, 2021 TO 31ST DEC, 2021) DISTRICT Chakwal For Analysis 100Sft. Unit Rate P.Sft (10x10 = 100 Sft.)

Sr#	Description	Quantity	Rate per	unit (Rs)	Amount
1	Material				
	Tile best quality having size 18"x12"SP Series on matching color base (Glossy / Matt) Light Color Rectified SB 933/10.76 = 86,71)	105	86.71	Sft.	9105
	ii) White Cement (06.009)	0.15	1100.00	P.Bag	165
	iii) Grey cement (06.008)	2.16	600.00	P.Bag	1296
	iv) Pigmant (10.015)	0.45	82.00	P.Kg	36.9
	v) Sand (06.007)	5.2	1500.00	% Cft	78
2	Labour				
	i)Mason (LB-040)	4	950.00	P.Day	3800
	ii)Un skilled Coolies (LB-015)	3	725.00	P.Day	2175
	iii) Bahishti (LB-017)	2.5	950.00	P.Day	2375
		and the second secon		Total:	19030.45

 Add 10% Sundries Charges on
 262

 Total:
 19292.45

 Add 20% Contractor
 3858.49

 Total:
 23150.94

 Rate PSft.
 231.51

 Say Rs:
 230/

al Officer R

2

dings Sub Division Chakwal

Finishing of exterior surface of walls with Tramofine Coating / Crete Sand Coating i/c cost of all labour and Material Charges as approved by the Engineer Incharge.

	3			NIT OF RATE	
S.N	Material		Quantity	Rate	Amount Rs.
1	Finishing of exterior surface				
	Binder:	Acrylic Resins	1997 - St. 11		00.000
		AC-261, AC-388, Acronol 18-D, DM-7	71	(A.K)	
	Colour:	Iron Oxide	parties in the		
	Dispersant.	1. Timol 731 SD			
		2. Potassium Tripoly	e - 110000000000000000000000000000000000		
	Fungicide:	Skane M-8			
	Mildew:	Margal			
	Thicking Agent:	Acrysol G-110	1 (1) 1 (1) 1 (1)		
		TT-615	-		
		KTPP			
	Freeza Thaw:	PROP/ETH			3
	Defoaming:	NOPCO NXZ			
	Titanium:	Tiona 575			
	Extender:	Quartz-8			
-		Quartz 71/51	1		
	Texnol:	Coalesent			
	Ammonium Hydroxide:	Optimize PH			
	and the second sec		1 Sft	50.00 P.S	Sft 50
2	Crete Sand Coating	a second s			
	Binder:	Acrylic Resins	and the second se		
		AC-261, AC-388, Acronol 18-D, DM-7	71		
	Colour:	Iron Oxide			
	Dispersant:	1. Timol 731 SD			
		2. Potassium Tripoly			
	Fungicide:	Skane M-8	6		
	Mildew:	Margal	• • • • • • • • • • • • • • • • • • •		4
		Acrysol G-110	++		ж. -
	Thicking Agent:	TT-615	(reserved to a p		
		KTPP	· · · · · · · ·		
			· · · · · · · · · · · · · · · · · · ·	1 1 1 1	
	Freeza Thaw:	PROP/ETH		- 10 A.	E.
	Defoaming:	NOPCO NXZ	1		
	Titanium:	Tiona 575	- Le:		
	Extender:	Quartz — 290	the second s	the second second	
		Quartz 71/51	- 14 · · ·	in - 1	* *
		C/C 300		1	
		MICA 300	in the second		1
		Dolomite 5 Micron		aar a sereje	
	Texnol:	Coalesent		i 1	
	Ammonium Hydroxide:	Optimize PH			
			1 Sft	40.00 P.S	
14. m.			1	TOTA	
	Average for One SFT 90/2	2 = 45			45.00
	Add 10% contractor's prof	it + 10% over head charges			9
	Rate for P.Sft				54.00
	to see the second s		0 A 0	/ RS. 5	ADCS

• Page 124

66

Analysis of rates

P/F Stainless steel corner beading angle 2"x2"x1/16" with double tape fixed with stainless steel nails i/c cutting fixing complete in all respect as approved by the Executive Engineer.

		Unit = P.F	Rft.	1st July	2021 to 31s	t Dec 2021
S.No.	Description	Quantity		Rate	Unit	Amount
The second second	Material.	ana (ang ang ang ang ang ang ang ang ang ang	N CARLON COMPANY OF A CARLON OF A CARLO		And Southern Contractor Southern St.	River and a second second second second
	Cost Stainless steel corner beading angle 2"x2"x1/16" with double tape fixed with stainless steel nails i/c cutting fixing complete i/c labour complete	1.00	Rft	570	P.Rft	570
					Total	570
	•		Add	20% contra	ctor profit	114
					Total "A"	684
4					Say Rs.	680

Sub Div hal Officer

Buildings Sub Division Chakwal

a

	(wood gola / skirting 2"x2" i/c labour fo nch polishing as approved by the Enginee		nd fini	shing in pr	oper shape	comple
		Unit = P.Sft		1st.lulv	2021 to 31s	Dec 202
S.No.	Description	Quantity		Rate	Unit	Amoun
and the second s	Naterial.			An energy and a second second	kaanna araar ay oo ammula	1999 - Handis Handis Handis Handis Handis
la	Cost of OAK wood gola / skirting 2"x2" i/c abour for moulding and finishing in proper hape complete i/c labour complete	1.00	Sft	270	P.Sft	270
					Total	270
			Add	20% contra		54
					Total "A"	324 320
					Say Rs.	
é J	Sub Divisional Officer Buildings Sub Division Chakwal			cutive Engl Idings Divi Chakwal	sion	

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 Dec 2021 Unit= Each Rate Unit Amount S.No. Description Quantity Material. A Cost of English W.C Porta made imported 1 one piece i/c double seat cover full size i/c thimble complete set color ICI/forte or 29500 Each 29500 1 No equivalent complete i/c labour 29500 Total 5900 Add 20% Contractor profit. Total 35400 Say Rs 35000 **Executive Engineer** onal Officer Sub **Buildings Division** dings Sub Division B Chakw Chakwal

P/F STAINLESS STEEL NON MAGNETIC RAILING 2-3/4" HEIGHT CONSISTING OF 2" DIA 18 SWG PIPE TOP WELDED OVER VERTICAL BALUSTRADE OF 1-1/2" WIDE 3/8" THICK STAINLESS STEEL DOUBLE STRIP WITH STAINLESS STUD WELDED TO FANCY REDUCER 2"X1/2" AT TOP AND M.S TIKKI 3" DIA 1/4" THICK AT BOTTOM FIXED WITH HOLDING DOWN RAWAL BOLTS 3"X3/8" M.S TIKKI COVERED WITH ARCHITECTURAL MULTI OFFSET SHAPE STAINLESS STEEL CAP 3" DIA AT BOTTOM AND REDUCED TO 1-1/2" DIA AT TOP IN 2" HEIGHT IN HORIZONTAL STAINLESS STEEL PIPE 3/4" DIA 18 SWG 3 NOS FIXED WITH VERTICAL BALUSTRADES I/C STEEL POLISHING FIXED AT SITE COMPLETE IN ALL RESPECT AND AS APPROVED AND DIRECTED BY THE ENGINEER IN-CHARGE (ALL STAINLESS STEEL MEMBER SHALL BE NON MAGNETIC).

			Unit Rate P.Rf	t	
	Qua	ntity	Rate per	r unit (Rs)	Amount
For Analysis 12 Rft					
Material					
Stainless steel pipe 2" dia 18 SWG = 12 Rft Add 5% wastage = 0.6 Total = 12.60 = 12.60	12.6	Rft	170	P.Rft	2142
S.5 Bend 2" dia.	2	No	230	P.No	460
Stainless steel pipe 3/4" dia Horizontal = 1x3x12 = 36 Rft Add 5% wastage <u>= 1.80</u> Total = 37.80	37.8	Rft	140	P.Rft	5292
Balustrade made of steel pipe 304.	4	No	1370	P.No	5480
M.S Tikki 3" dia M.S plate having 2 No hollow 3/8" dia	4	No	210	P.No	840
Stainless steel sheet cap 3" dia at bottom and 1-1/2" at top having architectural multi offset shape specially manufactured from market.	4	No	125	P.No	500
Rawal bolt 3"x3/8" (3x2)	12	No	25	P.No	300
Welding rod steel for 2" dia pipe all round		-	L.S		400
Polishing for railing		1	S		400
Carriage	in a set of some	1	5		400
Total					16214
Add 20% Contractor Profit					3242.8
Total				(A)	19456.8
Labour				1	
abour for cutting to sizes stainless steel pipe 2" dia, t-1/2" dia and 3/4" dia and assembling by welding to required length & height using bends, reducer etc and fixing using rawal bolts after drilling holes complete.					
lack smith	2	Day	950	P.Day	1900
lelper	2.5	Day	725	P.Day	1813
Velder	1	Day	950	P.Day	950
abour for polishing jointing for stainless steel pipe " dia 1-1/2" to 3/4" i/c grinding smooth joints and leaning etc. or 4x(3x3)+3(7) 34 Joints					
llack smith	1.5	Day	950	P.Day	1425
lelper	1	Day	725	P.Day	725
olishing of steel	1	Day	750	P.Day	750
Total					7563
dd 10% sundries charges					756
Total					8319
dd 20% Contractor Profit				101	1664
Total				(8)	9983
Total A + B					29439
Rate Per Rft = 28895/12=				L	2453.275
Rate Per Rft = 28895/12=			Say	Rs.	245

Sub Divisional Officer Buildings Sub Division Sub Di

Executive Engineer Buildings Division

Page 128

Analysis of rates							
	un pipe of approved quality (Tipu roved and directed by the Engine Unit= P.Rft (Take 6' lenti	er Incharge 4" dia		ints etc con to 31st Dec		respect	
S.No.			intity	Rate	Unit	Amount	
(A)	Material.						
1	Spun pipe 4"dia, 6' long	6 2	Rft	300	P. Rft	180	
2	Clamps (12.151)	2	No.	44	Each	8	
3	For joints	0.25	Kg	60	P.Kg	1	
4	Suite rope	0.25	Kg	40	P.Kg	1	
					Total	191	
			Add	20% contra	ctor profit	38	
					Total "A"	229	
(B)	Labour						
1	Mason (LB 040)	0.25	No.	950	P.Day.	23	
2	Coolie (LB 015)	0.25	No.	725	P.Day.	18	
	,				Total	41	
			La	bour sundri	ies @ 10%	4	
					Total	46	
			Add	20% contra	ctor profit	9	
					Total "B"	55	
5							
				То	tal of A+B	284	
				Ra	te Per Rft.	47	
					Say Rs.	47	

Sub Division Buildings Sub Division Chakwal

a

Executive Engineer Buildings Division Chakwal

	Unit= P. Kg	1st July 202	1 to 31st D	ec 2021		
S.No.	Description	T C	uantity	Rate	Unit	Amount
(A) 1 2 3	Material. Cost of spun pipe specials such as coller, bend etc plain type / plug type approved quality (Tipu supreme) Lead for joint (09.015) Sute rope (10.031)		Kg	20 129 28	P.Kg P.Kg P.Kg Total	160 3: 199
			Ad	ld 20% contr		41
					Total "A"	23
(B) 1 2	Labour Plumber (LB0.46) Coolie (LB0.15)	0.08	No. No.	950 725	P.Day. P.Day. Total	7 5 13
			1	Labour sund		1
					Total	14
×.			Ad	ld 20% contr		2
-	•				Total "B"	17
					otal of A+B	41
	34			F	Rate Per Kg Say Rs.	410
	Sub Divisional Officer Buildings Sub Division Chakwal			kecutive Eng uildings Div Chakwa		
•						

Preparing surface & painting with mat finish paint 2 coat on old surface i/c scraping old paint from walls and filling with putty with required material complete in all respect. 1st July 2021 to 31st Dec 2021 Unit = P.Sft. Take Analysis for 10'x10' = 100' Sft S.No. Description Quantity Rate Unit Amount Material. 450 1 Filling material 5.00 Kgs 90 P.Kgs 0.50 Gln 1200 P.GIn 600 2 Paint 3 Brushes 0.08 No 350 Each 28 0.33 No 120 P.Dozen 40 4 Sand paper Total 1118 Add 20% contractor profit 224 Total "A" 1341 Labour 750 P.Day 750 1 Painter (LB - 062) No. 1 P.Day 725 2 Un skilled coolly (LB -015) 1 No. 725 Total 1475 Add 10% Sundries 148 1623 Total Add 20% contractor profit 325 Total B 1947 Total A + B 3288 Rate P.Sft 3288 1 100 33 30 Say Rs.

Analysis of rates

onal Officer Sub Div **Buildings Sub Division** Chakwal

a

P/F OF FILTRATION PLANT OF AQUAGUARD I/C ALL ACCESSORIES AS PER SPECIFICATIONS, LOW PRESSURIZED FEED PUMP 1000 MAH, STAINLESS STEEL VESSEL, CONTROL VALVES, 50KG ACTIVATED CARBON, JUMBO, UV PANEL/LAMP AND WATER CHILLER UNIT ALONG WITH ALL UPVC FITTINGS AS DIRECTED/APPROVED BY ENGINEER INCHARGE.

U	nit	:	Each
_			

1	Cost of Filteration Plant I/c Chiller Unit (specs as per Quotation)					Rs.	640000
2	Cost of PVC insulated and PVC sheated copper conductor 19/0.052 4 core (P-145, item 13c (vii)		56	Mtr	1,672.25		93646
3	Electric Pannel board .		r	No.	32100	Each	32100
		Total:-				Rs.	765746
			Add 5 % C	ontra	actor Profit	Rs.	38287
-		Total:-				Rs.	804033
		Say:-				Rs.	804000 Each
	111						

1) onal Officer Sub Di Buildings Sub Division Chakwal a

Earthing of iron clad aluminum switches with 8 SWG copper wire i/c copper strip 60×10 mm with copper staple, copper nails etc with reducing socket 30' below from ground level i/c making bore hole and placing in mixture of salt and charcoal sand mortar etc complete in all respect as approved by the Engineer Incharge.

antic		MRS	1st July 20	21 to 31st	Dec 202
S.No	Detail	Qty	Unit	Rate	Amount
	<u>A Material</u>				
1	Cost of making hole 5" dia from ground level to 30' depth.	30	Rft	290	8700
2	G.1 pipe 3/4" dia	40	Rft	84.6	3384
3	Reducing socket	1	Each	130	130
4	Cost of copper wire 8 SWG.	40	Rft	20.5	820
5	Cost of copper strip 60x10mm	1	Each	950	950
6	Mixture of Salt & charcoal etc.	Par	Part "A"		<u>500</u> 1448-
	B) Labour Charges				
1	Labour Charges for electrician	0.5	P.Day	950	475
2	Plumbers	1.0	P.Day	950	950
3	Helper	1.0	P.Day	725 Total	<u>725</u> 2150
	Add 10% sundries charges	Par	-t ''B''	Total	<u>215</u> 2365
	Total A+B				1684
	Add 20% contractor profit except item no. 2	on (Rs:134	65)	(+)	2693
	Aug 2070 contractor providence preserver			Total	1954
				Say	1950

-

ivisional Officer Sub Buildings Sub Division Chakwal a

Executive Engineer Buildings Division Chakwal a O

Supply / Erection of Energy saver 24 bulb watts Philips made completed as approved and directed by the Engineer in charge.

		IAI		y 2021 to 31 Iysis unit =	
S.No	Detail	Qty	Unit	Rate	Amount
	A) Material				050
1	Cost of Energy saver bulb (Phillips)				250
2	Carriage charges				10
-				Total	260
	B) Labour				10
1	Electrician			Total	10
# 		Tota	al A+B	(+)	270
	Add 20% contractor profit and over head	charges.		(+)	54
				Total	324
				Say	320
					Each

Sub Divisional Officer Buildings Sub Division Chakwal

a

Executive Engineer Buildings Division Chakwah

P/F Exhaust fan plastic body 12" of approved quality i/c necessary fittings as approved by the Engineer Incharge,

				1	Unit = Ea
S.No	Detail	Qty	Unit	Rate	Amount
	A) Material				2
1	Cost of Exhaust fan				2320
2	Fixable Wire 23/0.0760	3	P.Meter	31	93
3	Cost of Screws etc.				50
4	Carriage charges				50
		Part "A"		Total	2513
	B) Labour				
1	Electrician	0.5	Each	950	475
2	Helper.	0.5	Each	725	363
•		Part "B"		Total	838
	. Total A+	B = 2513	+	838	3351
	Add 20% contractor profit			(+)	670
e.				Totai	4021
				Say	4000
					Each

visional Officer Sub D Buildings Sub Division Chakwal

a

P/L LEAD LINING 0.5MM THICK LEAD SHEET WITH WALL FOR RADIATION PROTECTION UPTO ROOF HEIGHT AS PER INSTRUCTIONS AND COVERING WITH 1/2" THICK M.D.F PANELING 1/C FRAME OF KAIL WOOD 1-1/2"X 1-1/2" I/C TERMITE PROOFING AND FANCY DEODAR WOOD BEADING COMPLETE IN ALL RESPECT AND AS DIRECTED AND APPROVED BY THE ENGINEER INCHARGE ALSO APPROVED THE RADIATION PROTECTING AGENCY ETC.

	Detail			t rate per 10		
	Detan	Qt	χ	Rate	Unit	Amount
"A"	MATERIAL					
i	Lead 0.5mm thick in snape of sheet	110	Sft	1315	P.Sñ	144650
il	Nail steel 1-1/2" to 2" long	50	Nos	4	Each	200
iii	Kailwood for frame 1-1/2"x1"@2' c/c (Input 12.005)					
	2x6x10x1.5"x1=1.20 Cft + 25% = 1.50 Cft (Input Rates)	1.5	Cft	1650	P.Ctì	2475
ív	Screw 3" long	50	Nos	2	Each	100
v	Lamination vin board 3/4"thick Input 8.83/1A(2)	110	Sft	43	P.Sft	4730
vi	Beading fancy gola deodar wood required size (Input Rate)	50	Rít	16	P,Rft	800
vii	Nail 1/2" to 1-1/2".	1	Kg	140	P.Kg	140
vili	Ghue (Input Rate)	1	Kg	110	P.Kg	110
ix	Carriage for all material				L.S	150
					Totai	153355
"B"	LABOUR					
i	Black smith LB028 (Input Rate)	2	Nos	950	P.Day	1900
11	Skilled cooly LB024 (Input Rate)	2	Nos	950	P.Day	1900
iii	Carpainter LB029 (Input Rate)	2.5	Nos	950	P.Day	2375
iv	Skilled cooly LB024 (Input Rate)	2.5	Nos	950	P.Day	2375
					Total	8550
	Add 10% Sundries					855
					Total	9405
					Total A+B	162760
	Add 20% Contractor Profit and over head					32552
					G.Total	195313
	Rate Per Sft	113018.40 100	=	1953.12		
					Say	1950

MRS 1ST July 2021 to 31st Dec 2021

Sub Divisional difficer, Buildings Sub Division Chalcheal a

Executive Engineer Buildings Division 80

Page 136

Supply / Erection of Powder Coated Choromium plated Bib Cock Special (Master Brand) completed as approved and directed by the Engineer in charge.

MRS 1st July 2021 to 31st Dec 2021 Analysis unit = Each S.No Detail Qty Unit Rate Amount A) Material Cost of Bib Cock 630 1 2 Carriage charges 50 Total 680 B) Labour 50 Plumber 1 Total 50 Total A+B 730 (+) Add 20% contractor profit and over head charges. 146 (+) Total 876 800 Say Each **Executive Engineer** Sub D visional Officer **Buildings** Division Buildings Sub Division Chakwal Chakwal ú

Supply / Erection of Powder Coated Choromium plated Tee Stop Cock (Master Brand) completed as approved and directed by the Engineer in charge.

MRS 1st July 2021 to 31st E Analysis unit = Eac							
Detail	Qty	Unit	Rate	Amount			
<u>A) Material</u> Cost of Tee Stop Cock				600			
Carriage charges			Total	50 650			
<u>B) Labour</u> Plumber			Total	50 50			
	Tota	al A+B	(+)	700			
Add 20% contractor profit and over head	charges.		(+) Total	<u>140</u> 840			
			Say	800 Each			
Sub Divisional Officer			ecutive Eng uildings Divi				
	A) Material Cost of Tee Stop Cock Carriage charges B) Labour Plumber Add 20% contractor profit and over head	A) Material Cost of Tee Stop Cock Carriage charges B) Labour Plumber Tota Add 20% contractor profit and over head charges.	Detail Qty Unit A) Material Cost of Tee Stop Cock Carriage charges B) Labour Plumber Total A+B Add 20% contractor profit and over head charges.	Detail Qty Unit Rate A) Material Cost of Tee Stop Cock Total Total B) Labour Plumber Total Total Add 20% contractor profit and over head charges. (+) Total Total Say Say			

u/a

82

S/E of wall box plastic frame (Hi-Life) lovery colour i/c fixing charges complete in all respect as approved \ Directed by the Engineer Incharge.For 1-4 switch

S.No.	Description	-	Oty	Unit	Rate	Amount
A	MATERIAL:-		ALL DESCRIPTION OF THE PARTY OF T		and an	azolencielarilarine Roxivol
1	I to 4 holes Hilife (Bush) special latest series local made electric switch plate with special PVC box complete	1	No.	Each	205	205
В	LABOUR					
2	Labour for fixing charges and carriage charges				and the second se	
	from market to site of work.		L.S		L.S	60
			Add 10	% sundrie	s on Labour	6
					Total	271
	Add 20% Contractor profit and over head					54
				0	Grand Total	325
					Say	325

Sub Divisional Officer Buildings Sub Division Chakwal

a

Executive Engineer Buildings Division Chakwal

Page 139

S/E of wall box plastic frame (Hi-Life) lovery colour i/c fixing charges complete in all respect as approved \ Directed by the Engineer Incharge.For 1-5 switch

					Unit	Each
S.No.	Description	(Qty	Unit	Rate	Amount
A	MATERIAL:-					
1	1 to 5 holes Hilife (Bush) special latest series local made electric switch plate with special PVC box complete	1	No.	Each	290	290
B	LABOUR					
2	Labour for fixing charges and carriage charges from market to site of work.		L.S		L.S	60
			Add 1	0% sundri	es on Labour	6
					Total	356
	Add 20% Contractor profit and over head					71
				-	Grand Total	427
					Say	425

isional Officer ings Sub Division Bui Chakwal

84

87

ANALYSIS OF RATE

P/F Master made Muslim shower with flexible pipe & hock i/c C.P double bib cock complete in all respect as approved by the Engineer Incharge.

			MRS 1st July 2021 to 31st D Analysis unit					
S.No	Detail	Qty	Unit	Rate	Amount			
	A) Material							
1	Cost of double bib cock	1	Each	780	780			
2	Cost of Muslim shower	1	Each	650	650			
3	Cost of connection lead				250			
4	Carriage charges				30			
				Total	1710			
	B) Labour							
1	Electrician for fixing and making connection				100			
				Total	100			
		Tot	al A+B	(*)	1810			
	Add 20% contractor profit and over head cha	irges.		(+)	362			
				Total	2172			
				Say	2150			
					Each			

Sub Divisional Officer Buildings Sub Division Chakwal

Executive Engineer Buildings Division Chakwal C

1

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			nit rate per	the state of the s	
	MATERIAL			Rate	Unit	Amoui
i	Aluminum composite pannel / Aluminum clading sheet 1x10x10 = 100 Sft Added 10% wastage $\frac{= 10 \text{ Sft}}{\text{Total}} = 110 \text{ Sft}$ 110 Sft x5mm 25.4 mmx12 = 1.81 Cft $(1.81 \text{ Cft}) \text{ m3} \times 2710 \text{ Kg} = 140 \text{ Kg}$ 3.28x3.28x3.28 m3 input rate 12.010	140	Kg	300	P.Kg	42000
	M.S Angle iron from $1 - \frac{1}{2} x 1 - \frac{1}{2} x 3/16''$ 2x6x10 = 120 Rft Added 5% wastage $\frac{= 6 \text{ Rft}}{\text{Total}} = 126 \text{ Rft}$ 126 Rft @0.812 Kg/ P.Rft = 102.31 Kg input rate 12.119	102.31	Kg	140.27	P.Kg	14351
iii	Rivets	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
	Screws 4" long input rate 24.261	0.5	Dozen	40	P.Dozen	20
V4 L	Silicon Standared size tube (Market rate)	1	Nos	350	Each	350
vii	Carriage for total material				L.S	150
					Total	72807
-	LABOUR					
i	Black smith LB028 (Input Rate)	0.5	Nos	950	P.Day	475
ii l	Skilled cooly LB024 (Input Rate)	0.5	Nos	950	P.Day	475
iii (Carpainter LB029 (Input Rate)	0.25	No	950	P.Day	237.5
iv s	Skilled cooly LB024 (Input Rate)	0.25	No	950	P.Day	237.5
					Total	1425
1	Add 10% Sundries					142.5
			_		Total	1568
					Total A+B	74375
1	Add 20% Contractor Profit and over head					14875
					G.Total	89249
	Rate Per Sft	<u>95414</u> 100	12	892.49428		
	. 1/1				Say	875

Sub Divisional Officer, Buildings Sub Division Chakykal

1

A

P/F OF FRONT SIDE DESIGN OF M.S PIPE 4"X1-1/2" FIXED WITH 1-1/2"X1/8" M.S PATTI ON BOTH SIDES BETWEEN IN COLUMN I/C WELDING FIXING PAINTING (WHITE COLOUR) CARRIAGE COMPLETE AS APPROVED & DIRECTED BY THE ENGINEER INCHARGE.

Sr. No	Detail	~	T	T	Unit Rate P.
31.110	Detan	Qty	Unit	Rate	Amount
Α	MATERIAL				
1	Cost of M.S hallow pipe size 4"x1-1/2", 16 SWG				
	Pipe 1x10	10			
	Add: 5% Wastage	0.5			
	Total	10.5	P.Rft	100	1050
2	Painting Guard bars Gates of iron bar				-
	1x10x0.92	9.2	%Sft	1303.3	120
3	Cost of M.S Patti 1-1/2"x1/8" around pipe		L.S		500
4	Cost of welding rods	2	Piece	30	60
5	Carriage charges		L.S		250
6	Labour charges		L.S		250
			· · · · · · · · · · · · · · · · · · ·	Total	2230
_	Add: 20% Contractor Profit on all iteme except item No. 2	on Rs. 224	72/-		422
				Total	2652
	Rate P.Rft	2652	1	10	265
			Sa	y Rs. P.Sft	250

Sub Divisional Officer Buildings Sub Division Chakwal

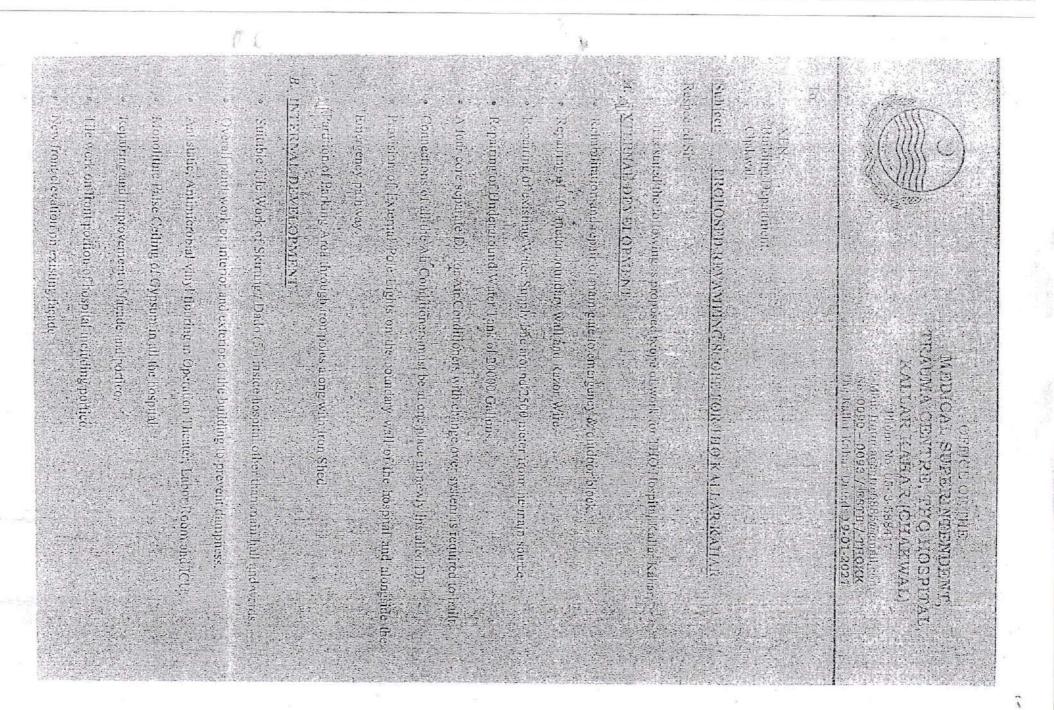
a

Buildings Division Chakwal

Executive Engineer

Taken length 10 Rft

MRS 1st July 2021 to 31st Dec 2021



Page 144

...

PROJECT MANAGEMENT UNIT . el No. PMU//P&SHD//2020/730

> P&S HEALTHCARE DEPARTMENT (31-E/1, Shahrah-e-Hazrat Imam Hussain Gulberg-III, Lahore, Ph: 042-99231208) Dated the Lahore November 25, 2020

1706

18

CE, Ph. Bidgs: Depti North Zone Lahore 44 Nos PES: date C.E Dir (A&W) PIT WIZ SUBJECT: 0.0.

.1

1.0.

C.D.

COST ESTIMATES FOR REVAMPING OF TEHSIL HOSPITALS

-050

5

Chief Engineer Buildings (North Zone)

Government of the Punjab,

Buildings Department,

Lahore.

Primary and Secondary Healthcare Department (P&SHD) has transformed its secondary healthcare establishments through revamping program. P&SHD is having A.O. 26 District and 133 Tehsil Headquarter Hospitals across the Punjab. These hospitals have 68A0 been divided in to two Phases of Revamping Program i.e. Phase - I (25 DHQ and 15 S/M____THQ Hospitals Annexure - A) and Phase - II (Remaining Hospitals Annexure - B). P&SHD has carried out the civil works under revamping program in Phase - I hospitals through Infrastructure Development Authority Punjab (IDAP). The scope of work of the revamping civil works was i) Internal Development ii) External Development and iii) External Electrification. As of now around 60% of work on these schemes has been completed by TDAP. No reasonable revamping civil works has been carried out in Phase - II Hospitals up till now.

Now, the Department intends to carry out further revamping program of 2. Phase - II through Communication and Works Department Punjab. Hence, in this regard, cost estimates for revamping.civil works of these hospitals are desired so that the work on these schemes can be executed promptly. The department has prepared the CAD Maps of most of these hospitals, which can be shared on email as well. The detailed design document containing detailed scope requirement is also attached at Annexure -C (The estimates of only clinical blocks of hospital may be provided).

It is pertinent to mention that P&SHD intends to revamp the civil 3. infrastructure of these Phase - II hospitals similar to Phase - I hospitals to achieve the uniformity. Hence, in order to have a better idea of specifications and materials, the field visits of revamped DHQ and THQ Hospitals are recommended (list already attached at (Annexure-A)

	2	· · · · · · · · · · · · · · · · · · ·	
Elsr. No.	Facility Name	District	Zone
State 2011 - 311-20-	DHQ Hespital Hafizebad	Hafizabad ·	allocation and
	DHQ Hospital M.B. Din	M.B. Din	N. D. August
2	DHQ Hospital Attock	Attock	國家和自治
3	THQ Hospital Hazro	Attock	A Distant
4	DHQ Hospital Mianwali	Mianwali	n the first
5	THQ HOSPITAL ISA KHEL	MianWali	拉国 124世纪在
<u> </u>	DHQ Hospital Narowal	Narowal .	by of of spin
7	CIVIL HOSPITAL DASKA	Sialkot	NULL CARLES
8	THQ Hospital Kamoke	Guiranwala	a cigity in the
9	DHQ Hospital Chakwal	Chakwal	The distance of
10	DHQ Hospital Chakwal	Khushab	NHO COMP
11	DHQ Hospital Jehlum	Jehlum	North Star
12	THQ HOSPITAL NOOR PUR THAL	Khushab	
13	DHQ Hospital Bhakhar	Bhakhar	Application
14	DHQ Hospital TT Singh	TT Singh	Center
16	GOVT.EYE-CUM-GENERAL HOSPITAL GOJRA	T.T. Singh	Center
17	DHQ Hospital Pakpattan	· Pakpattan	Center
how many all all a started	THQ HOSPITAL, ARIFWALA ARIFWALA	Pakpattan	Center
18	DHQ Hospital Okara	Okara	Center
19	DHQ Hospital Okara South City	Okara South City	Center
	DHQ Hospital Chiniot	Chiniot	Center
21	DHQ Hospital Jhang	Jhang .	Center
22	DHQ Hospital Kasur	Kasur	Center
23	THQ, HOSPITAL CHUNIAN	Kasur	Centre
24	THQ, HOSPITAL CHONIAN	Nankana	Center
. 204	DHQ Hospital Nankana THO HOSPITAL CHICHAWATNI	- Sahiwal	Center
25	DAO Hospital/Shelkupura	Shelkupura	Center
	DHO HOSpital Sherkupura	Muzaffrgarh	South
27	DHQ Hospital Muzaffrgarh	DG Khan	South
28	THQ HOSPITAL TAUNSA	Muzeffargarh	South
29	THQ Hospifel Kot Adu	Vehari	South
30	DHQ Hospital Vehari	Khanewal	South
31	IDrig riospital Nitanewai	Khanewal	South
32	THQ HOSPITAL MIAN CHANNU	Bahwalnagar	South
33	DHQ Hospital Bahwalnagar	Bahawalnagar	South
. 34	THQ HOSPITAL, CHISHTIAN.	Lodhran	· South
35	DHQ Hospital Lodhran	Bahawalpur	South
36	THO HOSPITAL, AHMADPER EAST.	Vehari	South
37	THQ BUREWALA	Layyah	South
38	DHQ Hospital Layyah	Multan	South
39	GOVT.THQ HOSPITAL SHUJABAD	Rajanpur	South
40	DHQ Hospital Rajanpur	Inajariput	1

4[].

1.4

:

1/25/19

ι

2

!

¥.,	, <u>s</u> 2		
Sr.#	FACILITY NAME	District	Zono y
1	City Hospital Jhang	Jhang	Center /
2	THQ Level Hospital Lal Quarter Samanabad Lahore	Lahore	Center
3	THQ Hospital Manawan Lahore Cantt	Lahore	Center
4	THQ Hospitals Sabzazar Lahore City	Lahore	Center
5	THQ Level Hospital Kot Radha Kishan Kasur	Lahore	Center
	Government General Hospital 224/RB Falsalabad City	Fajsalabad	Center
6	THQ Hospial Kahna Nu Raiwand Lahore	Kasur	· Center
7	THQ Level Hospitals Ghaziabad Lahore Carint	Lahore	Center
8	THO LEVEL HOSPITAL SUMUNDRI	Falsalabad .	Centre
9	THQ Hospital Shorkot	Jhang	, Céntre
10	THQ HOSPITAL MURIDKE	Sheikhupura .	Centre
11 .	THO HOSPITAL DEPALPUR	Okara	. Centre
- and the second	THQ HOSPITAL JARANWALA	Faisalabad ·	Centre
13	THQ HOSPITAL KAMALIA	T.T. Singh	Centre
	THQ HOSPITAL PATTOKI	Kasur	Centre
15	THQ HOSPITAL TANDILIANWALA	Faisalabad	. Centre
17	THQ Ahmed pur Sial	Jhang	Centre
18	THQ Hospital Safdarabad	Sheikhupura	Centre
19	THQ Level HOSPITAL HAVELI LAKHA	Okara .	Centre
20	THO HOSPITAL CHAK JHUMRA	Faisalabad	Centre
	THQ, HOSPITAL CHUNIAN	Käsur	Centre
	Tehsi Aead Quarter Hospital, Bhowana, Chinlot	Chinlot	Centre
22 .	GMH Pathi Ground	Lahore	Centre .
	GMH Chohan Road (1)	Lahore	Centre
24	THO SANGEA HILL	Nankana	Centre
25	THQ Hospital SharaqPur Sharif	Sheikhupura	Centre
27	THQ SHAHKOT	Nankana	Centre
28	THO Mian Meer	Lahore ;	Centre
29	THO Lalian	Chiniot	Centre
30	Tehsil Head Quarter Hospital, 18-Hazari, Jhang	Jhang	Centre
31	THQ Hospital Ferozewala	Sheikhupura	Centre
32	THQ HOSPITAL RENALA KHURD	译 Okara	. Centre
33	Govt: Hospital Shahdra r	Lahore	, Centre
34	Govt. General Hospital Samanabad	-Faisalabad	Centre
35	Govt. Model Town Hospital: Model Town, Lahcre	Lahore	Céntre
36	60 Bedded THQ Hospital, Lidher Bedlan Road, Lahore Cantt, Lahore	Lahore	Centre
37	Govt.Aziz Bibi, Roshan Bheela Hospital	Kasur	Centre
.38	Tehsil Head Quarter Hospital, Ralwind, Lahore	- Lahore	Centre
-115	THQ Hospital Wazirabad	💱 Gujranwala	的建筑的道法。

.:

The second

12 20

Document for Scope of THQs Revamping.

External Development

Road Networking (Asphalt)

Rehabilitation and Repair of Existing Road Network

Construction of new asphalt road where required

A.

External Plat forms/Pathways Addition, Alteration and Rehabilitation of plat forms / external pathways other than asphalt road (e.g. P.C.C, Tough Paver etc.) in order to have easiest access to all the

facilities of complex should be designed

Existing boundary wall of complex should be examined and addition of missing wall solutions strengthening Side), and dismantling/reconstruction (if required) should be assessed

The functionality of the existing sewerage system of clinical blocks of hospitals needs to be examined and provisions for its optimal functions keeping in view the present and future hospital requirements are required. Provisions for replacement of blocked/undersized existing severage line along with rehabilitation of manholes may

also be incorporated therein.

Water Supply System

Repair of existing external water supply line of clinical blocks of hospital

Provision for new water supply lines where required.

Water Filtration plant with supply system Provision for new water filtration plant vis-à-vis the hospital requirements may be incorporated. All important points including OPD, wards, waiting areas, emergency and other blocks must be provided with drinking water stations, for which the

distribution system needs to be planned and made a part of the estimates. Repair / Rehabilitation of existing water filtration plant along with provision of drinking

water distribution system as mentioned above.

JP.

Provisions of main power supply cable (4 - Core), main power panels / distribution boxes (from transformer to main meter and main meter to distribution boxes) should 108 22

be incorporated keeping in view the current distributive and future electric load of the complex

Provisions of external pole lights should be made within the clinical blocks of hospital. Provision of complete earthing and lighting protection system for clinical blocks including all electrical equipment. -7

External Waiting Area and Parking Facility

External waiting area should be provided according to the space requirement. Parking facility should be provided according to the space requirement.

> Internal Development B.

Tile work

Suitable tile work for flooring and skirting/dado (5') by keeping in view the existing and adjacent tile work condition should be proposed in complete hospital. (Provisions of 2' x 2' full body porcelain tile for flooring and 2' x 1' for dado are suggested to match with the life work of already revembed 40 DHO/THO Hospitals).

The tile work where found in good condition should only be incorporated for minor repair rather than complete replacement.

Ramps and Stairs

Coarse Grained / Rough Textured / Anti-skid flooring should be proposed on the ramp/stretcher way along with guard and handrails for stable movement of stretcher on ramp and patient/attendants on stairs should be proposed.

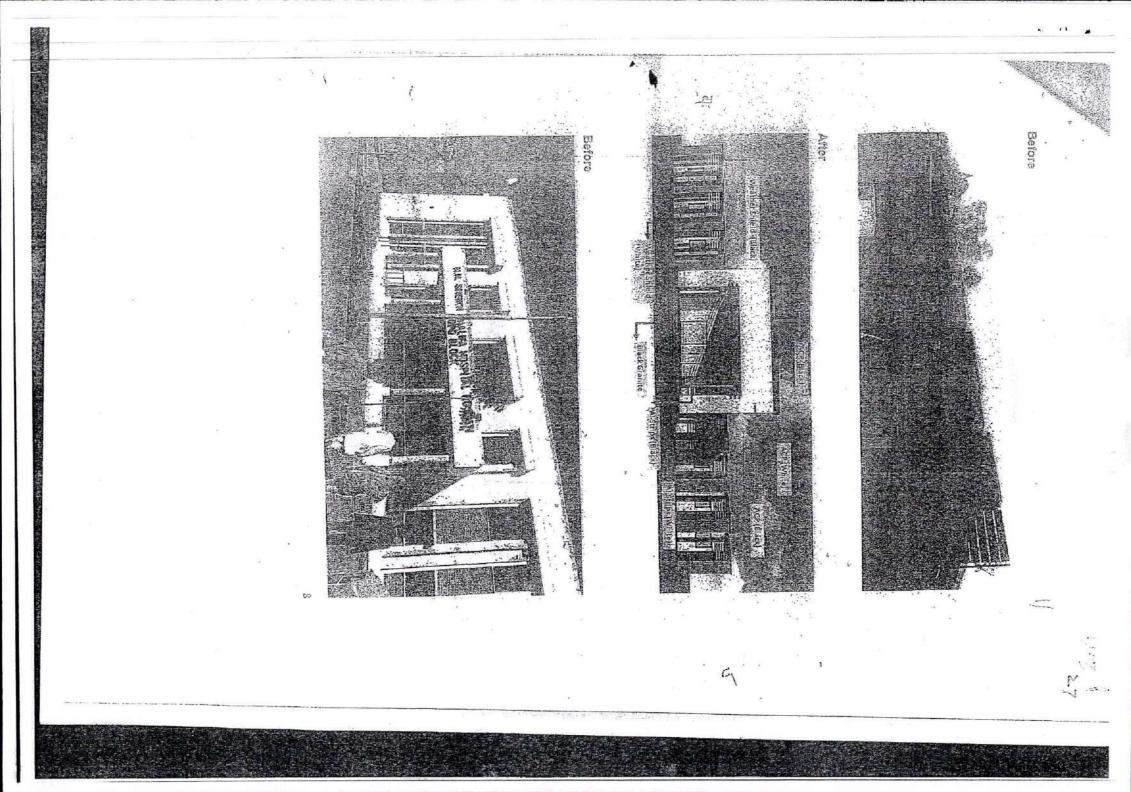
Paint and dampness works

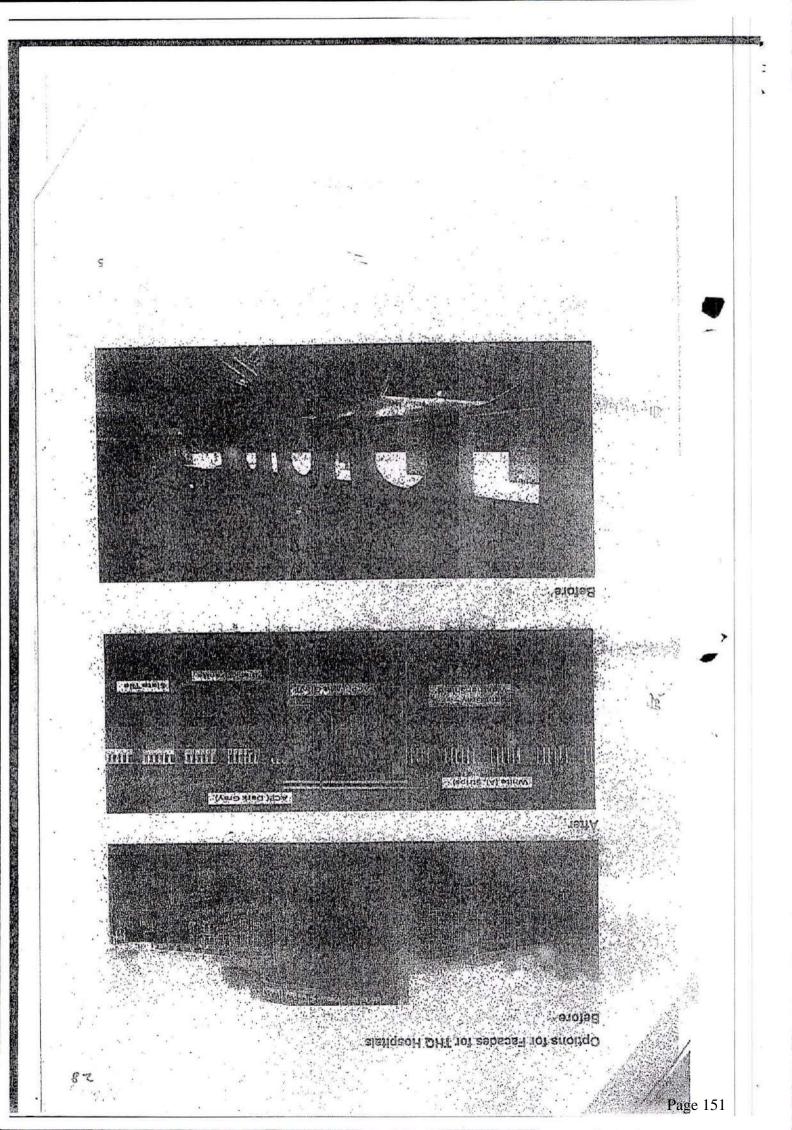
Paint work type on interior and exterior side of clinical blocks of hospital should be assessed by keeping in view the existing paint condition of hospital

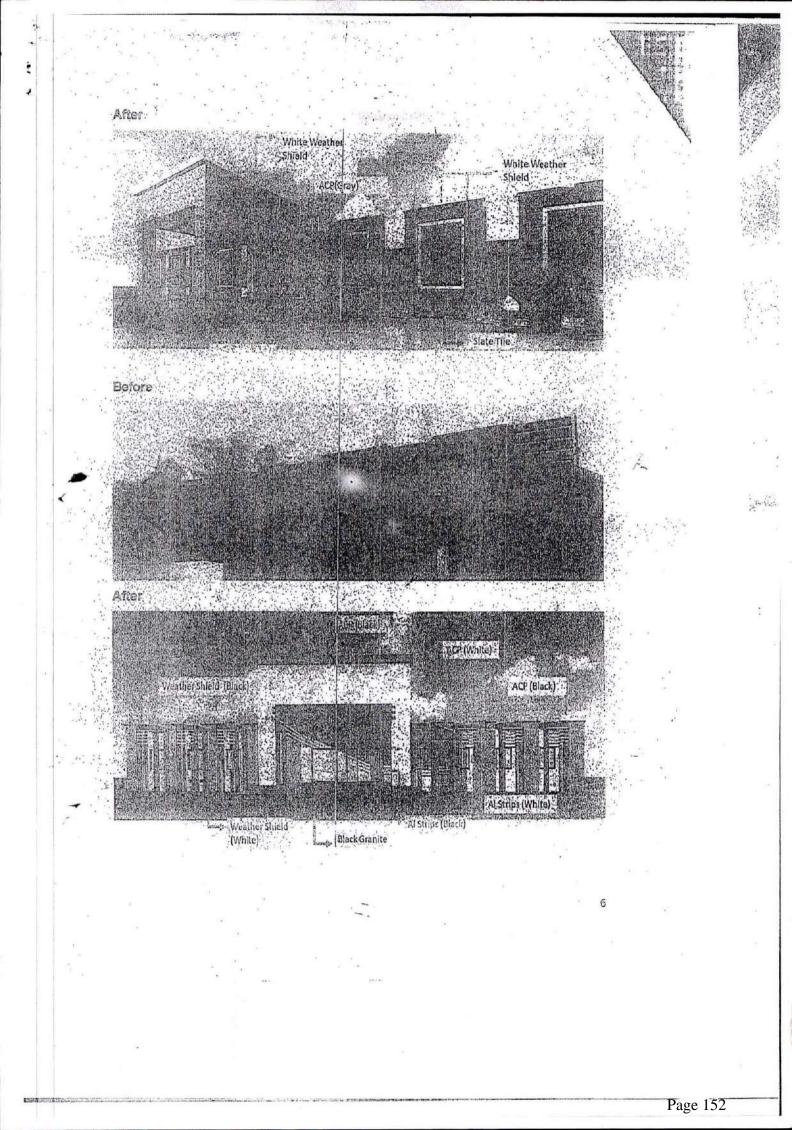
Assessments regarding elimination of dampness origin or source and regarding concealment of existing dampness should be made and appropriate solutions should be incorporated

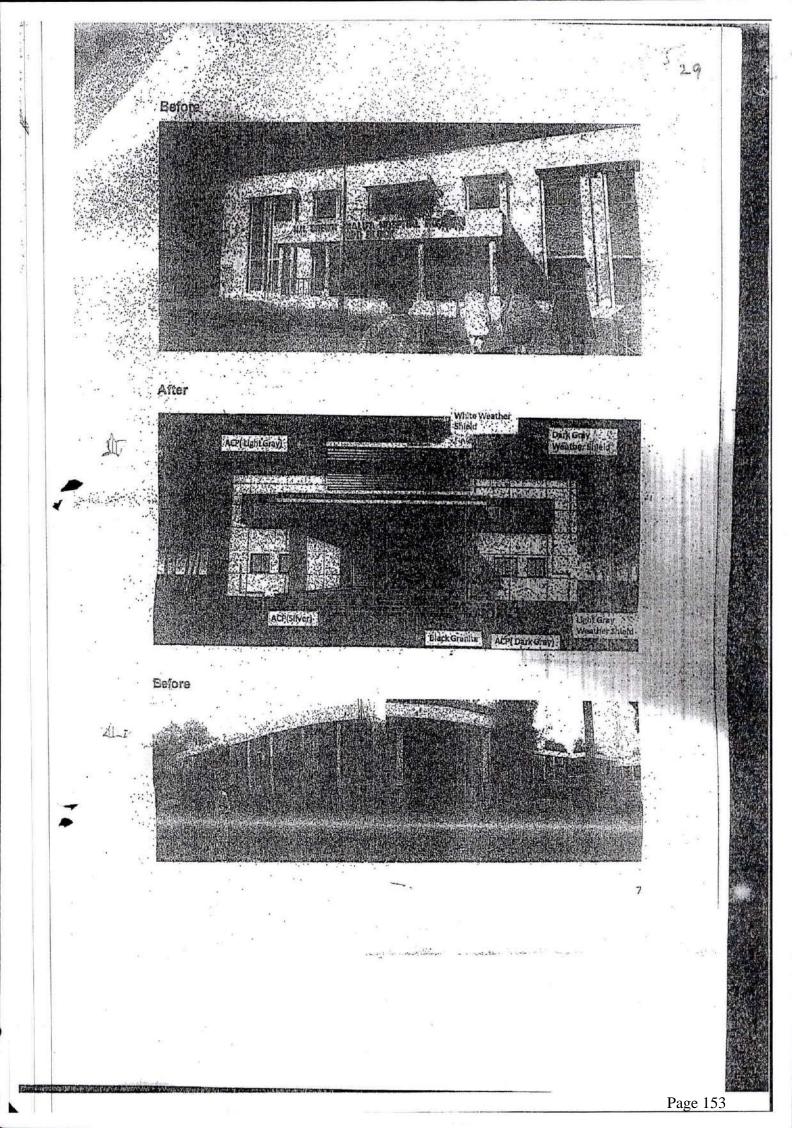
Flooring, Ceiling and Wall requirements of high cleanliness requiring areas like Operation Theaters (OTs), Gynecology OT, Labor room and ICU cum CCU should be incorporated with Anti-Bacterial Material (Provision of Antistatic, Antimicrobial Vinyl Flooring and Wall panels with monolithic false ceiling of gypsum or hon-percus aluminum are suggested)

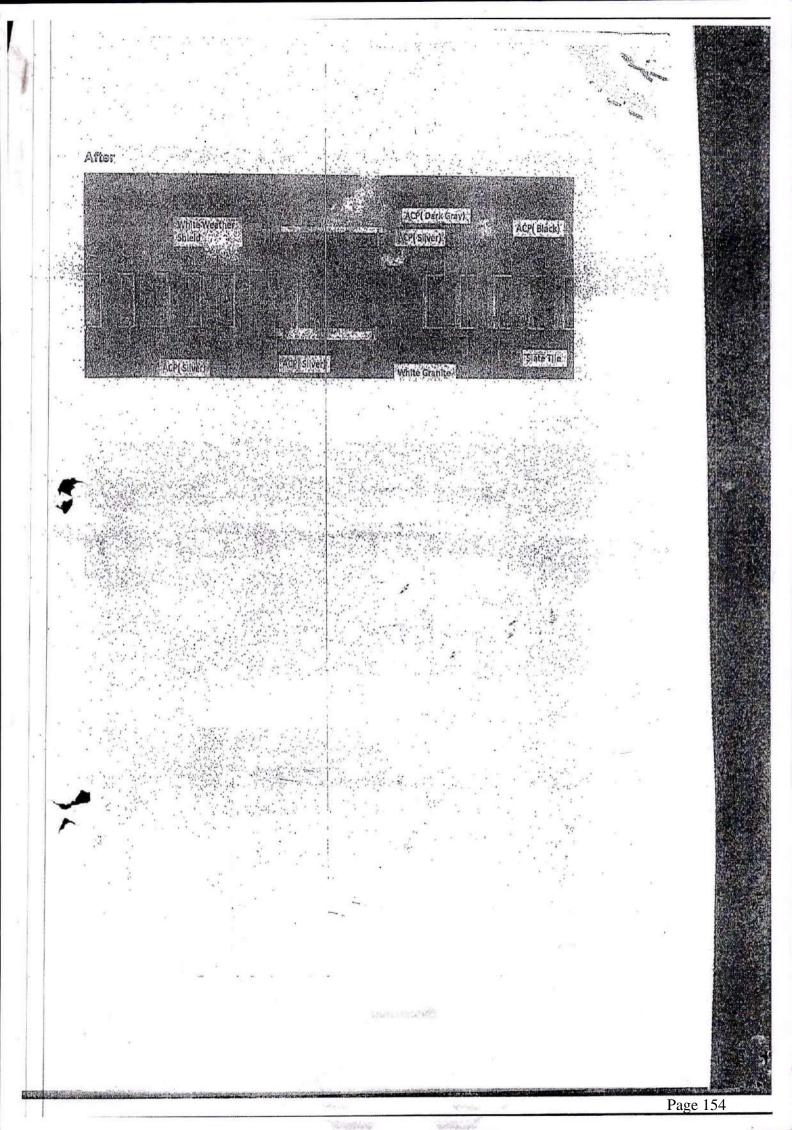
Provision of lead lining in X-Ray Rooms should be made.











8. <u>Annual Operating and Maintenance Cost after Completion of the</u> <u>Project</u>

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.

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

Grant Number:Government Buildings - (PC12042) LO NO:LO21011480 A/C To be Credited:Account-I

PKR Million

Sr #	Object Code	2023-	-2024	2024	-2025	2025	-2026	2026	-2027	2027-	-2028
		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) LO NO:LO21011480 A/C To be Credited:Account-I

PKR Million

Sr #	Object Code	2023	-2024	2024	-2025	2025	-2026	2026	-2027	2027-	-2028
		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

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

10.2 FINANCIAL PLAN DEBT INFORMATION

10.3 FINANCIAL PLAN GRANT INFORMATION

attached

10. Financial Plan and Mode of Financing

The project will be executed / financed through Annual Development Program under the sector Primary and Secondary Healthcare Department, the Government of Punjab. Year wise financial utilization is as under:

Revenue Side

(Do	in	N / I I	lian)
(Rs	.in	Mil	lion)

Year	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	Total
Funds Released	33.000	24.086	1.580	1.578	3.915	6.979	71.138
Utilization	11.027	23.066	1.542	1.441	3.890	0.518	41.484

Capital Side:

Year	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	Total
Funds Released	0	0	0	0	20.000	26.028	46.028
Utilization	0	0	0	0	20.000	0.000	20.000

<u>Balance funds may be provided for completion of the project in</u> <u>subsequent years through ADP</u>

10.4 WEIGHT COST OF CAPITAL INFORMATION

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.

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.

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

11.4 ECONOMIC ANALYSIS

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

Implementation Schedule

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

.

12.3 IMPLEMENTATION PLAN

•

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

attached

RISK REGISTER

Programme for Revamping of all THQ Hospitals in Punjab

		RISK DATA			itigation / Cu tative Assess		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 o 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	 Stoppage of work Performance of the Contractor has affected 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	 Delay in tendering Effect on quality as the Consultant supervision will not take place 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.	 Delays in completion of works Claim requests received by Contractor and Consultant 	3	3	9	Contractor will be asked to depute fully vaccinated labor

12.6 PROCUREMENT PLAN

.

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:Mr. Adeel Aslam Email: Fax No: **Designation:**Project Director, PMU P&SHD **Tel. 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 Kallas Kabay (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.

Prepared By:

(HISSAN ANEES) DIRECTOR PLANNING & HR, PMU, PRIMARY & SECONDARY HEALTHCARE DEPARTMENT, LAHORE (042-99231206) (Oct-2022)

(RIZWAN SHOUKAT)

PROCUREMENT SPECIALIST, (PMU), PRIMARY & SECONDARY HEALTHCARE DEPARTMENT, LAHORE (042-99231206) (Oct-2022)

110mz

(HAMZA NASEEM) PROJECT MANAGER CIVIL, PMU, PRIMARY & SECONDARY HEALTHCARE DEPARTMENT, LAHORE (042-99231206) (Oct-2022)

Checked By:

(Dr. AYESHA PARVEZ) DEPPUTY PROJECT DIRECTOR (PMU), PRIMARY & SECONDARY HEALTHCARE DEPARTMENT, LAHORE (042-99231206) (Oct-2022)

(KHIZAR HAYAT PROJECT DIRECTOR (PMU).

PROJECT DIRECTOR (PMU), PRIMARY & SECONDARY HEALTHCARE DEPARTMENT, LAHORE (042-99231206) (Oct-2022)

Approved By:

(DR. IRSHAD AHMAD) SECRETARY, GOVERNMENT OF THE PUNJAB PRIMARY & SECONDARY HEALTHCARE DEPARTMENT, LAHORE (042-99204567) (Oct-2022)

52

17. RELATION WITH OTHER PROJECTS

20. MARGINALISATION OF PC-1

SR.NO.	CRITERIA	YES/NO	COMMENTS
Descripti	on & 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 Ge	ender Disaggregated Data	T	
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 Im	ipact		
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 B	ased 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	
Monitori	ng & 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	