DOCUMENT OF THE INTER-AMERICAN DEVELOPMENT BANK

JAMAICA

SUPPORT FOR OPERATIONALIZATION OF THE START-UP PLAN FOR SPANISH TOWN HOSPITAL

(JA-T1253)

PROJECT DOCUMENT

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SUPPORT FOR OPERATIONALIZATION OF THE START-UP PLAN FOR SPANISH TOWN HOSPITAL
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PROJECT SUMMARY	
Operation Type:	Technical Cooperation
Sector:	HEALTH
Subsector:	HEALTH SYSTEM STRENGTHENING
TC Taxonomy:	Operational Support
Project Number under the Operational Support Taxonomy:	JA-L1049
Technical Responsible Unit:	SCL/HNP-Health, Nutrition and Population Division
Unit with Disbursement Responsibility (UDR):	CCB/CJA-Country Office Jamaica
Executing Agency:	Inter-American Development Bank

PROJECT OBJECTIVE

The objective of the technical cooperation (TC) is to support the design of the organizational structure and the launch of services for the operation of the Spanish Town Hospital (STH) across its various facilities. The aim is to establish an integrated, efficient, and quality oriented service delivery model. To achieve this, the work will include: (i) defining the services to be provided in each facility; (ii) estimating the resources required for each service; and (iii) changing management process. This will be complemented by support for the development of a commissioning plan for the new infrastructure financed under the JA-L1049 Program.

FINANCIAL INFORMATION

Financing Type	**Fund**	**Amount in US$**
TCN - Nonreimbursable	P3E - OC SDP Pillar 3 - Social Protection and Human Capital Development	150,000
	Total IDB Financing	**150,000**
	Counterpart Financing	**0**
	Total Project Budget	**150,000**
Donors:	N/A	
Disbursement Period:	36 months	
Execution Period:	36 months	

ADDITIONAL FINANCIAL INFORMATION

N/A

I. JUSTIFICATION AND OBJECTIVE

1.1 **Diagnostic.** Jamaica faces a growing burden of non-communicable diseases (NCDs), which account for approximately 80% of all deaths nationwide. Cardiovascular diseases, diabetes, cancer, chronic respiratory conditions, and hypertension continue to place significant pressure on the country's health system. At the same time, population growth, demographic transition, and increasing demand for specialized care have generated sustained pressure on secondary and tertiary healthcare facilities, particularly in urban centers.

1.2 The Government of Jamaica has undertaken significant investments to strengthen the health sector through the Support for the Health Systems Strengthening for the Prevention and Care Management of Non-Communicable Diseases Programme (4668/OC-JA). One of the flagship investments under this program is the expansion and modernization of Spanish Town Hospital (STH), located in St. Catherine Parish, the country's most populous parish with more than 522,057 inhabitants. Spanish Town Hospital serves as a critical referral facility within the South East Regional Health Authority (SERHA) and provides a broad range of secondary care services, including internal medicine, surgery, pediatrics, obstetrics and gynecology, orthopedics, renal services, physiotherapy, diagnostic imaging, pharmacy services, and emergency care.

1.3 Despite its strategic importance, Spanish Town Hospital has experienced persistent capacity constraints. Historical data indicate annual admissions exceeding 18,000 patients, with bed occupancy rates approaching or exceeding optimal operational thresholds in several specialties. The hospital has faced challenges associated with overcrowding, limited physical capacity, inefficient patient flows, growing demand for chronic disease management services, and increasing pressure on clinical and administrative staff. Between 2012 and 2017, on average, STH had 18,000 yearly admissions, and most (44%) were for obstetric care. General medicine and surgical services are overcrowded; their bed occupancy rate reaches 87.5% and 95.7%. Also, the average length of a stay is 5.8 days. The ongoing expansion financed under 4668/OC-JA seeks to address these limitations through infrastructure modernization and increased service capacity. However, infrastructure investments alone are insufficient to guarantee improved health outcomes or operational efficiency.

1.4 International experience demonstrates that major hospital expansions frequently encounter implementation challenges when operational readiness, workforce planning, governance arrangements, commissioning processes, and performance management systems are not strengthened in parallel with infrastructure investments. Without adequate preparation, newly expanded facilities may experience underutilization of assets, inefficiencies in service delivery, fragmented patient pathways, operational bottlenecks, and increased operating costs.

1.5 In the case of Spanish Town Hospital, the expansion will require substantial adjustments in service organization, staffing models, workflows, logistics systems, supply chain management, information systems, and accountability mechanisms. New clinical and non-clinical services must be integrated into existing operations while maintaining continuity of care and ensuring efficient utilization of resources. This transition requires a structured operational readiness and commissioning process supported by specialized technical assistance.

1.6 **Request.** To address these challenges, the Government of Jamaica has requested the Inter-American Development Bank's support to finance a TC (see Annex I), to support the implementation of the loan 4668/OC-JA, through institutional strengthening and key technical studies.

1.7 **Objective.** The objective of the Technical Cooperation (TC) is to support the design of the organizational structure and the launch of services for the operation of the Spanish Town Hospital (STH) across its various facilities. The aim is to establish an integrated, efficient, and quality oriented service delivery model. To achieve this, the work will include: (i) defining the services to be provided in each facility; (ii) estimating the resources required for each service; and (iii) changing management process. This will be complemented by support for the development of a commissioning plan for the new infrastructure financed under the 4668/OC-JA Program.

1.8 **Description of the associated Loan.** This TC reinforces the implementation of the investment loan 4668/OC-JA (US$50 Million). The objective of the loan is to contribute to the improvement of the health of Jamaica's population by strengthening comprehensive policies for the prevention of chronic Non-Communicable Chronic Disease (NCD) risk factors and improving access to an upgraded and integrated primary and secondary health network in prioritized areas, with an emphasis on more efficient and higher quality chronic disease management, that provide more efficient and higher quality care.

1.9 The proposed TC will support the Ministry of Health and Wellness (MOHW), the SERHA, and hospital leadership in designing and implementing the operational, organizational, and management arrangements necessary for the successful launch of the expanded facility. The TC is aligned with the objectives of 4668/OC-JA and contributes to Jamaica's broader health sector modernization agenda by strengthening hospital management capacity, improving quality and efficiency of service delivery, enhancing accountability and results-based management, and supporting the provision of more integrated and patient-centered care. By ensuring that operational systems, governance arrangements, workforce structures, and performance management mechanisms evolve alongside physical infrastructure investments, the TC will maximize the development impact and sustainability of the Spanish Town Hospital expansion and generate lessons that may be replicated across Jamaica's public hospital network. While the loan operation focuses on the construction and equipping of the hospital, the TC addresses the complementary institutional and operational requirements needed to make the facility fully operational. Specifically, it will support change management, support defining the service portfolio across the hospital's facilities, strengthen management processes, and support the commissioning plan for the new infrastructure. In doing so, the TC will help maximize the impact and sustainability of the investments financed under the Loan.

1.10 **Complementarity.** The TC also complements the Government of Jamaica's efforts to strengthen health system resilience, improve the quality and efficiency of hospital services, and enhance institutional capacity for evidence-based management through the TC "Reinforcing the Health System of Jamaica to Respond to the Health Needs of the Population" (ATN/OC-22093-JA). In addition, it builds on the results of ATN/OC-19621-JA, which assessed the impact of the STH infrastructure expansion on inpatient service delivery, estimated current and future human resource requirements, analyzed operating costs, and developed an action plan to strengthen hospital management and operational capacity. The evidence, analytical work, and planning tools generated under that TC provide the foundation for the present operation, which will support the implementation of

the recommended operational, institutional, and management reforms required to ensure the effective commissioning and sustainable operation of the expanded Spanish Town Hospital. Furthermore, this TC will maximize the effectiveness, sustainability, and development impact of the investments financed by 4668/OC-JA and generate institutional knowledge that can inform the modernization of other public hospitals across Jamaica.

1.11 **Strategic Alignment.** This TC is consistent with the IDB Group's Institutional Strategy: Transformation for Greater Scale and Impact (CA-631) and it is aligned with the objectives of: (i) reducing poverty and inequality by improving coverage and access to health services to all population segments and enhancing health care quality. The Program is also aligned with the following operational focus areas: (i) institutional capacity, rule of law and citizen security; and (ii) social protection and human capital development. The TC is aligned to the digital transformation priority area of the ONE Caribbean regional Strategic framework (GN-3201-5) as the initiatives to advance digital health in Jamaica will contribute to the regional objective of integrating of digital technology to enhance public services. Additionally, the TC aligns with the IDB Group Country Strategy with Jamaica (2022–2026) (GN-3138) and its strategic area of: (B) Addressing Social Gaps, as it supports public sector digital transformation and seeks to improve access to affordable and good-quality basic health services. The TC is also aligned with the cross-cutting theme of Institutional Capacity and Rule of Law, by strengthening the organizational and management capacity of the Ministry of Health and Wellness, SERHA, and Spanish Town Hospital to operationalize the expanded hospital infrastructure and deliver integrated, efficient, and quality-oriented health services.

1.12 The TC is consistent with the Health Sector Framework Document (GN-2735-12) line of action that addresses fiscal and financial sustainability. It contributes to reducing the health sector fragmentation and promotes primary health care coordination within the public healthcare sector. TC also addresses the line of action that improves the organization and quality of healthcare service delivery as it supports implementing the IS4H Plan of Action.

1.13 Likewise, the TC will contribute to the objectives of the Ordinary Capital Strategic Development Program (OC SDP) (GN-2819-25), by aligning P3E - OC SDP Pilar 3 - Social Protection and Human Capital Development. Specifically, it will strengthen institutional capacities for planning, management, and implementation in the health sector, contributing to more equitable access to quality health services and enhancing the effectiveness of public policies and investments in the social sector.

II. COMPONENTS

2.1 **Component 1. Integrated Hospital Operations and Workforce Coordination (US$100.000).** This component will finance specialized technical assistance to support the operational planning, readiness, commissioning, governance, workforce planning, and service delivery transformation required for the successful launch of the expanded Spanish Town Hospital. It will finance: (i) Consultancy for the Design and Implementation of Hospital Operational Readiness, that will include: (a) a comprehensive operational planning, readiness and commissioning framework for the expanded hospital; (b) service portfolio of the expanded hospital and establish operational arrangements for clinical and non-clinical services; (c) assessment for staffing requirements associated with the expanded infrastructure and projected service demand; and (ii) Consultancy for the Supply

Chain, Logistics, and Operational Support Systems, that will include: (a) assessment and optimize logistics processes, inventory management systems, equipment maintenance arrangements, procurement workflows, and support services required for hospital operations. The component will also support change management and staff engagement activities to facilitate cultural change and adaptation to the new operating model.

2.2 **Component 2. Health Information Systems, Monitoring, and Results-Based Management (US$50.000).** This component will finance technical assistance to strengthen data-driven management, performance monitoring, digital integration, and continuous quality improvement within Spanish Town Hospital. It will finance: (i) a Consultancy for the Hospital Performance Management Framework, that will include: (a) a comprehensive performance management framework including key performance indicators (KPIs), reporting mechanisms, accountability structures, and management dashboards; (b) the integration and systematization of hospital information systems and improve the availability and use of operational and clinical data for management purposes; (c) develop monitoring and evaluation mechanisms aligned with hospital objectives and 4668/OC-JA indicators. Activities will include indicator definition, reporting procedures, data quality protocols, and performance review processes; (d) training and technical support for hospital managers, clinical leaders, and administrative personnel on the use of data, performance monitoring tools, and management systems.

2.3 **Expected Results**. The results will be: (i) Strengthened operational readiness and commissioning of the expanded Spanish Town Hospital strengthened to enable the effective delivery of clinical and non-clinical service; (ii) Improved availability and use of operational and clinical data; and (iii) Enhanced capacity for results-based management and performance monitoring.

2.4 **Beneficiaries.** The direct beneficiaries of the TC will be the Ministry of Health and Wellness (MOHW), the South East Regional Health Authority (SERHA), and Spanish Town Hospital leadership and staff, whose institutional and operational capacities will be strengthened in areas including service coordination, human resources management, operational readiness, performance monitoring, and evidence-based decision-making. The final beneficiaries will be patients and communities served by Spanish Town Hospital and the broader SERHA referral network, particularly residents of St. Catherine Parish, who are expected to benefit from improved operational efficiency, continuity of care, service quality, and utilization of the expanded hospital's clinical capacity.

III. BUDGET

3.1 **Budget.** The total amount for this TC is US$150,000 (non-reimbursable) which will be financed by the P3E - OC SDP Pilar 3: Social Protection and Human Capital Development fund. There will be no local counterpart funding.

Budget in US$		
Components	**P3E**	**Total**
Component 1. Integrated Hospital Operations and Workforce Coordination	100.000	**100.000**
Component 2. Health Information Systems, Monitoring, and Results-Based Management	50.000	**50.000**
Total	**150.000**	**150.000**

IV. EXECUTION STRUCTURE

4.1 **The IDB as Executing Agency for TC**. The IDB as Executing Agency for the TC. The Executing Agency will be the Inter-American Development Bank (IDB), through the Health, Nutrition and Population Division (SCL/HNP), in accordance with the guidelines and requirements established in the TC Policy (GN-2470-2) and the Procedures for the Processing of TC Operations and Related Matters (OP-619-4, Annex II, C 2.2). Bank execution is justified based on institutional capacity and procedural constraints. The beneficiary do not currently have the necessary technical, operational, or institutional capacity to duly and timely execute the specialized activities provided under the TC, particularly those related to hospital operational readiness, commissioning, service organization, and institutional strengthening.

4.2 n addition, compliance with the beneficiary's internal requirements and procedures for the preparation and contracting of the specialized consultancies could delay the timely initiation and execution of the TC, potentially affecting the achievement of its objectives and the operational readiness of the expanded Spanish Town Hospital. SCL/HNP has the experience, capacity, and technical expertise required to prepare the terms of reference, carry out the contracting processes, and technically supervise the proposed activities. The Division has extensive experience in conducting and reviewing studies, advising on policy implementation and public health interventions, and supporting health system strengthening and quality of health care delivery. It can also draw on a broad network of specialists and organizations with expertise in hospital management, operational readiness, service delivery, and health systems strengthening. Bank execution will therefore facilitate the timely mobilization of the required specialized expertise while ensuring the technical quality necessary to achieve the expected results of the TC.

4.3 **Procurement.** All procurement to be executed under this TC have been included in the Procurement Plan (Annex IV) and will be hired in compliance with the applicable Bank policies and regulations as follows: (i) Hiring of individual consultants, as established in the regulation on Complementary Workforce (AM-650); and (ii) Contracting of services provided by consulting firms in accordance with the Corporate procurement Policy (GN-2303-33) and its Guidelines.

4.4 **Execution and Disbursement Period.** The disbursement and execution period will be 36 months.

4.5 **Monitoring, Reporting, and Supervision.** IDB Jamaica Country Office (CJA) will monitor the progress of the project. The project deliverables will be used as milestones to monitor physical and financial progress. The execution of this TC will be supervised by the Team Leader (HNP/SCL). The Unit of Disbursement Responsibility (UDR) will be the IDB Country Office in Jamaica (CCB/CJA).

4.6 The Project Team Leader will be responsible for overseeing the monitoring and supervision activities of this initiative, following the methodology outlined in the document "The TC Monitoring and Reporting System" (OP-1385-4).

4.7 **Intellectual Property.** Knowledge of products generated under this TC will be the property of the Bank and may be made available to the public under a creative commons license. However, at the request of the beneficiary, the intellectual property of such products may also be assigned or licensed to the beneficiary. This process will be carried out in coordination with the Legal Department.

V. POTENTIAL RISKS

5.1 The successful implementation of this TC may be affected by two main risks. First, limited institutional capacity, including competing operational priorities and constraints in technical and managerial resources, could delay implementation and affect the quality and sustainability of the TC's outputs. This risk will be mitigated through continuous technical assistance, which will include targeted capacity building, and regular coordination activities with hospital leadership to strengthen implementation capacity and address bottlenecks as they arise. Second, resistance to organizational change associated with the commissioning of the expanded Spanish Town Hospital could hinder the adoption of new workflows, governance arrangements, information systems, and accountability mechanisms across clinical, administrative, and support services. Notwithstanding the governments work to develop an organizational change strategy[1], which has not been finalized at this time, in order to mitigate this risk, the TC will promote early and continuous engagement of hospital leadership and key stakeholders, complemented by structured change management activities, stakeholder communication to facilitate the adoption of new processes and ensure institutional ownership of the reforms.

VI. EXCEPTIONS TO BANK POLICIES

6.1 There are no exceptions to Bank Policy

VII. ENVIRONMENTAL AND SOCIAL ASPECTS

7.1 This TC is not intended to finance pre-feasibility or feasibility studies of specific investment projects or environmental and social studies associated with them; therefore, this TC does not have applicable requirements of the Bank's Environmental and Social Policy Framework (ESPF).

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[1] Change Management – Health Systems Strengthening Programme.

REQUIRED ANNEXES:

- Annex I: Request from Client
- Annex II: Results Matrix
- Annex III: Terms of Reference
- Annex IV: Procurement Plan