

PROJECT INFORMATION SHEET

PIP No :

1549

(To be allocated by MOP)

PART A : BASIC PROJECT INFORMATION

(Must be completed in all cases)

1. PROJECT NAME: **Regional Hospital Development Project**
2. PROJECT DATES:
- PROJECT START: **1/1/2025**
- ESTIMATED COMPLETION: **1/12/2031**
3. TOTAL PROJECT COST: **\$141,000,000**
4. RESPONSIBLE MINISTRY: **Ministry of Health**
- RESPONSIBLE UNIT: **DIC/MoH**
- អង្គភាពទទួលខុសត្រូវ: **PMU for Regional Hospital**
5. PROJECT STATUS: **Planned**

DETAILED PROJECT INFORMATION

6. TYPE OF PROJECT: **Investment project**
7. SOURCE OF PROJECT FUNDING: **Concessional Loan**
8. THE POLICY AREA OF THE PENTAGON STRATEGY PHASE I THAT THIS PROJECT FALLS UNDER:V
Side 3. Improvements of People's Health and Well-being
9. THE CONTRIBUTION OF THE PROJECT TO ACHIEVE THE ABOVE POLICY:
Cambodia will be improved access to quality health services.
10. SUPPORT TO CAMBODIA INDUSTRIAL DEVELOPEMENT POLICY:

Does this Project support to the implementation of the Cambodia Industrial Development Policy? **Yes**

Coordination of Supporting Policies (Skills and Human Resource Development, Sciences, Technology and Innovation Promotion, Establishment and Development of Industrial Infrastructure, and Financing Measures)

11. SECTOR:

Health **Health**

Health

Health

12. PROJECT LOCATION: (Describe the location of the project and its components.)

Siem Reap, Kampong Cham,

13. PROJECT OBJECTIVE: (Describe the major purpose of the project.)

The objective of the Project is to improve the access to the advanced medical services in the regions by improving medical facilities and medical equipment which are necessary to upgrade provincial hospitals to regional hospitals, thereby contribute to improve the health of people.

14. PROJECT DESCRIPTION: (Provide a description of the project and all its components.)

In recent years, while the indicators of maternal and child health are improving, the burden of Noncommunicable Diseases (NCDs) are increasing. In addition, there exist disparity in access to advanced medical service between Phnom Penh and rural areas, so it is necessary to improve the quality of and access to medical services in rural areas in order to achieve Universal Health Coverage (UHC).

In addition, while the indicators of maternal and child health are improving, the morbidity and mortality of NCDs are worsening. RGC has a plan to improve functions of 7 provincial hospitals out of 25 provincial hospitals nationwide as regional hospitals that can provide advanced medical service including diagnosis and treatment of NCDs. Upgrading some provincial hospitals to regional hospitals helps people to receive quality advanced medical services at the right time without moving to national hospitals in Phnom Penh. Also, it will contribute to ease crowding at national hospitals. Moreover, regional hospitals will receive referrals from lower-level health facilities in neighboring provinces and also it is expected to function as training center for scarce health personnel.

15. PROJECT JUSTIFICATION: (Give reasons why this particular project is considered worthwhile.)

The project is to improve equitable utilization of quality health services in Cambodia included reduce poverty and mortality rate.

16. BENIFITS: (Who will benefit, directly and indirectly, from the project?)

The project beneficiaries are the entire population of Cambodia, particularly the poor and vulnerable, and the health care providers working in the public health sector. Given the support for increased HEF utilization, the project target will have stronger focus on the poor and underserved, including the socially marginalized population. While the majority of the project's systems and institutional strengthening activities will take place at the national and provincial levels, supporting community and facility level activities will also be prioritized, benefiting subnational entities as feasible, including communes and VHSGs.

17. FEASIBILITY STUDY

Is a Feasibility Study for the project required? **Yes**

If YES, has it been carried out? **Not yet**

18. SOCIAL & ENVIRONMENT IMPACT: (Briefly describe the effects of the project, if any, on the people and the surrounding enviroment. Will the project assist in alleviating poverty?)

- 1. The overall environmental and social risk is classified as Substantial**
- 2. In addition to health services enhancement and expansion for the poor and the vulnerable, the proposed project will support upgrading of RHs, including renovation or construction of additional hospital wards and upgrading of blood depots/banks at the provincial and regional hospitals, and NBTC**
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- 4. The social risk is classified as Substantial**
- 5. The environmental risk is classified as Substantial**
- 6. The operation of hospitals, and blood depots, are likely to generate large volumes of hazardous and infectious HCW, including COVID-19-related wastes, and non-hazardous sanitary liquid and solid wastes**
- 7. The MOH has experience with implementing World Bank-financed project requirements regarding safeguards policies.**

19. CLIMATE CHANGE

a. Is any activity or output of the project related to Climate Change? **Yes**

If Yes, please indicate **Both**

b. How is the project relevant to Climate Change?

Please select a Climate Change related sector of the project and fill up the contribution of the climate change related expenditure compared to the total project cost.

Climate Change-Related Sector	Percentage	Climate Change Relevance
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20. DISASTER RISK REDUCTION

Is any activity or output of the project related to Disaster Risk Reduction? **Yes**

If Yes, please indicate **Preparedness**

21. GENDER ANALYSIS: (How does the project affect the roles of the men and women in the project area? Will women be actively involved in the implementation of the project?)

Genders equity will be applied in the project implementation

22. CAPACITY TO IMPLEMENT: (Does the Ministry have the skills and experience required to implement the project?)

The project is being implemented as planned.

23. STATUS OF PROJECT IMPLEMENTATION: (Provide a brief update on the progress of the project to date. Discuss any major problems causing delays in project implementation.)

We are now on the process to finalize the and recruit the consultant

24. PROJECT PRIORITY: (Please indicates the priority ranking of the project decided by the ministry/agency.)

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25. DONOR INVOLVEMENT: (Provide any information on current or potential donor involvement in the project.)

Partially supported by JICA

PART B : PROJECT COSTS AND FUNDING SOURCES
(In US\$'000)

INVESTMENT COST	2024		2025 Budget	2026 Estimate	2027 Estimate	2028 Estimate	3yr Total 2026-2028	Recurrent Cost Est.
	Budget	Actual						
Operational Expenditure	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Salaries	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Materials + Admin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Capital Expenditure	0.0	0.0	0.0	1,700.0	20,260.0	20,260.0	42,220.0	0.0
Construction	0.0	0.0	0.0	1,700.0	20,260.0	20,260.0	42,220.0	0.0
Consultancy (i.e. TA) + Admin	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Equipment+ Furniture	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Training	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL COST	0.0	0.0	0.0	1,700.0	20,260.0	20,260.0	42,220.0	0.0
FUNDING SOURCES	2024		2025 Budget	2026 Estimate	2027 Estimate	2028 Estimate	3yr Total 2026-2028	
	Budget	Actual						
Project Revenue	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Government Funding	0.0	0.0	0.0	200.0	4,460.0	4,460.0	9,120.0	
Cash Input	0.0	0.0	0.0	200.0	4,460.0	4,460.0	9,120.0	
Other Resources	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
Donor Funding	0.0	0.0	0.0	1,500.0	15,800.0	15,800.0	33,100.0	
Japan	0.0	0.0	0.0	1,500.0	15,800.0	15,800.0	33,100.0	
TOTAL COMMITTED FUNDING	0.0	0.0	0.0	1,700.0	20,260.0	20,260.0	42,220.0	
FUNDING REQUIRED	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
(Total Cost - Funding Available)								

**Seen and Approved by
Minister**

(Signature)

Date :