

Submission Form To The Lebanon Recovery Fund Steering Committee

To be completed by the UN Resident Coo	ordinator's Office (RCO)
Meeting No:	Date of Meeting:
Item No:	Programme/project:

(To be completed by the Participating UN Organisation and endorsed by SC)

To: Lebanon Recovery Fund Steering Committee	Date of Submission: 6 November 2015
From: Ministry of Public Health and UNHCR Lebanon	Contact: Mireille Girard, Representative, UNHCR Lebanon Pia Carmela Paguio, Senior External Relations Officer, UNHCR Lebanon
Through: Project Approval Group (PAG) □ Endorsement □ Comments	Contact: Mireille Girard: +961 76 350 750, girard@unhcr.org Pia Carmela Paguio: +961 18 49201 ext:2120 paguiop@unhcr.org
 Proposed submission, if approved would result in: Continuation of existing programme/project New programme/project Other (explain) 	 Proposed submission resulted from: National Authorities initiative within national priorities UN Agency initiative within national priorities Other (explain)
Programme/project title: Supporting Lebar Crisis	non in Managing the Impact of the Syrian Refugee

Amount of funds requested for proposed programme/project: USD 495,000

Estimated number of beneficiaries: direct 11,680 (per year) indirect 25,000 (per year)

Amount of indirect costs requested: 7%

Background

Provide brief and concise information on the background of the project. Indicate how it originated; refer to the Sector Programme, request endorsement or approval by relevant Lebanese authorities, etc. If extension of existing project: provide information on original project, such as number, programme amount, date of approval.

1. Purpose of Proposed Programme/Project

Detail key objectives, outputs and activities

The key objective of the proposed project is to support Lebanese institutions in managing the impact of the Syrian refugee crisis. Specifically, the proposed project will aim to better enable the Beirut Rafik Hariri University Hospital (RHUH) to maintain the quality of diagnostics, care and teaching through the provision of critical equipment. This proposal comes in response to a direct request from the Director of the RHUH to assist in the purchase and installation of a Computerized Tomography (CT) scanner. This project is in line with UNHCR's programme priorities to support host communities and institutions in managing the impact of the Syrian crisis.

3. Evaluation of Proposals by the PAG

Implementability

	2015	2016
Estimated commitments	US\$	US\$
Estimated disbursements	US\$	US\$
Contribution (optional)	US\$	US\$

Does the project correspond to national priorities? Yes \square No \square



Project approved by Line Ministry: Ministry of Public Health on 11 August 2015

4. Review by the UN Resident Coordinator's Office (RCO)

Check on Programme/Project Proposal Format Co Cover sheet (first page)	ontents Yes ⊠ No □
Logical Framework	Yes 🛛 No 🗌
Programme/Project Justification	Yes 🛛 No 🗌
Programme/Project Management Arrangements	Yes 🛛 No 🗌
Risks and Assumptions	Yes 🛛 No 🗌
Budget	Yes 🛛 No 🗌
Support Cost	Yes 🛛 No 🗌
Overall review of programme submission	
Recommendations	
Approve	
5. Decision of the LRF Steering Committee	
Approved for a total budget of \$ 495,000	
Approved with modification/condition	
Deferred	
Reason(s)/Comment(s)	
Elaborate	
Chair of the KH Steering Committee	al dana
	662016
Signature	Date
6. Follow-up action taken by the Administrative A	Agent
Project consistent with provisions of the Let	tter of Agreement with donors (if applicable)
Signature	Date

4

Lebanon Recovery Fund

Programme/Project Proposal Format and Guidelines

Contents:

- 1. Cover sheet and description of programme/project document (Appendix A)
- Logical Framework (Appendix B)
 Programme/Project Budget (Appendix C)
- 4. Endorsement Letter from the Ministry of Public Health (Appendix D)

Appendix A



LEBANON RECOVERY FUND

PROJECT DOCUMENT COVER SHEET

Participating UN Organisation: UNHCR	Sector: Public Health
Programme/Project Manager	LRF PAG
Name: Dr. Michael Woodman, Senior	Name:
Public Health Officer	Address:
Address: Khater Bldg., Dr. Philippe Hitti	Telephone:
Str., P.O. Box 11-7332, Ramlet El Baida, Beirut, Lebanon	
Telephone: +961-1-849201 ext: 2340	E-mail:
-	
E-mail: woodman@unhcr.org	
Programme/Project Title: Supporting Lebanon in Managing the Impact of the	Programme/Project Location: Rafik Hariri University Hospital (RHUH), Beirut, Lebanon
Syrian Refugee Crisis	
Programme/Project Number:	
Programme/Project Description: The	Total Programme/Project Cost: USD 534,650
proposed programme aims to support Lebanon's public institutions, in particular the	LRF: USD 495,000
Ministry of Public Health and the RHUH, to manage the impact of the Syrian refugee	Government Input: N/A
crisis and mitigate its negative effects on the	UN organization: USD 39,650
local population.	Other: N/A
	Programme/Project Duration (in months): 6

list of Outcomes/outputs/ canner; Agree with RHUH /isibility/communications.	activities: Purchase a on a maintenance pla	nd install one Comp n; Conduct a hando	uterized Tomography (CT) ver ceremony, accompanied b
shalf of: UN HCR	Signature	Date	Name/Title
articipating Organisation	1	20/5/2016	n. Greiners
, LRF SC		6/6/2016	D. Greinen Revenution Minister of Economy and Trade
			Alain Hakim, PhD

1. Programme/Project Justification

Describe the project added value, problem statement and why it is important, including: needs assessment conducted or based on, targeted location with relevant details, needs of the community and expected change/impact, other stakeholders recent and ongoing interventions in targeted localities and linkages, how it links to the LCRP, how it supports Lebanese cope with the impact of the Syrian crisis

Like many Lebanese public institutions, public and private hospitals, primary health care centers and other dispensaries are stretched to capacity as they respond to the needs of both Lebanese and Syrian populations. UNHCR and partners are working to ensure that medical facilities can provide quality medical care to the most vulnerable patients across Lebanon. This project supports the health response of the Lebanon Crisis Response Plan 2015-2016 by building "capacities for treating non-communicable and chronic diseases, improved access to secondary/tertiary care and the administration of some healthcare costs".¹

The proposed project will benefit the Rafik Hariri University Hospital (RHUH) in Beirut, which is the largest public hospital in Lebanon. Based in Beirut's southern suburb, RHUH offers lifesaving care to some of Lebanon's most vulnerable citizens (see Map 1). RHUH currently comprises 430 beds, 14 operating rooms as well as a range of other diagnostic and clinical services. Affiliated with the Lebanese University and the American University of Beirut, RHUH is also a leading teaching hospital offering outstanding education and research opportunities to a large number of students and professional researchers.



Map 1. Lebanon Crisis Response Plan 2015-2016, p. 14²

¹ Lebanon Crisis Response Plan 2015-2016, p. 22

² Map 1 shows the areas of Lebanon where weak service delivery and high refugee burdens combine to create localized vulnerability.

In 2014 RHUH treated over 25,000 patients, approximately 21,000 Lebanese and 4,000 refugees and asylum seekers. When refugee admissions were related to life-saving or obstetric care, UNHCR covered 75% of the total hospital bill. In a number of cases, refugees were not able to pay the remaining 25% of the costs, leaving hospitals to shoulder these amounts. Support for RHUH would go towards compensating these extra-budgetary costs.

In particular, RHUH has informed UNHCR of its additional needs for medical imaging tools such as computerized tomography (CT) scans. As a result of the increasing patient volume since the onset of the Syria crisis, the hospital's CT machine has been overused and is no longer functional. Replacing the machine is needed in order to maintain the quality of diagnostics, care, and teaching at this major referral hospital. In the short and long-term, the beneficiaries will predominantly be Lebanese citizens. Expected annual number of beneficiaries will be approximately 11,680 patients; 9,461 Lebanese and 2,219 refugee and asylum seeker patients.³ UNHCR will request a three year full maintenance warranty from the selected supplier of this machine and the average operational lifespan of modern CT scanners is 8 years.

The proposed project is in line with the priority to support the stabilization component of the Lebanon Crisis Response Plan and in particular, to deliver much-needed assistance to the Lebanese host communities. The proposal has been fully endorsed the Ministry of Public Health (MoPH).

2. Programme/Project Approach

Describe the project approach and how it intends to achieve its objectives, partners, stakeholders and roles/expectations. Explain here in detail how the project was selected, were community partners consulted, GoL consultations...

The proposed project was developed in close consultation with GoL counterparts, specifically the Ministry of Public Health (MoPH) and management staff at RHUH. It was selected as a result of a direct appeal for assistance from the RHUH to UNHCR, and following endorsement from the MoPH. Furthermore, the proposed project responds to the need to mitigate the impact of the Syrian refugee crisis on basic services and host communities in Lebanon.

UNHCR will directly procure the necessary hard and software for the proper use and maintenance of the CT scanner. UNCHR will also employ the services of technical experts to help bring the CT scanner online. All direct procurement will be done in line with UNHCR's procurement guideline and in close consultation with RHUH. UNHCR will furthermore ensure that the CT scanner is integrated into RHUH's existing maintenance plan.

3. Project activities

³ Estimated from data provided by RHUH

List and fully describe proposed activities and explain how each contributes to the project goals/objectives, how it engages the local community, how it helps Lebanese cope with the impact of the Syrian crisis, how it links with the other proposed activities under this intervention and other ongoing/recent activities in the same locality. Provide here cost breakdown per activity.

In this section, explain in detail how the project will highlight the support from the LRF and the Republic of Korea (visibility guidelines as annex 3 for further reference).

The first activity will be to purchase and install the relevant CT equipment and software. The specifications of this equipment will include multiplanar reconstruction imaging, maximum intensity projection scanning as well as volume rendering, 3D and endo viewing capabilities. The procurement of this equipment will be done in line with UNHCR guidelines and in partnership with the RHUH in order to ensure the suitability of the equipment to be purchased. This new equipment is vital to maintain the quality of diagnostics, care and teaching at this major referral hospital, benefitting both refugee and host communities.

Once the CT equipment is installed, it will be integrated into RHUH's existing maintenance plan. Integration into this plan is important for the sustainability of this intervention, and to ensure that the patients of RHUH get the maximum benefit from this CT equipment. As a major referral RHUH, operating multiple medical imaging and other pieces of equipment, RHUH has demonstrated the capacity to maintain sophisticated medical equipment and has made the commitment to maintain all equipment purchased through this project.

Finally, there will be a handover ceremony conducted with all the relevant stakeholders and in line with the Lebanon Recovery Fund (LRF) Visibility Guidelines. The support of the Government of the Republic of Korea, through the LRF, will be highlighted at this event and in subsequent communications.

Activity	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6
Purchase and Install Equipment (500,000 USD)						
Integrate Equipment into RHUH Maintenance Plan (expenses covered by RHUH)						
Conduct Handover Ceremony (expenses covered by UNHCR/RHUH)						

4. Management Arrangements

Describe the management and coordination arrangement of the project in relation to the UN organizations and partners/counterparts.

UNHCR will work in close coordination with its counterparts in the RHUH and MoPH to ensure the successful completion of this project. Special efforts will be made to seek the views and input of all the relevant stakeholders at every stage of project implementation.

5. Analysis of risks and assumptions

List the possible risks that might interfere with the project implementations causing delays or shift in strategies or approaches while also highlighting possible corrective or backup strategies to employ in case those risks occurred.

The first possible risk is a breakdown in the relationship between UNHCR and RHUH, or with the government more broadly. This could potentially interfere with the project implementation by delaying the procurement process and obstructing coordination and cooperation on the handover ceremony. UNHCR judges the likelihood of this risk to be very low given the longstanding cooperative relationship UNHCR enjoys with the MoPH and RHUH and other ongoing joint MoPH projects with a development focus (ENI). Furthermore, given that the proposed programme is judged to be uncontroversial, benefiting both Lebanese and Syrian communities equally, this again lowers the risk of any fractions occurring between the relevant stakeholders. Moreover, UNHCR is undertaking the purchase of this equipment in direct response to a request (including detailed specifications of the needed technical apparel) made by the RHUH. Nonetheless, should this risk occur UNHCR will reaffirm the public good the proposed programme brings to all communities served by the RHUH, and if necessary UNHCR will develop new working modalities in order to bypass any existing or potential barriers to project implementation.

A second risk is that the services offered by RHUH become limited to Lebanese nationals only. This could pose a risk to project implementation by interfering with the aim of the intervention to support the RHUH to provide quality services to both Lebanese and refugee communities. This risk will be continuously monitored by UNHCR and will be integrated into UNHCR's ongoing advocacy. However the likelihood of this risk is very low as the purpose of the project to increase the capacity of the hospital which generates income through serving Syrian refugees and Lebanese alike.

A third and final risk is that RHUH incorrectly uses or fails to maintain the equipment procured through this intervention. This would deny all communities served by RHUH the maximum benefits this equipment could provide. This risk will be mitigated by working in consultation with RHUH at each stage in order to purchase and install equipment and software that can be correctly used and easily maintained by staff at RHUH, given resource and other scarcities. Following this phase the CT scanner will be integrated into RHUH's existing maintenance plan. UNHCR will provide guidance on this integration as needed to ensure the successful maintenance of RHUH's imaging equipment.

Appendix B Logical Framework

	Target	Measurable Indicators	Means of Verification	Important Assumptions	
Immediate Objective	To support the RHUH in maintaining the quality of diagnostics, care and teaching through the provision of critical equipment				
	RHUH is better equipped to provide quality services to refugee and host communities alike	1 CT Scanner purchased and delivered 1 handover ceremony conducted	Purchase and delivery records Pictures and other records of public event	Lebanese public institutions remain committed to providing quality services to refugee and host communities	
Output		ner is used to provide o vulnerable Lebanese h		•	
	One CT scanner in use and regularly maintained	1 CT scanner installed and integrated into RHUH Maintenance Plan	Maintenance Plan	RHUH remains committed to correctly using and maintaining the CT scanner, attendant equipment and software	
Activities		Inputs/Means	Costs		
CT equipment purchased and installed		1 CT Machine and accompanying software Technical assistance	500,000 USD		
Handover ceremony conducted with visibility/communications		Visibility and events materials			

Appendix C

Programme/Project Budget

The budget would utilize the Standard Format agreed by the UNDG.

CATEGORY	GoL contribution	Applicant contribution	Requested from the LRF	Total amount
1. Staff and other personnel				
2. Supplies, Commodities, Materials				
3. Equipment, Vehicles, and Furniture (including Depreciation)		39,650 ⁴	462,616.82	500 <i>,</i> 000⁵
4. Contractual services				
5. Travel				
6. Transfers and Grants to Counterparts				
7. General Operating and other Direct Costs				
Sub-Total Programme Costs		39,650	462,616.82	
8. Indirect Support Costs 7%			32,383.18	
TOTAL		39,650	495,000	534,650

⁴ In cash contribution

⁵ Estimations of cost of equipment are between USD 350,000 - 500,000 any savings will be reallocated to related activities in consultation with the LRF Steering Committee.

REPUBLIC OF LEBANON MINISTRY OF PUBLIC HEALTH

The Director General



11 H 🛣 الجه وزارة المسحنة ال التديس العب الم

Ret 2015/4 29064 Date: 11/8/2015

Dr. Lynne Mittler UNHCR Deputy Representative Beinit -Lehanon

Subject: Request for an Endorscment Letter

Dear Dr Miller,

Reference to your letter LEBBE/MOPH/2015/326 dated August 7th, 2015 regatding your planned proposal to the Lebanon Recovery Fund (LRF), we are pleased to inform you that we have the pleasure to endorse such an initiative.



Walid Ammar MD, Ph.D.

Director General Ministry of Public Health

Millseum Barest - Hussein Mericken Rig - Romit Neterion - Tell, 261,11615764 - 6157755 - Fox - FG1,11610750 - Email: endorgenerate/products b