

**A Trade Proposal for a Family Medical Center & 200 Beds General Hospital  
King Abdullah Economic City  
Jeddah – Saudi Arabia**

## **1. Family Medical Center**

### **Overview**

Emaar, The Economic City (EEC) is the owner and developer of the King Abdullah Economic City (KAEC) Family Medical Center (FMC). Upon commissioning in 3Q2015 the FMC will provide quality family, emergency and specialty healthcare services to KAEC's residents. Accordingly, EEC desires to appoint a renowned healthcare services provider "the Provider" to be the city-wide healthcare provider with the overall responsibility for provisioning healthcare services in KAEC subject to the terms and conditions of the FMC Medical Services Agreement. The scope of this engagement is open to include operating satellite urgent care clinics such as the Industrial Valley clinic (IV Clinic) located in the Labor dormitories.

EEC is developing the city's first Family Medical Center (FMC) that will provision to KAEC's residents a wide range of clinical services through a convenient and simplified patient journey, enhancing their overall patient experience. The clinic will provide family medicine services six days a week, while emergency services will be provided on a 24/7 basis. Additionally, the center will distinguish itself by offering specialized care through a number of specialized clinics.

## **2. 200 Beds General Hospital**

EEC Requests also the development and operation of the first Hospital in KAEC. The Hospital will mainly cater for a very wide scope of services.

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**Details of the projects can be found hereunder:**

### **Family Medical Center**

#### **Scope of Services**

The FMC shall provision community based services that represents the first point of contact for urgent and routine healthcare needs of the KAEC population as well as the day commuters (visitors, workers). All clinical services in the must be aligned to the ethos of patient-centred care, recognizing the multicultural environment of KAEC, taking into consideration the socioeconomic and cultural background and needs of every patient.

To further incentivize the Provider EEC is offering an operating model that evolves over time; reducing the Provider's demand risk and capital outlay in the initial years of operations while allowing the Provide to enjoy a higher portion of the upside once certain demand and financial triggers are met.

Initial Phase – Lump Sum:

- Service provider selected through bidding process.
- Service provider to operate and finance.
- Service provider paid + mark up for cost.
- Revenue collected by EEC. Initial Phase – Cost Plus :
  - Cost plus-fees model
  - Operator to pay for services upfront and invoice EEC on monthly basis
  - Operator to bid for a monthly operational cost based on:
    - Staffing type and numbers

- Expected running cost.
  - Revenues are returned to EEC on monthly basis Long-term Phase - Lease model:
- Service provider selected through bidding process.
- Revenue collected by service provider.
- Initial payments to service provider (grace period).
- Lease as of year (TBD based on pre-agreed demand and financial and triggers).

## **Project Description**

### **1. General Family Medicine Services**

The general family medicine services shall be provided by board certified family medicine consultant physicians with at least 3 years post board certification experience. The general medical services include but not limited to:

- Maternity and child care
- Geriatric medicine
- Cardio-vascular illness
- Gastro-intestinal illness
- General orthopedics and sports injury
- Ear, nose and throat illness.
- Minor ophthalmology conditions
- Female contraception
- Respiratory illness
- Common skin lesions
- Metabolic diseases
- Multiple chronic illness
- Urinary tract disorders
- Health promotion and disease prevention for children and adults
- Community palliative care
- Psycho-neurological disorders
- The Provider shall refer patients to all other specialties via arrangements with other suitable high quality providers in Jeddah, or elsewhere, until there is sufficient need for specialist to be based at the Polyclinic.

### **2. Urgent and Emergent Care Services**

The Provider shall provide unscheduled access for patients that require urgent assessment and treatment for the following clinical conditions and similar:

1. Road traffic accidents
2. Industrial and occupational injuries
3. Superficial lacerations, abrasions and other wounds;
4. Minor burns and scalds;
5. Musculoskeletal sprains, strains and other sports injury;
6. Removal of foreign bodies from tissues;
7. Fractures;
8. Bites and stings (including human and animal bites);
9. Infected wounds;
- 10) Minor head injuries;
10. Minor eye infections and corneal abrasions;
11. Upper respiratory symptoms;
12. Abdominal pain;

13. Abnormal gynecological bleeding;
14. Chest pain;
15. Fever;
16. Convulsions;
17. Dysuria and urine retention

### **3. Minor procedures**

The Provider shall provide access to a range of minor procedures in the clinic in addition to the general medical service. These minor procedures shall not include procedures that require sedation. Examples of procedures include, but are not limited to:

1. Cryo-therapy / Electro-cautery for some for lesions such as actinic keratosis, seborrheic keratosis, warts and verrucae, lentigos and other skin tags.
2. Curettage for superficial lesions such as seborrheic keratosis or actinic keratosis;
3. Therapeutic injections used in a variety of conditions including:
4. Injections into joints;
5. Aspiration of joints;
6. Injection of inflammatory tendonitis or carpal tunnel syndrome;
7. Injection of varicose veins
8. Simple excisions; and
9. Simple incisions for minor abscesses
10. The package of care for each procedure will include pre-assessment, the procedure itself and any follow-up arrangements for that procedure.

### **4. General Dental Services**

The Provider shall provide a comprehensive range of general dental services to serve the basic dental needs of the community such as:

1. Dental emergencies
2. Patient examination and diagnosis (including x-ray)
3. Fillings, root canal treatment and simple extractions
4. Health promotion and disease prevention
5. General dental hygiene
6. The Provider must support a comprehensive subspecialty dental service through consultations with subspecialty dental practitioners that can manage at a minimum the following conditions:
  - Periodontal therapy and management of soft tissues
  - Hard and soft tissue surgery
  - Non-surgical management of the hard and soft tissues of the head & neck
  - Management of the developing dentition
  - Restoration of the teeth
  - Replacement of teeth, crowns and bridges
  - Orthodontics
  - Pedodontics
7. The Provider will not be expected to carry out procedures that require sedation in the polyclinic

### **5. Specialty Clinics**

The Provider shall provide a range of specialist outpatient services to support the general medical services provided in the Polyclinic.

The outpatient services shall be based on need and demand, which the Provider will be expected to analyze on ongoing basis including but not limited to:

- General surgery;
- Obstetrics & Gynecology;
- Internal Medicine;
- Orthopedics;
- Pediatrics;
- Ophthalmology;
- Ear, nose and throat and
- Dermatology

#### **6. Pharmaceutical Services**

1. The provider shall dispense all medications needed to provide emergency and urgent care services.
2. The Provider shall provide a range of specialist outpatient services to support the general medical services provided in the Polyclinic.
3. The provider shall dispense all medications needed to provide emergency and urgent care services in the clinic including a maximum of one day's supply of urgent medications that can be taken home. Such medications are to be stored in the pharmacy unit inside the clinic and in other stores within the clinic, if needed. The provider shall ensure the availability of all emergency medications required at all times.
4. The provider shall make arrangements with a retail pharmacy outside the clinic to dispense all other non-emergency medications and medications beyond the dispensed maximum one day from the clinic in urgent cases. The arrangement must include the dispensing of medications to patients as per their insurance policies. Deductibles for medications shall be paid at the retail pharmacy (alternatively, at the clinic's reception).
5. The provider shall be given an option to rent and operate a retail pharmacy within the resort mall (where the polyclinic is situated). This shall be through a separate agreement with the Retail Business services that is outside the scope of this RFP. The scope of service includes:
  - a. The provision of medications (against prescriptions from the polyclinic) must cover insurance prescriptions
  - b. Selling of "over the counter" medications
  - c. Selling of other cosmetic products

#### **7. Diagnostic services**

- At service commencement, the Provider shall provide a range of diagnostic services to support the other clinical services within the clinic. It is imperative that these diagnostic services are accessible and convenient to patients and minimizes patient journeys to the polyclinic. Where possible, and unless the patient requests otherwise, all diagnostics shall be performed at the first visit with results supplied to the requesting practitioner on the same day. Provider shall provide the following diagnostic services:
  1. Basic laboratory investigations including hematology, biochemistry, serology and urine microscopy
  2. General and dental X-ray;
  3. General ultrasound scanning;
  4. Obstetric ultrasound scanning.

- The Provider shall ensure timely and accurate reporting of all diagnostic tests. Turnaround times shall be available and monitored by the service provider for inspection at any time by EEC. All diagnostic tests must be verified and validated by the relevant specialist. Radiology reading and reporting shall be provided through telemetry services with recognized radiology centers. The provider shall be able to refer patients for any other required diagnostic tests in a recognized center.
- The service provider shall be able to collect blood, urine and stool samples for further testing in an outside recognized lab, if such tests are not available in the polyclinic.

### **Facility layout Details**

- The clinic is built in a modular fashion facilitating a functional zoning concept (urgent care, family medicine, reception and staff support zones). It has a dedicated trauma/resuscitation area, a dedicated urgent care area and a family medicine/specialty care main area. The clinic has its own laboratory, a basic radiology machine and an emergency pharmacy. The clinic is equipped with a central sterilization unit mainly for dental instruments. The main entrance opens into a wide hall with the main reception and a large waiting area.
- The trauma room is located in the urgent care zone and is designed to accommodate 2 injured patients at the same time in compliance with International standards. Medical gases are provided through 2 ceiling pendants, each serving one trauma bed. Vital signs monitors are centrally monitored and are located on the pendants. Crash cart with defibrillator is available. Ventilators are available and ready for transportation.
- The urgent care area has 2 examination rooms equipped with negative pressure capability as well as 3 observation rooms. There is a dedicated triage room with electronic measurement of vital signs. The observation room is dedicated for patients that may require observation before a decision is made or a decision to discharge home. It is equipped with 3 separate wall mounted vital signs monitors that are connected to the central monitoring station located at the nursing station of the urgent care.
- Located beside the emergency entrance is the “decontamination room” with water wash down facilities and a dedicated radiation counter.
- The emergency physician on-call room is located in the urgent care area near to the emergency entrance.
- The plain x ray room is situated in the urgent care zone. It has its own changing room and is designed to perform all types of plain x rays to help in reaching diagnosis as well as for routine checkup examinations.
- The urgent care area has a dedicated nourishment room for patients under observation as well as dedicated dirty utility for infectious and non-infectious waste and a clean utility room for storage of linen and consumables. There is also a dedicated room for storing and cleaning housekeeping equipment
- The family medicine/specialty area has 9 examination rooms as well as a dedicated ophthalmology examination room and 2 dental chairs. All examination rooms have modular furniture and an examination couch isolated by a curtain to accommodate the accompanying family members. One of the examination rooms is equipped with a “gynecology” examination couch. Another room has dedicated “ENT” examination equipment.
- The family medicine area has a dedicated nursing station with linen and consumable storage and an equipment store. It also has a dedicated dirty utility and clean utility rooms and a janitorial room.

- The dental rooms are equipped with the state of art dental chairs with a patient screen, intra-oral camera and dental x-ray as well as dedicate dental instruments
- Adjacent to the dental rooms is the digital dental x-ray panorama machine.
- The central sterilization department has 2 rooms with a connecting window. One room is used for the cleaning and disinfection of the surgical instruments (mainly dental) while the other room is equipped with steam sterilizers.
- The clinic waiting area is centrally located between the urgent care and family medicine areas. It has comfortable family seating places, a centrally facing clinic reception with a consultation and business office behind. The waiting room opens into the Children play room dedicated for children and has several intuitive toys that are easy to clean and disinfect.
- The staff support area has dedicated male and female changing/toilet and a common lounge.
- The general lab is located between the family medicine and support zones. The lab has the equipment to perform general hematology, chemistry and hormonal investigations as well as routine urine testing including microscopy. Further tests shall be sent to the nearest accredited main lab. The lab has a dedicated phlebotomy area connected to it through a window connection. The adjacent patient toilet has a window for handling urine specimens directly to the phlebotomy room.
- The pharmacy is located in the support zone. Its main purpose is to store and dispense medications to urgent care nurses such as intravenous fluids and pain medications. It has a medication refrigerator as well as a dedicated vaccine refrigerator.
- Several storage areas are available in the support and urgent care rooms.
- The clinic had 2 dedicated ambulances for managing road side and residential emergencies as well as transferring patients out of KAEC to higher centers.
- The clinic is designed and equipped to accommodate 75,000 patients visit per year.

#### **What is the deal Structure?**

- KAEC to offer land for lease, 25 years with fixed terms and grace period (breakeven point)
- In healthcare, breakeven point is reached at 3-5 years of operation. In KAEC it may be earlier due to lower land cost and increasing healthcare demands
- Investor to build and operate, (or appoint operator, if does not have the license to operate)
- KAEC develops and monitors KPI's to ensure medical services are delivered according to International standards
- Investor agrees to acquire International accreditation within 2 years from operation.
- At the end of the lease period, negotiations to extend lease with new terms.

## 200 Beds General Hospital

### Overview

Develop and operate the first Hospital in KAEC. The Hospital will mainly cater **for the following services:**

- Trauma, urgent and emergent care and burn management
- Orthopedics and General surgery
- Internal medicine including non-invasive cardiology and gastro-entriology
- Women health, including delivery unit
- Adult Critical care
- Pediatrics including neonatal and pediatric intensive care
- Ophthalmology, Ear, nose and throat
- General laboratory services
- Diagnostic imaging including CT scan and Magnetic resonance
- General and restorative dentistry
- Physical and occupational therapy and rehabilitative services
- Oncology services The investor may elect to add other specialty services such as Dive medicine, Obesity surgery among others benefiting from the life style at KAEC

**The investor may elect to add other specialty services such as Dive medicine, Obesity surgery among others benefiting from the life style at KAEC**

### Project Description

- Hospital size : 200 inpatient beds capacity , 75 outpatient examination rooms and 20 physical therapy and rehabilitation cubicles
- plot size: 20,000 - 25,000 m<sup>2</sup>
- Hospital Built up Area : 35,000 m<sup>2</sup>
- Design: 4 -5 floors building with underground parking
- Estimated construction cost: approximately 365 M SR, based on:
- 9000 SR construction per m<sup>2</sup> = 315 M SR
- 250,000 SR equipment per bed = 50 M SR
- Revenue Model: Per the standard private hospitals' models: It is estimated that
- 80% of revenue is generated from insured patients
- 20% incurred from direct payments
- Annual net income is expected not to be less than 20%

**Location:** Alharamain District