

GOVERNMENT OF THE PUNJAB PLANNING & DEVELOPMENT BOARD (SHC&ME SECTION)

WORKING PAPER FOR THE PDWP

CONCEPT CLEARANCE

PART-A

Project Profile:

1.	Project Title	Establishment of Rehabilitation Engineering Center for the Advancement of Rehabilitation Aids Services in Pakistan					
2.	Location	Lahore					
3.	Sponsoring Agency	King Edward Medical University (KEMU), Specialized Healthcare & Medical Education Department					
4.	Implementing / Executing Agency	 ✓ Punjab Information Technology Board (PITB) ✓ Mayo Hospital, Lahore. 					
5.	Operating & Maintenance Agency	King Edward Medical University (KEMU), Specialized Healthcare & Medical Education Department					
6.	Proposed Cost	USD 4.00 million (PKR. 1,120.00 million) (ODA Grant by KOICA)					
7.	Cost in ADP 2024-25	N.A					
8.	Total Funds Released	N.A					
9.	Gestation Period	01.07.2026 to 30.06.2029					

10. Background:

- The Concept paper of the project was cleared by the Provisional External Financial Assessment Committee (PEFAC) in its 24th meeting held on 27-01-2025 with the following directions:
 - a. The King Edward Medical University (KEMU), SH&ME Department will act as the sponsoring agency whereas PITB will act as implementing agency and responsible for IT management system and Mayo Hospital / KEMU will establish Centre for Rehabilitation Engineering for Robotic Prostheses for the initiative.
 - b. The SH&ME Department will initiate summary for seeking approval of Government of the Punjab for engaging with Government of Korea for grant.
 - c. The KEMU / SH&ME Department will ensure recruitment and training of 40 master trainers, maintaining balanced mix of rehabilitation engineers, health

professionals, and IT specialists, in consultation with Korean partners to enhance the quality and relevance of the training program;

- d. KEMU / SH&ME Department will ensure the long-term sustainability of the initiative to maximize the benefits of the technology transfer from the Korean government.
- The matter was placed before the Provincial Cabinet for consideration during its 23rd meeting held on 11.02.2025. Minutes of the meeting are awaited.

11. Rationale of the Project:

Punjab has a high number of industrial accident survivors, particularly those suffering from limb amputations. Despite existing rehabilitation services, the prostheses available in Pakistan are outdated, costly, and lack advanced functionality. Many injured workers are unable to afford modern prosthetic devices, limiting their mobility and reintegration into the workforce. The absence of a multidisciplinary rehabilitation approach further reduces the effectiveness of prosthetic interventions.

Pakistan has a significant population of Persons with Disabilities (PWDs), with Punjab alone having 417,000 registered PWDs, out of which 281,284 have physical impairments. The existing public healthcare facilities lack adequate resources to provide modern and effective prosthetic solutions. The Mayo Hospital Orthotics and Prosthetic Workshop, established in 1986 by UNDP, is now understaffed and outdated, with only one technical expert remaining.

Data from the past four years shows a steady increase in the number of registered Persons with Disabilities (PWDs), with registration figures growing consistently on both a daily and annual basis. This significant upward trend highlights the expanding PWD population, making it imperative for the government to take prompt action in implementing welfare and rehabilitation initiatives

In line with this, the Punjab Empowerment of Persons with Disabilities Act, 2022, mandates the Department to roll out projects aimed at the welfare and rehabilitation of PWDs. Section 3 of the Act emphasizes non-discrimination toward Persons with Disabilities, granting them the right to dignity and the opportunity to lead a decent life. Additionally, Subsection 4 of Section 6 of the same Act guarantees the accessibility and mobility of Persons with Disabilities

To address these challenges, this project aims to modernize the production of rehabilitation prostheses at Mayo Hospital, introduce pneumatic prosthesis technology, enhance rehabilitation services, and integrate financial sustainability through social security programs. For provision of prosthetics, target population for the Programme will be identified on the basis of PWDs, who have registered themselves on Disabled Persons Management Information System (DPMIS) and decaled as a Person with Disabilities.

12. Objectives of the Project:

- i. Reinforce Modern Prosthesis Production Capacity.
 - Localize and transfer Korean pneumatic rehabilitation prosthesis technology to Mayo Hospital.
 - Establish a modern workshop for cost-effective and high-functionality prosthesis production

ii. Strengthen Human Resource Development

- o Train and certify prosthetics, orthotics, and rehabilitation professionals.
- Develop a sustainable training program for continuous skill development.

iii. Establish Integrated Rehabilitation Services

 Implement a multidisciplinary rehabilitation model, including physical therapy, occupational therapy, and psychological support

iv. Enhance Sustainability and Social Protection

 Develop policy recommendations to support the long-term accessibility of modern prosthetic solutions

13. Expected Outcomes:

- i. Improved Prosthesis Production Infrastructure (Establishment of a Rehabilitation Engineering Center)
 - Modernized workshop at Mayo Hospital with enhanced production capacity.
 - Introduction of high-quality pneumatic prostheses to replace outdated mechanical models.
- ii. Enhanced Human Resource Capacity (Professional capacity building through specialized training (40 people) curricula for rehabilitation engineers and master trainer programs)
 - Certified prosthetics and rehabilitation professionals trained in modern prosthesis production and rehabilitation techniques.
 - Sustainable training programs established within Mayo Hospital.
- iii. Integrated Rehabilitation Services for Social Reintegration (Provision of 800 robotic prostheses)
 - Development of coordinated rehabilitation services for industrial accident survivors.
 - Strengthened return-to-work mechanisms through structured rehabilitation pathways.

- iv. Sustainability Through Policy Integration (Provision of comprehensive rehabilitation services, including clinical therapy and advanced rehabilitation exercises)
 - Increased financial accessibility of prostheses through social security and health insurance schemes.
 - Policy recommendations to ensure long-term funding and support for rehabilitation services.

13.1 Direct Beneficiaries

- Physically Impaired (especially lower-limb amputees) in Punjab.
- Mayo Hospital staff, including prosthetics, rehabilitation professionals, and medical students.

13.2. Indirect Beneficiaries:

- Other hospitals and rehabilitation centers in Pakistan that may replicate the Mayo Hospital model.
- Families of amputees who benefit from improved economic stability and social inclusion.

13.3 Implementation Strategy

- Technology Transfer & Infrastructure Development: Equip Mayo Hospital with modern prosthesis production facilities and introduce Korean pneumatic prosthetic technology.
- **Capacity Building:** Conduct comprehensive training programs for prosthetics, orthotics, and rehabilitation specialists.
- Multidisciplinary Rehabilitation Services: Implement an integrated model combining physical therapy, psychological support, and vocational training.
- **Policy & Financial Integration:** Work with Punjab's social security institutions to ensure long-term sustainability of modern prosthetic devices.

13.4 Sustainability and Scalability

The project is designed for long-term impact by embedding prosthetic production and rehabilitation services within existing healthcare and social structures. By collaborating with key stakeholders such as Mayo Hospital, and the Punjab Social Welfare Department, the project aims to create a replicable model for other provinces in Pakistan.

13.5 Role & Responsibility:

> Mayo Hospital:

 Oversee the rehabilitation workshop renovation, organize training for prosthetists / technicians, integrate multi-disciplinary rehab services (physical therapy, psychosocial support). Provide clinical environment for patient care, pilot testing of advanced pneumatic prostheses, and direct service delivery.

> KEMU:

- Collaborate in the development and implementation of training curricula (e.g., certification courses, B.Sc. Orthotics & Prosthetics).
- Mobilize academic expertise, faculty, and students for field-based learning and research.

> PITB:

- Set up or refine digital platforms to track patient registrations, monitor rehab progress, and minimize duplication with other ongoing donor-funded health initiatives.
- ✓ Share IT solutions help unify patient databases across multiple social welfare projects, improving overall service efficiency and transparency.

(In Million)

14. Summary of Project Cost:

Output habilitation Prosthesis Technical ansfer & On-site Training	Activity Expert Labor Costs, Administrative and Management Costs, Technology Cost, Local	Proposed budget (USD)	Proposed Budget (PKR)
	•		
	Operation Costs, ETC	1.419	397.320
pacity Building (Overseas aining Sessions to Korea)	Medical and rehabilitation equipment, Workshop equipment and tools, Training center equipment	0.478	133.840
novation of Workshop	Prosthetic devices, Orthotic devices, Wheelchairs and mobility aids	0.413	115.640
uipment & Materials for producing bre than 500 assistive devices	Spare parts and tools, Tracking System Development	1.650	462.000
ntingency	Core Staff Development, Expanded Staff Training, Training in Korea, Training Materials, Workshops	0.040	11.200
Total		4.000	1120.000
	novation of Workshop uipment & Materials for producing re than 500 assistive devices ntingency Total	WorkshopWorkshopequipmentandtools,Trainingnovation of WorkshopProstheticdevices,Orthoticdevices,uipment & Materials for producing re than 500 assistive devicesSparepartsandtools,TrainingDevelopmentCoreStaffDevelopment,ExpandedStaffntingencyTraining,Training,TraininginKorea,TrainingMaterials,WorkshopsWorkshopsWorkshopsIntervention	WorkshopWorkshopequipmentandtools,Training0.478novation of WorkshopProstheticdevices,Orthoticdevices,0.413uipment & Materials for producing re than 500 assistive devicesSparepartsandtools,TrackingSystemDevelopmentDevelopment1.650ntingencyCoreStaffDevelopment,ExpandedStaffTotalImage: CoreTrainingImage: CoreImage: CoreImage: CoreImage: CoreTotalImage: CoreStaffImage: CoreImage: Core

15. Indicative Logical Framework:

Project Objectives	Activities/ Actions	Outputs	Output Indicator	Timeline	Desired Outcomes	Outcome Indicator	Timeline	Impacts	Impact Indicator	Timeline
Sectoral Objective Strengthen the rehabilitation prosthesis manufacturing and integrated rehabilitation services in Punjab, Pakistan										

Project Objectives	Activities/ Actions	Outputs	Output Indicator	Timeline	Desired Outcomes	Outcome Indicator	Timeline	Impacts	Impact Indicator	Timeline
Su b- objectiv e-1 1: Enhance Prosthesis Production Capacity	Activity 1 Renovate Mayo Hospital prosthesis workshop <i>Activity 2:</i> Install modern prosthesis manufacturing machinery <i>Activity 3:</i> Develop quality assurance and maintenance system	Output 1: Upgraded prosthesis workshop with modern equipment Output 2: Installed equipment for pneumatic prostheses production Output 3: Standardized maintenance and quality control protocols	Output 1 Indicator Renovation completion rate (%) Output 2 Indicator Equipment installation and utilization rate (%) Output 2 Indicator Equipment installation and utilization rate (%) Output 3 Indicator Compliance with quality assurance standards	By 2026 Qu art er wis e- 1 By 2026 Q2 By 2026 Q3	Outcome 1 Increased local		By 2027 Q4	affordable and high-quality assistive	Impact 1 Indicator Percentage of industrial accident survivors receiving	By 2029 Q4
Su b- objectiv e-2 2: Strengthen Human Resource Capacity	Activity 1 Conduct training for prosthetists and technicians Activity 2: Implement Training-of- Trainers (ToT) program Activity 3: Develop formal prosthetics certification courses	Output 1: Trained prosthetists and technicians in pneumatic prosthesis manufacturing Output 2: Established Master Trainer program for prosthetists Output 3: Certified training curriculum and courses for prosthetics	Indicator Number of trained prosthetics/tech nicians <i>Output 2</i> <i>Indicator</i> Number of trained Master Trainers <i>Output 3</i>	By 2027 Q2 By 2027 Q3 By 2028 Q2	Outcome 1 Improved technical expertise in prosthetic rehabilitation		By 2028 Q1	rehabilitation	Impact 1 Indicator Percentage of prosthetics retained in the healthcare system	By 2029 Q4
Su b- objectiv e-1 Reduce financial burden on PWDs through improved prosthetic access	Activity 1 Collaborate with Government funded assistive devices initiatives to subsidize prostheses	Output 1: Inclusion of modern prostheses in social security benefit package	Indicator Policy inclusion of prostheses in insurance	By 2027 Q4	Outcome 1 Reduced financial barriers for prosthetic rehabilitation	e Outcome 1 Indicator Percentage of amputees receiving subsidized prostheses	By 2028 Q3	Impact Enhanced financial and social security for injured workers	Impact 1 Indicator Reduction in out-of-pocket expenses for prostheses	By 2029 Q4
	1	J	I	Soc	ial Objective	1	1	1	1	
Su b- objectiv e-1 Ensure accidental survivors regain mobility and productivity	Activity 1 Implement multi- disciplinary rehabilitation services (PT, OT, Psychological support)	<i>Output 1:</i> Established integrated rehabilitation services at Mayo Hospital		By 2027 Q3	Outcome 1 Increased return-to- work (RTW) rates for amputees	Outcome 1 Indicator Percentage of rehabilitated workers returning to jobs	By 2028 Q2	Impact Improved quality of life and workforce reintegration	Impact 1 Indicator Percentage reduction in disability- related unemployme nt	By 2029 Q4
	·	·	• •		ate Objective	·		·		·
Sub- bjective-1 Promote sustainable production and materials in prosthesis	Activity 1 Develop eco- friendly materials for prosthesis production	Output 1: Adoption of sustainable materials in prosthesis manufacturing	Output 1 Indicator Percentage of prostheses made from sustainable materials	By 2028 Q2	Outcome 1 Reduced environmenta l impact of prosthesis production	Outcome 1 Indicator Percentage reduction in non- biodegradable waste	By 2029 Q2	Impact Environmentall y sustainable assistive technology sector	Impact 1 Indicator Long-term reduction in carbon footprint of prosthesis	By 2029 Q4

Project Objectives	Activities/ Actions	Outputs	Output Indicator	Timeline	Desired Outcomes	Outcome Indicator	Timeline	Impacts	Impact Indicator	Timeline
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g									g	

16. Monitoring Framework

16.1: Outcome-Level Indicators

Sr. No.	Outcome	Indicator	Target	
1	Improved Prosthesis	Completion of Mayo Hospital Prosthesis Center renovation	Yes (100%)	
•	Production Infrastructure	Number of modern pneumatic prostheses produced annually	≥ 150 per year	
2	Enhanced Human Resource Capacity	Number of prosthetics and rehab professionals trained	≥ 40 professionals	
3	Integrated Rehabilitation Services for Social	Percentage of prosthesis recipients successfully returning to work (RTW) within 1 year	≥ 60% RTW rate	
5	Reintegration	Patient satisfaction with rehabilitation services (Survey Score)	≥ 4.0	
4	Sustainability Through Policy Integration	Inclusion of modern prostheses	Yes (Implemented)	

16.2: Output-Level Indicators

Sr. No.	Output	Indicator	Target	
1.1	Renovation &	Completion of Mayo Hospital prosthesis workshop renovation	Yes (100%)	
1.1	Equipment Installation	Procurement and installation of modern prosthetic equipment	Yes (100%)	
1.2	Prosthesis Production Capacity	Number of functional pneumatic prostheses produced	≥ 150 per year	
2.1	Training & Capacity	Development of standardized prosthetics training curriculum	Yes (Approved)	
2.1	Building	Number of professionals completing prosthetics training	\ge 50 professionals	
3.1	Rehabilitation Services	Establishment of multidisciplinary rehabilitation team (PT, OT, Psych)	Yes (Implemented)	
5.1	Renabilitation Services	Number of rehabilitation patients receiving therapy post-prosthesis	≥ 500 patients	

17. <u>Recommendation:</u>

The Concept Paper at a total cost of USD 4.000 million (Rs. 1,120.00 million) is placed before the PDWP for consideration and clearance for the CDWP.
