Basic Information

**Grant title**
Warding off NCDs through health promotion & improving the delivery of public health activities

**Type of Project**
**Humanitarian Project**
Address community needs and produce sustainable, measurable outcomes

**Primary Contacts**

<table>
<thead>
<tr>
<th>Name</th>
<th>Club</th>
<th>District</th>
<th>Sponsor</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kasemchai Nitiwanakun</td>
<td>Silom</td>
<td>3350</td>
<td>Club</td>
<td>Host</td>
</tr>
<tr>
<td>David Mozdren</td>
<td>Honolulu Sunrise</td>
<td>5000</td>
<td>Club</td>
<td>International</td>
</tr>
</tbody>
</table>

**Committee Members**

**Host committee**

<table>
<thead>
<tr>
<th>Name</th>
<th>Club</th>
<th>District</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harn Aramvith</td>
<td>Silom</td>
<td>3350</td>
<td>Secondary Contact</td>
</tr>
<tr>
<td>Chaitawat Thepchanakul</td>
<td>Silom</td>
<td>3350</td>
<td>Secondary Contact</td>
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**International committee**

<table>
<thead>
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<th>Name</th>
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<th>Role</th>
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</thead>
<tbody>
<tr>
<td>Janice Taketa</td>
<td>Honolulu Sunrise</td>
<td>5000</td>
<td>Secondary Contact International</td>
</tr>
</tbody>
</table>

**Do any of these committee members have potential conflicts of interest?**
No

**Project Overview**
Tell us a little about your project. What are the main objectives of the project, and who will benefit from it?
Reducing the major risk factors for noncommunicable diseases (NCDs) to prevent avoidable health injuries. Improving public health infrastructure to address the public health crisis to better reach and care for the needy communities.

Areas of Focus

Which area of focus will this project support?
Disease prevention and treatment

Measuring Success

Disease prevention and treatment

Which goals will your activity support?
Promoting disease prevention and treatment programs that limit the spread of communicable diseases and reduce the incidence and effect of noncommunicable diseases;

How will you measure your project's impact? You need to include at least one standardized measure from the drop-down menu as part of your application.

<table>
<thead>
<tr>
<th>Measure</th>
<th>Collection Method</th>
<th>Frequency</th>
<th>Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of medical and health professionals trained</td>
<td>Grant records and reports</td>
<td>Every year</td>
<td>1-19</td>
</tr>
<tr>
<td>Number of health-focused events</td>
<td>Grant records and reports</td>
<td>Every year</td>
<td>1-19</td>
</tr>
</tbody>
</table>

Do you know who will collect information for monitoring and evaluation?
Yes

Name of Individual or Organization
Mr. Somchai Kanjanahaluetai

Briefly explain why this person or organization is qualified for this task.
Working as a business coach and consultant, he is well versed in collating records and compiling statistics, and thus best placed for this assigned task.

Location and Dates

Humanitarian Project
Where will your project take place?
City or town
Dusit
Province or state
Country
Thailand
When will your project take place?
2021-10-15 to 2022-02-28

Participants

Partners (Optional)
List any other partners that will participate in this project.

Rotarian Participants

Describe the role that host Rotarians will have in this project.
- Conduct needs assessment
- Develop plans to address project layout
- Seek out sustainable solutions
- Consult with healthcare experts to identify measurable outcomes
- Raise funds to finance the project
- Collaborate with international sponsors
- Assure grant fund stewardship
- Monitor & evaluate project outcomes
- Publicize public image in the local social media.

Describe the role that international Rotarians will have in this project.
- Work with host sponsors on project design
- Raise funds to finance the project
- Help assure project fund stewardship
- Visit project site when future opportunities arise
- Review final report preparation and authorization
- Work remotely where possible to move forward the project
- Publicize the success of this project in home district media.

Budget

What local currency are you using in your project's budget?
The currency you select should be what you use for a majority of the project's expenses.

<table>
<thead>
<tr>
<th>Local Currency</th>
<th>U.S. dollar (USD) exchange rate</th>
<th>Currency Set On</th>
</tr>
</thead>
<tbody>
<tr>
<td>THB</td>
<td>32</td>
<td>16/09/2021</td>
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</table>

What is the budget for this grant?
List each item in your project's budget. Remember that the project's total budget must equal its total funding, which will be calculated in step 9. Every global grant includes a match of at least $15,000 from The Rotary Foundation's World Fund. Project budgets, including the World Fund match, must be at least $30,000.

<table>
<thead>
<tr>
<th>#</th>
<th>Category</th>
<th>Description</th>
<th>Supplier</th>
<th>Cost in THB</th>
<th>Cost in USD</th>
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<tbody>
<tr>
<td>1</td>
<td>Equipment</td>
<td>Diagnostic ultrasound</td>
<td>IDS Medical</td>
<td>940000</td>
<td>29375</td>
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<tr>
<td>2</td>
<td>Equipment</td>
<td>Portable ultrasound</td>
<td>IDS Medical</td>
<td>500000</td>
<td>15625</td>
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<tr>
<td>3</td>
<td>Project management</td>
<td>Contingencies</td>
<td>Silom</td>
<td>44808</td>
<td>1400</td>
</tr>
</tbody>
</table>

Total budget: 1484808 46400

**Funding**

Tell us about the funding you've secured for your project. We'll use the information you enter here to calculate your maximum possible funding match from the World Fund.

<table>
<thead>
<tr>
<th>#</th>
<th>Source</th>
<th>Details</th>
<th>Amount (USD)</th>
<th>Support*</th>
<th>Total</th>
</tr>
</thead>
</table>

*Whenever cash is contributed to the Foundation to help fund a global grant project, an additional 5 percent is applied to help cover the cost of processing these funds. Clubs and districts can receive Paul Harris Fellow recognition points for the additional expense.

**How much World Fund money would you like to use on this project?**

You may request up to 0.00 USD from the World Fund.

Funding Summary

Total funding:

Total budget: 46,400.00

**Sustainability**

**Humanitarian Projects**

**Project planning**

Describe the community needs that your project will address.

Vajira Hospital is an advanced tertiary teaching university hospital providing the following healthcare service to the public: Internal medicine, emergency medicine, pediatrics, obstetrics & gynecology, general surgery, orthopedic surgery, dentistry, ophthalmology, ENT, radiology, psychiatry, anatomical pathology, clinical pathology, forensic medicine, anesthesiology, medical sciences, physical medicine and rehabilitation medicine. They provide 800 IPD beds, COVID cohort wards, and staffed with 3,500 medical service personnel. This hospital's internal medicine and surgery suites require at least two additional diagnostic medical sonographic machines (one stationary and one portable ultrasound scanners) to provide essential information about internal parts of the body--the heart, blood vessels, liver, bladder, gallbladder, abdomen, kidneys,
How did your project team identify these needs?
Our project team interviewed this hospital's healthcare and administration team chaired by the Deputy Dean of the Faculty of Medicine Vajira Hospital, Navamindradhiraj University, Dr. Ampan Vimonwattana. Following the community assessment and interviews, they jointly identified the hospital's immediate need of a minimum of two diagnostic sonographic resources, one stationary and one portable machines.

How were members of the benefitting community involved in finding solutions?
Dusit commune members discussed with this hospital to find out what their most pressing healthcare challenges are. Critical need lies with a shortage of quality diagnostic sonographic scanner resources. They focused on finding affordable and urgent solution to this issue of shortage through the private sector and local NGOs, including Rotary clubs.

How were community members involved in planning the project?
This hospital is nominated by Dusit community members. They jointly express their strong desire to address the challenges they have been facing with the inadequacy of available diagnostic sonographic resources.

Project implementation
Summarize each step of your project’s implementation.
Do not include sensitive personal data, such as government ID numbers, religion, race, health information, etc. If you include personal data, you are responsible for informing those whose personal data is included that you are providing it to Rotary and that it will be processed in accordance with Rotary’s Privacy Policy.

<table>
<thead>
<tr>
<th>#</th>
<th>Activity</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Approval, funding, implementing, monitoring &amp; evaluation</td>
<td>4.5 months</td>
</tr>
</tbody>
</table>

Will you work in coordination with any related initiatives in the community?
Yes

Briefly describe the other initiatives and how they relate to this project.
This tertiary university hospital has focused on their competency as a Center of Excellence to provide sufficient and easily accessible medical services to community patients in the sphere of healthcare, diagnosis, prevention and treatment. However this hospital is in dire need of a number of additional essential diagnostic sonographic machines.

Please describe the training, community outreach, or educational programs this project will include.
The essential health promotion and preventive outreach programs are contained in the attached Training Plans.

How were these needs identified?
We interviewed the hospital administrators and diagnostic service providers to assess their medical equipment needs and the challenges they are encountering. They helped us identify the following essential facts & equipment in dire need.

What incentives (for example, monetary compensation, awards, certification, or publicity), will you use, if any, to encourage community members to participate in the project?
Silom RC will award hospital personnel/commune members with local Rotary club's appreciation certificates for selfless service to improving the diagnostic support and technical services. The objective is to encourage the local community's further participation in our humanitarian service projects, now and in the future.
List any community members or community groups that will oversee the continuation of the project after grant-funded activities conclude.

This hospital's medical board of directors will oversee the continuation of this project after grant-funded activities have been concluded.

Budget

Will you purchase budget items from local vendors?
Yes

Explain the process you used to select vendors.

We invited local medical equipment agents to submit quotes to evaluate device specifications, technical compatibility, durability, delivery lead time, after-sale service guarantee, warranty coverage, and other terms. After having consulted with the healthcare service providers of this hospital, we selected the bids of sonographic machines with optimal technical compatibility and equipment quality/efficacy at the best price for each major expenditure items.

Did you use competitive bidding to select vendors?
Yes

Please provide an operations and maintenance plan for the equipment or materials you anticipate purchasing for this project. This plan should include who will operate and maintain the equipment and how they will be trained.

Diagnostic sonographic machine users (internal medicine specialists, surgeons, hospital clinicians, nursing staff, patient care attendants) and maintenance team (hospital technical personnel) are required to undergo on-site technical and familiarization training sessions to ensure they will function to their best. The former are to be trained in technical usage and basic care, and the latter in more complex maintenance tasks. Vendors/agents' subject-matter experts will deliver hands-on onsite training courses covering the operation, inspection and preventive/corrective maintenance of the donated equipment:
* Read the user manuals for guidelines
* Understand how each type of diagnostic sonographic machine operates
* Learn the correct usage of each type of ultrasound
* Learn how to keep them in good condition by learning how to solve a problem and make small repairs
* Clean the equipment on a daily basis:
  The ultrasound CPU are adversely affected by dust but they attract dust, so wipe them down for dust at the end of each shift
  * The peripheral devices such as the transducer probe and patient physiology cables need to be kept clean and well maintained:
    Wipe them down daily as well as going through the disinfecting procedure
    Inspect the pins on the probe connector--no bent pins, damaged probe, damaged connector boards
    Check the cable connection to make sure there are no frayed ends or exposed wires
* If the machine is contaminated with bodily fluids or biological spills, disinfecting it immediately with manufacturer-approved cleaner is vital
* Keep the system cool and prevent it from overheating. Clean the vents and air filters regularly
* When moving the machines, take extra precaution so that they don't tip and fall over.
* Have a scheduled maintenance plan performed by trained professionals is the best way to keep the machines running well for a long time.

Describe how community members will maintain the equipment after grant-funded activities conclude. Will replacement parts be available?

This hospital will maintain the transport incubator and other NICU devices & equipment with cumulative
funds combining annual health appropriations, per-treatment-round stipend from Thailand's National Health Security Office (NHSO) under the charge of the Universal Health Coverage Scheme (UC). Spare & replacement parts are readily available locally on call from the vendors/agents. Specific technical training & updating refreshers will be delivered at no charge by the vendors/agent's technical teams.

If the grant will be used to purchase any equipment, will the equipment be culturally appropriate and conform to the community's technology standards?
Yes

Please explain.
All medical equipment for use in supporting or sustaining patient's life must meet and comply with mandatory regulatory standards governed by Thailand's Medical Device Act of B.E. 2551 to assure their exacting safety and prevention/treatment efficacy.

After the project is completed, who will own the items purchased by grant funds? No items may be owned by a Rotary district, club, or member.
This hospital's medical board of directors will own all medical equipment, accessories, and parts purchased by grant funds on the completion of this GG project.

Funding

Does your project involve microcredit activities?
Yes

Have you found a local funding source to sustain project outcomes for the long term?
Yes

Please describe this funding source.
All public hospitals in Thailand receive the state funds of a per-treatment fee from the Bureau of Fund Allocation & Reimbursement of the National Health Security Office (NHSO) under the management of Thailand's Universal Health Coverage Scheme (UC).

Will any part of the project generate income for ongoing project funding? If yes, please explain.
With more diagnostic machines added to their medical services, the hospital will be able to provide additional quality and affordable healthcare services, and thereby generate more hospital incomes received from the NHSO's subsidies and per-treatment UC fees for their ongoing project & maintenance funding.

Authorizations

Authorizations & Legal Agreements

Legal agreement
Global Grant Agreement

I confirm and agree to the following:

1. All information contained in this application is, to the best of our knowledge, true and accurate.
2. We have read the Terms and Conditions for Rotary Foundation District Grants and Global Grants ("Terms and Conditions") and will adhere to all policies therein.

3. The grant sponsors ("Sponsors") shall defend, indemnify, and hold harmless Rotary International (RI) and The Rotary Foundation (TRF), including their directors, trustees, officers, committees, employees, agents, associate foundations and representatives (collectively “RI/TRF”), from and against all claims, including but not limited to claims of subrogation, demands, actions, damages, losses, costs, liabilities, expenses (including reasonable attorney's fees and other legal expenses), awards, judgments, and fines asserted against or recovered from RI/TRF arising out of any act, conduct, omission, negligence, misconduct, or unlawful act (or act contrary to any applicable governmental order or regulation) resulting directly or indirectly from a Sponsor’s and/or participant’s involvement in grant-funded activities, including all travel related to the grant.

4. The failure of the parties to comply with the terms of this Agreement due to an act of God, strike, war, fire, riot, civil unrest, hurricane, earthquake, or other natural disasters, acts of public enemies, curtailment of transportation facilities, political upheavals, acts of terrorism, or any similar cause beyond the control of the parties shall not be deemed a breach of this Agreement. In such an event, the Agreement shall be deemed terminated and the Sponsors shall refund all unexpended global grant funds within 30 days of termination.

5. TRF’s entire responsibility is expressly limited to payment of the total financing amount. TRF does not assume any further responsibility in connection with this grant.

6. TRF reserves the right to cancel the grant and/or this Agreement without notice upon the failure of either or both of the Sponsors to abide by the terms set forth in this Agreement and the Terms and Conditions. Upon cancellation, TRF shall be entitled to a refund of any global grant funds, including any interest earned, that have not been expended.

7. The laws of the State of Illinois, USA, without reference to its conflicts of laws principles, shall govern all matters arising out of or relating to this Agreement, including, without limitation, its interpretation, construction, performance, and enforcement.

8. Any legal action brought by either party against the other party arising out of or relating to this Agreement must be brought in either, the Circuit Court of Cook County, State of Illinois, USA or the Federal District Court for the Northern District of Illinois, USA. Each party consents to the exclusive jurisdiction of these courts, and their respective appellate courts for the purpose of such actions. Nothing herein prohibits a party that obtains a judgment in either of the designated courts from enforcing the judgment in any other court. Notwithstanding the foregoing, TRF may also bring legal action against Sponsors and/or individuals traveling on grant funds in any court with jurisdiction over them.

9. This Agreement binds and benefits the parties and their respective administrators, legal representatives, and permitted successors and assigns.

10. If any provision of this Agreement is determined to be illegal, invalid or unenforceable, the remaining provisions of this Agreement shall remain in full force and effect.

11. Sponsors may not assign any of its rights under this Agreement except with the prior written consent of TRF. Sponsors may not delegate any performance under this Agreement without the prior written consent of TRF. Any purported assignment of a Sponsor’s rights or delegation of performance without TRF’s prior written consent is void.

12. TRF may assign some or all of its rights under this Agreement to an associate foundation of TRF. TRF may delegate any performance under this Agreement to an associate foundation. Any other purported assignment of TRF’s rights or delegation of performance without the Sponsors’ prior written consent is void.

13. Sponsors will comply with all economic and trade sanctions, including those implemented by the Office of Foreign Assets Control (OFAC) of the United States Department of Treasury, and will ensure that they do not support or promote violence, terrorist activity or related training, or money laundering.

14. This Agreement constitutes the final agreement between the parties. No amendment or waiver of any
15. Rotary International (RI) and TRF may use information contained in this application and subsequent reports to promote the activities by various means such as The Rotarian, Rotary Leader, rotary.org, etc. Unless indicated otherwise in writing, by submission of the photos, the parties hereby grant to RI and TRF the worldwide right to publish and use the photos, including but not limited to, in RI and TRF publications, advertisements, and Web sites and on social media channels and to license use to others, including, but not limited to, media outlets and its partners and through RI’s online image database, for the purposes of promoting Rotary. By submitting the photos, the parties represent and warrant that all persons appearing in the photos have given their unrestricted written consent to use their likenesses and to license use to third parties.

16. The Sponsors agree to share information on best practices when asked, and TRF may provide their contact information to other Rotarians who may wish advice on implementing similar activities.

17. The Sponsors will ensure that all individuals traveling on grant funds have been informed of the travel policies stated in the Terms and Conditions and have been made aware that they are responsible for obtaining travel insurance.

Primary contact authorizations

Application Authorization

By submitting this global grant application, we agree to the following:

1. All information contained in this application is, to the best of our knowledge, true and accurate, and we intend to implement the activities as presented in this application.

2. The club/district agrees to undertake these activities as a club/district.

3. We will ensure all cash contributions (as detailed in the grant financing) will be forwarded to The Rotary Foundation (TRF) or sent directly to the global grant bank account after Trustee approval of the grant.

4. Rotary International (RI) and TRF may use information contained in this application to promote the activities by various means such as The Rotarian, the RI international convention, RVM: The Rotarian Video Magazine, etc.

5. We agree to share information on best practices when asked, and TRF may provide our contact information to other Rotarians who may wish advice on implementing similar activities.

6. To the best of our knowledge and belief, except as disclosed herewith, neither we nor any person with whom we have or had a personal or business relationship are engaged, or intend to engage, in benefiting from TRF grant funds or have any interest that may represent a potential competing or conflicting interest. A conflict of interest is defined as a situation in which a Rotarian, in relationship to an outside organization, is in a position to influence the spending of TRF grant funds, or influence decisions in ways that could lead directly or indirectly to financial gain for the Rotarian, a business colleague, or his or her family, or give improper advantage to others to the detriment of TRF.

All Authorizations & Legal Agreements Summary

Primary contact authorizations
<table>
<thead>
<tr>
<th>Name</th>
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<tr>
<td>David Mozdren</td>
<td>Honolulu Sunrise</td>
<td>5000</td>
<td></td>
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</tbody>
</table>

**District Rotary Foundation chair authorization**

<table>
<thead>
<tr>
<th>Name</th>
<th>Club</th>
<th>District</th>
<th>Status</th>
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<tbody>
<tr>
<td>Nakarin Ratanakitsunthorn</td>
<td>Prakanong</td>
<td>3350</td>
<td></td>
</tr>
<tr>
<td>Adelbert Green</td>
<td>Downtown Honolulu</td>
<td>5000</td>
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**DDF authorization**

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<th>Name</th>
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**Legal agreement**

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<td>5000</td>
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<td>Silom</td>
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