

# InvestEU Scoreboard <sup>(1)</sup>

## Presentation of the financing or investment operation

Implementing Partner: EIB

Name of the Operation: NOUVEL HOPITAL DE TOURS

Type of approval: Individual financing or investment operation

Name of the final recipient: CENTRE HOSPITALIER UNIVERSITAIRE DE TOURS

Country(-ies) of implementation: France

Short description of the financing or investment operation:

The project is part of the CHRU's master restructuring plan aimed at concentrating medical and surgical care from the five existing sites on three sites: Bretonneau, Clocheville and Trousseau. More specifically, it concerns the construction on the Trousseau site of the New Trousseau Hospital (NHT) and the New Psychiatric Hospital (NHP).

## Public Statement

The project is in line with the InvestEU objective of social investment, in particular by creating infrastructure for basic, complex and acute hospital care. The project financed by the EIB concerns the construction of two new hospital buildings on the Trousseau site of the Centre Hospitalier Régional Universitaire de Tours, namely (i) the "Nouvel Hôpital Trousseau" to house emergency, critical care and adult surgery activities, and (ii) the "Nouvel Hôpital Psychiatrique", also located on the Trousseau site, which will bring together psychiatric and addictologic full hospitalisation activities, as well as the "Logipôle" (logistics integrated facility for automated logistical transportation flows).

The project supports the EIB's health policy objective of 'Innovation, digital transformation and human capital' (Health sub-objective) and aims to provide accessible, high-quality health services.

The project addresses the sub-optimal situation of investment in European healthcare infrastructure due to market failures resulting from the nature of public hospital assets and healthcare institutions more generally, despite the significant health externalities they generate. Indeed, strategic investments in the healthcare sector generate long-term benefits not only in terms of the health of the population, by controlling morbidity and mortality, but also in terms of positive indirect impacts on the economic productivity of hospital services. The Bank's support for the project therefore makes it possible to address the financing shortcomings of the market.

The long-term financing granted by the Bank will enable the CHRU-T to diversify its sources of finance. The possibility of obtaining a fixed rate over a long period, the deferred repayment period and the flexibility offered at drawdown are all factors that will make it possible to adapt/spread and thus reduce the annual cost of servicing the debt.

**Pillar 3 - Market failure or sub-optimal investment situation addressed by the financing or investment operation (Excellent)**

**Pillar 4 - Financial and technical contribution by the implementing partner (Very Good)**

**Pillar 5 - Impact of the financing or investment operation (Very Good)**

(1) This Scoreboard of indicators reflects the information presented to the InvestEU Investment Committee (IC) for its decision on the use of the EU guarantee for this operation. Therefore, the document does not take into account possible developments that could have occurred after this decision.

**Pillar 7 - Complementary indicators <sup>(2)</sup>**

<b>Key project indicators</b>	<b>Expected at PCR</b>
Start of works	01.11.2023
End of works	30.11.2027
Project investment cost	508.50 MEUR
Mandate eligible investment mobilized	407.20 MEUR
Amount of private financing	0.00 MEUR
Co-financing with national promotional banks	0.00 MEUR
Co-financing with structural funds (ESIF)	0.00 MEUR
Energy efficiencies realised	0.00 MWh/a
Climate Action indicator	86.47% Mitigation - Energy Efficiency (transversal)
Transition regions	100.00 %
Employment during construction - temporary jobs	2,086 person years
Employment during operation - new permanent jobs	0 FTE
Gender Tag	No Significant contribution to Gender Equality
Employment during project operation - women	0 FTE

<b>Outputs</b>	<b>Expected at PCR</b>
New or rehabilitated health facilities	2.00 Units
Number of beds in health facilities	769.00 Units
Equipment and ICT supplied to health facilities	44.70 MEUR
Construction floor area in health facilities	93,360.00 m2
Full Time Equivalent (FTE) health care professionals	673.00 FTE
Share of health services covered by public funding	100 %
Digitalisation– SECTOR based share of project investment cost	14.90 %

<b>Outcomes</b>	<b>Expected at PCR</b>
Number of readmissions	3,933.00 Units/yr
Bed occupancy rate	92.50 %
Volume of patients treated	28,254.00 Beneficiaries

(2) The abbreviation PCR stands for Project Completion Report. EIB internal methodologies are used in order to calculate the figures presented in this document. The Promoter's estimates might differ.

Average length of stay (ALOS)	3.80 d
Share of annual operating costs spent on maintenance	1.82 %
Population covered by improved health services	395,877 Beneficiaries
Country UHC services coverage index	85 Units
Country Catastrophic health expenditure	2 %
Digital transformation impact	3 - Very Good