

Taiwan Mariana Is. Philippines	MICRONESIA	
Palau C Bismarch New Guinea	Solomon Is.	
Australia	AELANESIA Vanuatu Samoa Maro	quesas Is. notu Arch. Kangareva
	Norfolk Is. Kermadec Is. New Zealand	Easter Island

"Peace And Spirit Creating Alternative Solutions"

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PASCAS CARE CENTRE - from the Micro to the Macro

From amongst the community of a small remote village, a person might come forward and be trained in First Aid. That person would be supported with a comprehensive first aid kit and communications to a clinic / care centre established in a larger village. That clinic would be connected with global network communications and be supported by a regional clinic which may have day surgery facilities. This larger clinic would be connected to a hospital facility and its comprehensive range of doctors and specialists together with the full ambit of diagnostic technologies.

All the way through would be connectivity and support from Chaldi College (CC) and Urban Rural Technopath (URTh) people to assist in resolving issues and needs raised by villagers.



This is about the village communities being responsible for their own agendas and goals. If they do not come forward with their needs and objectives then we are not here to impose our will upon them.

Truly this is a most exciting time in the history of humanity as we move out of the top down autocracy and bureaucracy and embrace a feelings first bottom up democracy. The people in the village community are to be listened to and they are to be self-sufficient and self-defining.

There are no obligations. No one joins anything. There are no controls. It is all about embracing your feelings and having your mind assist with implementation of what your feelings are leading you to embrace. The most incredible thing is that the social structure of small village communities is the most conducive environment to make this shift from mind domination that has been imposed upon us all for aeons and now begin our growth of being our true and authentic selves through expressing our feelings.

Yes, the village communities will progressively become responsible for these services and facilities, however that transition is being accounted for in what can and is to be made available.



PASCAS CARE CENTRE – PACIFIC BASIN NATIONS

Unique issues throughout the Pacific Basin Nations, most of whom are members of the Pacific Island Forum, are:

- → Isolation due to the thousands of islands and mostly very rugged terrains.
- → Per capita income is around USD 3,000 per annum.
- → Life style is mainly village subsistence.
- → Median age of populations is in the mid 20s.
- → What do the people want ask them!

Before addressing medical services, one has to consider education and before you consider education one needs to address communications. To achieve any of these is the need for a reliable power supply.

The purpose of a Pascas Care Centre goes significantly beyond being a Pascas Health Clinic. It is to consider any of the needs with which the local community seek support and assistance with. The Clinic is to be driven by the needs and focus of the community – the village, the township or suburbia. Progressively the Clinic is to become autonomous and self sufficient. At all times the support of Pascas WorldCare will be accessible to the Clinic, however the Clinic is to be for the community, driven by the community and ultimately be financially independent through the community.

Clinic Buildings

The building of the Clinic is much more than a medical outpost. Earth and weather events have transitioned to new levels of extremes and frequency. The structure is to be built to withstand anticipated extremes. The building structure may also assist in being a safe haven during such events.

Power Supply

Only about 20% of Papua New Guinea's 8 million people have electricity and for a significant proportion of them the supply is not reliable. Approximately 12% of Solomon Islanders have a power supply, with access to electricity in rural areas estimated at 4%. Energy access rates in Fiji have increased, however, 4% of urban residents and nearly 20% of rural dwellers still lack electricity. The Vanuatu Department of Energy (DoE) estimate that 80% of urban and 17% of rural households have electricity access. Approximately 76% of households in Micronesia have some form of electrification, however access rates vary widely among states. An estimated 16% of the world's population — 1.2 billion people — have little or no access to electricity. 15 September 2017

Thus a Pascas Care Centre and Clinic is to have a robust power supply – frequently its own.

Communications

Papua New Guinea with a population of more than 8 million and while mobile saturation has reached 50%, fixed line internet has only reached 10% of the population according to BuddeComm. Around 90% of Internet usage occurs over a single company's mobile and broadband networks – Digicel. Cook Islands Internet service is available across Tarawa. On the outer islands internet access is limited and may only be available from the Cook Island Council offices. Solomon Islanders – 9% use the internet. Fiji's connection to the Internet is good in some places, but patchy in some of the more remote islands or no service at all.

PACIFIC BASIN NATIONS		typically 2017		Median
	Population	Gross Domestic Product	GDP capita	Age
Papua New Guinea	8,251,000	USD21,090,000,000	USD2,556	21.5
Palau	21,729	291,500,000	13,417	33.4
Federated States of Micronesia	105,544	336,400,000	3,188	25.8
Nauru	13,649	113,900,000	8,344	26.4
Kiribati	116,398	196,200,000	1,685	22.5
Tuvalu	11,192	39,730,000	3,550	25.7
Cook Islands	17,379	300,000,000	20,354	36.6
Nuie	1,624	10,000,000	5,800	20.4
Somoa	196,440	857,000,000	4,360	21.1
Tonga	108,020	426,100,000	3,944	22.0
Fiji	905,502	5,061,000,000	5,589	27.5
Vanuatu	276,244	862,000,000	3,124	20.8
Solomon Islands	611,343	1,303,000,000	2,132	19.6
Bougainville (independence)	249,358			19.9
New Caledonia	280,460	2,682,000,000	12,580	32.3

A Pascas Clinic will be dependent upon digital communications support. Connection may need to be direct to satellite if more affordable terrestrial networks are not available.

Internet and digital communications are necessary for and through a Pascas Care Centre for:

- ✓ Diagnostic imaging analysis.
- \checkmark Live internet patient / doctor consultation.
- \checkmark Emergency communications and village support services.
- \checkmark Administration communications for the clinic centre.
- ✓ Chaldi College education and information delivery.
- \checkmark General community interaction and internet service provision.

Internet connectivity is an essential service for the community, for the delivery of clinic support, for education services either through the Chaldi College unit within the clinic centre and or in conjunction with any local education facilities.

Chaldi College will not only provide children with education opportunities but also adults to assist with their own trades and professions. Chaldi College is to introduce Living Feelings First amongst other programs with which the community may seek assistance.

Clinic Professional Staff

Remote area clinics will typically be deprived of skilled health carers. This will take long term initiatives to resolve.

A Nurse Clinician is a registered nurse who works in the clinical area where patient care is delivered. He/she could also be called a staff RN (registered nurse), a Clinical RN, Clinical Staff, or simply RN. The educational or academic qualifications vary from practice area, hospital settings and patient population. A nurse practitioner is an advanced practice registered nurse classified as a mid-level practitioner. A nurse practitioner is trained to assess patient needs, order and interpret diagnostic and laboratory tests, diagnose illness and disease, prescribe medication and formulate treatment plans.

The academic training of clinical nurses may be facilitated at a university within Papua New Guinea or elsewhere within the Pacific. In this regard Pascas WorldCare would support and potentially underpin such education programs. As this is a Pacific Basin initiative then it is intended that all aspects of the agenda be dealt with in the region.

Triage is the process of determining the priority of patients' treatments based on the severity of their condition. Thus the triage could look like this:

Small remote village:	Pascas Care Centre would be built to provide for all community objectives within the clinic. Thus it would have some degree of emergency shelter being the same floor space to be used for Chaldi College education programs. Thus it has its own robust power supply, internet communications and clinical room or rooms. Elementary x-ray units and appropriate diagnostic equipment to be provided and installed.
	The medical supplies on site would also be a store for extreme events. Emergencies could be dealt with from time to time.
	The Centre would have communication and backup from a clinic in a nearby (or nearest) but larger clinical centre.
Regional care centre:	This would have a medical practitioner and more advanced diagnostic equipment. Pathology services would be available. This may be in the form of onsite testing to a limited degree.
Major facilities:	This may extend to the availability of some specialists as well as full hospital settings. It maybe that day surgery is available or even overnight full hospitalisation.
Full health care unit:	A major unit with more than a 100 hospital beds, 6 operating theatres, a wide range of specialists and all the diagnostic services that you would expect in any developed economy.

Telemedicine is the remote delivery of healthcare services, such as health assessments or consultations, over the telecommunications infrastructure. As various parties seek more efficient ways to provide care at less cost to the patient, telemedicine's role has grown. Such technology may be appropriate as an aid for nurse clinicians and other paramedic personnel.

Long term goals are for a trained paramedical to be available within village communities in sufficient population-to-clinician ratios to enable the primary health care services to be available.

PACIFIC BASIN NATIONS:



Papua New Guinea

Population 8.251 million (2017)

Estimate 2022 population is 9 million



13.0 % of the population is **urban** (1,137,684 people in 2019) The **median age** in Papua New Guinea is **21.7 years**.

Gross domestic product USD 21.09 billion (2017) GDP per capita USD 2,556 (2017)

Papua New	Guinea –	10 Largest	Cities
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	Name		Population
1	Port Moresby	National Capital	283,733
2	Lae	🤍, Morobe	76,255
3	<u>Arawa</u>	 Bougainville 	40,266
4	Mt Hagen	 Western Highlands 	33,623
5	Popondetta	 Northern Province 	28,198
6	<u>Madang</u>	Madang	27,419

7	<u>Kokopo</u>	🤍 East New Britain	26,273
8	Mendi	, Southern Highlands	26,252
9	<u>Kimbe</u>	🤍, West New Britain	18,847
10	<u>Goroka</u>	 Eastern Highlands 	18,503
11	Wewak	, East Sepik	18,230
12	<u>Bulolo</u>	 Morobe 	16,042

Palau

Population 21,729 (2017)

Palau is an archipelago of over 500 islands, part of the Micronesia region in the western Pacific Ocean. Koror Island is home to the former capital, also named Koror, and is the islands' commercial centre. The larger Babeldaob (population 6,000) has the present capital, Ngerulmud, plus mountains and sandy beaches on its east coast. In its north, ancient basalt monoliths known as Badrulchau lie in grassy fields surrounded by palm trees.

The economy of Palau consists primarily of subsistence agriculture and fishing. ... Palau's per capita GDP of \$13,400 makes it one of the wealthier Pacific Island states.

Gross domestic product USD 291.5 million (2017) GDP per capita USD 13,417 (2017)

Federated States of Micronesia

Population 105,544 (2017)

The Federated States of Micronesia is a country spread across the western Pacific Ocean comprising more than 600 islands. Micronesia is made up of 4 island states: Pohnpei, Kosrae, Chuuk and Yap. The country is known for palm-shaded beaches, wreck-filled dives and ancient ruins, including Nan Madol, sunken basalt temples and burial vaults that extend out of a lagoon on Pohnpei.

Palikir, capital of the Federated States of Micronesia. It is located inland on the island of Pohnpei. Nearby is the coastal city of Kolonia, the island's other large settlement. Pop. (2010) 6,674.

Gross domestic product USD 336.4 million (2017) GDP per capita USD 3,188 (2017)





Nauru

Population 13,649 (2017)

Nauru is a tiny island country in Micronesia, northeast of Australia. It features a coral reef and whitesand beaches fringed with palms, including Anibare Bay on the east coast. Inland, tropical vegetation surrounds Buada Lagoon. The rocky outcrop of Command Ridge, the island's highest point, has a rusty Japanese outpost from WWII. The underground freshwater lake of Moqua Well lies amid the limestone Moqua Caves.

Gross domestic product USD 113.9 million (2017) Nauru GDP per capita USD 8,344 (2017)

Kiribati

Kiribati population 116,398 (2017) Capital is Tarawa – population 28,802

Kiribati, officially the Republic of Kiribati, is a sovereign state in Micronesia in the central Pacific Ocean. The permanent population is just over 110,000, more than half of whom live on Tarawa Atoll. The state comprises 32 atolls and reef islands and one raised coral island, Banaba. The government system is a republic; the chief of state and head of government is the president. Kiribati has a mixed economic system which includes a variety of private freedom, combined with weak centralised economic planning and government regulation.

Kiribati Gross domestic product USD 196.2 million (2017) Kiribati GDP per capita USD 1,685 (2017)

Tuvalu

Tuvalu population 11,192 (2017) Funafuti is the capital wit population 6,152 (2012)

Tuvalu, in the South Pacific, is an independent island nation within the British Commonwealth. Its 9 islands comprise small, thinly populated atolls and reef islands with palm-fringed beaches and WWII sites. Off Funafuti, the capital, the Funafuti Conservation Area offers calm waters for diving and snorkelling among sea turtles and tropical fish, plus several uninhabited islets sheltering sea birds.

Tuvalu gross domestic product USD 39.73 million (2017) Tuvalu GDP per capita USD 3,550 (2017)









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Cook Islands

Cook Islands Population 17,379 Capital: Avarua District population 5,445 (2006)

The taxation haven of the Cook Islands is a nation in the South Pacific, with political links to New Zealand. Its 15 islands are scattered over a vast area. The largest island, Rarotonga, is home to rugged mountains and Avarua, the national capital. To the north, Aitutaki Island has a vast lagoon encircled by coral reefs and small, sandy islets. The country is renowned for its many snorkelling and scuba-diving sites.

Gross domestic product USD 300 million Cook Island per capita income USD \$20,354.

Nuie

Niue population 1,624 (2016)

The economy suffers from the typical Pacific island problems of geographic isolation, few resources, and a small population. The agricultural sector consists mainly of subsistence gardening, although some cash crops are grown for export.

GDP (purchasing power parity) USD 10 million (2003 est) GDP per capita (PPP) USD 5,800 (2003 est)

Samoa

Samoa population 196,440 (2017) Samoa capital is Apai – population 36,000

Samoa, officially the Independent State of Samoa and, until 4 July 1997, known as Western Samoa, is a country consisting of two main islands, Savai'i and Upolu, and four smaller islands. The capital city is Apia. The Lapita people discovered and settled the Samoan Islands around 3,500 years ago.

Gross domestic product USD 857 million (2017) Samoa GDP per capita USD 4,360 (2017)

Golden Rule: that one must always honour another's will as one honours one's own.







Tonga

Tonga population 108,020 (2017) Nuku'alofa population 23,658

Tonga is a Polynesian kingdom of more than 170 South Pacific islands, many uninhabited, most lined in white beaches and coral reefs and covered with tropical rainforest. The main island, Tongatapu, is protected by lagoons and limestone cliffs. It's home to the rural capital of Nuku'alofa, as well as beach resorts, plantations and the Ha'amonga 'a Maui, a monumental coral gate from the 1200s.

Tonga gross domestic product USD 426.1 million (2017) GDP per capita USD 3,944 (2017)

Fiji

Fiji population 905,502 (2017) Suva population 88,271

Fiji, a country in the South Pacific, is an archipelago of more than 300 islands. It's famed for rugged landscapes, palm-lined beaches and coral reefs with clear lagoons. Its major islands, Viti Levu and Vanua Levu, contain most of the population. Viti Levu is home to the capital, Suva, a port city with British colonial architecture.

Gross domestic product USD 5.061 billion (2017) GDP per capita USD 5,589 (2017)

Vanuatu

Vanuatu population 276,244 (2017) Port Villa population 44,039 (2009)

Vanuatu is a South Pacific Ocean nation consisting of approximately 80 islands that stretch 1,300 kilometres. The islands offer scuba diving at coral reefs, underwater caverns and wrecks such as the WWII-era troopship SS President Coolidge. Harbour-side Port Vila, the nation's capital and economic centre, is on the island of Efate.

Gross domestic product USD 862 million (2017) Vanuatu GDP per capita USD 3,124 (2017)







Solomon Islands

Solomon Islands population 611,343 (2017) Honiara population 64,609 (2009)

The Solomon Islands, a nation of hundreds of islands in the South Pacific, has many WWII-era sites. Guadalcanal, a province and one of the archipelago's largest islands, honours fallen Allied soldiers at its U.S. War Memorial. Guadalcanal is also home to the nation's capital, Honiara, whose bustling Central Market showcases the islands' produce and traditional handicrafts.

Gross domestic product USD 1.303 billion GDP per capita USD 2,132 (2017)

Bougainville

Seeking independence from Papua New Guinea 23 November 2019 Autonomous Region of Bougainville population 249,358 (2011) Capital: Buka Town

Bougainville, officially the Autonomous Region of Bougainville and previously known as North Solomons, is an autonomous region in Papua New Guinea. The largest island is Bougainville Island. The region also includes Buka Island and assorted outlying nearby islands including the Carterets.

New Caledonia

New Caledonia population 280,460 (2017) Noumea population 99,926 (2014)

New Caledonia is a French territory comprising dozens of islands in the South Pacific. It's known for its palm-lined beaches and marine-life-rich lagoon, which, at 24,000 sq km, is among the world's largest. A massive barrier reef surrounds the main island, Grand Terre, a major scuba-diving destination. The capital, Nouméa, is home to French-influenced restaurants and luxury boutiques selling Parisian fashions.

Gross domestic product USD 2.682 (2000) GDP per capita USD 12,580 (2000)

	Population	2017 Gross Domestic Product	GDP capita	Median Age
Pacific Basin Nations	11,165,882	USD33,568,830,000	USD3,006	23.0
Australia the Pacific basin nations has compared to Australia	24,600,000 45.4% of the population	USD1,323,000,000,000 2.5% of the income	USD54,000 5.6%	37.3









PASCAS CARE – THREE UNITS IN ONE:



- Average number of employees per clinic including medicos: 25
 - day care treatment facility: 20
 - nutrition café and community services: <u>15</u>
 - Total: 60

By living true to ourselves, true to our feelings, we are living true to God. It's that simple.

The Beauty and Wisdom of Village Cultures

"We are so accustomed to disguise ourselves to others, that in the end, we become disguised to ourselves." *Francois de la Rochefoucauld*

Villagers are far more authentic between each other than for most of who live in major cities and that transposes to all aspects of their lives even when they migrate away from the village.

We are to be our true selves, we are to express our true personality. This is what has been denied to us for the past 200,000 years – through the Rebellion and Default we have all embraced a false facade, a personality imposed upon us by our physical childhood parents. Our suppression and repression universallv has been imposed, even throughout all of the remote villages.

We are to Find the Truth of our Childhood.





It takes a village to raise a child! Not only is the village community to be supported and strengthened, the village that embraces Living Feelings First is to be emulated and replicated throughout the world. It is now their time in history to be acknowledged and embraced.

We are to embrace the longings of the village community, we are to welcome their observations and recognised preferences for introduction of services, facilities and technologies that we may or may not have to provide. This is about enabling the village community to progress in the manner and direction

that they collectively prefer. As we are not to impose our will upon others, we are not to impose our will upon a village community.

The interaction with the village community does require bringing about an awareness of what is possible from us to them.

The village is to remain autonomous. The village will progressively become self-sufficient and not be dependent upon outside assistance however support is to be provided along the way to achieve a desired

level of self-sufficiency and independence.

The educating and training of skills will be supported through scholarships and apprenticeships mostly within education facilities within their region. People are to be sponsored to attend advanced education centres and universities within the Pacific Basin, such as Fiji, Vanuatu and Papua New Guinea. This

may require assistance and building of additional universities including in the Solomon Islands and elsewhere.

Where appropriate, some may be sponsored to attend advanced education facilities elsewhere, such as Australia, south-east Asia or even Europe. The agenda is to enable the nations of the Pacific to become autonomous and selfreliant.

In the long term each community will progressively move into selfmanagement of their facilities



that are to be introduced and delivered through this program and foundation.

A Pascas Care Centre may contain a very complex array of services. You could liken it to a town hall environment with a village square atmosphere that all the people of the village congregate and interact with each for mutual benefit. The facility that would be built by the villagers with materials and guidance being provided by the foundation would be unique in many ways.

Any building structure would be assembled to have a long life -50 years would be the minimum standard. The buildings would be able to withstand the extremes of weather events anticipated for the location. Obviously the buildings would be built to avoid sea surges and flooding from rivers. The structures would be shelters against cyclones and all that nature may provide from time to time.



However, these same shelters would be used for the provision of education services through Chaldi College or elsewhere. The rooms would have multiple purposes – education, training, meeting and emergency shelter.

The greater agenda for Chaldi College is the provision of education free for children as well for adults. Each Pascas Care Centre may have two training / teaching rooms with programs being conducted via internet. Chaldi College is intended to become a university with a campus of one million students. With its association to Pascas Clinics, it will be a most widely spread university! Thus support for nurse clinicians and health carers will be available through Chaldi College as well as through other medical professional centres.



To assist in the delivery of internet programs it is envisaged that villagers would be 'teacher's aides' during the delivery of material. Involvement within every aspect of a Pascas Care Centre would be encouraged. Physical involvement experience is essential. Courses and programs to be provided are to be those most conducive for one's way of living and that which is relevant to one's way of life applicable to the environment.





Chaldi College programs will focus primarily upon what is practical and applicable to the villagers way of life – particularly technical college skills training. Adult education will focus upon employment opportunity and commerce development as well as health related programs such as nutrition and personal care. To facilitate remote area delivery requires onsite robust power supply and internet services even if it is via satellite. Programs are to be universally available for first aid training and support programs for the development of Nurse Clinician's competency.

Why! We need multi-skilled training not just academic Degree Training – at a University if you have a good memory and can absorb details contained within the Text Book you can achieve an excellent pass but have little or no practical capacity to deliver. Training delivered should be the ability blend academic + Technical capability that delivers practical common sense, multi-skilling is the Goal

Without empathy for others, education becomes robotic and then there are no mentors to fall back on. Most mentors develop and deliver empathy between student and teacher.

Pascas and partners support projects that provide free education for each worker and their immediate family, wife, husband and children, Children are the future. The biggest Gift we can deliver to the children is the word "WHY"!!!!

Higher Education

The 2016 Census of Population and Housing has recorded that Australians are up-skilling like never before, with 56% of Australians aged 15 years and over -9.6 million people - now holding a post-school qualification, up from 46% in 2006.

Attaining a university qualification remains an achievement Australians strive for, with close to one quarter (24%) of youths and adults in the 2016 Census having completed a Bachelor Degree or above, up from 18% a decade ago.

For USA, in 2016, the most recent year for which statistics are available, the Bureau of Labour Statistics reported that 69.7% of students who graduated high school in 2016 were enrolled in college (university). About 49% of these students are enrolled in community colleges, according to a 2017 report issued by the National Student Clearinghouse Research Centre.

Higher education is a major determinant of a population's knowledge and skills, workforce participation, employment, incomes, economic growth, immigration, family formation and of the educational attainment and future prosperity of subsequent generations.



Pascas Care Centre Multiple Roles

The wonderful attributes of a village community are conducive to the free expression of one's feelings, both good and bad. It is only now recognised that the underlying cause of illness is the result of childhood repression and suppression. Simply put, our physical parents rejected us – our true selves – and in the process of our rejection they imposed upon us a 'personality' that they consider more appropriate for our survival. They knew better than our Heavenly Mother and Father.

From the time of conception through to around the age of six years we were continually manipulated and indoctrinated to suppress our true selves, our real personality and adopt the norms that our physical parents directed us to do. We were repressed and then we embellished this repression by personally suppressing our feelings. This internal conflict is the energy behind what manifests as illness throughout our lives. It is this wrongness that brings about all of our adult life difficulties.

We are to Find the Truth of our Childhood.

These understandings are to be recognised and how to bring about a reversal is to live life Feelings First.

A Pascas Care Centre will provide a meeting environment for villagers to openly explore and engage in living Feelings First. It will be a town hall environment in the manner of a village square meeting place.



Thus, the village square facility will be to assist with local trade and interaction between the residents. It is to be a structure that will provide safety for all in extreme weather conditions. Thus it would typically be adjoining the Pascas Care Centre so that common utilities are available such as robust power supply and communications to the internet and the outside world. As the care centre is to built to withstand the onslaught of extreme weather events then the two buildings would combine to provide emergency shelter. This will also involve storage of emergency medical and other supplies to see the community through a major weather event.

Weather events are increasing in severity and frequency due to the marginal increased rotation of the iron nickel core of Earth which has increased surface temperatures by more than 1° Celsius, albeit unevenly thus complicating events. Hurricane Dorian in the Bahamas, September 2019,was a category 6 event – above the scale!

From this to this:





Hurricanes

Saffir-Simpson scale

Winds of 119 to 153 kph

Dangerous: Damage to poorly constructed homes, tree branches, power lines

2 154 - 177 kph

Very dangerous: Damage to roofs, windows, walls. Shallow-rooted trees blown down. Severe power outages

3 178 - 208 kph

Devastating: Damage to building structures. Many trees uprooted. Flooding near coast. Power and water shortages

4 209 - 251 kph

Catastrophic: Roofs and walls collapse. Most trees and power lines destroyed. Flooding. Areas up to 10 km from coast evacuated

5 252 or higher

Utterly catastrophic: Buildings destroyed, roofs torn off. Floods. Areas up to 16 km from coast evacuated



Saffir-Simpson Hurricane Intensity Scale

Surge: 4-5 feet - Winds: 74-95 mph (64-82 kt)

No real damage to building structures. Damage primarily to unanchored mobile homes, shrubbery and trees. Also, some coastal flooding and minor pier damage.



Category

Surge 6-8 feet - Winds: 96-110 mph (83-95 kt)

Some roofing material, door and window damage. Considerable damage to vegetation, mobile homes, etc. Flooding damages piers and small craft in unprotected moorings may break their moorings.

Surge: 9-12 feet - Winds: 111-130 mph (96-113 kt)

Category

Some structural damage to small residences and utility buildings, with a minor amount of structural failures. Mobile homes are destroyed. Flooding near the coast destroys smaller structures with larger structures damaged by floating debris. Terrain may be flooded well inland.



Surge: 13-18 feet - Winds: 131-155 mph (114-135 kt)

More extensive structural failures with some complete roof failure on small residences. Major erosion of beach areas. Terrain may be flooded well inland.

Surge: 19+ feet - Winds: 156+ mph (135+ kt)

Complete roof failure on many residences and industrial buildings. Some complete building failures with small utility buildings blown over or away. Flooding causes major damage to lower floors of all structures near the shoreline. Massive evacuation of residential areas may be required.



Earthquake-proof Buildings

After the massive earthquake near Japan one wonders if it's possible to build an earthquake-proof building? The answer is yes and no. There are of course, engineering techniques that can be used to create a very sound structure that will endure a modest or even strong quake. However, during a very strong earthquake, even the best engineered building may suffer severe damage. Engineers design buildings to withstand as much sideways motion as possible in order to minimise damage to the structure and give the occupants time to get out safely.

Buildings are basically designed to support a vertical load in order to support the walls, roof and all the stuff inside to keep them standing. Earthquakes present a lateral, or sideways, load to the building structure that is a bit more complicated to account for. One way to to make a simple structure more resistant to these lateral forces is to tie the walls, floor, roof, and foundations into a rigid box that holds together when shaken by a quake.

The most dangerous building construction, from an earthquake point of view, is unreinforced brick or concrete block. Generally, this type of construction has walls that are made of bricks stacked on top of each other and held together with mortar. The roof is laid across the top. The weight of the roof is carried straight down through the wall to the foundation. When this type of construction is subject to a lateral force from an earthquake the walls tip over or crumble and the roof falls in like a house of cards.

Construction techniques can have a huge impact on the death toll from earthquakes. An 8.8magnitude earthquake in Chile in 2010 killed more than 700 people. On January 12, 2010, a less powerful earthquake, measuring 7.0, killed more than 200,000 in Haiti.

The difference in those death tolls comes from building construction and technology. In Haiti, the buildings were constructed quickly and cheaply. Chile, a richer and more industrialised nation, adheres to more stringent building codes.





Transport and Shipping

Helicopters and fixed winged aircraft are essential for the movement of people and goods.

Ocean transport is equally important with greater capacities and economics.

Then there is the issue of remote communities in rugged regions without adequate roads or airstrips.

The experiences and observations of the villagers at each location may provide insights for determining practical solutions.

Nutrition

We are to support the provision of basic human needs for all humanity in a way which is self sustainable, namely:

Clean air – this is the need for renewable energy supplies Potable water Nutritious food – without pesticides and weedicides Safe lodging

Emerging technologies may create employment opportunities within the villages.









CATS – Mentoring Australian Sunrise Innovations Queensland Australia Em: info@financefacilities.com



CAT'S SCIENTIFIC ENVIRONMENTALLY SUSTAINABLE INNOVATIONS:

- Administered technologies
- Communications



- Complementary Medicine
- Agriculture
- Food
- Housing
- Environmental
- Resources
- Education and Training















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Pascas Care Centre

A Pascas Care Centre in an emerging economy may facilitate and focus upon the following:

- Medical Clinicians with satellite broadband communication linkage to the core centres within the network.
- Focus on:
 - o Pre-natal / post natal services.
 - o Immunisation
 - o Dental
 - Eyes (embracing Sight for All)
 - o Nutrition
- General Practitioners / Physicians will be supported by visiting specialist:
 - o Obstetrics and Gynaecology
 - o Orthopaedics
 - o Dermatology
 - Oncology cancer treatment
 - Units will incorporate:
 - o Pharmacy
 - o Optometry
 - o Dentistry
 - o Physiotherapy
 - o Radiology

Day theatre capabilities will undertake a wide range of procedures.

A standard Ozone Therapy unit may have 12 beds / chairs available as well as the AIDs Serum unit may have available a further 15 beds / chairs. Treatments in both segments extends to a wide range of life threatening diseases.

Nutritional training for patients and their family will be facilitated through the attached training kitchen being adjacent to dining / training rooms – Pascas Cafe.

Having extensive office facilities and meeting rooms – Chaldi College – within the Pascas Health Clinic enables Pascas to support the introduction of new technologies to grow employment and skill levels for patients and their families. Chaldi College can be likened to a community centre for the dissemination of life style guidance, particularly living feelings first.

The agenda is to treat the cause, not the symptoms as well as bring gainful employment and prosperity into the community which Pascas will be.





PASCAS CARE CENTRE

PASCAS CARE CENTRE:

TOTALCARE HEALTH CENTRE & CLINICS

Primary agenda is the provision of capabilities for the expansion of:

- ✓ Support for dental services.
- ✓ Support for eye services.
- ✓ Support for inoculation programs.
- ✓ Support for family planning programs
- ✓ Support nutrition education programs.

Principal clinics to be established in the major centres of each province with provision for Tele-Medicine units to be deployed throughout the provinces. All clinics and tele-medicine units are to be supported by satellite links to the major Pascas Health Sanctuary centres of excellence in Australia and elsewhere.

Specific support will be directed to the management and treatment of HIV/AIDS, malaria and tuberculosis.

Pascas Care is bringing a focus to treating the cause rather than just treating the symptoms of disease. Pascas Care is about wellness and well being of humanity on a global basis.

PASCAS CARE is a holistic complementary health and alternative medicine clinic melding the excellence in allopathic (Western) medicine with the proven techniques of many traditional therapies, developed over aeons.

Hierarchy of Holistic Medical Services

Remote Areas:

- Telemedicine via call centres supported by the medical teams at each of the Centres of Excellence strategically located around the world. These Centres have alliances with world renowned medical units that will be accessed as and when required.
- Telemedicine Kiosk: Through satellite communications, the kiosk enables remote access to telemedicine diagnosis and treatment. The Kiosk features diagnostic camera, three lead ECG, retinal scanner, a camera for video-conferencing, video screen, vital signs measurement and a defibrillator. Should the Kiosk (being a laptop unit) be unable to communicate with the greater network, in built diagnostics are able to provide analysis of results.

Rural Areas:

- Medical Clinics may consist of as few as one Clinician. However, he/she has satellite broadband communication linkage to the core centres within the network.
- Third world remote clinics are to focus upon:
 - o Pre-natal / post natal services.



- o Immunisation
- o Dental
- o Eyes
- o Nutrition

Urban Clinics:

- General Practitioners / Physicians will be supported by visiting specialist:
 - Obstetrics & Gynaecology
 - o Orthopaedics
 - o Dermatology

Supporting units will incorporate:

- o Pharmacy
- o Optometry
- o Dentistry
- o Physiotherapy
- o Radiology

Integrative Medicine, which incorporate natural healing methods to improve and/or restore function. Integrative Medicine allows medical practitioners to combine successful natural and complementary therapies within the framework of orthodox medical training to provide better clinical results with less invasive therapies.

Thus, there is a progression in size and complexity within the satellite health and healing units that can be anywhere in the world, all being linked back to the Pascas Centres of Excellence.



Feeling Healing with Divine Love is the key!



http://www.pascashealth.com/index.php/library.html Library Download – Pascas Papers

All papers may be freely shared. The fortnightly mailouts are free to all, to be added into the mailout list, kindly provide your email address. info@pascashealth.com

HEALTH DOME:

The Health Dome needs to be viewed internally as a hologram.

Each health modality interconnects and is complemented and supported by each and every other health modality.

No one process or practice is an exclusive solution.

If you were to say that one practice or solution stands out above and beyond all others at the pinnacle of the **Health Dome** then that would be **Love and Forgiveness – Feeling Healing.**

The basic malady found in people is self-hatred generated from childhood repression and suppression. Self-hatred is the basic inner illness in all of us, but just how that self-hatred and non-acceptance of the self manifests is shown in our different character structures. As we work to understand our dynamics on a daily level, we can learn to accept ourselves through this process. Self-love is the greatest healer, and self-love also requires daily practice of living Feelings First.

The broad view of the healer encompasses the totality of the human being. In healing there is no separation between body and mind, emotions and spirit – all need to be in balance to create a healthy human being. The healer focuses on physical, psychological and spiritual malfunction. It is impossible to do healing without affecting the psychological levels of the personality. The more the healer understands the psychodynamics of his/her clients / friends, the more the healer will be equipped to help the clients / friends heal themselves.

Finding and understanding the initiating cause of an illness – childhood repression and suppression – is always a key part of healing.

The objective, from within the Pascas Care Health Dome, is to treat the cause much more so than just treat (suppress) the symptoms. Re-occurrence of many illnesses is due to the non-treatment of the cause.





INTEGRATED HEALTH MANAGEMENT INCORPORATES:

- Painting a health picture and the relevance of childhood repression and suppression.
- Understand the physical, psychological, emotional and behavioural symptoms of stress stemming from childhood repression and suppression.
- Interpreting case history of a client in a holistic way, building up a picture of the progression of any conditions, chronic or otherwise, from their past and even from their parents.
- Holistic Diagnosis.
- Understand the importance of good nutrition.
- Understand the role of exercise in staying healthy.
- General health management for practitioners.
- Understand the link between the feeling healing with physical and mental health.
- Learn how to self-heal feeling healing and teach it to others.
- Use the techniques you have learnt to achieve the life you want to have evolve for you.
- Putting the Theory into Practice.

The **Pascas Care Health Matrix** melds allopathy (western) medicine with complementary (alternative) therapies with continual blending of advanced practices and sciences, all contributing to the objective of treating the cause more so than the symptoms, with the patient being responsible for their own health management programs.

Pascas continues to draw on new practices, innovations, sciences, protocols to support health management programs and deal with diseases that are decidedly difficult to manage – all with a focus of delivery of services in remote and emerging economies.

All practices have something to contribute. It is **Pascas'** agenda to focus on those practices with the highest level of efficacy and appropriateness for desired health management programs.

Through the diagnostic streamer, patients / clients / friends are able to obtain an understanding of the health care programs available and resolve the program to be supported by the management of the streamer and his team.



CHALDI COLLEGE (WW) Limited

DELIVERY CONCEPT

Mobilising Souls and Minds for a Sustainable Future



EDUCATION DELIVERY DYNAMICS:

Advanced teaching systems and progressive curriculum will be assembled by localised administration for distribution by broadband internet to education centres (schools and advanced technology training centres).

Education centres in remote and rural locations will be self-contained with:

- Electricity supply sufficient for communications and supporting equipment, lighting and heating, and auxiliary needs.
- Clean water for drinking being supplied by on site water purification units. A continuous quality water supply to provide potable water and meet sanitation requirements.

- Communications with broadband internet capabilities to enable interactive delivery of education with central administration.
- Furniture and equipment to suit education delivery for all ages. Training rooms would be used for school-aged children during the day with the same facilities being used for adult education in the evenings. Training entails hands on practical experience to enable learnt systems to become routine employable skilled capabilities.

Central administration is to:

- Be equipped to distribute curriculum subjects and supporting products via broadband internet.
- Establish curriculum relevant for recipients with focus on the location of those recipients.
- > Introduce world leading systems and technology for the delivery and teaching of subjects.
- ➢ Focus on adult education programs that enable the development of new industries and employment within the recipient communities.

Via Urban Rural Technopath (URTh) and the Centre for Advanced Technologies (CATs), these are to support central administration with:

- Introduction to unique advanced technologies to enable the remote area education program to function efficiently and economically.
- Support central administration in the installation and application of new technologies.
- Make available by way of introduction any systems and technology that CATs becomes aware of that is conducive to the objectives of the program and the recipients.
- Support central administration with the commercialisation of relevant technologies introduced by CATs.

The program has two agendas; firstly, the delivery of education to enable students to graduate for higher education programs, be they children or adults:

- Literacy reading and writing (in their native language as well as English if appropriate).
- Arithmetic quantities, measures, currency, geometry.
- Sciences chemistry and physics.
- Life skills health and family.Etc. etc.

The second agenda is the development of new industries as well as a focus on sustainable development:

- Land use and agriculture.
- Water management.
- Light industry.
- ➢ Housing.

Via Urban Rural Technopath (URTh) and the Centre for Advanced Technologies (CATs) further support central administration with:

- Introduction to and making available unique technologies for employment opportunities within the communities being facilitated with the education services.
- > Technologies being introduced are to be aimed at alleviating problems within the area, be they supply, resource management, employment, etc.
- Management of the operations of the technologies.
- > Training systems to ensure the meaningful employment of such technologies.

At all times, the wisdom of the people within the region that these facilities and opportunities are to be introduced is to prevail. The program will best be served by central administration resolving which options and procedures to implement.

The aim is to deliver:

Communities of people with knowledge using technologies to deliver vibrant healthy villages.



Symbolically, the iceberg is a good representation of the undiscovered potential in all of us.



COMMUNICATIONS - NATIONAL COVERAGE - CHAP:







URBAN RURAL TECHNOPATH Pty Ltd (URTh) combines together the logistics and capabilities of all appropriate and technically proven corporations and professional services from across Australia and elsewhere for the objective of delivering sustainable infrastructure and commercial endeavours into emerging economies and communities around the world.

Economical Sustainable Communities incorporate:

- O Urban reconstruction.
- O Communications.
- O Water services and quality thereof.
- O Energy with a focus on renewable.
- O Education particularly into remote communities.
- O Adult training in new industries and technology.
- O Infrastructure development for the delivery of potable (drinking) water.
- O Infrastructure development for management of sewerage.
- O Employment of sewage sludge for the delivery of high performance organic fertiliser.
- O Building materials for the provision of low cost housing with quality.
- O Introduction of industries that provide substitutes for imports.
- O Introduction of industries that provide value adding opportunities for natural resources.
- O Health education programs and facilities.
- O Health technologies with a focus on major health problems and local issues.
- O Renewable energy programs with a focus on remote area services.
- O Transport systems roads, rail, as well as low cost peoples' car.
- O Resource discovery, management and development.
- O Sustainable management of the environment.
- O Agricultural programs for higher sustainable yields of quality products.
- O Agricultural programs for the introduction of new crops and systems.

- O Value adding and introduction of export products into the agricultural industry.
- O Higher employment and management of food greater percentage of food to the consumer.
- **O** New technologies and industries being introduced from the many new innovations available through our community of innovators.

Everything is Interconnected





PASCAS WORLDCARE recognised Hierarchy of Needs, structured upon Maslow's theory.



URBAN RURAL TECHNOPATH CAPABILITY PLAN

OUR STRATEGIC DIRECTION:

- To employ the core Australian construction engineering and agricultural businesses with operational excellence by facilitating their expertise, leadership and growth in international operations and to foster and develop international strategic alliances and partnerships to provide sustainable improvements in standard of living in developing and emerging countries and communities.
- To further invest in adjacent and complementary market segments such as services, maintenance and manufacturing businesses to provide sustainable economic base for suffering and emerging communities for a better world.
- To train and educate the key people in the areas we work to ensure continuity and succession and a lasting betterment in these communities.

OUR VALUES

- Our strength is derived from the integrity, reliability, safety, enthusiasm and commitment of our people, and of those who we come in contacts with, who are our most important asset.
- Teamwork and mutual trust is at the heart of our successful client / family relationship. It provides the environment for open communication, a proactive approach and a common goal.
- Innovation differentiates our business in the marketplace. We continuously improve all that we do.
- The quality of every project is an enduring reflection and benchmark of our commitment to client service and technical excellence and an innovation for betterment in the community.

ABILITIES

To leverage resources, technical support in fields of building (including demolition and waste recycling), rail, civil, marine, power, mining, water and services provider, facilities management. To contract companies well placed to roll out components of the global strategy of URTh (Urban Rural Technopath) throughout Asia Pacific Region and other global regions where we may be invited.

OUR COLLECTIVE EXPERIENCE INCLUDES

- Public infrastructure.
- Communication.
- Education.
- Health and science.
- Health Care Centres
- Hospitals.
- Retail.

- Wholesale.
- Commercial and Industrial.
- Hotels and resorts.
- Tourism.
- Highways, Railways, Bridges, Road network.
- Dams.
- Water treatment plants.
- Waste water treatment plants.
- Municipal waste management.
- Reticulation and transfer systems.
- Aquifer Storage and Recharge.
- Stormwater Management.
- Irrigation.
- Re use systems cement, steel and timber recovery.
- Land Use Management.
- Defence.
- Multi unit residential.
- Restoration and fit-out.
- Manufacturing Facilities.
- Landscaping.
- Forestry.
- Mining.
- Bulk Materials Handling.
- City building, etc.

WE AIM TO

- Challenge conventional standards.
- Stay abreast of and introduce the latest systems and technologies.
- Work together with our clients in a spirit of teamwork and cooperation.
- Maximise the training and education of the local people to carry out the current projects and carry on the future works.

PERFORMANCE BUILT ON TRUST

- Companies available have all carried out major landmark building, infrastructure projects and offer building and development services across all market sectors and customise delivery method to best suit the needs of the clients and the project. The range of delivery methods includes development partner, construction manager, design and construct and traditional head contractor.
- With world class management systems, excellent relationship with sub contractors and suppliers and enviable track records for delivering projects in remote areas as well as cities, the Companies have delivered time and time again.
- Flexibility, integrity and innovation ensure a quality job from start to finish. This focus is combined with the commitment of long serving staff. For example:

For rail reconstruction team's of experienced rail personnel and innovative project managers, backed by an extensive range of construction and maintenance equipment, can deliver any size project on time and within budget. The company would be a principal service provider


for track construction throughout Australia, New Zealand and South East Asia with years of experience. It would also be a world leader in the design and manufacturer of pre-stressed concrete sleepers and associated factories.

- In all areas, the combined experience of long serving staff along with plant and equipment resources, allow the various companies to offer feasibility; design and budget estimates through to "Turnkey" delivery. Harnessing the skills and experience of highly trained staff enables the companies to offer alternative solutions guaranteeing client enhanced quality, cost savings and the best technology available with the earliest delivery.
- Through a wide-ranging experience in a mix of remote areas and urban, civil and infrastructure works, URTh with partners has developed strategic management processes for community and environment management, ensuring URTh access to state of the art technologies and abilities to select the best path with sourcing of the most appropriate companies available within Australia for delivery of:
 - ✓ Infrastructure.
 - ✓ Manufacturing plants.
 - ✓ Building systems and materials.
 - \checkmark Services.
 - ✓ Facilities.
 - ✓ Property, asset and facilities management.
 - ✓ Land management.
 - \checkmark Tourism industry structures and strategic plans.
 - ✓ Resource management, assessment and development where appropriate.
 - ✓ Good Governance Systems.
- Best practices:
 - ✓ Forestry, horticulture, agriculture, animal husbandry, stock breeding, herd enhancement.
 - ✓ Food integrity, bio-security, environmental and farm management, range land and wildlife systems.
- Strategically adding value to capital investment decisions and whole of life cycle costings and trade off. Assessing the status quo and selecting the best way to make a difference.
- All leading to asset enhancement, wealth creation for both public and private sector clients aiming for a sustainable future with an enhanced economy and betterment of community life.





INTRODUCTION

The purpose of this document is to provide an outline of the strategy and skills to be involved in the proposed project for the rebuilding of communities and ongoing growth in emerging countries and communities. We NEED to develop Local Companies which are linked to the community and just not focus on the short-term delivery of a Project as the world will keep on going and we need to develop the local skill base.

Subject to acceptance of the recommendations contained here in, it is considered that the initial step is the completing of a detailed strategic plan, operating structure and schedule covering implementation of programs.

PROJECT STRATEGY

The project is anticipated to include the restoration of essential public infrastructure to meet immediate needs for education, health, safety, sanitation, transport and communications for the community. Strategic planning and implementation of programs to cover the longer term community needs is also required. These long term programs will be based on sustainable development, long term viability and will be reliant on continuing community involvement and self management.

We see the rebuilding of local communities and their ongoing growth as having three stages, namely:

- Short term restoration or new public infrastructure and the completion of community audits.
- Strategic planning and community engagement.
- Program delivery, community training and community handovers.

Stage 1

Immediate action will achieve restoration of water, sewerage, power, roads, bridges, communications, health and education facilities.

This will be a short term program to bring relief to the current critical shortage in community services. Extensive community audits of existing services and facilities is also required, together with a strategy to immediately implement priority items.

The identification and planning of community audits is anticipated to take around three months. Restoration and/or new works will proceed beyond Stage 1. Critical works having started immediately.

Stage 2

The strategic planning for sustainable longer term community programs as well as facilities and infrastructure development necessary to position communities for future prosperity and self management.

This will involve considerable liaison and inputs from the community (at national, state, county and local levels), and the development of proposals for sustainable programs and facilities to meet agreed community needs.

Stage 3

The implementation of agreed community programs resulting from works completed in Stages 1 & 2 will be staggered. Some key projects may be recommended for implementation during the later part of Stage 1 due to their critical importance to the immediate needs of the community. Others will rank in terms of their importance. Maintenance of longer term frameworks in a number of sectors will be essential.

It is noted that an initial Health Survey as well as Education Survey and building the framework for community engagement are deemed to be of sufficient importance to be elevated to early program initiatives and commenced in Stage 1.





STAGE 1 INITIAL SURVEY & REPORT

The initial community audits are to be carried out to determine the status of public infrastructure such as water, sewerage, power, roads / bridges, communications, health, education, etc. The extent of works and priority given to restore or establish specific necessary facilities will also be outlined. Some items may be identified for immediate commencement. This will deliver some relief for communities.

It is anticipated the initial community audits will take approximately three months to complete. The work will be carried out under the direction of Urban Rural Technopath Pty Ltd by Project Managers responsible to Urban Rural Technopath Pty Ltd (URTh's chairman director Peter Shepherd). Urban Rural Technopath will be assisted by lead contractors to engage and projects manage the necessary personnel for this stage.

The initial community audits will also form a database from which the later strategic planning and preparation of Master Plans for the various community programs to be developed in Stage 2.

The following skills will be engaged for the Stage 1 and identification of the scope of works:

Item	Team Leaders
Program Director	CEO
Group Communications Officer	
Project Manager	
Field Director	
Community Engagement & Ownership	
Water Services	
Sewerage Infrastructure & Process	
Communication Infrastructure	
Roads & Bridges	
Health	
Education – schools – technical – university	
Treasury	
Industry Development	
Urban Reconstruction Surveying	
Inter-Department Land Information	

Affordable Housing & Urban Design Engineering Infrastructure Ground Water Management Power Generation & Reticulation Renewable Energy Urban Reconstruction Workforce Training Planning & Governance Natural Resource Management and Land Use Forestry & Agriculture Fisheries / Aquaculture Management Mining & Resource Development Support Staff

It is strongly recommended that both community health services and community consultation and ownership should be included in the initial survey. A lead specialist and 3 assistants may be required to carry out this work.

STAGES 2 & 3 KEY PERSONNEL

Key Personnel will be engaged during Stages 1 & 2 to be responsible for the disciplines listed.

Please note that all considered personnel have significant expertise in their field of experience, and many are pre-eminent in their field. Many also have national and international experience in both the public and private sectors. Further resources will be allocated to each Team Leader as necessary as the project develops.

PROJECT STRUCTURE

International agencies and governmental agencies may be involved depending upon the size and complexity of the issues to hand. The anticipated project structure is expected to be as follows:



DETAILED BRIEF

On approval in principle to the Outline Brief, it is recommended that the lead contractor be requested to prepare a Detailed Brief for the project.

When ever assessing a Project you prepare a List of WANTS based on input from all that is the users / technical and the beneficiaries;

Armed with the WANTS LIST you define a NEEDS List;

Once you have the NEEDS List you look at the WANTS which were not included as you may wish to add WANTS;

The Final NEEDS List become the Specification for the Feasibility Study.

The Feasibility Study when completed delivers a Document based on a Turn-Key operation including Quarterly Advance Payments which reduces the need for the winning Contractor to approach the Bank to commence the Project as the Project Funds are held in the Bank therefore eliminating the barnacles and multiple Bank compliance and Bank Fees.

The Detailed Brief will include but not be limited to the following.

- Background
- Project description
- Intra government communications
- Authorisations to carry out works and services
- Community ownership liaison and coordination
- Mission Statement
- Key Objectives
- Scope of Works
- Philosophy underlying operations
- Program Strategies
- Staging of programs
- Resource scoping
- Involvement of local community
- Packaging of work
- Project Team Briefs
- Project Team Leaders
- Project Management Structure
- Selection and Appointment of Consultants
- Project Structure
- Project Management Structure

- Approval / Reporting mechanisms
- Community Training and Handover strategy
- Cost Planning
- Implementation Strategy
- Implementation Teams
- Selection & Appointment of Contractors
- Selection and Training of implementation workforce
- Supervision and reporting of implementation activities
- Project Control and Reporting
- Project Financial Analysis and Management
- Financial Control and Reporting
- Appendices
 - Curriculum Vitae
 - Preliminary Gantt Chart
 - Supporting Data

It is anticipated the detailed brief will form part of the work.

ACCEPTANCE OF OUTLINE BRIEF

Please advise whether the outline brief provides sufficient direction and structure to move forward. If so we accept the next step is to proceed with production of a detailed brief as outlined herein. Alternatively, please advise which areas of the outlined brief require amendment or further development.

LOCAL INOLVEMENT

Overarching desire is for the local community to participate as strongly as possible in the conceptualisation of the works to be considered and in the delivery of these works. This is an opportunity for the community in many regards. It is an opportunity for the creation of local skills to be further employed in the many opportunities that unfold from these economic developments. It is also an opportunity for the local community to take ownership of these endeavours and bring about long term financial stability and sustainability of the various aspects of these works for the enduring benefit of the community.





URBAN RURAL TECHNOPATH Pty Ltd is all about Economical Sustainable Communities:





URBAN RURAL TECHNOPATH Pty Ltd initiatives supports URBAN RENEWAL:

URBAN RURAL TECHNOPATH Pty Ltd initiatives supports RURAL RENEWAL:



URBAN RURAL TECHNOPATH Pty Ltd initiatives DEVELOP RESOURCES:



URBAN RURAL TECHNOPATH Pty Ltd initiatives DEVELOPS AGRICULTURE:



SOIL = ABIOTIC parts of soil + BIOTIC parts of soil







URBAN RURAL TECHNOPATH Pty Ltd is all about a sustainable industrial future:



City Water Supply, Sewage, Drainage & Solid Waste optimisation of asset strategy

Consulting Engineers are to submit an Optimisation of Asset Strategy to provide Professional Engineering Services.

This proposal is for a modelling and concept study that includes:

- Central sewage facility.
- Decentralised sewage facilities.
- Conversion of sewage to organic fertiliser.
- Conversion of sewage to gas.
- Drainage garbage collection system.
- Garbage collection system.
- Conversion of organic and plastics garbage to gas.
- Sewage and garbage gas electric power generation.
- Waste water disinfection.
- Waste water recycling.
- Tube well requirements.
- Water supply.
- Co-generation.
- Energy pricing.
- Energy distribution.
- Hot water production.
- District cooling.
- Carbon credit trading.
- Future planning.

BACKGROUND

Most Cities' water supply system is being contaminated by human sewage.

The strategy is to eliminate this pollution and in the process convert the pollution to a resource.

The preliminary analysis allows for waste water disinfection only. Desalination would be considered as part of the study.

DESIGN PHILOSOPHIES

"OASIS" INTEGRATED ASSET STRATEGY

The opportunity exists to collect sewage and garbage, which can be used to generate revenue. This revenue can then be used to fund part or all of the recurrent costs of the project. While it is not normal to provide the following information in a proposal we feel it is paramount to emphasise the benefit of the Optimisation strategy to the City and to the Nation.

The "OASIS" approach is an acronym for "Optimisation of Assets Strategy and Integration of Services".

The optimum strategy requires to be developed at the Model Strategy Phase. This will have a major influence on the initial capital investment and subsequent operating cost. It is not feasible or appropriate to proceed direct to Concept Design as this implies the immediate selection of one system, without fully evaluating the cost / benefits of each of the options developed within the Model Strategy Phase.

The approach includes a process of Pre-planning and Concept Designs during which the Model Strategy Analysis is undertaken to ensure proper feasibility analysis is completed. In this instance, a range of concepts can be developed to meet agreed Project Philosophies. The Client functional requirements will form the basis of the concept requirements and will not be compromised.

An approximation of the financial benefit of producing electric power and organic fertiliser from sewage and organic garbage can be developed. This is not to be read as the optimum solution since decentralised / centralised plants and the combination of power production and organic fertiliser production is to be fully assessed during the study.

The complete study is to take into account:

- Garbage collection and operating cost.
- Sewage collection and operating cost.
- Procurement of land.
- Electric power distribution.
- Electric rate escalation.
- Infrastructure.

It could be argued that some of the above are necessary for the benefit of the population regardless of waste revenue stream infrastructure cost. These issues can be dealt with in detail in the study.

It is obvious however, that currently the city / community may be faced with a substantial loan for the services currently being implemented. The Optimisation Strategy will provide a solution to achieve a good portion of the funds required for that work.

There will be a benefit identified in reduced medical costs due to a cleaner environment and clean water.

URBAN RURAL TECHNOPATH Pty Ltd 🎉

Urban Rural Technopath Pty Ltd (URTh) provides multidisciplinary and comprehensive professional services that enables new technology installations and health sciences in remote areas to succeed.

URTh is to rationalise existing resources within the remote community, its needs, and the opportunities available through the extensive range of innovations and technologies that have been assembled by URTh's companion entity, Centre for Advanced Technologies (CATs).

Given consensus on the program to be initiated, URTh is to project manage the infrastructure development and the installation and commissioning of the appropriate new technologies and industries for the remote community and region.



CATsberg symbolically is a good representation of the undiscovered potential in us all.

Most often it takes another person with an uncluttered but observant mind to see what has escaped many of us. A breakthrough concept or perhaps new approaches otherwise hidden from our perception.

It is common to reach for the telephone to call an associate for an opinion. Less common is the ability to feel completely at ease with a stranger who has our best interest at heart.

CATsberg is our symbol to introduce to you that the Centre for Advanced Technologies (CATs) is here to share the journey through your business and personal life in a way that can make a difference to you and the way you feel as you grow your intellectual property.

PASCAS CARE CENTRE will facilitate the introduction of new technologies into communities where PASCAS has facilities. PASCAS will make available from within its regional premises, offices, communications and training facilities to enable growth of employment and prosperity to be accessible to its constituents, be they patients / friends or local regional residents. New technologies will be introduced through the separate management of URBAN RURAL TECHNOPATH who will draw on new innovations from around the globe, such as CENTRE for ADVANCED TECHNOLOGIES.



BUDGET – PACIFIC BASIN NATIONS

The economics of these initiatives are long term. Initially the recurrent costs will need to be funded from the fund pool delivering the facilities. Somewhere between five and ten years should see each facility progress to being self-funding. The users of the services will always be invoiced for what is being provided to them. Those who can afford to pay or contribute towards the costs will be asked to do so. There may be a grace period of several years where fees are fully subsidised by the fund pool, then the ratio of contributions from users will progressively increase until the facility is self funding. When self funding is achieved then the facility would become autonomous – should it so want to?

The allocation to communities of funds for programs

Globally consider that US\$1,000 is available per man, woman and child. For affluent communities where needs are non-critical then the allocation may be US\$500 per person or lower. For communities that are impoverished then the allocation could be as high as US\$2,000 per man, woman and child. In this manner the program for a region can be governed by a predetermined but flexible gross allocation.

Thus the overall program budget for the Pacific Basin Nations with a population of 11.5 million may be a gross budget of US\$23 billion. That is equivalent to about 66% of the gross domestic product for all the nations within the scope of this program. The program may take around five years to fully deliver – it will have a dramatic impact upon the economics of all communities – a very positive one!

Auxiliary projects to supplement the community programs is the establishment of a complex training hospital within Papua New Guinea of 300 beds with a similar supporting hospital in south Queensland of a further 300 beds. Regional 100 bed hospitals would be established in large population catchments. People and freight shipping strategically located throughout the Pacific Basin is required. An augmentation a Flying Doctor (Pacific Basin) services of up to ten aircraft. The establishment of a university campus to accommodate one million students throughout the world but firstly focused upon the Pacific Basin. These programs may represent a need for US\$7 billion bringing the funds required to US\$30 billion.

Diversity of facilities

A village representative may become the first aid officer for this small community through appropriate training and kitting out with supplies, equipment and communication. Education through internet may be introduced with the first aid officer. Then at the other end we will have a major training hospital attached to a university with a global campus. In between will be numerous health care units and education facilities. Peppered throughout all of these will be new technologies introduced with appropriate funding to enhance the potential for the people. Amongst all of these elements will be introduced Living Feelings First and the potential through Feeling Healing.

Nothing major, some may first contemplate, but this is an evolutionary change in the direction for humanity. All of humanity will be offered these possibilities and all of humanity will eventually undergo their Feeling Healing.

The reason why these opportunities for humanity have come about is the ending of the Rebellion and Default.

Beacons of Light by Di Skelly Heron



perceived truth MoC 880 - relative truth potential MoC 1,480