ANNUAL REPORT

Jul-2021 to Jun-2022

Cat-D Hospital Dogar, Kurram





CONSULTANCY SERVICES FOR PROVISION OF HOSPITAL SERVICES AT HEALTH FACILITIES (CATEGORY-D HOSPITALS) IN MERGED DISTRICTS OF KHYBER PAKHTUNKHWA THROUGH PUBLIC-PRIVATE PARTNERSHIP

Medical Emergency Resilience Foundation (MERF)

www.merf-pakistan.org

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1. Executive Summary

The Government of KP under its initiative to provide quality healthcare services to the public under its health policy has engaged private sector organizations in health service delivery through KP Health Foundation (HF) on Public Private Partnership Model. The KP-HF is mandated to promote and enable the development of innovative health care delivery models to achieve policy objectives of Government of Khyber Pakhtunkhwa to improve coverage through various means of Public Private Partnership for health care service delivery.

Under this initiative, 06 hospitals located in Newly Merged Districts (NMDs) were outsourced to private sector organizations on PPP model through competitive bidding process undertaken by KP-HF. CAT-D Hospital, Dogar has been outsourced to MERF along with 03 other hospitals in NMDs under this initiative. The contract for the hospital which requires operationalization, management and provision of healthcare services was signed on June 26, 2020 as part of tripartite agreement with KP-HF and Health Department, KP.

NMDs (Ex FATA) have been badly hit by terrorism in last two decades. District Kurram suffered the same as most part of merged districts. Health Facilities along with Government offices, markets, telecommunication centers, homes and parks have been equally affected. Since the hospital has been handed over to MERF, it has carried out various measures including renovation and rehabilitation of the infrastructure, provision of the Solar System, deployment of required HR, repair and installation of existing equipment, its, provision of necessary medicines, consumables and equipment. Electronic Medical Record System (EMR), infection prevention (IP) & healthcare waste management (HCWM) system, M&E and quality assurance mechanisms and administrative measures have been implemented for smooth operations of the hospital and provide quality healthcare services to the local population.

During the reporting period number of OPD, in patient care and surgeries increased compare to previous year. 61,624 OPD consultations (general/specialist), 5,897 inpatients, 701 women delivered clean/safely, 2,472 ANC & PNC, 2,145 surgeries including 180 major and 57,776 investigations (51,356 labs, 3,886 x-ray, 2,224 ultrasounds and 310 ECGs) were some of the achievements.

A 20 kg/hour semiautomatic incinerator has been installed and made functional, relevant staff trained on its operation and use. Lack of continuous supply of electricity and low voltage were the main challenges which has affected the smooth functioning of the hospital services

2. Summary of HMIS Data



Medical Staff

05 Specialists and 11 Medical Officers including 02 Female Medical Officers 45 Nurses and Paramedics are providing services in the hospital.



Accident & Emergency 17,110 patients treated in casualty department including 56 cardiac emergencies, 122% increase as compared to the previous year.



OPD Consultations

44,514 OPD Consultations (62% General & 38% Specialized OPD). OPD consultation increased by 45% as compare to the previous year.



Institutional Deliveries

701 Clean and safe deliveries conducted including 33 c-sections during the reporting period, 149% increase as compare to previous year.



MNCH Services

2,472 pregnant women received antenatal and postnatal care, 189% increase as compare to the previous year.



In-Door Services

5,897 patients admitted in various IPD departments. 304% increased as compare to the previous year.



Surgeries

2,145 Surgeries conducted including 180 Major surgeries, 27% increase as compare to the previous year.



Pathology

51,356 lab investigations conducted, 234% increase as compare to the previous year.



Diagnostics

6,420 Diagnostics services including (3,886 X-rays, 2,224 U/S and 310 ECG) provided, 126% increase as compare to the previous year.



3. Service Delivery Data Analysis

With technical inputs along with provision of qualified and experienced Human Resource, Medicine and consumables, equipment, robust logistics support and monitoring of project activities; MERF successfully improved the service delivery at Cat – D Hospital Dogar during reporting period to a significant level as compared to the established baseline.

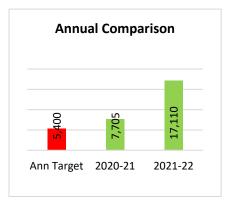
a) Accident and Emergency (A&E) Unit

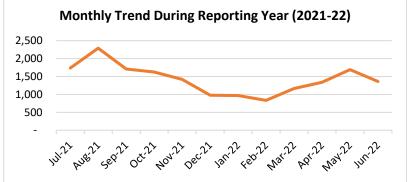
The emergency unit at Cat-D Hospital, Dogar offered quality, uninterrupted and round the clock services through trained and qualified staff. During the period under consideration, 17110 were treated. The A &E cases were mostly comprised of stroke, History of Fall and Trauma, Acute infections, dog and snake bite, ischemic heart diseases, fractures, firearm injuries, poisons and road traffic accident etc. Patients with serious complications requiring advanced investigations and treatment at tertiary care level hospital were referred to Sadda, Kohat and Peshawar.



Dressing in minor OT

Below Graphs shows annual progress and monthly trend of A&E caseload.





b) OPD Consultations

MERF continued to provide general and specialized OPD services during the reporting period and remarkable increase has been observed in the overall OPD cases. A total of 44,514 (Males: 44% & Females: 56%) OPD cases received both at general and specialized clinics and out of these 19% were children under five years of age.

62% patients attended general OPD clinics and 38% patients attended specialist clinics at Cat-D hospital, Dogar. Hospital is providing specialist clinic services in the

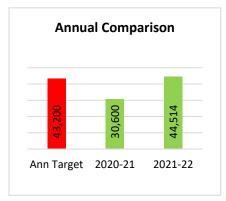


Patients are getting registered at CRP counter



departments of Medicine, General Surgery, Pediatric, Obstetrics and Gynecology and Dentistry.

The graph below shows monthly and annual progress of the OPD caseload.





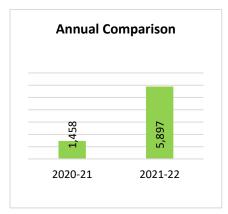
c) Indoor Patient Services

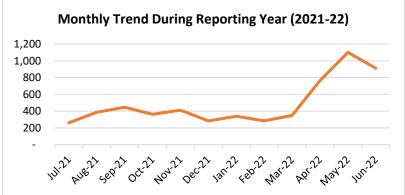
During the reporting period, a total of 5,622 patients were admitted at various indoor wards and received treatment under following specialties; Internal Medical, General Surgical, Obstetrics/Gynecology and Pediatrics. Indoor wards are sufficiently equipped & staffed to provide round clock services to the admitted Consultants/Specialists conduct morning & evening rounds to closely supervise the management of the admitted patients. Despite of the harsh weather conditions in the reporting period, proper insulation of the Patient is getting treatment at male medical ward in wards along with adequate heating system is ensured to provide a comfortable environment for the patients.



Cat-D hospital Dogar

Below graph shows monthly trend and annual progress of inpatients admission in the hospital.





d) Maternal and Neonatal Child Health Services (MNCH)

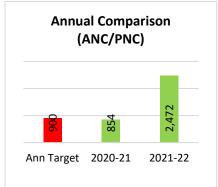
The hospital provided quality MNCH services including Comprehensive Emergency Obstetric and Newborn Care (CEmONC) services through trained and qualified staff including gynecologist, female medical officers and nursing staff, LHV's and trained birth attendants. The MNCH unit is equipped to comply with MHSDP standards. Ante and postnatal care clinic, supported by a 24/7 Labor Room and round-the-clock availability of obstetrical surgical team cater planned and emergency complicated obstetrics cases including C-sections & Hysterectomies.



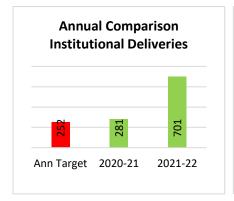
Newborn receiving treatment at NICU

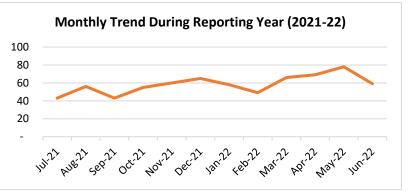
During the reporting period the unit provided 2,472 antenatal and postnatal checkups to pregnant and lactating women, conducted 701 clean and safe deliveries. Out of the total deliveries, 664 were Normal Vaginal deliveries (NVDs), 04 assisted deliveries and 33 complicated cases were managed by Cesarean Section.

Below graph shows monthly trend and annual progress of MNCH Services









e) Neonatal Unit

Neonatal care unit at Cat - D Hospital, Dogar, is equipped with baby incubators, patient monitors, phototherapy machines and radiant warmers. Qualified and trained medical officers and nursing staff has been deployed and providing round the clock services for the admitted critically ill children under the supervision of Paediatrician. In the reporting Period 144 children have been admitted to the neonatal care unit for newborn complications, Pneumonia, Fits, Bronchiolitis, Sepsis, ARDS, delayed cry, hemorrhagic disease, Jaundice etc

f) Immunization

During the reporting period, 6,887 vaccination shots were provided to children under 5 years and women of reproductive age for vaccine preventable diseases included in the Expanded Programme on Immunization (EPI). 577 children have been vaccinated against BCG, 2,242 against Polio, 2,133 against Penta, 604 Measles and 1,331 women received TT vaccination as per EPI schedule in the reporting period.

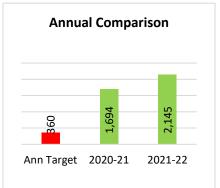


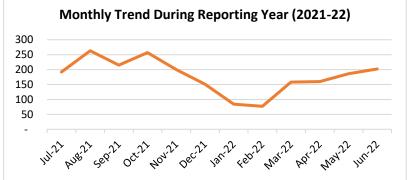
EPI technician vaccinating child at Cat-D Dogar

g) Surgical Services

During the reporting period, the health facility performed 2,145 (180 Major and 1,965 minor) surgeries under various specialties. The major surgeries conducted include laparotomies, C - Section, Appendectomy, Inguinal & Umbilical Herniorrhaphies, Abscess drainage under general anesthesia, amputation etc. Most of the minor surgeries were D/D of diabetic foots, imbedded nails, trauma, pig bits wound stiches on local anesthesia and RTAS (minor). All surgeries were conducted under strict Infection Control and under the supervision of a Surgical team performing Caesarean qualified Anesthetist.









h) Dental Services

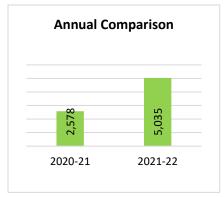
Well-equipped dentistry unit under the supervision of a qualified dental surgeon and experienced staff, continued to offer free of cost dentistry service to the local population.

During the reporting period, 5,035 patients availed dental services, among which the major cases were surgical tooth extractions, fillings, Root Canal Treatment and scaling services.

Patients are routinely screened for HIV, hepatitis B virus and hepatitis C virus before dental procedures



Dental technician making x-ray image of young female patient teeth





i) Diagnostic Services (Lab & X-Rays)

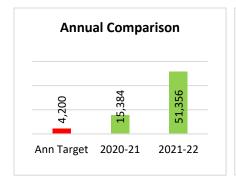
Cat-D Hospital, Dogar, offers round the clock free of cost diagnostic services to patients attending OPD Clinics, A&E department and admitted in indoor units. The diagnostic services remained fully functional during this period. The hospital laboratory is equipped with all the necessary equipment and other lab items as per MHSDP. During the reporting period, 51,356 Lab investigation and 3,886 x-rays done.

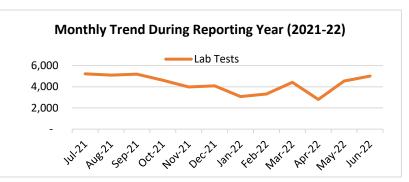


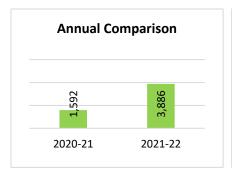
A well-functional clinical lab at Cat-D Dogar

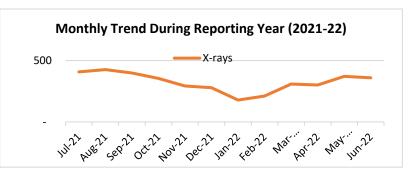
Monthly trend and annual progress of diagnostic services can be seen in the below graph.











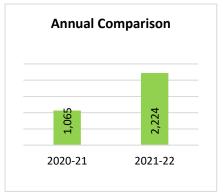
j) Ultrasound services

Cat-D Hospital, Dogar, offered round the clock free of cost Ultrasound services to patients attending OPD Clinics, A&E department and admitted in indoor units through qualified and well experienced staff. Ultrasound services were available for both obstetric as well as for general patients requiring information for diagnosing and treating a variety of diseases and conditions The Ultrasound services remained fully functional during this period and 2,224 Ultra-sonographies (general and obstetrics) were performed including 2,216 in OPD and 08 in IPD.



Doctor performing ultrasound on a young boy

Monthly trend and annual progress of ultrasound services can be seen in the below graphs.







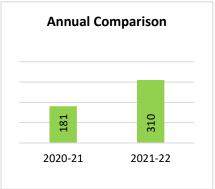
k) Electrocardiography (ECG)

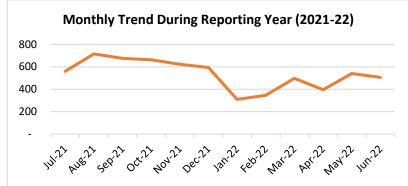
Cat-D Hospital, Dogar, is one the few hospitals in the newly merged districts providing Emergency Cardiac Services to the patients presenting with chest pain, shortness of breath or palpitations. An ECG is often used alongside other tests to help diagnose and monitor conditions affecting the heart. During the reporting period the Hospital continued to provide ECG services through qualified and trained staff for patient requiring the services and performed 310 ECG tests.



Male nurse is performing an ECG of a patient

annual progress and monthly trends of ECG tests can be seen from the graphs below.





1) COVID-19 Services

Cat-D Hospital, Dogar, offers both COVID-19 Sampling and vaccination facility to patients of the locality. In order to facilitate the patients coming with symptoms of COVID-19 to the hospital as well as to ensure protection of the healthcare workers, a separate COVID-19 Counter was established. During the reporting year, on average 20 samples of the suspected COVID-19 cases has been collected and sent for PCR.

During the period COVID-19 vaccination center was fully functional with two dedicated staff, which have administered 19,684 Covid-19 vaccination (11,112 Dose 1, 7,226 Dose 2 & 1,346 booster doses). While COVID -19 sampling point was also functional during the period from patient attending OPD. Strict infection prevention protocols are being implemented at Screening point, Triage, Quarantine, Isolation and HDU wards in the hospital.







m) Vertical Programs

Malaria Program

During the reporting year, 2,529 suspected malaria patients visited the Hospital and among them 204 were confirmed with microscopy.

Tuberculosis Program

Among the patients visiting the Out-patients Department, 33 were suspected of Tuberculosis. 2 patients were confirmed with microscopy.

Hepatitis B&C and HIV Screening

12,399 patients were screened for Hepatitis B & C and HIV and among them 66 cases of Hepatitis B and 57 cases of Hepatitis C were positive with RDTs and have been referred for confirmation by PCR method.

4. Pharmacy

Cat-D Hospital, Dogar has a central warehouse and two satellites pharmacies, one each for out-patient department and accident & emergency unit and provide free of cost medicine to all the patients visiting hospital. Major bulk of medicine supplies are stored in the main warehouse, from where this medicine distributed to the satellites pharmacies on demand. All the pharmacies and warehouses are connected through Medicine and logistics management information system (MLMIS), in order to track inventory, through which stock can be easily managed. MLMIS prevent stock outs and expiration of drugs. Complete record from preparing purchase requests to end user consumption is available with few clicks. Warehouse and all the pharmacies use standard pharmacy protocols i.e. Temperature record, physical stock counts, pest control etc.



Standard warehousing, supply chain and logistics management has been established and made operational at the Cat – D Hospital, Dogar. All existing equipment, supplies were properly counted, newly received items have been properly documented and standard protocols have been developed to ensure asset safeguarding. All the medical supplies such as medicines and consumables are stored and maintained according to the approved standards. All procured medicine are stored in the main warehouse, and proper system of documentation is adopted.

5. Infection Prevention (IP) & Healthcare Waste Management (HCWM)

MERF through its detailed IP policies, procedures and systems in place ensures that all the hospital floors, equipment and furniture are kept clean and safe for patients, attendants, visitors and staff. Strict policies and protocols are in place for disinfection and cleaning of medical equipment, special areas like OT, Emergency Ward, Labor Room, Minor OT, Laboratory and other areas in the hospital. MERF maintains a team of cleaners at the hospital who are trained and equipped with sufficient tools and materials to ensure cleanliness of the hospital all the time.



Weekly deep cleaning of hospital is in progress

MERF has implemented healthcare waste management policies that ensures efficient hospital waste management with segregation of waste into infectious and non-infectious waste through five color coded bin system. The concerned staff are trained on segregation of waste at source, collection, storage, transportation and safe disposal. In the reporting period incinerator was repaired and function in use.

6. New Initiatives

Installation of incinerator

A fully automated and environmental friendly incinerator has been installed for disposal of medical waste as per HCWM Rules 2005/National and international guidelines (Environmental Protection Act, 1997 – XXXXIV of 1997).

7. Monitoring and Evaluation

MERF's Monitoring and Evaluation system mainly comprises of the following four components.

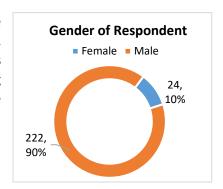
Achievement against set Indicators

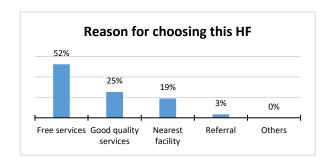
Cat – D Hospital, Dogar, is among the few hospitals in the newly merge districts of KP implementing EMR system replacing the traditional paper based DHIS system. EMR provides accurate, up-to-date, and complete information about patients. The system has the feature to collect and store information about a patient's health history, such as diagnosis, medicines, investigation, and treatment plans. As EMR provides accurate and complete data at any time helps the hospital management to keep an eye over the progress of key performance indicators. Achievement against set indicators has been discussed above in detail.

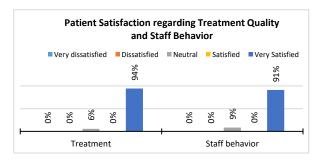


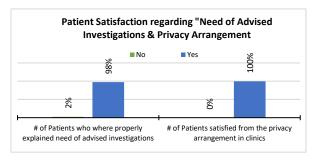
Patient Exit Surveys

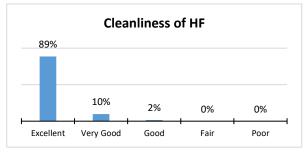
A total of 246 patients/attendant of age 15 years or above were interviewed to determine the satisfaction levels. Among them 222 were male and 24 were female respondents. The respondents showed an overall satisfaction level with 94% respondents being satisfied from the treatment quality and 91% with staff behavior. The finding regarding other parameters is given below.











Complaint Response Mechanism

CRM is a complaint and proposal consideration mechanism that provides accessible channel for submission of complaints and feedback regarding services provided at the Cat-D Hospital Dogar. MERF considers patients and their attendants' complaint seriously and aim to respond timely. During the Period 11 complaints were received and all were addressed with satisfaction of the community and the complainer.

8. Capacity Building Workshops & Presentations

During the reporting arranged 11 capacity building workshop and CME sessions where participants were briefed and oriented on the contemporary topic s—Dengue Case management, new born resuscitation Neonatal intensive care unit management, Covid-19 case management, Hypertension management, Mortality morbidity orientation meeting, case discussions of various surgical disorders, Mood Disorder and infection prevention.









Monthly meeting of THQ DOGGAR staff

9. External Monitoring and Visits

During the reporting year, a number of Govt. officials visited the hospital. These delegations were received by Health Manager and presented brief history of hospital and services available during the hospital visit. Various Government, Armed forces and public sector officials have visited the hospital and all of them were seem satisfied with the services offered at the hospital and appreciated the staff. Officials from the MERF Country Office and Provincial Office paid several monitoring visits from time to time to identify any short comings that hampers quality service delivery. Pictures displayed below showing various visits with their detail descriptions.



DC Kurram Wisal Khattak visit Cat-D Dogar



Dr. Ijaz Shah Director IMU KP visit



KP UNICEF leader visit THQ DOGGAR visit Cat-D Dogar



10. Human Resource Recruitment and Deployment

Due to remoteness of the area and security concerns, finding appropriate human resource specially specialist and female staff is very challenging, however, MERF using multiple recruitment processes including advertisement, head-hunting and its existing CV bank has managed to fill almost all the budget positions. For effective HR management, bio-metric attendance mechanism has been installed at the facility level. Similarly, duty rosters have been developed to ensure availability of relevant staff in the relevant shifts. During the reporting period, following staff hired by MERF and deployed at Cat – D Hospital Dogar, Kurram.

S.No	Key Staff	Budgeted Positions	Filled Positions
1	Health Manager	1	1
2	Logistics Manager	1	1
3	Finance Manager	1	1
4	Physician	1	1
5	Surgeon	1	1
6	Gynecologist	1	1
7	Pediatrician	1	1
8	Anesthetist	1	1
9	MO	8	8
10	WMO	2	2
11	Dental Surgeon	1	1
12	Charge Nurse	9	9
13	Clinical Technician (Radiology)	4	4
14	Clinical Technician (Dental)	1	1
15	Clinical Technician (Pathology)	4	4
16	Clinical Technician (Pathology) for Blood	2	2
17	Clinical Technician (Surgical)	5	5
18	Clinical Technician (Anesthesia)	4	3
19	Clinical Technician (EPI)	2	2
20	Lady Health Visitor-LHV	4	4
21	Senior Pharmacist	1	1
22	Pharmacy Technician	3	3
23	HR Officer	1	1
24	Computer Operator	7	7
25	Store Keeper	1	1
26	Driver	3	1
27	Dai/Aya	4	4
28	Ward Orderly	5	5
29	Chowkidar	5	5
30	Mali	1	1
31	Washer man	2	2
32	Sweeper	14	14
	Total	101	98



11. Problems Encountered and Actions Taken

• Limited availability of electricity

Power /transmission lines from WAPDA are not available, Although MERF has made alternative arrangements including repairing existing generator and installation of solar system, however, the alternative arrangements have their own limitations. Therefore, un-interrupted power supply is a dire need for smooth operations of the hospital. Letters have been written by the hospital management to the concerned departments and district administration for uninterrupted electricity supply.

• Insufficient staff accommodation

The current accommodation for staff in the hospital premises is not enough as per current needs. All the present accommodation is comprised of hostel buildings which is not very friendly for the staff living with their families. There are no bungalows for the MS, consultants and medical officers and quarters for the lower staff.

To combat this challenge, letters have been written by the hospital management to the concerned departments for additional construction of the hostel and bungalows.

Security concerns

Although the LEAs have brought normalcy to the region after being affected due to years of militancy and related, staff from other regions still have security and safety concerns on working in the area. MERF is taking mitigating measures as per its security protocols, however, implementing project activities in such situation is challenging.

• Difficulties in HR especially female and specialist positions

Due to unavailability of local qualified HR, remoteness of the area as well as security concerns, it is very challenging to find and retain suitably qualified HR especially female nurses, medical officers and specialists. MERF constantly advertise and head hunt vacant positions and offers attractive salary packages to combat this issue.

• Existing equipment either non-functional or accessories missing

Though the hospital has been equipped with necessary equipment before the handover, most of the equipment either missing necessary accessories or requiring major repairs. This resulted in on-going repairs cost while accessories are being procured by MERF from the existing budgets. MERF managed to procure and repair all the necessary equipment from the already allocated budget. Extra allocation for costly equipment or provision of such equipment by the DoH like X-Rays, Anesthesia machines would ensure availability of services round the clock.

• Disbursement of funds

Disbursement of funds under the contract were delayed due to various reason which directly impacts the program activities adversely including payment of staff salaries as well as payment to vendors. This matter has been raised with all the concerned officials'/stake holders from time to time and in the meanwhile temporary fund arrangements were made by MERF from its own sources to ensure continuity of the service delivery. The way forward to address this issue will be to develop "Single Line Fund Flow Mechanism" having managed at provincial level on the pattern currently used for Medical Teaching Institutions (MTI).



• COVID-19 Pandemic

COVID-19 had multiple impacts on health services particularly;

Implementation of SOPs for gatherings at OPDs, Emergency and other wards has been challenging due to general behavior of public as well as insufficient security arrangements at hospital level. Hospital management in close coordination with District Administration and notables of the town to spread the word regarding significance of prevention. In addition, engaging with people at OPDs and emergencies and availability of relevant IEC material for awareness/ educating on significance of COVID-19 Prevention SOPs.

Medics, paramedics and other staff were infected by COVID-19 that was challenging to ensure 24/7 availability of doctors and other staff. Hospital management in consultation with department heads, kept reviewing the duty rosters and made alternate arrangements of medics and other staff when need arose. MERF had to bear financial impact for arrangement of PPEs on daily basis for all medics, paramedics and other staff from the regular allocated budget. Health Department and other stake holders has supported to meet the requirements in combating COVID-19 including PPEs, medicines and equipment and other arrangements as per national guidelines. In such situation, allocation of additional budget would help the hospital management to deal more effectively.



12. Progress Report against Key Performance Indicators

Progress Report against Key Performance Indicators									
Thematic Area	Sub- Thematic Area	Key Performance Indicators	Baseline	Target	Achievement	Means of Verification	Frequency		
		Power (Presence of backup generator or Solar System)	Not Available	100% (24/7)	100%	Observation	Periodic		
		Safe Drinking water	Not Available	Yes (100%)	100%	Observation	Periodic		
	Basic Amenities	Availability of clean toilets for Male and Female staff/patients in every block/department.	Not Available	Yes (100%)	100%	Observation	Periodic		
		Telephone Phone line/Inhouse intercom system.	Not Available	Yes (100%)	100%	Observation	Periodic		
		Access to computer with internet connection.	Not Available	Yes (100%)	100%	Observation	Periodic		
Facilities		Ambulance Service	Not Available	Yes (100%)	100%	Observation	Periodic		
Management		Availability of the Drainage System	Not Available	Yes (100%)	100%	Observation	Periodic		
	Basic Equipment	Availability of bio- medical and surgical equipment	Not Available	Yes (100%) As per list all in working condition.	100%	Asset and inventory record/Report	Monthly		
		Other equipment including office and IT equipment	Not Available	Yes (100%) As per list all in working condition.	100%	Asset and inventory record/Report	Monthly		
		Furniture	Not Available	Yes (100%) As per list all in working condition.	100%	Asset and inventory record/Report	Monthly		
		CCTV	Not Available	Yes (100%) As per list all in working condition.	100%	Asset and inventory record/Report	Monthly		
		Proper lighting and Ventilation	Not Available	Satisfactory	100%	Observation	Periodic		
		Regular Sterilization of Instrument/equipment	No	yes	Yes	Observation	Periodic		

		Storage and safe disposal of infectious and other wastes such as sharps	Not available	Yes	Yes	Observation	Periodic
		Availability of Disinfectant	Not available	Yes	Yes	Observation	Periodic
	Hygiene and	Sharps box/container	Not available	Yes	Yes	Observation	Periodic
	Waste Management	Soap or hand disinfectant, Latex gloves, masks and sterilizers	Not available	Yes	Yes	Observation	Periodic
		Cleanliness of facility	Not available	Yes	Yes	Observation	Periodic
		Availability of Incinerators for disposal of bio wastes	Not available	Yes	Yes	Observation	Periodic
	Filled Posts	All sanctioned/proposed posts filled	No	100%	100%	HR record	Monthly Attendance Record
	Specialist	Essential specialists filled as per proposed posts	No	Yes	Yes	HR record	Monthly Attendance Record
	Bio metric staff attendance System	Bio metric attendance System	Not available	Yes	Yes	Observation	Periodic
Human Resource	Staff Presence	Availability of clinical staff as per duty roaster	No	100%	100%	Staff duty Roster, biometric record	Periodic
Management Management		Availability of all support staff	No	100%	100%	Staff Payroll/Bio Metric Attendance	Monthly Attendance Record
	Up to date Credentials	All required credentials are up to date for doctors (PMDC registration and experience certificates).	NA	Yes	Yes	HR record	Periodic
		All required credentials are up to date for nurses Diploma/Experience. Relevant registration.	NA	Yes	Yes	HR record	Periodic



		All required credentials are up to date for mid wives / LHVs.	NA	Yes	Yes	HR record	Periodic
	CME (Quality Care) Continuing Medical Education	CMEs Session conducted (All relevant Staff trained on Protocols and Guidelines for Clinical Case Management, EmOC, Infection Prevention, Infectious Diseases and Waste Management.)	NA	Yes	Yes	CME sessions Records	Periodic
	Staff Leave Management	For all staff	Not available	100%	100%	HR record	Monthly Attendance Record
	Medicines	Essential Medicines (Available as per MERF standard list)	Not available	100%	100%	Stock Record/LMIS system	Monthly
	Lab Services	Lab tests offered (As Per MHSDP Standard)	Not available	100%	100%	EMR reports	Periodic
		Lab Equipment maintenance	No	Yes	Yes	Observation	Periodic
Service Delivery	OT Services	All required services provided / procedures performed (Available as per MHSDP standard and as per annexure list)	Not available	Yes	Yes	Observation	Periodic
Management (Clinical Services / Clinical Quality)	Blood Bank Services	Availability of Blood Bank in vicinity.	Not available	Yes	Yes	Observation	Periodic
, Similar Quality)	Emergency Services	All required lifesaving services provided / procedures performed	Not available	Yes	Yes	Observation, EMR record, Emergency resgisters	Periodic
	Monitoring and Supervision	Regular monitoring of services	Not available	Regular visit from Country Office, Third Party Evaluation, Monthly and Quarterly reporting	Yes	Monitoring Report/Routine Reporting/Self Reporting (DHIS monthly report)/Third Party Evaluation Report	Periodic
		Complaint Management System	Not available	Yes	Yes	Observation/display of complaint box,	Periodic



						catalog for complaints	
	Family Planning Services	Guidelines on family planning	Not available	Yes	Yes	Observation	Periodic
		Space available for FP counselling	Not available	Yes	Yes	Observation	Periodic
	MNCH	Guidelines on MNCH	Not available	Yes	Yes	Observation	Periodic
	services	Space available for MNCH counselling	Not available	Yes	Yes	Observation	Periodic
Implementation of Vertical	EPI Services	Guidelines on EPI and Vaccines	Not available	Yes	Yes	Observation	Periodic
Program		Space available for EPI	Yes	Yes	Yes	Observation	Periodic
	Tuberculosis	Guidelines on TB	Not available	Yes	Yes	Observation	Periodic
	(TB) Services	Space available for TB counselling	Not available	Yes	Yes	Observation	Periodic
	Dengue / Malaria Services	Guidelines on Dengue / Malaria	Not available	Yes	Yes	Observation	Periodic
		Space available for Dengue / Malaria	Not available	Yes	Yes	Observation	Periodic
	General Services	Electronic Medical Record System	Not available	Yes	Yes	Observation, EMR reports	Periodic
		Average Daily OPD Attendance	0	150	185	OPD Register, EMR	Monthly
		Bed Occupancy Rate (monthly)	0	20%	71%	Daily Bed Statement Register, EMR	Monthly
Health		Average daily emergency service Utilization	0	15	47	Emergency Register, EMR	Monthly
Management Information System (HMIS)	Clinical services	Number of Surgical Procedures (minor + major) Performed (monthly)	0	30	268	OT Register, EMR	Monthly
		Percentage of Hospital Death Among Admitted Patients	Not available	<5%	2.6%	Admission File, EMR, mortality register	Monthly
	Diagnostic	Monthly Lab Services Utilization	0	350	6,420	Lab Register, EMR	Monthly
		Monthly Diagnostic Services Utilization (X- ray, Ultrasound, ECG)	0	250	803	X-Ray, ECG, Ultrasound Registers, EMR	Monthly



	EDI	Percentage of Full Immunization Coverage	0	27%	76%	EPI Register	Monthly
	EPI	Penta immunization coverage	0	35%	148%	EPI Register	Monthly
		Number of Antenatal Care (ANC) visit (Monthly)	0	75	216	MNCH Register, EMR	Monthly
	Emergency maternal	Number of Normal Delivery Performed (Monthly)	0	20	83	Labour Room Register, EMR	Monthly
	Obstetrical Services (EmOC)	Number of Caesarean section performed (Monthly)	0	1	4	Labour Room Register/OT Register	Monthly
		Percentage of New born Case Fatality in Health Facility	Not available	<5%	0%	Labour Room Register	Monthly
	Other	DHIS/ HMIS Reporting Compliance	Not available	Yes	100%	Monthly DHIS Report	Monthly
		DHIS/ HMIS Reporting timelines	Not available	Yes	100%	Monthly DHIS Report	Monthly
	records	DHIS/ HMIS Reporting completeness	Not available	Yes	100%	Monthly DHIS Report	Monthly
		DHIS/ HMIS Reporting accuracy	Not available	90%	95%	LQAS Record	Quarterly



MERF aims to save lives in times of crisis and help rebuild the shattered health services structure in the country during natural disasters, conflict and disease or health system collapse



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